REOPENING OF CARIBBEAN TOURISM & TRAVEL

Safely Resuming Business Operations and Restoring Caribbean Tourism in 2020 and Beyond

Guidelines and Checklists

CARPHA-CTO-CHTA-OECS-GTRCMC COVID-19 Task Force

June 22, 2020

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PREFACE

These Guidelines and accompanying Checklists have been prepared by the Caribbean COVID-19 Tourism Task Force to support a consistent and harmonized strategy, as far as possible, in the phased approach to the recovery of Caribbean tourism and to minimizing health safety risks to visitors and residents in the operation of tourism businesses.

The members of the Task Force include: the Caribbean Public Health Agency (CARPHA), the Caribbean Tourism Organization, the Caribbean Hotel and Tourism Association, the Organization of Eastern Caribbean States, and the Global Tourism Resiliency and Crisis Management Center.

This document, therefore, establishes core guidelines and protocols aimed at protecting residents and visitors in the reopening and continued operation of tourism services, while simultaneously allowing tourism service providers to be effectively re-established.

The Guidelines are part of a series of documents which describes core protocols initially for four key tourism sub-sectors – Ground Transportation, Accommodations, Food and Beverage Operations and Sites and Attractions. These offer services at critical points on the continuum of the traveler's experience at the destination.

It is, therefore, of paramount importance that these services provide a heightened level of quality and health safety assurance to support business success in the new normal of a COVID-19 environment.

The guidelines are not meant to displace, but rather complement, those which are adopted by destinations and companies. They are intended to advance basic guidelines at a destination level, as well as core measures at sectoral levels, collectively aimed at building resident and visitor confidence and enabling the Caribbean to remain a top destination for visitors.

This document incorporates guidelines and protocols issued by a range of destinations, industry enterprises and regional agencies and are further synced with global protocols including those of the World Health Organization (WHO), the World Tourism Organization (UNWTO), and World Travel and Tourism Council (WTTC). For businesses that apply the guidelines and protocols, the intention is to acknowledge their efforts through a Regional Recognition Program of the Caribbean Public Health Agency (CARPHA) and collaborating partners of the Task Force.

This document has been prepared based on evidence and information currently available on the "Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2)", i.e. COVID-19. The Guidelines are, therefore, subject to re-evaluation and adjustments as information on COVID-19 evolves, as new and more efficient solutions become available and with the development of a treatment or widely accessible vaccine for COVID-19.

Implementation of relevant protocols are necessary by all tourism service providers across the region to ensure the successful recovery of Caribbean tourism. Caribbean destinations and tourism services providers are accordingly encouraged to adopt and implement the guidelines and protocols as appropriate.

GTRCMC

CARIBBEAN HOTEL & TOURISM ASSOCIATION

CARPHA

OECS

CARPHA-CTO-CHTA-OECS-GTRCMC COVID-19 Task Force

CARIBBEAN
HOTEL & TOURISM
ASSOCIATION

The CARPHA-CTO-CHTA-OECS-GTRCMC COVID-19 Task Force supplements CARICOM's efforts to extend core health safety protocols throughout the region aimed at minimizing the risk to residents and employees of contagion from COVID-19.

The COVID-19 Task Force is comprised of representatives from the Caribbean Public Health Agency (CARPHA); the Caribbean Tourism Organization (CTO); the Caribbean Hotel and Tourism Association (CHTA), Global Tourism Resilience and Crisis Management Centre (GTRCMC), and the Organization of Eastern Caribbean States (OECS) Commission, and was tasked to:

1. Inventory and Review existing COVID-19 Health Safety Standards and Identify Core Regional Standards and Sub-sector Standards for consideration as part of Regional Protocols;
2. Identify the Core Protocols required for the Regional Recognition Program of CARPHA and collaborating partners;
3. Develop Supporting Documents – inclusive of Checklists, and
4. Identify Training Needs and Develop a Staged Training Plan.

