

**Coronavirus 2019 (COVID-19):  
Best Practices for Businesses, Community Establishments  
and Public Events**

This guidance describes best practices that businesses, community establishments, and event organizers are recommended to follow to help reduce the risk of COVID-19 transmission amongst workers, patrons<sup>1</sup> and the community.

This guidance is not intended for use in healthcare settings, Pre-Kindergarten-12th Grade and Adult Education, or childcare settings. It is also not intended for non-healthcare congregate settings such as correctional facilities or homeless shelters. These settings have their own specific guidance to follow. For additional information, visit [coronavirus.dc.gov/healthguidance](https://coronavirus.dc.gov/healthguidance).

### **Fundamentals of safe operation**

Businesses and organizations play a key role in preventing the spread of COVID-19 by implementing safe operations. Employers are responsible for providing a safe workplace and a safe environment for the people served in their facility. Plans should be carefully and thoughtfully developed around COVID-19 prevention, communication, and response to decrease the risk of spread of COVID-19 within their facilities.

- How COVID-19 spreads:
  - The main way COVID-19 spreads is from person-to-person when an infected person breathes out droplets and particles that contain the virus.
    - People can become sick with COVID-19 by breathing in infected air, being splashed or sprayed in their eyes, nose, or mouth with infectious droplets (e.g., from a cough), or touching their eyes, nose or mouths with hands that have the virus on them.
  - People who are 6 feet or closer to the infected person are most likely to get sick.
  - COVID-19 can sometimes spread between people in the air over longer distances, especially in crowded indoor settings with poor ventilation. COVID-19 can also spread from environmental surfaces, but this is uncommon.
- Use of multiple layered COVID-19 prevention measures is the best way to prevent COVID-19 from being introduced and spreading in your facility. No individual method is perfect, but when used together they are very powerful. Even if COVID-19 does get into your facility, the use of these measures can contain the virus and make it less likely to adversely affect operations.

They include:

- **Vaccination**
- **Wearing masks**
- **Physical distancing**
- **Staying home when sick**
- **Hand hygiene and respiratory etiquette**
- **Cleaning and disinfection**
- **Good ventilation in indoor spaces**
- **Testing, isolation, contact tracing, and quarantine**

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<sup>1</sup> The generic term “patron” is used throughout this guidance for simplicity. Please substitute whatever term is appropriate for the people served by your establishment (e.g., customer, client, visitor, attendee, guest, congregant).

## COVID-19 vaccination

### Vaccination basics

Vaccination is the most important public health intervention for ending the COVID-19 pandemic. In the United States, the COVID-19 vaccine is available to everyone 5 and older. All adults 18 and older should also get a COVID-19 booster shot. If you are not vaccinated, find out more about the COVID-19 vaccines at [coronavirus.dc.gov/vaccine](https://coronavirus.dc.gov/vaccine).

COVID-19 vaccines are free, safe, and effective. However, no vaccines are 100% effective and there are breakthrough cases of COVID-19 even in fully vaccinated people. Fortunately, if you catch COVID-19 when you are fully vaccinated, the infection will likely be mild. The vaccines are very effective at preventing severe illness, hospitalization, and death. At this point, most people who become very sick with COVID-19 are unvaccinated people. In DC, over 97% of those hospitalized with COVID-19 are unvaccinated.

- People are considered **fully vaccinated** 14 days after they received the final dose of a COVID-19 primary<sup>2</sup> vaccination series (after the second dose of a 2-dose series, or after one dose of a single-dose vaccine).
- People who are unvaccinated remain at higher risk for catching COVID-19 and need to take more precautions than people who are fully vaccinated.
  - People who are immunocompromised may not be fully protected even if they are fully vaccinated. Because of this, **people who are immunocompromised should continue taking all the same precautions as unvaccinated people** and should consult with their healthcare provider.
- For detailed information about what people can do if they are vaccinated, see *Guidance for Fully Vaccinated People* at [coronavirus.dc.gov/healthguidance](https://coronavirus.dc.gov/healthguidance).

