

September 28, 2020

Rivendell Community Association, Inc.  
Lighthouse Property Management, Inc.  
16 Church Street  
Osprey, FL 34229

Re: Rivendell Community Association, Inc.; Pool Closure Issues  
OFN: 4782.002

Dear Board of Directors:

The purpose of this correspondence is to provide the Association with guidance regarding the question of re-opening the pool under the current COVID-19 circumstances. There are several factors and risks involved in making this decision, and the Board should consider all of the factors and exercise reasonable business judgment in making any such decision. Because this COVID-19 pandemic is unique and there is no current legislation or case law that give attorneys specific legal authority to use as guidance, the advice that I can provide is related to risk assessment and general protocols to help reduce exposure to claims and establish that the Association has acted in a reasonable, non-negligent manner. The factors include, but are not limited to, the following:

- Risk of exposure to and spread of COVID-19
- Risk of lawsuits/financial liability due to damage claims
- Lack of adequate available insurance coverage for the Association
- Being able to comply with applicable governmental agency guidelines
- Costs of following the guidelines (increased staffing, cleaning materials and sanitization, signage, management and enforcement, etc.)
- Adopting reasonable rules and regulations
- Monitoring for compliance and enforcement

On March 9, 2020, Governor DeSantis issued Executive Order 20-52, declaring a state of emergency in the State of Florida (60-day period). This Executive Order has been extended twice, most recently by Executive Order 166, signed on July 7, 2020, extending the order for another sixty (60) days into September 2020. It is expected that

this order will continue to be renewed until the COVID-19 crisis significantly changes for the better. There are no executive orders that require the closure of pools that are open to the public or community association pools. However, closure and regulation remain options for the owners/operators of these types of recreation areas.

From a legal standpoint, it is my opinion that for so long as the state of emergency exists, and for so long as the federal Center for Disease Control and Prevention (“CDC”) is recommending guidelines for use of community common areas and other general social interaction, the Board can determine the extent of safe and acceptable pool use, if any, under the circumstances. The authority to control use of the pool area extends beyond this current crisis, but this correspondence will be limited to the current COVID-19 crisis. If the Board cannot provide a safe environment for pool use and comply with the recommended governmental guidelines (at a minimum), it is my recommendation that it should keep the pool closed until it is in a position to take reasonable steps. If the Board feels that it can implement protocols, hire additional staff, and take other measures to comply with the recommended guidelines and provide reasonable assurances of a safe environment to lower and/or eliminate risks, it can decide to what degree, and under what regulations, that the pool can be opened. The CDC guidelines are relatively basic, and there are no detailed protocols that are recommended. There are numerous practices that can be implemented by the Association to try to limit transfer, exposure, and infection. Attempts to limit exposure will not guarantee that there will be no lawsuits or exposure to damage claims.

Attached are excerpts from the CDC guidelines, and they are described below with some other suggestions to help achieve these guidelines. As stated above, they are general in nature, and we can discuss specific action and incorporate them into a set of rules and regulations and protocols. Taking steps that are above and beyond what the CDC recommends will serve to work in the Association’s favor from a legal standpoint should there be a lawsuit, but there can be no guarantees that there will be no claims against the Association. Because we have no case law or legislation to help us measure the risk, I cannot give you specific standards or legal premises dealing with COVID-19. I can provide guidance so that if there is a lawsuit, the Association will have documented evidence to present on its behalf to help negate claims of negligence. However, there will remain a risk of nuisance or frivolous lawsuits for which there will likely be no insurance coverage.

The fact that other neighboring communities or communities across Florida may have opened their pools to some degree, or the fact that local governments may have opened their pools as well does not prevent this Association from keeping its pool closed or adopting its own more restrictive policies, procedures, rules, and regulations regarding safe use of the Association’s common property. This includes the ability to make a decision to keep the pool completely closed due to the current and lingering COVID-19 crisis. A recent survey (June/July 2020) conducted by the Community Associations Institute, a national community association organization made up of property managers, professionals, board members, and community association members, conducted an informal survey about pool openings. Responding communities had differing approaches

to opening or closing the pools, based on fear of exposure to legal liability, fear of the spread of COVID-19, and attorney advice. In New York and New Jersey, where there were spiking cases for a period of time, more than 80% of the communities responding to the survey had not opened their pools. In Florida, less the 10% of the respondents indicated that their pools were closed. Texas respondents indicated 24% were closed, and North Carolina indicated 29% were closed. Keep in mind that Florida is currently experiencing a spike in cases, and it is likely that communities will be taking more actions in response to the spike, and it is possible that local governments will be implementing additional safeguards.

### **Insurance Coverage Issues and Potential Litigation Claims:**

There may be claims for personal injury damages due to infection from the virus, or loss of use claims against the Association for failing to open and/or improperly restricting use of the pool area. While the Association has multiple insurance policies (casualty and commercial liability insurance, wind/hurricane insurance, and directors and officers insurance), and there may be coverage for lawsuits regarding the loss of use of the pool due to its closure, the Association's insurance carriers are likely to attempt to deny coverage for a claim for COVID-19 damages based on express language in the policy or by attempting to define the virus crisis as an exception to coverage. These types of damages involve uncertainty and risk.

We can expect pushback from the insurance industry, and have already heard some general responses from insurers that COVID-19 claims would not be covered. While the response from the insurance industry was expected, it does not mean that the Association is without arguments that there should be some coverage where there is not a specific exclusion. What it does mean is that there will likely be a long and expensive battle to resolve coverage issues in this unique environment until we have established case law and/or legislation to address liability issues.

The Association's current property insurance wind policy specifically excludes claims due to virus or bacteria. The Association's Directors and Officers Policy does not specifically exclude virus or bacteria claims, but it excludes claims involving harmful or toxic pollutants (defined in the policy as "substances that are generally recognized in industry or government to be harmful or toxic to persons, property or the environment"), as well as exclusion for claims for bodily injury, sickness, disease, or death. The general commercial policy excludes property damage claims from pollutants. Also, I anticipate that any new policy obtained by the board will contain a specific virus/bacteria exclusion. Depending on a particular claim, there will certainly be arguments and disagreements whether the commercial policy covers this type of "damage" claim from a virus, whether it is a "pollutant" excluded from the policy, etc.

I am aware of an insurance product that provides legal defense coverage, where the insurance company will pay for legal fees if a COVID-19 claim is made against the Association. However, this type of coverage does not cover damages. If the Association

had a damages claim against them for COVID-19 damages, the Association would not have to pay the legal fees up to the covered amount, but it would be on the hook for the amount of any settlement or judgment amount if the insurance coverage was denied. It is my recommendation that the Association pursue such coverage and determine whether it can be reasonably obtained.

Without insurance coverage for COVID-19 claims, the attorney's fees, out-of-court settlements, and any damages awarded by a court would be paid by the Association through its assessments. Cases that appear to be frivolous in nature or have no basis in fact will still prove to be expensive for the Association due to potential attorney's fees associated with claims and nuisance-case out-of-court settlements. The Association could be put in a position to impose special assessments or borrow money in order to fund its defense and pay any award. Obviously, this adversely affects every owner's pockets. It may very well be that there are no claims or lawsuits against the Association regarding COVID-19. At this point, I am not aware of any formal claims or lawsuits being filed against community associations. However, it will be important for the directors and owners to be aware of this potential liability so that they fully understand the ramifications of opening the pool.

It is also important to note that any person that alleges a damage claim due to the Association's negligence will have the burden of proving that they contracted COVID-19 at the pool, and/or that the Association's actions or inactions was the cause. It is my opinion that this will be a very difficult thing to prove, given that most people do in fact go to other places to shop, eat, and/or socialize, any one of which could have also contributed to or caused the exposure. However, there remains a risk that a resident's claim could be successful, and there is also a risk of one or more frivolous lawsuits that are filed simply to attempt to convince the Association to pay the plaintiff to make the case go away. This could devastate the Association's finances, and the individual owners will have to come up with funds to pay any necessary assessments. There is no way to estimate how much of an award that someone could receive if they can somehow prove that the Association's negligence resulted in damages.

Until there are court cases that begin to establish the extent of premises liability for owner/operator negligence, or until the legislature adopts legislation limiting liability for COVID-19 negligence claims, the Association is exposed to potential liability for which there could be no insurance coverage. As the Association's legal counsel, I cannot give you definitive answers regarding what steps will fully insulate the Association from claims. The Association may be faced with imposing a special assessment against all members to pay judgments for damages. Again, there are significant uncertainties regarding the availability of insurance coverage and the extent of potential liability. This is an area of law that will evolve over time.

**Recommended Protocols:** Below is a summary of what the CDC has issued. These guidelines would be the bare minimum to implement. Note that even implementing the bare minimum will not necessarily insulate the Association from potential claims.

The CDC has published guidelines for shared or congregate housing, including shared pools and restroom facilities similar to Rivendell's facilities. They are not very detailed and simply provide general policies to help inform individuals and achieve proper distancing and cleaning. I have attached the guidelines as composite Exhibit A to this letter, and have provided numerous links to the web pages that I refer to in this letter. It is important to note that these guidelines may change over time, so it is important to keep an eye on any changes. The highlights include guidance for:

1. Maintaining safe operations, which involves:
  - a. providing guidance for residents' personal preventive measure to limit exposure.
  - b. cleaning and disinfecting shared areas and frequently touched surfaces with EPA-registered disinfectants.
2. Encouraging staff and residents to prepare and take action to protect themselves and others. This includes social distancing, wearing cloth face coverings, etc.
3. Communicating with staff and residents, using websites, emails, newsletters, flyers, signs, etc.
4. Considerations for common spaces in your facility to prevent the spread of COVID-19.
  - a. Regarding pools and hot tubs, the CDC recommends that associations consider closing pools and hot tubs or limiting access to pools for essential activities only.
  - b. The CDC states that proper pool operation, maintenance and disinfection with chlorine should kill the virus in the pool and hot tub water, but it can easily be transmitted by crowds or failure to keep the surfaces clean and disinfected.
  - c. For shared bathrooms like the bathroom facilities at the pool:
    - i. clean **at least** twice per day OR after periods of heavy use.
    - ii. properly stock with soap, paper towels, and hand sanitizer
    - iii. remove trash regularly
    - iv. hang signs showing how to properly wash hands (the CDC website has a link to signs that can be printed)
    - v. hang signs instructing users that sinks can be an infection source, and to limit contact with surfaces.