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ACRONYMS

ATV	All-Terrain Vehicle
C	Celsius
CARICOM	Caribbean Community and Common Market
CARPHA	Caribbean Public Health Agency
CDC	Centers for Disease Control and Prevention
CHTA	Caribbean Hotel and Tourism Association
COVID-19	Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2)
CTHAS	Caribbean Travel Health Assurance Stamp
CTO	Caribbean Tourism Organization
EPA	Environmental Protection Agency (US)
EU	European Union
F	Fahrenheit
F&B	Food and Beverage
GTRCMC	Global Tourism Resilience and Crisis Management Centre
HVAC	Heating, Ventilation and Air Conditioning
IAAP	International Association of Amusement Parks and Attractions
IPC	Infection Prevention and Control
ISO	International Organization for Standards
MICE	Meetings, Incentives, Conferences and Events
NHTA	National Hotel & Tourism Association
OECS	Organization of Eastern Caribbean States
OSHA	Occupational Safety and Health Administration
PC	Personal Computer
PCR	Polymerase Chain Reaction
POS	Point-of-Sale
PPE	Personal Protective Equipment
PR	Public Relations
RAT	Rapid Antigen Test
RT-PCR	Reverse-Transcription - Polymerase Chain Reaction
SMS	Short Message Service
SOP	Standard Operating Procedure
THiS	Tourism Health (Information) System
TTBAA	Trinidad and Tobago Beverage, Alcohol Alliance
UITP	International Association of Public Transportation
USVI	United States Virgin Islands
UNWTO	World Tourism Organization
WHO	United Nations World Health Organization
WTTC	World Travel and Tourism Council

KEY TERMINOLOGY

CARIBBEAN TRAVEL HEALTH ASSURANCE STAMP (CTHAS)

CTHAS will be issued by CARPHA for accommodation facilities which are registered on THiS and meet CARPHA COVID-19 health and safety protocols. This regionally recognized stamp of approval will be the only such recognition worldwide to be issued by a health agency to acknowledge that health standards are met for tourism.

The stamp will add to assuring travelers that health safety is of priority in their stay at the recognized property while in the Caribbean. The intention is for CTHAS to be available to tourism service providers initially in the accommodation sector and later for other tourism sub-sectors.

CLEANING, SANITIZING AND DISINFECTING

Cleaning, sanitizing and disinfecting are considered three (3) levels of the cleaning process [1] , i.e.

1. Cleaning: To remove dirt, soils, debris and impurities from surfaces. This involves soaps and detergents and removes germs like bacteria or viruses but does not necessarily kill them. Hot or cold water may be applicable;
2. Sanitizing: To reduce bacteria on a surface by at least 99%. This kills a high percentage of germs that are on surfaces and can be done by heat or chemicals. It may not eliminate all the presence of bacteria, viruses and mould and does not prevent growth; and
3. Disinfecting: To kill a wider range and higher percentage (99.99%) of microorganisms (than sanitizers) on a surface. This is done with chemical and requires a certain amount of contact time. Items that will contact food or be used in the mouth must be thoroughly rinsed after disinfecting.

CDC recommends wearing gloves when you are cleaning or caring for someone who is sick. Otherwise, washing hands for 20 seconds with running water and wearing face coverings along with other preventative measures such as physical distancing and using hand sanitizers are seen as most appropriate for daily activities.

HAZARD ANALYSIS CRITICAL CONTROL POINTS (HACCP)

HACCP is an internationally recognized method of identifying and managing food safety related risk and, when central to an active food safety program, can provide customers, the public, and regulatory agencies assurance that a food safety program is well managed.

TOURISM SERVICE PROVIDERS

This term covers all individuals, businesses and entities in hospitality, travel and tourism that offer services to visitors in the destination. These include those in all of tourism's sub-sectors including Accommodation, Transportation, Food and Beverage; Entertainment and Recreation (including Sites and attractions); Meetings, Incentives, Conferences and Events (MICE); and Other Tourism Support and Related Services.

TOURISM HEALTH INFORMATION SYSTEM (THiS)

THiS is a real-time, web-based application developed by the Caribbean Public Health Agency (CARPHA) to monitor for illnesses and potential outbreaks in visitor accommodations (Hotels, Guest Houses etc.) and to facilitate a confidential early warning and rapid response. THiS is intended to strengthen regional and national health systems and to enhance the health safety of staff, residents and visitors and the quality, reputation and sustainability of Caribbean tourism.

Through THiS, facilities and countries can proactively monitor COVID-19 syndromic trends and illness of visitors. Self-monitoring can be done by guests themselves. Plans are underway to extend THiS to service providers in other tourism **sub-sectors.**

[1] Based on CARPHA Interim COVID-19 Health Guidelines for Hospitality: Hotels and Guesthouses. Healthier, Safer Tourism

USE OF GREEN/ENVIRONMENTALLY SAFE AND RECYCLED PRODUCTS

COVID-19 requires increased cleaning, sanitizing and disinfecting and the use of personal protective equipment (PPE) to ensure health safety - all of which can make use of safer products and tools to avoid harming staff, visitors and the pristine environment promoted by destinations across the Caribbean.