### Vaccination at the business/community establishment

- Employers should actively encourage and consider incentivizing workers to get vaccinated.
- High levels of vaccination at a business/community establishment will help allow the establishment to continue functioning, even if there is a COVID-19 exposure.
- **DC businesses and private establishments may require their staff to be vaccinated against COVID-19 and may require proof of vaccination from patrons to enter the establishment.**
- Per DC Mayor's Order 2021-099, DC Government employees, contractors, interns, and grantees are required to be vaccinated or participate in weekly testing.
- Employers should support staff by providing leave options for them to get the COVID-19 vaccine and for if they experience vaccine side effects.
- DC Health and the Office of the Chief Technology Officer (OCTO) have a Vaccine Exchange Program that connects District organizations with vaccine providers that can assist with setting up COVID-19 vaccination clinics for members or employees in the workplace or at designated vaccination clinics.
  - Business and community organizations are eligible to participate in the Vaccine Exchange Program. Organizations interested in setting up a vaccine clinic should submit a request at request [vaccineexchange.dc.gov/](https://vaccineexchange.dc.gov/).

<sup>2</sup> The standard vaccine course before any additional or booster doses

## Masks:

**Face masks are a powerful tool for preventing COVID-19.** Masks act as a simple barrier to help prevent respiratory droplets from traveling into the air and onto other people when the person wearing the mask talks, coughs, sneezes, or raises their voice. This is called source control. Masks also provide some protection to the wearer against droplets expelled by other people.

- To be effective, masks must be worn correctly. Masks should cover the nose and mouth and fit snugly against the sides of the face.
- Masks also prevent spread from infected people who don't have symptoms. This is referred to as "asymptomatic" or "pre-symptomatic" spread and is a major way that COVID-19 spreads.
- A mask is not a substitute for physical distancing.
- **Wearing masks is especially important for people who are not fully vaccinated or immunocompromised.**
- Masks should not be worn by children younger than age 2.

## Mask guidelines:

- **DC Mayor's Order 2021-142, which took effect November 22, 2021, discontinued DC's mask mandate for indoor public spaces.**
- The indoor mask mandate (regardless of vaccination status or personal history of COVID-19) remains in effect in certain settings covered by this guidance including libraries and public transit (including rideshare vehicles). For a complete list of settings where indoor masking is required, please refer to the full Mayor's Order at [coronavirus.dc.gov/sites/default/files/dc/sites/coronavirus/page\\_content/attachments/2021-142-Modification-of-Certain-COVID-19-Indoor-Mask-Mandate.pdf](https://coronavirus.dc.gov/sites/default/files/dc/sites/coronavirus/page_content/attachments/2021-142-Modification-of-Certain-COVID-19-Indoor-Mask-Mandate.pdf).
- **Business, community, and event organizers may maintain stricter indoor masking policies for patrons and employees at their discretion.**
- **Although masks are no longer *required*, wearing a mask in indoor public spaces is still recommended (regardless of vaccination status) if community transmission levels are substantial or high.**<sup>3</sup>
- **People who are not fully vaccinated or who are immunocompromised should continue to wear masks in indoor public spaces regardless of community transmission levels.**
- For detailed recommendations about face masks, please see to *Mask Guidance for the General Public* on [coronavirus.dc.gov/healthguidance](https://coronavirus.dc.gov/healthguidance).