There are also CDC guidelines for public pools and hot tubs during COVID-19. **Even though the governor has recently issued an executive order permitting all businesses to re-open, it does not impact the CDC's guidelines for safe interaction in the community and in business. The governor's executive order does not nullify safety guidelines, as the threat of the virus still exists in Florida and beyond.** The CDC indicates that there is no evidence that the virus can be spread through humans

through the use of recreational pools. The risk of infection is related to following safe swimming practices, social distancing, and other preventative actions. Because there is no specific CDC protocol, associations are left to their own judgment to determine what is reasonable and what are acceptable risks.

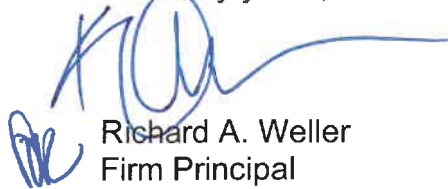
The State of Florida Department of Health issued a Public Health Advisory on July 21, 2020, recommending that “all individuals should refrain from participation in social or recreational gatherings of more than 10 people.” It also incorporates recommendations to wear face coverings and to maintain social distancing similar to the CDC guidelines.

There is no cookie-cutter approach to implementing the specifics for the safety protocols. It will depend on the individual community pool circumstances (size, capacity, access, staffing, hours of operation, furniture, etc.). Appropriate staffing will be necessary to monitor the pool area to ensure that the pool users are complying, and to stock, clean, and sanitize the facilities to ensure compliance. Without adequate staffing (employee, managers, directors, volunteers, etc.) to monitor the area and follow up with compliance verification, there are no assurances that the protocols are being followed. The CDC guidelines provide “guidelines”, but they do not provide many specifics, and they presume that there is adequate staffing to achieve the results. For example, they do not tell you how many hours a pool should be open, or limits on capacity, amount of staffing, or how often to clean certain surfaces. Consequently, it is up to the Association to take reasonable steps and adopt reasonable policies, and you can be more restrictive than any “guideline”.

I have attached some bullet points that address the actions that I recommend in order to help comply with CDC guidelines and to limit the risk of infection, and to put the Association in a better legal position to fight negligence claims. The details can vary depending on how much you can afford to spend on staff and supplies, and you can discuss how above and beyond the bare CDC guidelines that you are willing to go. The Board is free to adopt additional rules, regulations, restrictions, and protocols deemed necessary by the Board to maintain the safe operation of the common areas.

Please let me know if you have any questions or need additional information.

Sincerely yours,



Richard A. Weller  
Firm Principal  
Email: [rweller@najmythompson.com](mailto:rweller@najmythompson.com)

RAW  
Enclosures

#### CDC Links:

- Covid-19 guidance for shared or congregate housing: <https://www.cdc.gov/coronavirus/2019-ncov/community/shared-congregate-house/guidance-shared-congregate-housing.html>
- How to protect yourself and others: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>
- Cleaning and disinfecting your facility: [https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fprepare%2Fdisinfecting-building-facility.html](https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fprepare%2Fdisinfecting-building-facility.html)
- Social distancing: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>
- Face coverings: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html>
  - <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wear-cloth-face-coverings.html>
  - <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html>

#### Pools and Hot Tubs:

- <https://www.cdc.gov/coronavirus/2019-ncov/community/parks-rec/aquatic-venues.html>

- I. CDC guidelines for Shared or Congregate Housing:
- **“Consider closing pools and hot tubs or limiting access to pools for essential activities only, such as water therapy”.**
  - **“Consider cancelling all public or non-essential group activities and events”**
  - **“Arrange seating of chairs and tables to be at least 6 feet (2 meters apart)”**
  - **“Minimize traffic in enclosed areas”**
  - **“Ensure that social distancing can be maintained in shared rooms”**
  - **“Clean and disinfect shared areas ... and frequently touched surfaces using EPA-registered disinfectants more than once a day if possible”**

You are not required to severely limit pool use or prohibit certain activities like classes or instruction, sunbathing or family gatherings, but I recommend it in order to limit chances of exposure. Provided all the other safety guidelines can be met, you can determine what can be safely achieved based on your level of staffing and monitoring. It is my recommendation to consider significantly limiting pool use in order to help lower risk of health and legal issues. There are no bright line guidelines or specifics, and there is no guarantee that implementing any or all of these will insulate the Association. You can consider the following:

- Prohibit classes, parties and organized gatherings.
- Remove all or a large portion of tables and chairs to discourage gathering or long uses
- Limit pool hours
- Limit the days the pool is open
- Limit number of people inside the gated area to a smaller percentage of the maximum pool area occupancy
- Require advance reservations
- Require sign in at entry
- Prohibit outside guests (residents of Rivendell only)
- Limit number of people in the pool water at any time
- Prohibit consumption of food and require immediate disposal or removal of all trash and debris
- Put a time limit on how long you can use the pool area
- Limit use of bathrooms to one person at a time.
- Disable/Cover water fountain and encourage residents to bring their own refreshments

II. CDC Guidelines for Shared Bathrooms:

- **“Shared bathrooms should be cleaned regularly using EPA-registered disinfectants, at least twice per day (e.g., in the morning and evening or after times of heavy use)”**



- **“Make sure bathrooms are continuously stocked with soap and paper towels or automated hand dryers”**
- **“Hand sanitizer could also be available”**
- **“Make sure trash cans are emptied regularly”**
- **“Provide information on how to wash hands properly. Hang signs in bathrooms”**

It will be important for staff to clean the bathrooms before the pool area is opened each day. I also recommend scheduling the cleaning and stocking of the bathroom more than what is recommended. Depending on how many hours the pool is open, I recommend cleaning before opening, and having them checked/sanitized throughout the day. For example, if you are only opening the pool for 4 hours a day, you may be able to maintain it in good order by cleaning it after opening for 2 hours. If you are open 8 hours a day, I would recommend periodic cleaning throughout the day, more often than just once.

- Place hand washing signs inside and outside of the restrooms
- Clean bathrooms before opening and adopt a cleaning protocol depending on number of hours the pool is open and volume of use
- Ensure they are properly stocked, and checked on a regular basis. Obviously if there has only been a couple of people using the pool, the requirement to re-check the stock of soap and paper towels is not necessary if it was fully stocked prior to opening. Staff will need to use judgment and periodically check the restrooms based on the circumstances and volume of use each day.

### III. CDC Guidelines for Social Distancing and Face Coverings:

- Keep at least six (6) feet of physical distancing between yourself and other people who are not in your household
- Limit close face-to-face contact
- This applies to both indoor and outdoor areas
- Wearing face coverings to protect those around you, including those that are at higher risks or others you may come into frequent contact with. Should be worn when coming into contact with people that do not live in your household or when social distancing may be difficult
- Face coverings should cover your nose and mouth, not be worn around your neck or up on your forehead
- Avoid touching the face coverings, and wash or sanitize your hands if you do.
- Children under two (2) should not be required to wear face coverings.

#### IV. Staff guidelines

- Adequate staff (employees, managers, board members, volunteers, etc.) will need to be scheduled to be present and/or periodically monitor the pool area for compliance.
- Make sure staff is properly equipped with materials for sanitizing, hand washing, etc.
- Staff should wear masks at all times when residents are present at the pool area, and frequently wash/sanitize their hands throughout the shift, particularly after touching any surface.
- Create a schedule for cleaning consistent with the pool hours of operation, and require staff to log cleaning times and activities.
- Encourage extra cleaning of surfaces if time permits and if pool area volume warrants additional cleaning.
- Persons exhibiting flu-like symptoms or other symptoms associated with COVID-19 should not be permitted into the area
- Persons failing to comply with the rules/protocols should be asked to leave the area immediately.
- Lists of violations and the identity of the violators should be maintained and turned over to the Association after each shift.
- Law enforcement must be called for any physically confrontational or potentially violent situation. Such action should be reported to the Board/Management as soon as possible
- If pool users refuse to comply, staff may close the pool area early to be reopened only after approval from the Board.

#### V. Additional Considerations.

- Board should consider hiring professional cleaning company for periodic deep cleaning of surfaces, restrooms, etc., to compliment the day-to-day cleaning. While this is not necessary if the areas are being cleaned by staff regularly and in accordance with the CDC protocols, it is something to consider to help protect the Association.
- As the pool re-opens, the Board can reevaluate the procedures to determine whether any are not working properly and need adjustment, whether any procedures are simply not necessary based on the circumstances, or whether new procedures need to be implemented to ensure compliance with CDC regulations and other safety factors to protect the Association.