Use of eco-products that achieve the health safety requirements of COVID-19 and recognized through testing and certification by third party groups such as Green Seal, Ecologo and the EPA's Design for the Environment, is encouraged. Reducing the use of plastics, where possible, is also encouraged, e.g. digital mobile phone room entry instead of plastic room key cards.

WHAT IS COVID – 19?

COVID-19 is a new strain of coronavirus first identified in Wuhan City, China in December 2019. It was first noted that it usually takes 2 to 14 days for someone to show signs of infection after having come into contact with someone with the disease. This 2019 virus is a new strain of coronavirus that has not been previously identified in humans.

HOW COVID-19 SPREADS

There are 2 main routes by which people can spread COVID-19:

- √ By the respiratory droplets of an infected person (who coughs or sneezes) to people who are within 2 meters/6 feet, i.e.it is spread person to person, and
- √ By touching a surface, object or the hand of an infected person that has been contaminated with respiratory secretions AND then touching their own mouth, nose, or eyes (e.g. touching door knobs or shaking hands then touching own face)

COVID-19 SYMPTOMS[2]

The most common symptoms of COVID-19 are:

- √ Fever
- √ Dry cough, and
- √ Tiredness

People of all ages who experience fever and/or cough associated with difficulty breathing/shortness of breath, chest pain/pressure, or loss of speech or movement should seek medical attention immediately.

Other less common symptoms that are usually mild and begin gradually include:

- √ aches and pains
- √ nasal congestion
- √ headache
- √ conjunctivitis
- √ sore throat
- √ diarrhea
- √ loss of taste or smell
- √ rash on skin
- √ discoloration of fingers or toes

• Some persons may show no symptoms (asymptomatic), but are positive
• According to WHO, most people (about 80%) recover from the disease without needing hospital treatment.

[2] https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-coronaviruses

REOPENING OF CARIBBEAN TOURISM & TRAVEL

PRINCIPLES & KEY CRITERIA IN THE REOPENING OF TOURISM

Guidelines and Checklist

CARPHA-CTO-CHTA-OECS-GTRCMC COVID-19 Task Force

June 22, 2020

GUIDELINES & KEY CRITERIA IN THE REOPENING OF TOURISM

As travel restrictions are lifted internationally in tourism generating countries and airlines resume flights to the region, CARPHA has issued Health Guidelines for the Hospitality Sector to support the health safety of residents and visitors as destinations across the Caribbean reopen for tourism.

These Guidelines are based on six (6) foundational principles needed in the restart and operation of tourism in 2020 and beyond. The recommendation is for these principles to permeate the COVID-19 measures and protocols of destinations and of tourism service providers.

CARPHA GUIDELINES

- √ Lift Travel Restrictions in accordance with WHO Criteria and CARICOM Common Protocol;
- √ Build Consumer Confidence by establishing Healthy Practices in the Destination;
- √ Reconfigure Hospitality Businesses to follow Social Distancing and other Health Safety Practices;
- √ Institute Proactive COVID-19 Traveler's Health Practices;
- √ Heighten Public Education and Communication including for Employees and Visitors; and
- √ Sustain Permanent Partnerships among State and Non-State Actors on the Value Chain.

SIX KEY CRITERIA[3]

These guidelines should be supported by the following six (6) criteria in each destination:

1. LOW LEVELS OF COVID-19 INCIDENCE

This is the main pre-requisite for resuming tourism activities in any destination.

It must be based on epidemiological evidence which shows that the spread of COVID-19 in that specific destination has significantly decreased and stabilized for a sustained period of time and is likely to remain stable with the increased tourist population.

2. HEALTH SYSTEM CAPACITY

The tourism sector must assess availability of and access to sufficient health care.

Sufficient health system capacity should be available for both residents and tourists so that, in the event of a sudden increase in cases, the health system is not overwhelmed. This is particularly important in areas that can expect higher rates of visitors due to the capacity of their tourism plant, i.e. large hotels and resorts, and the type and distance from healthcare infrastructure, e.g. homestay and vacation rental away from the regular thoroughfare.

