Phase Two Guidance

This document is intended for owners, management, and residents of apartment buildings and condominiums/co-ops during Phase Two. Please note this document is not applicable to facilities that provide healthcare services. The owners and management of apartment and condominium/co-ops must implement the following measures to help reduce the risk of COVID-19 transmission amongst employees, residents, and the community. For additional information, see coronavirus.dc.gov/phasetwo.

Please note that any building employee or contractor experiencing symptoms of COVID-19, or who was recently exposed to someone diagnosed with COVID-19, should not report to work 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, diarrhea, or otherwise feeling unwell.

**Employees, Residents, and Visitors Should Practice Everyday Prevention Measures**
- **Stay at home if you are feeling unwell or if you were recently exposed to someone with COVID-19.**
- **Practice social distancing.** Keep 6 feet of distance between you and other people who are not in your household.
- **Avoid physical contact (handshakes, high-fives) with other people.**
- **You must wear a facemask or cloth face covering in common areas.** Face coverings/masks are not a substitute for social distancing.
  - Masks protect the wearer and protect other people.
  - Masks are most effective if they fit snugly to the face and have 2-3 layers of tightly woven fabric.
  - If respirators or facemasks are required for an employee’s regular job tasks, those items must still be worn.
  - Masks and respirators without valves should be worn to prevent the spread of COVID-19.
- **Perform frequent hand hygiene (with soap and water or alcohol-based hand sanitizer).**
  - Key times to perform hand hygiene include
    - Before eating food,
    - After using the toilet,
    - Before and after putting on, touching, or removing cloth face coverings,
    - Before and after work shifts and work breaks,
    - Before and after services to each guest or resident,
    - After handling guest or resident belongings, and
    - After blowing your nose, coughing, or sneezing.
- **For additional guidance for older adults and individuals with chronic health conditions, see coronavirus.dc.gov/healthguidance.**

**Considerations for Residents**
- **If you have been diagnosed with or exposed to COVID-19:**
  - Stay in your unit except for essential activities and avoid using common areas. This would include lobbies, elevators, stairs, fitness facilities, pools, lobbies and courtyards.
  - Avoid non-essential visitors, including building maintenance staff.
  - Residents are under no obligation to disclose their personal health information to building management.
  - For more information, please see Guidance for Persons who Tested Positive for COVID-19.
Considerations for Building Owners and Operators

Employee Considerations

- Provide staff with cloth face coverings and appropriate PPE (e.g., masks, gloves) per their job responsibilities. Gloves should be worn as indicated per routine job responsibilities.
- Stagger employee break times as much as possible to maintain social distancing.
- Implement leave policies that are flexible and non-punitive, and that allow sick employees to stay home. Leave policies are recommended to account for the following:
  - Employees who report COVID-19 symptoms,
  - Employees who were tested for COVID-19 and test results are pending,
  - Employees who tested positive for COVID-19,
  - Employees who are a close contact of 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.
- Keep abreast of current law, which has amended both the DC Family and Medical Leave Act and the DC Sick and Safe Leave Law and created whole new categories of leave, like Declared Emergency Leave.
- Learn about and inform your employees about COVID-related leave provided through new federal law, the Families First Coronavirus Response Act (FFCRA) and all applicable District law relating to sick leave.

Operations Considerations

- Provide supplies to allow for cleaning and disinfection in shared spaces. Provide supplies to allow for frequent hand hygiene (e.g., soap and water or alcohol-based hand sanitizers with at least 60% alcohol). Ensure hand hygiene products are accessible in employee and resident areas (e.g., front desk, lobby, workstations, activity rooms, exercise rooms, other common areas).
- Common areas such as lobbies, courtyards, and rooftops may be open.
- Ensure proper social distancing and mask/face covering usage is being enforced for all staff and residents in any building common areas.
- Develop a plan for in-unit emergency service requests that minimizes the physical proximity between residents and service providers.
- Implement contactless delivery throughout the facility. Deliveries to residents can be left outside the door of individual resident units.
- Develop an access control plan that reduces elevator capacity burdens by limiting passengers to no more than 4 people or one household at one time.
- Utilize virtual tours for real estate showings as much as possible.
- Implement payment via digital platforms, as much as possible (e.g., online rent payment).
- Display signage that encourages appropriate use of face coverings, social distancing, and hand hygiene throughout the facility.
- For buildings that support individuals who may be at risk of more severe illness with COVID-19 (such as older adults or those with chronic health conditions), consider more stringent restrictions in common areas and on group events than those outlined in this guidance until later phases of reopening.
- Educate employees, residents, owners, and visitors about COVID-19. Use platforms such as email, websites, newsletters, signage, and flyers to communicate messages. Refer to coronavirus.dc.gov for more information about COVID-19.
- For residences that offer in-house services (e.g., gym and fitness, retail, entertainment, or transportation), see additional guidance specific to these areas at coronavirus.dc.gov/healthguidance.

Pools
- If there is a pool, allow access to residents and members only.
- Social distancing of 6 feet must be maintained while people are wading/swimming and on the pool deck area.
- The building must facilitate entry for prescheduled and unannounced inspections of the pool area by DOH or DCRA so that an inspection may be performed;
- Prominently post at the pool area the name and contact information of the person responsible for ensuring safety provisions.
- A written plan must be available to address implementation of guidance as provided by DC government.
- The building should be prepared for emergency pool closure order or other restrictions that may need to be enforced by DC Health.
- Your mask or face covering must be worn in common areas, but not in the water.
- A logbook of guests using the pool is required to be kept for 30 days. Information collected must include name, date and time of visit, phone number, and email (if available). See more details in the “Screening and Monitoring for Symptoms” section below.