**Mission:**

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



**Ron DeSantis**  
Governor

**Scott A. Rivkees, M.D.**  
State Surgeon General

**Vision:** To be the Healthiest State in the Nation

2020 JUN 21 AM 8:00

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**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
PUBLIC HEALTH ADVISORY**

In Re:

**UPDATED MEASURES TO ENSURE  
PROTECTION OF PUBLIC HEALTH  
IN RESPONSE TO COVID-19**

**WHEREAS**, on March 25, 2020, I issued a public health advisory relating to protective measures for vulnerable populations, gatherings of private citizens and density of the workforce; and

**WHEREAS**, on May 4, 2020, Governor Ron DeSantis implemented Phase 1 of Florida's recovery, a plan in which the Governor's Task Force recommended encouraging individuals to limit their personal interactions outside of the home, permitting certain personal services to resume in the State of Florida, and advising individuals to wear face coverings in instances in which social distancing is impractical; and

**WHEREAS**, on June 5, 2020, Governor Ron DeSantis implemented Phase 2 of Florida's recovery plan for the majority of Florida's counties, encouraging individuals to follow appropriate social distancing and safety protocols issued by the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) in their personal interactions outside of the home; and

**WHEREAS**, on June 20, 2020, I issued an updated public health advisory relating to face coverings, protective measures for vulnerable populations, and gatherings of private citizens; and

**WHEREAS**, as of July 16, 2020, Florida is seeing increases in positive cases, increases in the positivity rate, and increases in hospitalizations from COVID-19; and

**WHEREAS**, the Florida Department of Health is advising everyone to “Avoid the 3 Cs, that is, to avoid “Closed Spaces,” avoid “Crowded Places,” avoid “Close-Contact Settings,” and to wear a mask; and

**WHEREAS**, pursuant to the authority granted in Section 381.00315(1), Florida Statutes, I, Scott A. Rivkees, M.D., as State Surgeon General and State Health Officer, determine that a public health advisory is necessary as a result of COVID-19 to protect the public health and safety, and hereby issue the following public health advisory, which shall serve to update and supplement the public health advisories issued on March 25, 2020, and June 20, 2020.

## **FACE COVERINGS**

Every individual in Florida should wear a face covering over the nose and mouth in any setting where social distancing is not possible, both indoors and outdoors, subject to the exceptions below. Businesses and organizations are encouraged to require individuals who enter the premises to wear a face covering, subject to the exceptions below. Many counties and municipalities have issued directives requiring individuals to wear face coverings, and such directives should include the following exceptions.

Face coverings should not be worn by:

- A child under two years of age;
- An individual with one or more medical conditions or disabilities that prevent wearing a face covering;
- An individual obtaining a service involving the nose or face for which temporary removal of the face covering is necessary to perform the service;

- An individual working in a profession where use of a face covering will not be compatible with the duties of the profession; or
- An individual engaged in outdoor work or recreation with appropriate social distancing.

Face coverings may reduce disease transmission by an individual who is infected but has no symptoms and an individual who has symptoms. The face covering may reduce the infectious particles that are released into the air when an individual speaks, coughs, or sneezes. A face covering may also serve to protect individuals by reducing the concentration of particles that are inhaled. All individuals should follow CDC guidelines on what type of face coverings are available and should be utilized.

Face coverings are not a substitute for social distancing, washing your hands, and staying home when you are ill. All of these mitigation measures should be carefully followed together to reduce the spread of COVID-19.

## **GATHERINGS**

All individuals should refrain from participation in social or recreational gatherings of more than 10 people. For all gatherings of fewer than 10 people, individuals should practice social distancing by maintaining a distance of at least six feet from each other and wear a face covering.

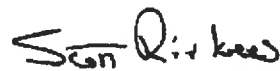
## **VULNERABLE POPULATIONS**

All individuals over the age of 65 and all individuals of any age with high-risk health conditions should limit personal interactions outside of the home and take all measures to limit the risk of exposure to COVID-19. These measures include, but are not limited to: distancing any unavoidable personal contact by a minimum of six feet; wearing a face covering when social distancing is not possible; washing hands often with soap and water for at least 20 seconds, or using hand sanitizer with at least 60% alcohol; avoiding unnecessary touching of

eyes, nose, and mouth, and washing hands prior to doing so; and cleaning and disinfecting high-touch surfaces, including entryway door handles.

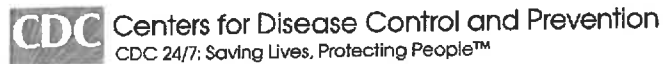
High-risk health conditions include, but are not limited to: chronic lung disease; moderate to severe asthma; serious heart conditions; immunocompromised status (as a result of cancer treatment, bone marrow or organ transplant, immune deficiencies, poorly controlled HIV or AIDS, or prolonged use of corticosteroids and other immune weakening medications); cancer; severe obesity (body mass index [BMI]>40); diabetes; renal failure; and liver disease.

Issued this 20th day of July 2020, in Department of Health offices, Tallahassee, Leon County, Florida.



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Scott A. Rivkees, M.D.  
State Surgeon General



## Coronavirus Disease 2019 (COVID-19)

[MENU >](#)

# COVID-19 Guidance for Shared or Congregate Housing

Updated Aug. 3, 2020

[Print](#)

The following guidance was created to help owners, administrators, or operators of shared (also called “congregate”) housing facilities – working together with residents, staff, and public health officials – prevent the spread of COVID-19.

For this guidance, shared housing includes a broad range of settings, such as apartments, condominiums, student or faculty housing, national and state park staff housing, transitional housing, and domestic violence and abuse shelters. Special considerations exist for the prevention of COVID-19 in shared housing situations, and some of the following guidance might not apply to your specific shared housing situation.

People living and working in this type of housing may have challenges with social distancing to prevent the spread of COVID-19. Shared housing residents often gather together closely for social, leisure, and recreational activities, shared dining, and/or use of shared equipment, such as kitchen appliances, laundry facilities, stairwells, and elevators.

Be sure to consider the unique needs of your residents, such as people with disabilities, cognitive decline, or no access to technology. This guidance does not address infection prevention and control in healthcare settings. If your facility offers healthcare services, please consult CDC Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings

There may also be specific guidance for certain types of shared housing, such as homeless shelters, that may apply to your facility.


State, territorial, local, and tribal public health departments can give you specific information on COVID-19 transmission and policies in your community, which can help you decide when and if you need to scale up or loosen prevention measures.

## To maintain safe operations

- Review the CDC guidance for businesses and employers to identify strategies to maintain operations and a healthy working and living environment.
- Develop flexible sick leave policies. Require staff to stay home when sick, even without documentation from doctors. Use flexibility, when possible, to allow staff to stay home to care for sick family or household members or to care for children in the event of school or childcare dismissals. Make sure that employees are aware of and understand these policies.
- Create plans to protect the staff and residents from spread of COVID-19 and help them put in place personal preventive measures.
- Clean and disinfect shared areas (such as exercise room, laundry facilities, shared bathrooms, and elevators) and frequently touched surfaces using EPA-registered disinfectants [↗](#) more than once a day if possible.

- Identify services and activities (such as meal programs, religious services, and exercise rooms and programs) that might need to be limited or temporarily discontinued. Consider alternative solutions (e.g., virtual services) that will help programs continue while being safe for residents.
- Identify a list of healthcare facilities and alternative care sites where residents with COVID-19 can receive appropriate care, if needed.


## Encourage staff and residents to prepare and take action to protect themselves and others

- Follow the guidance and directives on community gatherings from your state and local  health departments.
- Encourage social distancing by asking staff and residents to stay at least 6 feet (2 meters) apart from others and wear masks in any shared spaces, including spaces restricted to staff only.
- Consider any special needs or accommodations for those who need to take extra precautions, such as older adults, people with disabilities, and people of any age who have serious underlying medical conditions.
- Limit staff entering residents' rooms or living quarters unless it is necessary. Use virtual communications and check ins (phone or video chat), as appropriate.
- Limit the presence of non-essential volunteers and visitors in shared areas, when possible.
- Use physical barriers, such as sneeze guards, or extra tables or chairs, to protect front desk/check-in staff who will have interactions with residents, visitors, and the public.
- Provide COVID-19 prevention supplies for staff and residents in common areas at your facility, 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.
- Consider any special communications and assistance needs of your staff and residents, including persons with disabilities.
- Suggest that residents keep up-to-date lists of medical conditions and medications, and periodically check to ensure they have a sufficient supply of their prescription and over-the-counter medications.
- If possible, help residents understand they can contact their 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.
- Make sure that residents are aware of serious symptoms of their underlying conditions and of COVID-19 symptoms that require emergency care, and that they know who to ask for help and call 911.
- Encourage residents who live alone to seek out a "buddy" in the facility who will check on and help care for them and safely make sure they are getting basic necessities, including food and household essentials.

*Note: Surgical masks and N-95 respirators are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance. All staff and residents should wear a mask covering when in shared areas of the facility and maintain social distancing to slow the spread of the virus.*

## Communicate to staff and residents

Identify platforms such as email, websites, hotlines, automated text messaging, newsletters, and flyers to help communicate information on:

- Guidance and directives from state and local officials and state and local  health departments.
- How your facility is helping to prevent the spread of COVID-19.
- How additional information will be shared, and where to direct questions.
- How to stay healthy, including videos, fact sheets, and posters with information on COVID-19 symptoms and how to stop the spread of germs, how to wash your hands, and what to do if you are sick.



- How staff and residents can cope and manage stress and protect others from stigma and discrimination.
- Identify and address potential language, cultural, and disability barriers associated with communicating COVID-19 information. Communications may need to be framed or adapted so they are culturally appropriate for your audience and easy to understand. For example, there are resources on the CDC website that are in many languages.