If tourist areas have limited health care services and a considerable number of additional visitors can be expected, there arises a need for implementing additional response mechanisms, such as medical evacuation flights to, for example, medical facilities on neighbouring islands in the region.

[3] Adapted based on EU/WHO, May 13, 2020: COVID-19: EU Guidance for the Progressive Resumption of Tourism Services and for Health Protocols in Hospitality Establishments: https://ec.europa.eu/info/sites/info/files/communication_tourismservices_healthprotocols.pdf

3. SURVEILLANCE & MONITORING CAPACITY

Systems must be in place to monitor and respond to changes in indicators of health service capacity.

Increased surveillance and monitoring capacity on a local level are required to prevent introduction of the virus through travelers as well as spread from local populations to tourists. To support capacity, destinations should make use of CARPHA's real-time Tourism Health Surveillance and Monitoring Systems (e.g. THiS) if no current system of monitoring travelers health is used by a destination.

THiS is a confidential, web-based application for real-time syndrome surveillance of populations in tourism accommodations. This application was designed to enhance national surveillance systems by monitoring illnesses in tourist accommodations to identify public health threats in real-time in order to promote rapid response and disease spread.

Destinations using THiS would be meeting a key criterion in Caribbean travelers' health assurance and would be identified in Caribbean Traveler's apps as a recognized destination.

4. TESTING CAPACITY

A pivotal criterion in the restart and continued operation of tourism activities is testing to detect cases, monitor the spread of the virus and to slow down or impede transmission.

Recognizing the practices to date that have undergirded the Caribbean's success in containing the spread of COVID-19, we recommend that a robust testing mechanism for visitors, returning residents and citizens be a part of a destination's border entry requirements at this stage in the pandemic.

If pretesting in the country of origin is either not possible or practical within 72 hours of travel, protocols should be established by the host destination which provide for testing upon arrival. In all cases, passengers should be formally notified in advance of travel of all entry requirements at the destination as well as with respect to any specific protocols that will be expected e.g. wearing of face coverings, corporal temperature screening, etc. Additionally, passengers should be clearly advised in advance of travel of all details related to isolation requirements should they test positive for COVID-19 on arrival or at any point during their stay. Passenger must agree in advance of travel to abide by the protocols and laws of the host destination.

Robust testing means the Reverse-Transcription Polymerase Chain Reaction Test, i.e. RT-PCR which is currently the only test that detects SARS-CoV-2 with accuracy. This test has been recommended by the WHO, as persons at any stages of a SARS-CoV-2 infection can test negative when tested with a rapid antigen- or antibody-based tests. If in the course of time other tests become available that demonstrate more than 90% specificity and sensitivity (but ideally more than 95%) done within 72 hours before departure for the Caribbean, that test will be equally as acceptable.

Destinations should clearly communicate to all travelers and potential travelers the testing and general health safety protocols which they have established. This should stipulate the proof of testing documentation which is required for entry.

[4] this.carpha.org

5. CONTACT TRACING IS AVAILABLE

Contact tracing is an effective and essential public health measure for the control of COVID-19.

The aim is to promptly identify and manage contacts of COVID-19 cases to reduce further onward transmission. Ideally, such contact tracing must allow the sharing of relevant information between countries. This must, however, be balanced against any relevant data protection regulations nationally, regionally and internationally.

6. COORDINATION AND COMMUNICATION MECHANISMS

Coordination and communication between and among tourism stakeholders is necessary.

Mechanisms must be in place to allow for this between local authorities, organizations (i.e. NHTAs) and tourism service providers and between national governments within the region. In addition, cross-border coordination, information-sharing and communication are essential, particularly as Caribbean intra-regional tourism opens. Risk communication for visitors is also vital to ensuring they are informed about the local context and, for example, measures to follow in case of suspected COVID-19 cases.