## Staying home when sick

- Any individual experiencing symptoms of COVID-19 or who is required to isolate or quarantine<sup>4</sup> due to COVID-19 diagnosis or exposure should not visit, work at, or attend a business or community establishment or event due to the risk of exposing others.
- Symptoms of COVID-19 may include: fever (subjective or 100.4 degrees Fahrenheit), chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea.
- Actively encourage workers to stay home if they are sick. Staff with symptoms consistent

<sup>3</sup> To see current levels of community transmission (and other data including local vaccination rates) for DC and other areas of the country, see the *CDC Data Tracker* at [covid.cdc.gov/covid-data-tracker/#county-view](https://covid.cdc.gov/covid-data-tracker/#county-view)

<sup>4</sup> For more information see *Guidance for People who Test Positive for COVID-19 and their Household Members* and *Guidance for Close Contacts of a Person Confirmed to have COVID-19: Quarantine and Testing* at [coronavirus.dc.gov/healthguidance](https://coronavirus.dc.gov/healthguidance).

with COVID-19 should be encouraged to talk to their healthcare provider and seek testing.

## Physical distancing

**Physical distancing remains an important prevention measure to further reduce the spread of COVID-19.** COVID-19 spreads when an infected person coughs, sneezes, or talks, and droplets from their mouth or nose are launched into the air and are inhaled or land in the mouths or noses of people nearby. This can happen before people develop symptoms or know that they are infected. COVID-19 spreads mainly among people who are in close contact (within about 6 feet) for a prolonged period, and physical distancing helps reduce the risk of coming into contact with an infected person. Physical distancing is especially important for people who are not fully vaccinated or who are immunocompromised. In settings where fully vaccinated and unvaccinated patrons and workers may be present, the use of physical distancing will reduce the risk to individuals who are not fully vaccinated or may not be fully protected by the vaccine because they are immunocompromised.

- Businesses, community establishments, and event organizers are encouraged to set up the facility to encourage workers and patrons (or related groups) to maintain at least 6 feet of distance from people not from their household while on site. Consider the following modifications:
  - Identify work and common areas (entryways, lobbies, queueing areas) where people could have close contact (within 6 feet) with others and implement interventions to facilitate physical distancing in these locations, such as placing visual markers or signs or removing furniture.
  - Monitor areas prone to congregation (e.g., common areas, staff breakrooms) and use visual cues or room capacity limits to help prevent congregation.
  - Minimize face-to-face passing. Have separate entrances and exits and mark one-way paths in the facility.
  - Close off or limit access to areas where physical distancing cannot be practiced.
  - Continue utilizing the following methods as much as possible:
    - Contactless ordering and payment methods (e.g., ordering through QR codes at restaurants and bars)
    - Online, delivery, and drive-through services to decrease crowding in the facility.
    - Installing physical barriers, such as sneeze guards and partitions, in areas where it is difficult for employees to remain at least 6 feet from patrons, or for employees to remain at least 6 feet from other employees.
    - Scheduling appointments for services to avoid crowding.
  - For staff:
    - Discourage physical contact (e.g., handshakes, hugs, high-fives) in the workplace. Encourage staff to greet each other verbally or use other non-contact means of communication.
    - Stagger shift and break start times.
- Physical distancing is especially important during activities where face masks cannot be worn, such as when eating or drinking.
- Consider options of limiting capacity to achieve physical distancing of 6 feet between patrons or groups of patrons.
- If 6 feet of distance cannot be maintained, consider providing service/holding event outdoors, improving ventilation, and/or minimizing movement at an event by providing reserved seating to minimize close contact between patrons.
- Activities in which voices are projected, such as choir or theater, where wind instruments

are used, or heavy breathing is involved, present greater risk of spread of respiratory droplets, and should be modified to be outdoors and/or allow for 10 feet of physical distancing indoors.

## Hand hygiene and respiratory etiquette

Hand hygiene and respiratory etiquette are important components of preventing the spread of many infectious diseases, including COVID-19. When viral particles are on hands and people touch their eyes, nose, and mouths, this can cause them to become infected. Promoting hand hygiene and respiratory etiquette can help to reduce this risk.