## Considerations for common spaces in your facility, to prevent the spread of COVID-19

- Consider how you can use multiple strategies to maintain social (physical) distance between everyone in common spaces of the facility.
- Consider cancelling all public or non-essential group activities and events.
- Offer alternative methods for activities and social interaction such as participation by phone, online, or through recorded sessions.
- Arrange seating of chairs and tables to be least 6 feet (2 meters) apart during shared meals or other events.
- Alter schedules to reduce mixing and close contact, such as staggering meal and activity times and forming small groups that regularly participate at the same times and do not mix.
- Minimize traffic in enclosed spaces, such as elevators and stairwells. Consider limiting the number of individuals in an elevator at one time and designating one directional stairwells, if possible.
- Ensure that social distancing can be maintained in shared rooms, such as television, game, or exercise rooms.
- Make sure that shared rooms in the facility have good air flow from an air conditioner or an opened window.
- Consider working with building maintenance staff to determine if the building ventilation system can be modified to increase ventilation rates or the percentage of outdoor air that circulates into the system.
- Clean and disinfect shared areas (laundry facilities, elevators, shared kitchens, exercise rooms, dining rooms) and frequently touched surfaces using EPA-registered disinfectants  more than once a day if possible.


## Considerations for specific communal rooms in your facility

### Shared kitchens and dining rooms

- Restrict the number of people allowed in the kitchen and dining room at one time so that everyone can stay at least 6 feet (2 meters) 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. Wash hands after handling used food service items.
- Use gloves when removing garbage bags and handling and disposing of trash. Wash hands

### Laundry rooms

- Maintain access and adequate supplies to laundry facilities to help prevent spread of COVID-19.
- Restrict the number of people allowed in laundry rooms at one time to ensure everyone can stay at least 6 feet (2 meters) apart.

- Provide disposable gloves, soap for washing hands, and household cleaners and EPA-registered disinfectants  for residents and staff to clean and disinfect buttons, knobs, and handles of laundry machines, laundry baskets, and shared laundry items.
- Post guidelines for doing laundry such as washing instructions and handling of dirty laundry.



## Recreational areas such as activity rooms and exercise rooms

- Consider closing activity rooms or restricting the number of people allowed in at one time to ensure everyone can stay at least 6 feet (2 meters) apart.
- Consider closing exercise rooms.
- Activities and sports (e.g., ping pong, basketball, chess) that require close contact are not recommended.


## Pools and hot tubs

- Consider closing pools and hot tubs or limiting access to pools for essential activities only, such as water therapy.
  - While proper operation, maintenance, and disinfection (with chlorine or bromine) should kill COVID-19 in pools and hot tubs, they may become crowded and could easily exceed recommended guidance for gatherings. It can also be challenging to keep surfaces clean and disinfected.
  - Considerations for shared spaces (maintaining physical distance and cleaning and disinfecting surfaces) should be addressed for the pool and hot tub area and in locker rooms if they remain open.

## Shared bathrooms

- Shared bathrooms should be cleaned regularly using EPA-registered disinfectants , at least twice per day (e.g., in the morning and evening or after times of heavy use).
- Make sure bathrooms are continuously stocked with soap and paper towels or automated hand dryers. Hand sanitizer could also be made available.
- Make sure trash cans are emptied regularly.
- Provide information on how to wash hands properly. Hang signs  in bathrooms.
- Residents should be instructed that sinks could be an infection source and should avoid placing toothbrushes directly on counter surfaces. Totes could also be used for personal items to limit their contact with other surfaces in the bathroom.

## If a resident in your facility has COVID-19 (suspected or confirmed)

- Have the resident seek advice by telephone from a healthcare provider to determine whether medical evaluation is needed.
- Residents are not required to notify administrators if they think they may or have a confirmed case of COVID-19. If you do receive information that someone in your facility has COVID-19, you 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).
- Provide the ill person with information on how to care for themselves and when to seek medical attention.
- Encourage residents with COVID-19 symptoms and their roommates and close contacts to self-isolate – limit their use of shared spaces as much as possible.
  - 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.
- Follow guidance on when to stop isolation.
- Minimize the number of staff members who have face-to-face interactions with residents who have suspected or confirmed COVID-19.
- Encourage staff, other residents, caregivers such as outreach workers, and others who visit persons with COVID-19 symptoms to follow recommended precautions to prevent the spread.
- Staff at higher risk of severe illness from COVID-19 should not have close contact with residents who have suspected or confirmed COVID-19, if possible.
- Those who have been in close contact (i.e., less than 6 feet (2 meters) with a resident who has confirmed or suspected COVID-19 should monitor their health and call their healthcare provider if they develop symptoms suggestive of COVID-19.
- Be prepared for the potential need to transport persons with suspected or confirmed COVID-19 for testing or non-urgent medical care. Avoid using public transportation, ride-sharing, or taxis. Follow guidelines for cleaning and disinfecting any transport vehicles.

## Accepting new residents at facilities that offer support services

First, review and follow the guidance and directives from your state and local officials.

If your situation is not restricted by their guidance and directives, then consider the following guidance:

- At check-in, provide any new or potential resident with a clean mask and keep them isolated from others. Shelters can use this tool to screen for symptoms at entry.
- Medical evaluation may be necessary depending on the symptoms.
- If your facility is full, your facility space is inadequate to maintain physical distancing (such as is recommended in the guidance for homeless shelters), or you do not have the resources (staff, prevention supplies) to accept additional residents, reach out to community- or faith-based organizations to help meet individuals' needs, including:
  - A safe place to stay
  - Ability to obtain basic necessities, such as food, personal hygiene products, and medicine
  - Access to any needed medical or behavioral health services
  - Access to a phone or a device with internet access to seek out resources and virtual services and support

## Additional CDC resources to help prevent spread of COVID-19 in shared or congregate housing settings

More detailed guidance is available for specific types of facilities. Some of the information in these guidance documents is applicable to that specific type of facility only, and some of the information would be applicable to other congregate housing facilities.

- Assisted living facilities
- Retirement communities and independent living
- Homeless shelters
- Community- and faith-based organizations

- Colleges and universities
- Households with suspected or confirmed COVID

Last Updated Aug. 3, 2020

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



## Coronavirus Disease 2019 (COVID-19)

MENU >

# Considerations for Public Pools, Hot Tubs, and Water Playgrounds During COVID-19

Updated July 15, 2020

Print

There is no evidence that COVID-19 can be spread to humans through the use of recreational waters. Follow safe swimming practices along with social distancing and everyday preventative actions to protect yourself.

As public aquatic venues open in some areas, CDC offers the following considerations for the safety of those who operate, manage, and use public pools, hot tubs, and water playgrounds.

Public aquatic venues can be operated and managed by:

- City or county governments
- Apartment complexes
- Membership clubs (for example, gyms)
- Schools
- Waterparks
- Homeowners' associations

All decisions about implementing these considerations should be made locally, in collaboration with local health officials. Operators of public aquatic venues can consult with local officials to determine if and how to implement these considerations while adjusting them to meet the unique needs and circumstances of the local jurisdiction. Their implementation should also be informed by what is feasible, practical, and acceptable.

## Promoting behaviors that prevent the spread of COVID-19

Public aquatic venues can consider different strategies to encourage healthy hygiene, including:

### Hand hygiene and respiratory etiquette

- Encouraging all staff, patrons, and swimmers to wash their hands often and cover their coughs and sneezes.

### Masks

- Encouraging the use of masks as feasible. Masks are **most** essential in times when physical distancing is difficult.
  - Advise those wearing masks to not wear them in the water. Masks can be difficult to breathe through when they're wet.

### Staying home

- Educating staff, patrons, and swimmers about when to stay home (for example, if they have symptoms of COVID-19, have tested positive for COVID-19, or were exposed to someone with COVID-19 within the last 14 days) and when they can safely end their home isolation.

### Adequate supplies

- Ensuring adequate supplies to support healthy hygiene. Supplies include soap, hand sanitizer with at least 60 percent alcohol (for staff and older children who can safely use hand sanitizer), paper towels, tissues, and no-touch trash cans.

### Signs and messages

- Posting signs in highly visible locations (for example, at deck entrances and at sinks) about how to
  - Stop the spread 🦠 of COVID-19
  - Properly wash hands
  - Promote everyday protective measures 🛡️
  - Properly use a mask 🧴
- Broadcasting regular announcements about how to stop the spread on PA system.
- Including messages about behaviors that prevent the spread of COVID-19 in contracts with individual patrons or households, in emails, on facility websites (for example, posting online videos), through facility's social media accounts, and on entrance tickets).

## Maintaining healthy environments

To maintain healthy environments, operators of public aquatic venues may consider:

### Cleaning and disinfection

- Cleaning and disinfecting frequently touched surfaces at least daily and shared objects each time they are used. For example:
  - Handrails, slides, and structures for climbing or playing
  - Lounge chairs, tabletops, pool noodles, and kickboards
  - Door handles and surfaces of restrooms, handwashing stations, diaper-changing stations, and showers
- Consulting with the company or engineer that designed the aquatic venue to decide which List N disinfectants approved by the U.S. Environmental Protection Agency 🇺🇸 (EPA) are best for your aquatic venue.
- Setting up a system so that furniture (for example, lounge chairs) that needs to be cleaned and disinfected is kept separate from already cleaned and disinfected furniture.
- Labeling containers for used equipment that has not yet been cleaned and disinfected and containers for cleaned and disinfected equipment.
- Laundering towels and clothing according to the manufacturer's instructions. Use the warmest appropriate water temperature and dry items completely.
- Protecting shared furniture, equipment, towels, and clothing that has been cleaned and disinfected from becoming contaminated before use.
- Ensuring safe and correct use and storage of disinfectants, including storing products securely away from children.