1.1 CHECKLIST OF KEY CRITERIA TO CONSIDER IN THE REOPENING OF TOURISM

This Checklist Allows Quick Assessment of the Situation at the Destination to support the Effective Reopening of Tourism

☑ = Yes:	☒ = No	⊟ = Not Applicable			
1.	**LOW LEVELS OF COVID-19 INCIDENCES**				
☐	Epidemiological Evidence shows spread of COVID-19 has significantly decreased, i.e. no new cases over a consecutive 14-day period	☐	Nationally *(Country-Wide)*		
		☐	Regionally *(by Region in the Country- Input Region Name)*	☐	Region 1 *(Input Name)*
				☐	Region 2
				☐	Region 3
		☐	Locally in Specific/Key Tourist Areas	☐	Tourist Area 1
				☐	Tourist Area 2
				☐	Tourist Area 3
☐	Epidemiological Evidence shows that the spread has also stabilised for a sustained period of 14 days (Low or 0 cases)	☐	Nationally *(Country-Wide)*		
		☐	Regionally *(by Region in the Country- Input Region Name)*	☐	Region 1 *(Input Name)*
				☐	Region 2
				☐	Region 3
		☐	Locally in Specific/Key Tourist Areas	☐	Tourist Area 1
				☐	Tourist Area 2
				☐	Tourist Area 3
2.	**SUFFICIENT HEALTH SYSTEM CAPACITY**				
☐	Availability of Health Care that can meet the needs of residents and increased numbers of visitors	☐	National Health Care System		
		☐	Regional Health Care Systems	☐	Region 1 *(Input Name)*
				☐	Region 2
				☐	Region 3
		☐	In Specific/Key Tourist Area	☐	Tourist Area 1
				☐	Tourist Area 2
				☐	Tourist Area 3
☐	Adequate access to Health Care	☐	Access in Place for Specific/Key Tourist Areas	☐	Tourist Area 1
				☐	Tourist Area 2
				☐	Tourist Area 3
☐	Medical Evacuation Arrangements in Place	☐	In National System/Public Sector		
		☐	By Key Service Providers	☐	Accommodation Sector
3.	**SURVEILLANCE & MONITORING CAPACITY**				
☐	Monitoring & Response Systems in place	☐	By National/Public System	☐	By Accommodation Providers
☐	CARPHA System Used/In Place	☐	By National/Public System	☐	By Accommodation Providers
4.	**TESTING CAPACITY**				
☐	Border Management Policy in place for Testing	☐	Robust testing is part of border entry requirements	☐	Travelers notified in advance of entry requirements
5.	**CONTACT TRACING**				
☐	National System in Place				
☐	Caribbean/Regional Collaboration in Place	☐	CARPHA ☐ CTO	☐	CHTA ☐ OECS
☐	International Collaboration in Place				
6.	**COORDINATION AND COMMUNICATION**				
☐	Local/National Coordination in Place	☐	Between Health Agencies & Tourism Service Providers		
		☐	Between Tourism Authority & Tourism Service Providers		
		☐	Between National Tourism Association & Tourism Services Providers		
		☐	Among Tourism Authority/Health Agencies/Tourism Association		
☐	Cross-Border Coordination & Info Sharing	☐	Coordination/Coordination with CARPHA in Place		

REOPENING OF CARIBBEAN TOURISM & TRAVEL

GUIDELINES AND CHECKLIST FOR ALL TOURISM SUB-SECTORS

Ground Transportation; Accommodation; Food & Beverage; Recreation and Entertainment; Meetings, Incentives, Conference & Events (MICE); & Tourism Services

CARPHA-CTO-CHTA-OECS-GTRCMC COVID-19 Task Force

June 22, 2020

GUIDELINES FOR ALL TOURISM SUB-SECTORS

Ground Transportation; Accommodation; Food & Beverage; Recreation & Entertainment including Sites & Attractions; Meetings, Incentives, Conference & Events (MICE); and Tourism Services

TARGET GROUP

These Guidelines are earmarked for Hospitality and Tourism Service Providers in the Caribbean including Retailers, Vendors and Public Markets at the destination.

FOCUS

Building User Confidence and Assurance in Tourism Service Delivery by ensuring that Health Safety Protocols are in place at key points in the Tourism Experience and Visitor Service provided.

PRIORITY

- √ Protecting Jobs and Livelihoods by Providing Health Safety & Quality Service
- √ Reconfiguring Business Operations to Minimize Health Safety Risks and to Protect the Safety of Employees, Visitors and Guests
- √ Integrating Technology, Digitization and Innovation
- √ Education and Training
- √ Clear Communication and Messaging
- √ Collaboration and Partnerships

REQUIREMENT

The guidelines and protocols must be adapted according to Size, Staff Number and Nature of the Tourism Service provided. Ultimately, they must be based on the National/Local Requirement at the destination.