- Encourage workers to perform frequent hand hygiene (with soap and water or alcohol-based hand sanitizer with at least 60% alcohol).
  - Washing hands with soap and water is necessary if hands are visibly dirty.
  - Key times to perform hand hygiene include:
    - Before eating or preparing food
    - After using the restroom
    - Before and after putting on, touching, or removing a mask
    - Before and after work shifts and work breaks
    - Before and after services to each patron
    - After handling another person's belongings
    - After blowing your nose, coughing, or sneezing.
- Consider using signs to remind workers and patrons of the following:
  - not to touch their faces, eyes, mouths, or noses or mouths with unwashed hands.
  - to cover their mouth and nose with a tissue when they cough or sneeze (or sneeze into their elbow if no tissue is available)
  - to place used tissues into the trash
- Businesses, community establishments, and event organizers are recommended to provide supplies to allow for frequent hand hygiene for use by workers and patrons.

## Communication/Operations

Below are recommendations for how to successfully manage communication and operations to keep people at your facility safe during the COVID-19 pandemic.

- **Educate your workers about COVID-19, and how they can protect themselves at work and outside of work.**
  - Actively support, encourage, and even require staff to get vaccinated against COVID-19.
  - Require them to wear masks indoors at the establishment.
  - Encourage them to follow everyday prevention measures such as: physical distancing, covering coughs and sneezes, and washing their hands.
  - Encourage them to avoid using other workers' phones, desks, offices or other work tools and equipment.
  - Refer to [coronavirus.dc.gov](https://coronavirus.dc.gov) for more information.
- Employers should consider conducting a thorough assessment of the workplace to identify potential workplace hazards that could increase risks for COVID-19 transmission.
- Employers should create a COVID-19 workplace health and safety plan for their office(s). For more information, see *Workplaces and Businesses* at [cdc.gov/coronavirus/2019-ncov/community/workplaces-businesses/index.html](https://cdc.gov/coronavirus/2019-ncov/community/workplaces-businesses/index.html).
- It is important to include all workers in communication plans — for example management, staff, relief employees, volunteers, janitorial staff, maintenance staff, and supervisory staff.
  - If contractors are employed in the workplace, develop plans to communicate with the

contracting company regarding modifications to work processes and requirements for the contractors to prevent transmission of COVID-19.

- Consider designating an individual at the establishment to be the point of contact for all COVID-19 related questions and concerns. Make sure all workers know who this person is and how to contact them.
- Employers should account for non-English speaking workers in their communication plans and provide information in appropriate languages.
- Consider posting signage at the entrance stating that nobody with a fever or symptoms of COVID-19 is permitted to enter the facility.
- Businesses, community establishments, and event organizers can consider screening employees for symptoms before shifts/events, but this may have a limited effect as the virus that causes COVID-19 can also be spread by people who are not showing symptoms.
  - Screening can be done by attestation before arrival or on-site.
  - See the *Sample Health Screening Tool* at [coronavirus.dc.gov/healthguidance](https://coronavirus.dc.gov/healthguidance).
- Screening testing is generally not recommended. People who are fully vaccinated or have tested positive for the virus that causes COVID-19 in the previous 90 days, should not participate in asymptomatic screening testing.
- Business and community establishments are recommended to implement leave policies that are flexible and non-punitive. Leave policies are recommended to account for the following:
  - Employees who report COVID-19 symptoms
  - Employees who were tested for COVID-19 due to symptoms, exposure, or travel and test results are pending
  - Employees who are isolating due testing positive for COVID-19
  - Employees who need to quarantine due to close contact with someone who tested positive for COVID-19
  - Employees who need to stay home with their children if there are school or childcare closures, or to care for sick family members
  - Employees who need to get the COVID-19 vaccine,
  - Employees who are experiencing side effects from the COVID-19 vaccine.
- Learn about and inform your employees about COVID-related leave provided through any new federal laws and all applicable District law relating to sick leave. Keep abreast of current law, which has amended both the DC Family and Medical Leave Act and the DC Sick and Safe Leave Law.