### Ventilation

- Ensuring that ventilation systems of indoor spaces operate properly.
- Increasing introduction and circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. However, do not open windows and doors if doing so poses a safety risk to staff, patrons, or swimmers.

## Water systems

- Taking steps to ensure that all water systems (for example, drinking fountains, decorative fountains, hot tubs) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires' disease and other diseases associated with water.

## Modified layouts

- Changing deck layouts to ensure that in the standing and seating areas, individuals can remain at least 6 feet apart from those they don't live with.

## Physical barriers and guides

- Ensuring staff, patrons, and swimmers stay at least 6 feet apart from those they don't live with, both in and out of the water, by providing:
  - Physical cues or guides, such as lane lines in the water or chairs and tables on the deck
  - Visual cues, such as tape on the decks, floors, or sidewalks
  - Signs

## Communal spaces

- Staggering use of communal spaces (for example, in the water or breakroom), if possible, and cleaning and disinfecting frequently touched surfaces at least daily and shared objects each time they are used.

## Shared objects

- Discouraging people from sharing items that are difficult to clean, sanitize, or disinfect or that are meant to come in contact with the face (for example, goggles, nose clips, and snorkels).
- Discouraging the sharing of items such as food, equipment, toys, and supplies with those they don't live with.
- Ensuring adequate equipment for patrons and swimmers, such as kick boards and pool noodles, to minimize sharing to the extent possible, or limiting use of equipment by one group of users at a time and cleaning and disinfecting between use.

# Maintaining healthy operations

To maintain healthy operations, operators of public aquatic venues may consider:

## Protections for vulnerable staff

- Offering options such as telework or modified job responsibilities that reduce their risk of getting infected.
- Limiting aquatic venue use to only staff, patrons, and swimmers who live in the local area, if feasible.

## Lifeguards and water safety

- Ensuring that lifeguards who are actively lifeguarding are not also expected to monitor handwashing, use of masks, or social distancing of others. Assign this monitoring responsibility to another staff member.

### Alterations of public aquatic venues

- Consulting the company or engineer that designed the aquatic venue before altering aquatic features (for example, slides and structures designed for climbing or playing).

### Regulatory awareness

- Being aware of local or state regulatory agency policies on gathering requirements or recommendations to determine if events, such as aquatic fitness classes, swim lessons, swim team practice, swim meets, or pool parties can be held.

### Staggered or rotated shifts

- Staggering or rotating shifts to limit the number of staff present at the aquatic venue at the same time.

### Designated COVID-19 point of contact

- Designating a staff member to be responsible for responding to COVID-19 concerns. All staff should know who this person is and how to contact him or her.

### Gatherings

- Avoiding group events, gatherings, or meetings both in and out of the water if social distancing of at least 6 feet between people who don't live together cannot be maintained. Exceptions to the social distancing guidance include:
  - Anyone rescuing a distressed swimmer, providing first aid, or performing cardiopulmonary resuscitation, with or without an automated external defibrillator.
  - Individuals in the process of evacuating an aquatic venue or entire facility due to an emergency.
- If planned events must be conducted, staggering drop-off and pick-up times, as much as possible, to maintain distance of at least 6 feet between people who don't live together.
- Asking parents to consider if their children are capable of staying at least 6 feet apart from people they don't live with before taking them to a public aquatic venue.
- Limiting any nonessential visitors, volunteers, and activities involving external groups or organizations.

### Communication systems

- Putting systems in place for:
  - Having staff, patrons, and swimmers self-report if they have symptoms of COVID-19, a positive test for COVID-19, or were exposed to someone with COVID-19 within the last 14 days.
  - Notifying local health authorities of COVID-19 cases.
  - Notifying staff, patrons, and swimmers (as feasible) of potential COVID-19 exposures while maintaining confidentiality in accordance with the Americans with Disabilities Act (ADA) [\[7\]](#).
  - Notifying staff, patrons, and swimmers of aquatic venue closures.

### Leave policies



- Implementing sick leave (time off) policies and practices for staff that are flexible and non-punitive.
- Developing return-to-work policies aligned with CDC's criteria to discontinue home isolation.

## Back-up staffing plan

- Monitoring absenteeism of staff and creating a roster of trained back-up staff.

## Staff training

- Training staff on all safety protocols.
- Conducting training virtually or ensuring that social distancing is maintained during in-person training.

## Recognize signs and symptoms

- Conducting daily health checks (for example, temperature screening or symptom checking) of staff. Ensure safe and respectful implementation that is aligned with any applicable privacy laws and regulations.
  - Consider using examples of screening methods in CDC's General Business FAQs as a guide.


# Preparing for when someone gets sick

To prepare for when someone gets sick, operators of public aquatic venues may consider:


## Isolating and transporting those who are sick to their home or a healthcare provider

- Immediately separating staff, patrons, or swimmers with COVID-19 symptoms (for example, fever, cough, or shortness of breath).
- Establishing procedures for safely transporting anyone sick to their home or to a healthcare provider.

## Notifying health officials and close contacts

- Immediately notifying local health officials, staff, patrons, and swimmers of any case of COVID-19 while maintaining confidentiality in accordance with the Americans with Disabilities Act (ADA) .
- Informing those who have had close contact with a person diagnosed with COVID-19 to stay home and self-monitor for symptoms, and follow CDC guidance if symptoms develop.

## Cleaning and disinfection

- Closing off areas used by a sick person and not using the areas until after cleaning and disinfecting them.
- Waiting more than 24 hours before cleaning and disinfecting these areas. Ensuring safe and correct use and storage of EPA-approved List N disinfectants , including storing products securely away from children.

## Communication Resources



**FOLLOW THESE 5 SAFETY STEPS**  
to keep us all healthy

**1 STAY HOME IF YOU DON'T FEEL WELL**  
Or if you tested positive for COVID-19 or were exposed to someone with COVID-19 in the last 14 days

**2 STAY 6 FEET AWAY FROM PEOPLE**  
who don't live with you, both in and out of the water and avoid sharing items with other non-ride

## Other Resources

### Lakes, oceans, and other recreational water

There is no evidence that COVID-19 can be spread to humans through the use of recreational waters. Follow safe swimming practices along with social distancing and everyday preventative actions to protect yourself.

### CDC COVID-19 Resources

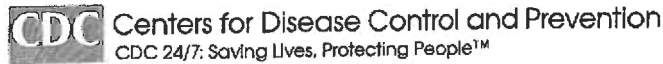
- Cleaning and Disinfection
- Guidance for Businesses and Employers
- COVID-19 Prevention
- Masks
- Social Distancing
- COVID-19 Frequently Asked Questions
- CDC Communication Resources
- Community Mitigation
- Considerations for Public Beaches

### Other CDC Resources

- CDC Healthy Swimming
- CDC Steps of Healthy Swimming
- Handwashing Information

Last Updated July 15, 2020

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



## Coronavirus Disease 2019 (COVID-19)

[MENU >](#)

### Social Distancing

Keep a Safe Distance to Slow the Spread.

Updated July 15, 2020

[Print](#)

Limiting close face-to-face contact with others is the best way to reduce the spread of coronavirus disease 2019 (COVID-19).

### What is social distancing?

Social distancing, also called “physical distancing,” means keeping a safe space between yourself and other people who are not from your household.

To practice social or physical distancing, stay at least 6 feet (about 2 arms' length) from other people who are not from your household in both indoor and outdoor spaces.

Social distancing should be practiced in combination with other everyday preventive actions to reduce the spread of COVID-19, including wearing masks, avoiding touching your face with unwashed hands, and frequently washing your hands with soap and water for at least 20 seconds.

### Why practice social distancing?

COVID-19 spreads mainly among people who are in close contact (within about 6 feet) for a prolonged period. Spread happens when an infected person coughs, sneezes, or talks, and droplets from their mouth or nose are launched into the air and land in the mouths or noses of people nearby. The droplets can also be inhaled into the lungs. Recent studies indicate that people who are infected but do not have symptoms likely also play a role in the spread of COVID-19. Since people can spread the virus before they know they are sick, it is important to stay at least 6 feet away from others when possible, even if you—or they—do not have any symptoms. Social distancing is especially important for people who are at higher risk for severe illness from COVID-19.

If you are sick with COVID-19, have symptoms consistent with COVID-19, or have been in close contact with someone who has COVID-19, it is important to stay home and away from other people until it is safe to be around others.

COVID-19 can live for hours or days on a surface, depending on factors such as sunlight, humidity, and the type of surface. It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or eyes. However, this is not thought to be the main way the virus spreads. Social distancing helps limit opportunities to come in contact with contaminated surfaces and infected people outside the home.

Although the risk of severe illness may be different for everyone, anyone can get and spread COVID-19. Everyone has a role to play in slowing the spread and protecting themselves, their family, and their community. In addition to practicing everyday steps to prevent COVID-19, keeping space between you and others is one of the best tools we have to avoid being exposed to this virus and slowing its spread in communities.

## Tips for Social Distancing

When going out in public, it is important to stay at least 6 feet away from other people and wear a mask to slow the spread of COVID-19. Consider the following tips for practicing social distancing when you decide to go out.