SEVEN (7) COMMON HEALTH SAFETY ELEMENTS

1. PHYSICAL DISTANCING

2. INFECTION PREVENTION
Coughing & Sneezing Etiquette;
Hand Hygiene
Face Mask, PPE

3. INFECTION CONTROL
Ventilate, Clean
Sanitize, Disinfect

4. MONITORING
Temperature Checks

5. RAPID RESPONSE & REPORTING

6. TRAINING

7. COMMUNICATION & MESSAGING

REQUIRED PRIORITY GUIDELINES

SPECIFIC COVID-19 HEALTH SAFETY MEASURES

Implementation of the following five (5) Special Health Safety Measures for Staff, Guests/Patrons, Facilities, and the Services provided as part of the Visitor Experience, is necessary:

1. PHYSICAL DISTANCING:

√ Targeted Measures

This should be put in place in communal areas where staff, guests, patrons and visitors are likely to gather for prolonged periods, i.e. longer than 15 minutes. In principle, a distance of 5 to 6 feet or approximately 1.5 to 2 meters should be applied except for persons traveling together.

Protocol may include establishing a maximum number of staff, guests, patrons and visitors allowed in any common facility and in vehicles or water vessels, e.g. restaurants, bars, lobby, loading zones, attraction rides/ tours, taxis. Reduced carrying capacity at all sites must be considered. This may require allocating booking slots, e.g. for meal times, tours, pool/gym use.

√ Alternative Measures

When physical distancing cannot be fully observed, alternative measures of protection may be used such as sneeze guards, impermeable barriers and wearing of face coverings. Careful consideration should also be given to whether some services should temporarily remain closed, e.g. childcare facilities, and to outdoor seating opportunities where possible. Large scale events should also be temporarily postponed.

2. INFECTION PREVENTION AND CONTROL (IPC)

These include specific personal protective measures, ventilation and cleaning, sanitizing and disinfection protocols. These must be considered, communicated to staff, guests, patrons and visitors and implemented accordingly:

√ Personal Protective Measures

(i) Respiratory Etiquette: Strict respiratory etiquette should be communicated and followed (coughing or sneezing into a paper tissue or the elbow bend) by staff, guests, patrons and visitors. Tourism service providers should ensure the availability of paper tissues and contactless or foot-pedal garbage bins.

(ii) Hand Hygiene [6]: Hand hygiene is an essential control measure. Hands must be washed thoroughly and often, using soap and water for a minimum of 20 seconds. Hand hygiene practices should be communicated to staff, guests, patrons and visitors through infographics at key areas/facilities, e.g. at entrances, in washrooms, at the cashier, elevator entrance, etc.

Tourism service providers should ensure easy access to hand washing facilities with soap, single use paper towels (use contactless faucets and dispensers as far as possible), or contactless automatic dryers. Alcohol-based hand rub solutions in contactless dispensers should also be available.

NB: Alcohol-Base Level for Sanitizers: Alcohol-Based Hand Sanitizers 60% alcohol or above may be used for personal hand sanitation purposes. For All other purposes, i.e. for cleaning, disinfecting and sanitizing surfaces, 70% alcohol or above is required.

[6] https://www.who.int/docs/default- source/inaugural-who-partners-forum/who-interim-recommendation-on- obligatory-hand-hygiene-against-transmission-of- covid-19.pdf

(iii) Use of Face Covering [7]**:** The use of face covering, which includes face masks or other shields, should be worn by staff, guests, patrons and visitors, particularly in communal areas and public-facing situations when interactions with others is required.

Vulnerable and High-Risk Groups: Staff, guests, patrons and visitors in Vulnerable and High-Risk Groups[8] must use a face covering at all times.

According to WHO, COVID-19 is often more severe in people who are older than 60 years or who have health conditions like lung or heart disease, diabetes or conditions that affect their immune system. These are among the Vulnerable and High-Risk Groups.

Appropriate use of face covering is important and should be communicated to staff, guests, patrons and visitors. Face-covering must not replace core preventive measures.

√ Ventilation

Increasing the number of air exchanges per hour and supplying as much outdoor air as possible is recommended - either by natural or mechanical ventilation, depending on the facility. For example, increased ventilation of guest rooms for at least one hour after check-out is suggested.

Cleaning of HVAC systems should be increased and air filters replaced more frequently in indoor spaces. The use of high-grade filters in enclosed spaces similar to aircraft cabins and elevators, is an option that may be explored.

A time log should be kept for documentation of all cleaning and upkeep undertaken.

