COVID-19 Respiratory Infection due to novel CORONAVIRUS SARS-COV-2 strain - Guidance for hotels and other travelers' accommodation facilities

SARS-CoV-2 was first identified in the area of Wuhan, China in December 2019 and has since spread in many countries around the world. It is a new strain of coronavirus that had never, until then, been identified in humans. It causes a respiratory infection called COVID-19.

How is the virus transmitted?

The virus is transmitted from human to human mostly through respiratory droplets from sneezing, coughing or talking. It can also be transmitted through recently contaminated surfaces, if measures of hand hygiene are not used.

When is a case considered more contagious?

A case is considered more contagious if the patient develops symptoms; however, a patient can potentially transmit the infection even 1-4 days before developing symptoms himself. The main period of transmission is during the symptomatic phase. A case is considered as non-contagious 24 hours after symptoms subside.

What are the symptoms of COVID-19 infection?

The main symptoms of the disease are fever, dry cough and fatigue. Some people may also develop sore throat, joint/muscle pain and nasal congestion. Symptoms are usually mild and approximately 80% of patients recover without need for treatment.

Which patients are considered to be more at risk of developing a severe condition?

Some patients develop dyspnea (difficulty breathing) and possibly, pneumonia that has to be treated in hospital. People in high-risk groups (e.g. elders, patients with heart conditions, diabetes mellitus, liver or lung conditions) are more likely to develop severe symptoms of the disease.

What is the definition of close contact with a COVID-19 case within hotel premises?

- Sharing the same room with a confirmed case of COVID-19
- Having direct contact with a confirmed case of COVID-19 (e.g. handshake)
- Having been face-to-face or in the same closed space with a confirmed case of COVID-19 at a distance less than 2 meters and for at least 15 minutes.
- Having unprotected contact with contagious secretions of a confirmed case (e.g. vomit)
Do hotel employees need to wear a mask?

You should use a mask in the following cases:

- If you have symptoms of respiratory infection (cough, sneezing, runny nose), in order to limit the risk of transmission.
- If you are caring for escorting other persons with symptoms of respiratory infection, to protect yourself against the infection.

Other than that, generalized use of masks in working environments is not advised.

When should hotel employees refrain from work?

Hotel employees are advised to refrain from work if:

- They have symptoms of respiratory infection
- If they have come in close contact with a confirmed case of COVID-19, and for 14 days after that.

What procedure is to be followed in case a hotel customer needs to self-isolate in his room (quarantine at the hotel for 1-14 days) after having a close contact with a confirmed case of COVID-19?

- The isolated guest is advised to have his meals inside his room and refrain from using the hotel’s common areas
- Hotel personnel must refrain from entering the room, unless there is a serious reason.
- When entering the room, personnel is advised to use a standard surgical mask as well as gloves
- When leaving the room, any used gloves and masks must be disposed of; hand hygiene must follow
- Care should be taken so that the number of staff coming in contact with the quarantined guest will be limited to the minimum possible

General measures for prevention of infection transmission

All hotel areas must be well ventilated while access to running water and soap must be available to allow for good hygiene practice.

1. The first line of defense against infections is good hygiene practice. You are advised to wash your hands frequently with soap and water. If your hands are not dirty, you may use a disinfectant instead (e.g. 70% alcohol solution). Use of gloves should not replace hand washing.

2. Good hygiene practice involves:
   - covering your mouth and nose with a tissue when you cough or sneeze
3. Avoid coming in close contact (1 - 2 meters distance) with patients who show respiratory symptoms.

Handling a suspected case of COVID-19

If a guest meets the criteria of the COVID-19 case definition, (see NPHO’s website for case definition) the procedure below must be followed:

The hotel’s health official must contact NPHO IMMEDIATELY at 210 5212054 or 1135 hotline (24/7) to declare the suspected case and receive guidance on how to handle the case.

- The patient is advised to remain in his room and keep the door shut.
- If the patient shows symptoms of respiratory infection (cough, sneezing, runny nose), he must be provided immediately with a mask and tissues.
- If the patient was accompanied by another individual who still wishes to remain with him to take care of him (e.g. spouse), then this person must also be given a standard surgical mask and must practice hand hygiene at all times when coming in contact with the patient’s secretions (e.g. saliva) and, most importantly, before touching their face or before eating or drinking.
- Personnel must be advised to avoid entering the patient’s room, unless there is a serious reason. If need arises, we suggest that only one member of the hotel staff be responsible for the suspected case. This way, the number of employees exposed to infection may be reduced to minimum.
- Any used protective equipment (standard surgical mask, gloves) must be disposed of in a bin and must in no case be used again.
- After disposing of the protective equipment, you should wash your hands thoroughly with water and soap. Please note that using gloves does not replace hand washing, which is the most important measure of protection.

Care should be taken by hotel management for accessible and adequate amount of supplies to be used for infection prevention:

- soap and water or hand disinfectant
- tissues
- standard surgical masks
- disposable gloves
- thermometers
- garbage bags
- surface cleanser

Finally, to safeguard public health, the hotel management must keep a record of all members of staff and all persons who stayed at the hotel - name, nationality, check-in and check-out date, contact information (address, telephone number, e-mail), to allow
communication with all individuals who came in close contact with a later confirmed case of COVID-19.

Information to staff and availability of protective equipment may contribute towards organized and controlled management of a case of alert. Timely planning and effective prevention can ensure the health of visitors and staff and maintain smooth facility operation.

Cooperation with NPHO and other Public Health bodies (District Divisions for Public Health) is important both in establishing measures of prevention as well as in proceeding with necessary actions and the provision of information if a case of infection is reported.

NOTE:

Health professionals handling a suspected case must use all droplet precautions and wear a FFP2 mask, a long-sleeve water-proof gown, gloves and eye protection (glasses).

Cleaning and disinfecting the patient's room

- All surfaces the patient may have come in contact with must be thoroughly cleaned, e.g. door knobs, bathroom surfaces etc., particularly if these surfaces are contaminated with body fluids.
- Cleaning staff is advised to use a standard surgical mask, gloves and a disposable waterproof gown. While working, cleaning staff must not touch their mouth, nose or eyes with their hands. Also, they must not eat or smoke.
- After removing the gloves, thorough handwashing with soap and water is necessary. Please note that using gloves does not replace hand washing, which is the most important measure of protection.

Fabric surfaces (e.g. furniture fabrics) must be steam cleaned at > 70°C.

For any further clarifications, please contact NPHO at

210 5212054, 1135 (24/7)