- **Know Before You Go:** Before going out, know and follow the guidance from local public health authorities where you live.
- **Prepare for Transportation:** Consider social distancing options to travel safely when running errands or commuting to and from work, whether walking, bicycling, wheelchair rolling, or using public transit, rideshares, or taxis. When using public transit, try to keep at least 6 feet from other passengers or transit operators – for example, when you are waiting at a bus station or selecting seats on a bus or train. When using rideshares or taxis, avoid pooled rides where multiple passengers are picked up, and sit in the back seat in larger vehicles so you can remain at least 6 feet away from the driver. Follow these additional tips to protect yourself while using transportation.
- **Limit Contact When Running Errands:** Only visit stores selling household essentials in person when you absolutely need to, and stay at least 6 feet away from others who are not from your household while shopping and in lines. If possible, use drive-thru, curbside pick-up, or delivery services to limit face-to-face contact with others. Maintain physical distance between yourself and delivery service providers during exchanges and wear a mask.
- **Choose Safe Social Activities:** It is possible to stay socially connected with friends and family who don't live in your home by calling, using video chat, or staying connected through social media. If meeting others in person (e.g., at small outdoor gatherings, yard or driveway gathering with a small group of friends or family members), stay at least 6 feet from others who are not from your household. Follow these steps to stay safe if you will be participating in personal and social activities outside of your home.
- **Keep Distance at Events and Gatherings:** It is safest to avoid crowded places and gatherings where it may be difficult to stay at least 6 feet away from others who are not from your household. If you are in a crowded space, try to keep 6 feet of space between yourself and others at all times, and wear a mask. Masks are especially important in times when physical distancing is difficult. Pay attention to any physical guides, such as tape markings on floors or signs on walls, directing attendees to remain at least 6 feet apart from each other in lines or at other times. Allow other people 6 feet of space when you pass by them in both indoor and outdoor settings.
- **Stay Distanced While Being Active:** Consider going for a walk, bike ride, or wheelchair roll in your neighborhood or in another safe location where you can maintain at least 6 feet of distance between yourself and other pedestrians and cyclists. If you decide to visit a nearby park, trail, or recreational facility, first check for closures or restrictions. If open, consider how many other people might be there and choose a location where it will be possible to keep at least 6 feet of space between yourself and other people who are not from your household.

Many people have personal circumstances or situations that present challenges with practicing social distancing to prevent the spread of COVID-19. Please see the following guidance for additional recommendations and considerations:

- Households Living in Close Quarters: How to Protect Those Who Are Most Vulnerable
- Living in Shared Housing

- People with Disabilities
- People Experiencing Homelessness

### More Information

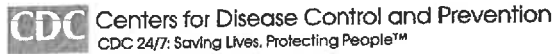
How to Protect Yourself

Cleaning and Disinfecting Your Home

Gatherings and Community Events

Last Updated July 15, 2020

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



## Coronavirus Disease 2019 (COVID-19)



### Cleaning and Disinfecting Your Facility

Everyday Steps, Steps When Someone is Sick, and Considerations for Employers

Updated July 28, 2020 [Print](#)

## How to clean and disinfect



### Clean

- **Wear disposable gloves to clean and disinfect.**
- **Clean surfaces using soap and water, then use disinfectant.**
- Cleaning with soap and water **reduces number of germs, dirt and impurities** on the surface. **Disinfecting kills germs** on surfaces.
- **Practice routine cleaning** of frequently touched surfaces.
  - More frequent cleaning and disinfection may be required based on level of use.
  - Surfaces and objects in public places, such as shopping carts and point of sale keypads should be cleaned and disinfected before each use.
- **High touch surfaces include:**
  - Tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, etc.



### Disinfect

- **Recommend use of EPA-registered household disinfectant** [☑](#) .  
Follow the instructions on the label to ensure safe and effective use of the product.
- Many products recommend:
  - Keeping surface wet for a period of time (see product label).
  - Precautions such as wearing gloves and making sure you have good ventilation during use of the product.

**Always read and follow the directions on the label** to ensure safe and effective use.

- Wear skin protection and consider eye protection for potential splash hazards
- Ensure adequate ventilation
- Use no more than the amount recommended on the label
- Use water at room temperature for dilution (unless stated otherwise on the label)
- Avoid mixing chemical products
- Label diluted cleaning solutions
- Store and use chemicals out of the reach of children and pets

You should never eat, drink, breathe or inject these products into your body or apply directly to your skin as they can cause serious harm. Do not wipe or bathe pets with these products or any other products that are not approved for animal use.

See EPA's 6 steps for Safe and Effective Disinfectant Use [☑](#)

Special considerations should be made for people with asthma and they should not be present when cleaning and disinfecting is happening as this can trigger asthma exacerbations. Learn more about reducing asthma triggers.

- **Diluted household bleach solutions may also be used** if appropriate for the surface.
  - Check the label to see if your bleach is intended for disinfection and has a sodium hypochlorite concentration of 5%–6%. Ensure the product is not past its expiration date. Some bleaches, such as those designed for safe use on colored clothing or for whitening may not be suitable for disinfection.
  - Unexpired household bleach will be effective against coronaviruses when properly diluted.  
**Follow manufacturer's instructions** for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser.  
**Leave solution on the surface for at least 1 minute.**

**To make a bleach solution, mix:**

- 5 tablespoons (1/3rd cup) bleach per gallon of room temperature water  
OR
  - 4 teaspoons bleach per quart of room temperature water
- Bleach solutions will be effective for disinfection up to 24 hours.
  - **Alcohol solutions with at least 70% alcohol may also be used.**



## Soft surfaces

For soft surfaces such as carpeted floor, rugs, and drapes

- **Clean the surface using soap and water** or with cleaners appropriate for use on these surfaces.
- **Laundry items** (if possible) according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.  
  
OR
- **Disinfect with an EPA-registered household disinfectant.** These disinfectants  meet EPA's criteria for use against COVID-19.
- Vacuum as usual.



## Electronics

For electronics, such as tablets, touch screens, keyboards, remote controls, and ATM machines

- Consider putting a **wipeable cover** on electronics.
- **Follow manufacturer's instruction** for cleaning and disinfecting.
  - If no guidance, use **alcohol-based wipes or sprays containing at least 70% alcohol.** Dry surface thoroughly.



## Laundry


For clothing, towels, linens and other items

- Launder items according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items **completely.**
- **Wear disposable gloves** when handling dirty laundry from a person who is sick.

- Dirty laundry from a person who is sick can be washed with other people's items.
- **Do not shake** dirty laundry.
- Clean and **disinfect clothes hampers** according to guidance above for surfaces.
- Remove gloves, and wash hands right away.



## Cleaning and disinfecting your building or facility if someone is sick

- **Close off areas** used by the person who is sick.
  - Companies do not necessarily need to close operations, if they can close off affected areas.
- **Open outside doors and windows** to increase air circulation in the area.
- **Wait 24 hours** before you clean or disinfect. If 24 hours is not feasible, wait as long as possible.
- Clean and disinfect **all areas used by the person who is sick**, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls, and ATM machines.
- Vacuum the space if needed. Use a vacuum equipped with high-efficiency particulate air (HEPA) filter, if available.
  - Do not vacuum a room or space that has people in it. Wait until the room or space is empty to vacuum, such as at night, for common spaces, or during the day for private rooms.
  - Wear disposable gloves to clean and disinfect. For soft (porous) surfaces such as carpeted floors or rugs, clean the surface with detergents or cleaners appropriate for use on these surfaces, according to the textile's label. After cleaning, disinfect with an appropriate EPA-registered disinfectant on List N: Disinfectants for use against SARS-CoV-2 . Soft and porous materials, like carpet, are generally not as easy to disinfect as hard and non-porous surfaces. EPA has listed a limited number of products approved for disinfection for use on soft and porous materials on List N. Follow the disinfectant manufacturer's safety instructions (such as wearing gloves and ensuring adequate ventilation), concentration level, application method and contact time. Allow sufficient drying time if vacuum is not intended for wet surfaces.
  - Temporarily turn off in-room, window-mounted, or on-wall recirculation HVAC to avoid contamination of the HVAC units.
  - Do NOT deactivate central HVAC systems. These systems tend to provide better filtration capabilities and introduce outdoor air into the areas that they serve.
  - Consider temporarily turning off room fans and the central HVAC system that services the room or space, so that particles that escape from vacuuming will not circulate throughout the facility.
- Once area has been appropriately disinfected, it can be opened for use.
  - **Workers without close contact** with the person who is sick can return to work immediately after disinfection.
- If **more than 7 days** since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.
  - Continue routine cleaning and disinfection. This includes everyday practices that businesses and communities normally use to maintain a healthy environment.



## Cleaning and disinfecting outdoor areas

- Outdoor areas, like **playgrounds in schools and parks** generally require **normal routine cleaning**, but do not require disinfection.
  - Do not spray disinfectant on outdoor playgrounds- it is not an efficient use of supplies and is not proven to reduce risk of COVID-19 to the public.



- High touch surfaces made of plastic or metal, such as grab bars and railings should be cleaned routinely.
- Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.
- **Sidewalks and roads should not be disinfected.**
  - Spread of COVID-19 from these surfaces is very low and disinfection is not effective.



## When cleaning

- **Regular cleaning staff** can clean and disinfect community spaces.
  - Ensure they are trained on appropriate use of cleaning and disinfection chemicals.
- **Wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash.**
  - Additional personal protective equipment (PPE) might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
  - Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area.
- **Wash your hands often** with soap and water for 20 seconds.
  - Always wash immediately after removing gloves and after contact with a person who is sick.
  - Hand sanitizer: If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.

Always read and follow the directions on the label to ensure safe and effective use.

- Keep hand sanitizers away from fire or flame
- For children under six years of age, hand sanitizer should be used with adult supervision
- Always store hand sanitizer out of reach of children and pets

See FDA's [Tips for Safe Sanitizer Use](#) and CDC's [Hand Sanitizer Use Considerations](#)

- **Additional key times to wash hands** include:
  - After blowing one's nose, coughing, or sneezing.
  - After using the restroom.
  - Before eating or preparing food.
  - After contact with animals or pets.
  - Before and after providing routine care for another person who needs assistance (e.g., a child).