Avoid Close Contact and Reduce Touchpoints
- Arrange lobbies, meeting areas, office spaces, break rooms, and other common areas including pool decks or business centers) to ensure at least 6 feet of distance between persons. This may require removing chairs, increasing the distance between tables and chairs, or installing transparent shields or other physical barriers where social distancing is not an option (such as at a front desk).
- Use visual cues to help prevent congregating in areas such as lobbies or front desks.
- Remove reusable high touch items that are not able to be cleaned or disinfected (e.g., magazines, newspapers, brochures) from common areas in the facility.
- Limit non-essential group activities and events. If offering group activities, implement the following measures to help reduce the risk of COVID-19 spread:
  - Limit the number of attendees to no more than 10 people for indoor activities and no more than 50 for outdoor activities, including staff. 1
  - Prioritize outdoor activities. Outdoor activities are preferred over indoor, however it is important to understand that interacting with more people in any setting raises your risk, so it is important to follow social distancing and cloth face covering recommendations.
  - Provision of food and refreshments is discouraged, but if provided, should be as pre-packaged boxes or bags for each attendee.
  - Stagger activities and arrival/departure times.
  - Attendees should maintain 6 feet of distance from people from other households, as much as possible.
  - Post signage to indicate that individuals should not attend communal activities if they are feeling unwell or have been exposed to someone with COVID-19.

Screening and Monitoring for Symptoms
- Perform screening (e.g., symptom questionnaires) of employees daily, prior to entering the building, over the phone or in person.
  - For Screening Tool Guidance, visit coronavirus.dc.gov/healthguidance
- Encourage and remind employees to remain vigilant for fever and other possible symptoms of

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1 Unless the number of persons in a household exceeds 10 people
COVID-19.

- Encourage residents and visitors to remain vigilant about monitoring themselves for fever and other possible symptoms of COVID-19.
- Maintain a record of individuals who use the pool or attend any planned activities for at least 30 days. This information must be provided within 24 hours if requested by DC Health if a case of COVID-19 occurs at your establishment, in order to assist with contact tracing.

**Clean and Disinfect**

- The facility should have a comprehensive plan for routinely cleaning and disinfecting common spaces and high-touch surface areas (e.g., front desk, lobby areas, activity rooms, exercise rooms, business centers, laundry facilities, shared restrooms, shared kitchens, elevator buttons, door handles, front desk pens, etc.).
- Any shared employee equipment (e.g., phones, computers, carts, etc.) should be cleaned and disinfected between each person’s use of it.
- Any shared equipment should be cleaned and disinfected between users, in addition to being arranged according to physical distancing requirements.
- For more information about cleaning and disinfection in a community building and the disinfectants that are effective against the virus that causes COVID-19, see the CDC website: cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html.
- For more information about cleaning and disinfection when a person has COVID-19, see the CDC website: cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html.

**Building Considerations**

- Consider making the following improvements to improve building ventilation (cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html):
  - 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).
  - Ensure 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).
  - 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.
- If a 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.

**Establish a Plan for COVID-19 Exposure**

- A resident being diagnosed in a building is not a risk to the rest of the building, unless they have attended group events or were in common areas.
  - This information will be gathered from the individual by the DC Health Contact Trace Force.
• DC Health does not disclose that an individual has been diagnosed with COVID-19 to apartment or condominium building managers unless the individual has been determined to pose a risk to other residents or staff in the building.

• Establish a plan in the event that an employee is diagnosed with COVID-19.

• Identify a point of contact that an employee can notify if they test positive for COVID-19 and choose to disclose this information.

• If an individual develops any of the symptoms above during the work shift, there should be a plan in place for that individual to immediately isolate, notify their supervisor, and leave the facility.

• If an employee chooses to report that they are positive for COVID-19, the facility should have a notification process to share the following with staff:
  ○ Education about COVID-19, including the signs and symptoms of COVID-19
  ○ Referral to the Guidance for Contacts of a Person Confirmed to have COVID-19, available at coronavirus.dc.gov/healthguidance.

• Refer to the guidance “First Steps for Non-Healthcare Employers when Employees Test Positive for COVID-19” at coronavirus.dc.gov/healthguidance.
  ○ A close contact is someone who was within 6 feet of a person who tested positive for COVID-19 for at least 15 minutes over a 24-hour period, during that person’s infectious period.
  ○ The infectious period starts two days before symptom onset and typically ends 10 days after symptom onset (or test date for people who do not have symptoms).

• Establishments must notify DC Health when:
  ○ An employee who interacts frequently with residents or visitors notifies the building they tested positive for COVID-19 (not before results come back)
  AND
  ○ the person was in the building during their infectious 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:
  ○ Submit a Non-Healthcare Facility COVID-19 Consult Form.

• An investigator from DC Health will follow up within 48 hours to all appropriately submitted inquiries. Please note this time may increase as cases of COVID-19 increase in the District.

The guidelines above will continue to be updated as the outbreak evolves. Please visit coronavirus.dc.gov regularly for the most current information.