## Cleaning and disinfection

The virus that causes COVID-19 can land on surfaces. Although it is uncommon to catch COVID-19 from surfaces, it is possible for people to become infected if they touch a contaminated surface and then touch their nose, mouth, or eyes. The most reliable way to prevent infection from surfaces is to frequently perform hand hygiene by washing hands or using alcohol-based hand sanitizer. Cleaning and disinfecting surfaces can also reduce the risk of infection. **If no people with confirmed or suspected COVID-19 are known to have been in a space, cleaning high-touch surfaces once a day is usually sufficient to remove virus that may be on surfaces.**

- Businesses, community establishments, and event organizers are recommended to develop a comprehensive plan for increased routine cleaning (and disinfection as needed) of common spaces and frequently touched surfaces within the facility (e.g., counters, keyboards, telephones, handrails, printers/copiers, drinking fountains, door handles, workstations, cash registers, payment kiosks, light switches).
- Businesses, community establishments, and event organizers should implement the following practices:

- Train workers on cleaning procedures and monitor cleaning schedules to ensure compliance.
- Clean frequently touched surfaces at least daily.
- Clean any shared objects frequently, based on level of use.
- Clean and disinfect restrooms frequently, with special attention to high-touch surfaces (such as faucets, toilets, stall doors, door handles, countertops, diaper changing tables, and light switches). Adequate supplies of soap and paper towels should always be present.
- Provide workers with appropriate PPE, such as disposable gloves for cleaning activities and handling trash. Hand hygiene should be performed before and after wearing gloves.
- **If a sick person, or someone with COVID-19, has been within a facility or space** within 24 hours, cleaning and disinfection is recommended. If it has been more than 24 hours, cleaning should take place. If more than 3 days have passed since the person who is sick or diagnosed with COVID-19 has been in the space, no additional cleaning (beyond regular cleaning practices) is recommended.
- **For comprehensive guidance on cleaning and disinfection, including if someone with COVID-19 was at the facility**, please see *Guidance on Cleaning and Disinfection for Community Facilities* at [coronavirus.dc.gov/healthguidance](https://coronavirus.dc.gov/healthguidance).

## Ventilation and building considerations

Particles of the virus that cause COVID-19 can cause someone to get sick by inhalation or splash/spray in the eyes, nose, or mouth. This can happen more easily in an indoor environment. If an infected person is in an indoor space, particularly if there is poor ventilation, virus particles can linger and build up in high concentrations. When outdoors, the natural movement of the air disperses viral particles so they can't build up in high concentrations. The lower the concentration of particles and droplets in the air, the less risk there is that the virus will be transmitted by inhalation or spray, or deposited on surfaces. **Outdoor events are safer than indoors**, but improving ventilation systems indoors can provide an additional layer of protection in addition to other mitigation strategies to decrease the risk of spread of COVID-19 inside your facility.

- Consider making the following improvements to improve building ventilation:
  - Increase circulation of outdoor air as much as possible, for example by opening windows and doors. Use fans to increase the effectiveness of open windows.
    - Do not open windows and doors if doing so poses a safety or health risk (e.g., risk of falling, triggering asthma symptoms).
  - Verify ventilation systems operate properly and provide acceptable indoor air quality for the current occupancy level for each space.
  - Decrease occupancy of spaces with poor ventilation.
  - Improve central air filtration to the highest level compatible with the filter rack, and seal edges of the filter to limit bypass.
  - Check filters to ensure they are within service life and appropriately installed.
  - Turn off any demand-controlled ventilation (DCV) controls that reduce air supply based on occupancy or temperature during occupied hours.
  - Consider portable high-efficiency particulate air (HEPA) fan/filtration systems to help enhance air cleaning (especially in higher risk areas such as isolation rooms for people who become sick on the premises).
  - Keep systems running longer hours, 24/7 if possible, to enhance air exchanges in the building space.
  - Consult with a specialist to see what works for your building.
  - For more information about building ventilation, see the CDC article *Ventilation in Buildings* at [cdc.gov/coronavirus/2019-ncov/community/ventilation.html](https://cdc.gov/coronavirus/2019-ncov/community/ventilation.html).