## Additional considerations for employers

- **Educate workers** performing cleaning, laundry, and trash pick-up to recognize the symptoms of COVID-19.
- Provide instructions on what to do if they develop symptoms within 14 days after their last possible exposure to the virus.
- **Develop policies for worker protection and provide training** to all cleaning staff on site prior to providing cleaning tasks.
  - Training should include when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE, and how to properly dispose of PPE.
- Ensure workers are trained on the hazards of the cleaning chemicals used in the workplace in accordance with OSHA's Hazard Communication standard (29 CFR 1910.1200 [link](#)).

- **Comply with OSHA's standards** on Bloodborne Pathogens (29 CFR 1910.1030 [↗](#) ), including proper disposal of regulated waste, and PPE (29 CFR 1910.132 [↗](#) ).



## Alternative disinfection methods

- The efficacy of alternative disinfection methods, such as ultrasonic waves, high intensity UV radiation, and LED blue light against COVID-19 virus is not known.
  - EPA does not routinely review the safety or efficacy of pesticidal devices, such as UV lights, LED lights, or ultrasonic devices. Therefore, EPA cannot confirm whether, or under what circumstances, such products might be effective against the spread of COVID-19.
- CDC does not recommend the use of sanitizing tunnels. There is no evidence that they are effective in reducing the spread of COVID-19. Chemicals used in sanitizing tunnels could cause skin, eye, or respiratory irritation or damage.
- CDC only recommends use of the surface disinfectants identified on List N [↗](#) against the virus that causes COVID-19.



## For facilities that house people overnight

- Follow CDC's guidance for colleges and universities. Work with state and local health officials to determine the best way to isolate people who are sick and if temporary housing is needed.
- For guidance on cleaning and disinfecting the bedroom/bathroom for someone who is sick, review CDC's guidance on disinfecting your home if someone is sick.

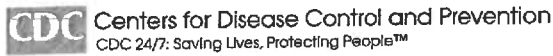
More details: [Detailed Disinfection Guidance for Community Facilities](#)

## More information

[Transport Vehicles](#)

Last Updated July 28, 2020

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



# Coronavirus Disease 2019 (COVID-19)



## How to Protect Yourself & Others

Updated July 31, 2020 [Print](#)

**Older adults and people who have severe underlying medical conditions like heart or lung disease or diabetes seem to be at higher risk for developing serious complications from COVID-19 illness. More information on [Are you at higher risk for serious illness.](#)**



### Know how it spreads

- There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19).
- **The best way to prevent illness is to avoid being exposed to this virus.**
- The virus is thought to spread mainly from person-to-person.
  - Between people who are in close contact with one another (within about 6 feet).
  - Through respiratory droplets produced when an infected person coughs, sneezes or talks.
  - These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
  - Some recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

## Everyone Should



### Wash your hands often

- Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- It's especially important to wash:
  - Before eating or preparing food
  - Before touching your face
  - After using the restroom
  - After leaving a public place
  - After blowing your nose, coughing, or sneezing
  - After handling your mask
  - After changing a diaper
  - After caring for someone sick
  - After touching animals or pets
- If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
- Avoid touching your eyes, nose, and mouth with unwashed hands.

### Avoid close contact



- **Inside your home:** Avoid close contact with people who are sick.
  - If possible, maintain 6 feet between the person who is sick and other household members.
- **Outside your home:** Put 6 feet of distance between yourself and people who don't live in your household.
  - Remember that some people without symptoms may be able to spread virus.
  - Stay at least 6 feet (about 2 arms' length) from other people.
  - Keeping distance from others is especially important for people who are at higher risk of getting very sick.



## Cover your mouth and nose with a mask when around others

- You could spread COVID-19 to others even if you do not feel sick.
- The mask is meant to protect other people in case you are infected.
- Everyone should wear a mask in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain.
  - Masks should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
- Do NOT use a mask meant for a healthcare worker. Currently, surgical masks and N95 respirators are critical supplies that should be reserved for healthcare workers and other first responders.
- Continue to keep about 6 feet between yourself and others. The mask is not a substitute for social distancing.



## Cover coughs and sneezes

- **Always cover your mouth and nose** with a tissue when you cough or sneeze or use the inside of your elbow and do not spit.
- **Throw used tissues** in the trash.
- Immediately **wash your hands** with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.



## Clean and disinfect

- **Clean AND disinfect** frequently touched surfaces **daily**. This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.
- **If surfaces are dirty, clean them.** Use detergent or soap and water prior to disinfection.
- **Then, use a household disinfectant.** Most common EPA-registered household disinfectants  will work.



## Monitor Your Health Daily

- **Be alert for symptoms.** Watch for fever, cough, shortness of breath, or other symptoms of **COVID-19**.
  - Especially important if you are running essential errands, going into the office or workplace, and in settings where it may be difficult to keep a physical distance of 6 feet.
- **Take your temperature** if symptoms develop.

- Don't take your temperature within 30 minutes of exercising or after taking medications that could lower your temperature, like acetaminophen.
- Follow CDC guidance if symptoms develop.

## Stop the Spread of Germs

### Robert R. Redfield, MD | #COVIDStopsWithMe

CDC Director Robert R. Redfield, MD discusses how we can slow the spread of COVID-19.

### COVID-19 Stop the Spread of Germs

Help stop the spread of COVID-19 and other respiratory illnesses by following these steps.

## Handwashing Resources



Handwashing tips



Hand Hygiene in  
Healthcare Settings

## More information

Symptoms

What to do if you are sick

If someone in your house gets sick

Frequently asked questions

Travelers

Individuals, schools, events, businesses and more

Healthcare Professionals

10 Things You Can Do to Manage COVID-19 at Home

10 Things You Can Do to Manage COVID-19 at Home (ASL Version)

Social Distancing (ASL Video)

ASL Video Series: What You Need to Know About Handwashing

Last Updated July 31, 2020

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



## Coronavirus Disease 2019 (COVID-19)

[MENU >](#)

### About Masks

Updated Aug. 6, 2020 [Print](#)

A mask may not protect the wearer, but it may keep the wearer from spreading the virus to others.

COVID-19 spreads mainly from person to person through respiratory droplets produced when an infected person coughs, sneezes, talks, or raises their voice (e.g., while shouting, chanting, or singing). These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. Recent studies show that a significant portion of individuals with COVID-19 lack symptoms (are “asymptomatic”) and that even those who eventually develop symptoms (are “pre-symptomatic”) can transmit the virus to others before showing symptoms.

To reduce the spread of COVID-19, CDC recommends that people wear masks in public settings when around people outside of their household, especially when other social distancing measures are difficult to maintain.

### Why it is important to wear a mask

Masks may help prevent people who have COVID-19 from spreading the virus to others. Wearing a mask will help protect people around you, including those at higher risk of severe illness from COVID-19 and workers who frequently come into close contact with other people (e.g., in stores and restaurants). Masks are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings. The spread of COVID-19 can be reduced when masks are used along with other preventive measures, including social distancing, frequent handwashing, and cleaning and disinfecting frequently touched surfaces.

The masks recommended here are not surgical masks or respirators. Currently, those are critical supplies that should be reserved for healthcare workers and other first responders. Masks are not personal protective equipment (PPE). They are not appropriate substitutes for PPE such as respirators (like N95 respirators) or medical facemasks (like surgical masks) in workplaces where respirators or facemasks are recommended or required to protect the wearer.

### Masks with Exhalation Valves or Vents

The purpose of masks is to keep respiratory droplets from reaching others to aid with source control. Masks with one-way valves or vents allow exhaled air to be expelled out through holes in the material. This can allow exhaled respiratory droplets to reach others and potentially spread the COVID-19 virus. Therefore, CDC does not recommend using masks if they have an exhalation valve or vent.

## More Information

Considerations for Wearing Masks

How to Wear Your Mask

How to Wash Your Mask

How to Make Your Own Mask

ASL Video Series: Easy DIY Mask

How to Make Your Own Mask Video (Spanish)

Last Updated Aug. 6, 2020

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



## Coronavirus Disease 2019 (COVID-19)



### How to Wear Masks

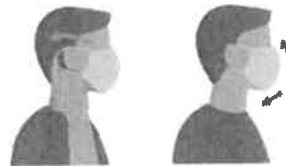
Updated Aug. 7, 2020 [Print](#)

Masks are an additional step to help slow the spread of COVID-19 when combined with every day preventive actions and social distancing in public settings.

- CDC recommends that people wear masks in public and when around people who don't live in your household.
- Masks should NOT be worn by children under age 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.
- Do NOT use a mask meant for a healthcare worker. Currently, surgical masks and N95 respirators are critical supplies that should be reserved for healthcare workers and other first responders.

### Wear your Mask Correctly

- Wash your hands before putting on your mask
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily
- CDC does not recommend use of masks or cloth masks for source control if they have an exhalation valve or vent



### Wear a Mask to Protect Others

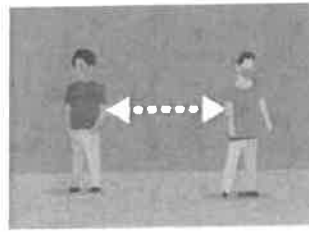
- Wear a mask that covers your nose and mouth to help protect others in case you're infected with COVID-19 but don't have symptoms
- Wear a mask in public settings when around people who don't live in your household, especially when it may be difficult for you to stay six feet apart
- Wear a mask correctly for maximum protection
- Don't put the mask around your neck or up on your forehead
- Don't touch the mask, and, if you do, wash your hands or use hand sanitizer to disinfect

### Follow Everyday Health Habits

- Stay at least 6 feet away from others
- Avoid contact with people who are sick



- Wash your hands often, with soap and water, for at least 20 seconds each time
- Use hand sanitizer if soap and water are not available



## Take Off Your Mask Carefully, When You're Home

- Untie the strings behind your head or stretch the ear loops
- Handle only by the ear loops or ties
- Fold outside corners together
- Place mask in the washing machine (learn more about how to wash masks)
- Be careful not to touch your eyes, nose, and mouth when removing and wash hands immediately after removing.