- If the building was closed for an extended period of time, remember to check HVAC systems, and ensure all water systems are safe to use. For more information, see CDC's *Guidance for Reopening Buildings after Prolonged Shutdown or Reduced Operation*: [cdc.gov/coronavirus/2019-ncov/php/building-water-system.html](https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html).

## Plan for COVID-19 exposure/Reporting requirements

A timely public health response is critical to preventing further spread if an outbreak is identified. All COVID-19 cases in DC residents will continue to be interviewed and provided with isolation guidelines, and their close contacts identified and provided with quarantine guidelines by the DC Contact Trace Force. Businesses, community establishments, and event organizers should also report cases that meet the criteria below to prevent further spread between employees and/or patrons.

- Establish a plan in the event a worker or patron is diagnosed with COVID-19.
- Businesses, community establishments, and event organizers can consider keeping a record of workers and patrons who have visited the facility or attended an event in the last 30 days to assist with contact tracing.
- If a worker or patron develops any symptoms of COVID-19 while at the facility or event, businesses, community establishments, and event organizers should have a plan in place for that individual to immediately isolate, notify their supervisor (if the individual is an employee), and leave the premises.
  - Testing should be strongly encouraged for staff with symptoms consistent with COVID-19. Information on options for COVID-19 testing in the District of Columbia is available at [coronavirus.dc.gov/testing](https://coronavirus.dc.gov/testing).
- Identify a point of contact at the establishment that a worker or patron can notify if they test positive for COVID-19 and choose to disclose this information (This may be the same person designated as the point of contact for general COVID-19 concerns and questions in the **Communication/Operations** section).
- If a staff member or patron chooses to report to the business, community establishment, or event organizer that they are positive for COVID-19, the establishment should:
  - Refer to the guidance "*First Steps for Businesses when an Employee or Patron Tests Positive for COVID-19*" at [coronavirus.dc.gov/healthguidance](https://coronavirus.dc.gov/healthguidance).
    - A close contact is someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period, during that person's infectious period.
    - The infectious period starts two days before symptom onset date and typically ends 10 days after symptom onset date (Or two days before the positive test collection date for infected people who did not have symptoms).
  - Have a notification process to share the following to those who may have been exposed, while maintaining the privacy of the person who tested positive.
    - Education about COVID-19, including the signs and symptoms of COVID-19
    - Referral to the *Guidance for Close Contacts of a Person Confirmed to have COVID-19: Quarantine and Testing*, available at [coronavirus.dc.gov](https://coronavirus.dc.gov)
    - Information on options for COVID-19 testing in the District of Columbia is available at [coronavirus.dc.gov/testing](https://coronavirus.dc.gov/testing)
- Cases must be reported to DC Health per the criteria below. Staff and patron information must be provided when available if requested to assist with contact tracing.
  - For multipurpose event facilities (e.g., places of worship, hotels, convention centers, entertainment venues):



- If two or more persons (e.g., **workers, volunteers, attendees**) test positive for COVID-19 (not before results come back) within a 14-day period or at a given event.
  - For businesses, community establishments, and event organizers:
    - If two or more **workers** test positive for COVID-19 (not before results come back) within a 14-day period.
- Notify DC Health by submitting an online form on the DC Health COVID-19 Reporting Requirements website [dchealth.dc.gov/page/covid-19-reporting-requirements](https://dchealth.dc.gov/page/covid-19-reporting-requirements):
  - Submit a **Non-Healthcare Facility COVID-19 Consult Form**.
- An investigator from DC Health will follow-up in 24-72 hours to all appropriately submitted notifications.

The guidelines above will continue to be updated as the outbreak evolves. Please visit [coronavirus.dc.gov](https://coronavirus.dc.gov) for the most updated information.