### More Information

[Considerations for Wearing Masks](#)

[How to Wear Your Mask](#)

[How to Wash Your Mask](#)

[How to Make Your Own Mask](#)

[ASL Video Series: Easy DIY Mask](#)

[How to Make Your Own Mask Video \(Spanish\)](#)

Last Updated Aug. 7, 2020

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



## Coronavirus Disease 2019 (COVID-19)

MENU >



# Considerations for Wearing Masks

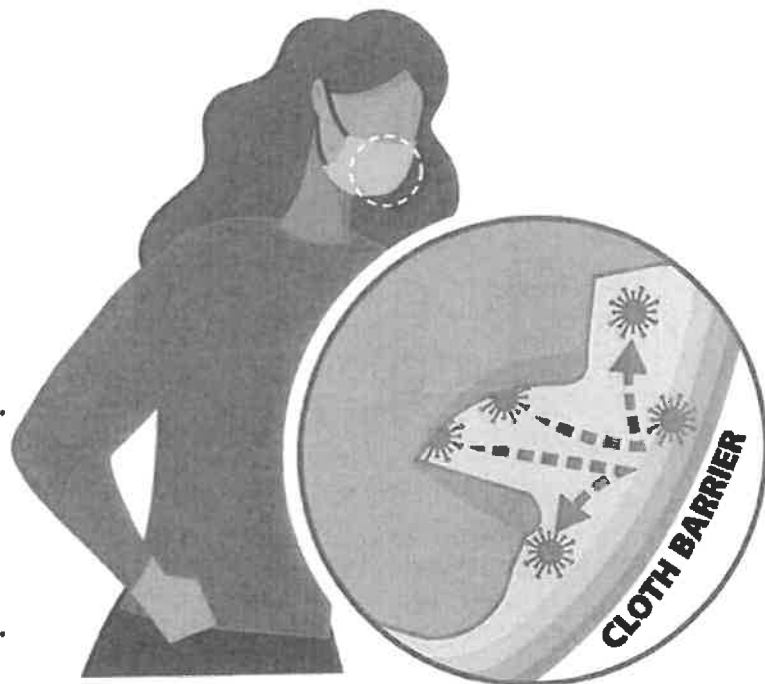
Help Slow the Spread of COVID-19

Updated Aug. 7, 2020 [Print](#)

- CDC recommends that people wear masks in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain.
- Masks may help prevent people who have COVID-19 from spreading the virus to others.
- Masks are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings.
- Masks should NOT be worn by children under the age of 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.
- Masks with exhalation valves or vents should NOT be worn to help prevent the person wearing the mask from spreading COVID-19 to others (source control).

## Evidence for Effectiveness of Masks

Masks are recommended as a simple barrier to help prevent respiratory droplets from traveling into the air and onto other people when the person wearing the mask coughs, sneezes, talks, or raises their voice. This is called source control. This recommendation is based on what we know about the role respiratory droplets play in the spread of the virus that causes COVID-19, paired with emerging evidence from clinical and laboratory studies that shows masks reduce the spray of droplets when worn over the nose and mouth. COVID-19 spreads mainly among people who are in close contact with one another (within about 6 feet), so the use of masks is particularly important in settings where people are close to each other or where social



distancing is difficult to maintain. CDC's recommendations for masks will be updated as new scientific evidence becomes available.

## Who Should Wear A Mask?

### General public

CDC recommends all people 2 years of age and older wear a mask in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain.

COVID-19 can be spread by people who do not have symptoms and do not know that they are infected. That's why it's important

for everyone to wear masks in public settings and practice social distancing (staying at least 6 feet away from other people).

- While masks are strongly encouraged to reduce the spread of COVID-19, CDC recognizes there are specific instances when wearing a mask may not be feasible. In these instances, adaptations and alternatives should be considered whenever possible (see below for examples).

## People who know or think they might have COVID-19

- If you are sick with COVID-19 or think you might have COVID-19, do not visit public areas. Stay home except to get medical care. As much as possible stay in a specific room and away from other people and pets in your home. If you need to be around other people or animals, wear a mask (including in your home).
- The mask helps prevent a person who is sick from spreading the virus to others. It helps keep respiratory droplets contained and from reaching other people.

## Caregivers of people with COVID-19

- Those caring for someone who is sick with COVID-19 at home or in a non-healthcare setting may also wear a mask. However, the protective effects—how well the mask protects healthy people from breathing in the virus—are unknown. To prevent getting sick, caregivers should also continue to practice everyday preventive actions: avoid close contact as much as possible, clean hands often; avoid touching your eyes, nose, and mouth with unwashed hands; and frequently clean and disinfect surfaces.

## Who Should Not Wear a Mask

Masks should **not** be worn by:

- Children younger than 2 years old
- Anyone who has trouble breathing
- Anyone who is unconscious, incapacitated, or otherwise unable to remove the mask without assistance

## Feasibility and Adaptations

CDC recognizes that wearing masks may not be possible in every situation or for some people. In some situations, wearing a mask may exacerbate a physical or mental health condition, lead to a medical emergency, or introduce significant safety concerns. Adaptations and alternatives should be considered whenever possible to increase the feasibility of wearing a mask or to reduce the risk of COVID-19 spreading if it is not possible to wear one.

For example,

- People who are deaf or hard of hearing—or those who care for or interact with a person who is hearing impaired—may be unable to wear masks if they rely on lipreading to communicate. In this situation, consider using a clear mask. If a clear mask isn't available, consider whether you can use written communication, use closed captioning, or decrease background noise to make communication possible while wearing a mask that blocks your lips.
- Some people, such as people with intellectual and developmental disabilities, mental health conditions or other sensory sensitivities, may have challenges wearing a mask. They should consult with their healthcare provider for advice about wearing masks.
- Younger children (e.g., preschool or early elementary aged) may be unable to wear a mask properly, particularly for an extended period of time. Wearing of masks may be prioritized at times when it is difficult to maintain a distance of 6 feet from others (e.g., during carpool drop off or pick up, or when standing in line at school). Ensuring proper mask size and fit and providing children with frequent reminders and education on the importance and proper wear of masks may help address these issues.
- People should not wear masks while engaged in activities that may cause the mask to become wet, like when swimming at the beach or pool. A wet mask may make it difficult to breathe. For activities like swimming, it is particularly important to maintain physical distance from others when in the water.
- People who are engaged in high intensity activities, like running, may not be able to wear a mask if it causes difficulty breathing. If unable to wear a mask, consider conducting the activity in a location with greater ventilation and air exchange (for instance, outdoors versus indoors) and where it is possible to maintain physical distance from others.
- People who work in a setting where masks may increase the risk of heat-related illness or cause safety concerns due to introduction of a hazard (for instance, straps getting caught in machinery) may consult with an occupational safety and health professional to determine the appropriate mask for their setting. Outdoor workers may prioritize use of masks when in close contact with other people, like during group travel or shift meetings, and remove masks when social distancing is possible. Find more information here and below.

Masks are a critical preventive measure and are **most** essential in times when social distancing is difficult. If masks cannot be used, make sure to take other measures to reduce the risk of COVID-19 spread, including social distancing, frequent hand washing, and cleaning and disinfecting frequently touched surfaces.

## Masks with Exhalation Valves or Vents

The purpose of masks is to keep respiratory droplets from reaching others to aid with source control. However, masks with one-way valves or vents allow air to be exhaled through a hole in the material, which can result in expelled respiratory droplets that can reach others. This type of mask does not prevent the person wearing the mask from transmitting COVID-19 to others. Therefore, CDC **does not recommend** using masks for source control if they have an exhalation valve or vent.

## Face Shields










- A face shield is primarily used for eye protection for the person wearing it. At this time, it is not known what level of protection a face shield provides to people nearby from the spray of respiratory droplets from the wearer. There is currently not enough evidence to support the effectiveness of face shields for source control. Therefore, CDC **does not currently recommend** use of face shields as a substitute for masks.
- However, wearing a mask may not be feasible in every situation for some people for example, people who are deaf or hard of hearing—or those who care for or interact with a person who is hearing impaired. Here are some considerations for individuals who must wear a face shield instead of a mask:
  - Although evidence on face shields is limited, the available data suggest that the following face shields may provide better source control than others:
    - Face shields that wrap around the sides of the wearer's face and extend below the chin.
    - Hooded face shields.
  - Face shield wearers should wash their hands before and after removing the face shield and avoid touching their eyes, nose and mouth when removing it.
  - Disposable face shields should only be worn for a single use and disposed of according to manufacturer instructions.
  - Reusable face shields should be cleaned and disinfected after each use according to manufacturer instructions or by following CDC face shield cleaning instructions .
  - Plastic face shields for newborns and infants are **NOT recommended**.

## Surgical Masks

Masks are not surgical masks or respirators. Currently, those are critical supplies that should continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance. Masks also are not appropriate substitutes for them in workplaces where surgical masks or respirators are recommended or required and available.

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Last Updated Aug. 7, 2020

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