√ Cleaning Measures

There are three (3) levels of cleaning, i.e. Cleaning, Sanitizing and Disinfecting. Each is important to ensure the health safety of staff, guests, patrons and visitors. Cleaning of high touch surfaces as often as possible (at least daily and, if possible, more frequently, i.e. after use, hourly or at least once every two hours) is required.

Example of Key High Touch Point and Surfaces

- Doors
- Door Handles & Knobs
- Windows & Coverings
- Seats and Chairs
- Seat Belt Buckles
- Arm Rests
- Hand Rails
- Grab Handles
- Table-tops
- Bar/Counter tops
- Check-in/Payment Counters
- Point-of-Sale Terminals
- Dining Surfaces
- Food Preparation Surfaces
- Sinks, Faucets & Taps
- Keys and Locks
- Steering Wheels
- Driver/Vessel Controls
- Light and AC Control Panels
- Remote Controls
- Elevator Buttons
- Touch Screens & Tablets
- Staff PCs
- Telephones
- Pool/Water Safety Equipment
- Gym Equipment
- Vending & ATM Machines

[7] Major health organizations, including the CDC and WHO, have urged people to only use medical grade face masks if they are ill, so as not to spread the virus to others, or if they are a Health Care Provider

[8] https://www.who.int/westernpacific/emergencies/covid-19/information/high-risk-groups

As a general rule, staff should:

- Prior to disinfecting, clean with detergent or soap and water if the surface is visibly dirty.
- Wear gloves[9] and a mask and other protective equipment as required by the product instructions during cleaning and disinfecting.
- Perform good hand hygiene before and after cleaning.
- Always follow the instructions on the cleaning agents for how to dilute and apply to different surfaces.
- Perform the procedure of cleaning and sanitizing after the end of the service provided, e.g. at check-out (for rooms); after drop-off (for ground transportation and water tours).
- Be trained on manufacturer's directions and the Occupation, Safety and Health Administration (OSHA) requirements for safe use of cleaning chemicals.
- Trained in the treatment of cleaning equipment, waste management and laundry. For laundry services, in addition to washing items in accordance with the manufacturer's instructions, staff should be aware of the CDC[10] guidelines and the circumstances for use of cold or hot water.
- Be made aware of personal hygiene required following cleaning.

- **Chemicals:** When choosing cleaning chemicals, products approved for use against COVID-19 should be considered. Eco-friendly or other disinfectants labeled to be effective against emerging viral pathogens should be used. Bleach alternatives should be applied as far as possible. If used, diluted household bleach solutions (5 tablespoons per gallon of water according to the manufacturer's instructions). Alcohol solutions with at least 70% alcohol that are appropriate for the surface should also be utilized accordingly.

- **NB:** For personal use Alcohol-Based Hand Sanitizers with 60% alcohol or above may apply.
  Eco-Friendly Cleaners, Sanitizers and Disinfecting Chemicals, and Recycled Products should be used, as far as possible, for continued support to climate change mitigation and to maintaining the pristine environment of the region.

3. SCREENING AND TEMPERATURE CHECKS FOR SYMPTOMS OF COVID-19

√ COVID-19 Symptoms [11] (WHO)

The most common symptoms of COVID-19 are fever, dry cough or cough associated with difficulty breathing/ shortness of breath, chest pain/pressure, and tiredness. Other symptoms that are less common include aches and pains, nasal congestion, headache, conjunctivitis, sore throat, diarrhea, loss of taste or smell or a rash on skin or discoloration of fingers or toes. These symptoms are usually mild and begin gradually.

Screening Questions: Suggested screening questions for COVID-19 symptoms for staff, guests, patrons and visitors are:

- Have you been in close contact in the past 14 days with a confirmed case of COVID-19?
- Have you been diagnosed with COVID-19?
- Have you been told by a health care provider or public health official to self-quarantine?
- Are you experiencing a cough, shortness of breath/difficulty breathing, chills, muscle pain, new loss of taste or smell, or sore throat?
- Have you had a fever in the last 48 hours?
- Have you had vomiting or diarrhea in the last 24 hours?
- Have you had a fever in the last 48 hours?
- Have you had vomiting or diarrhea in the last 24 hours?

[9] CDC recommends wearing gloves when you are cleaning (or caring for someone who is sick).
[10] https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/laundry.html
[11] https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-coronaviruses

√ Temperature Checks

Fever, remains among the key symptoms displayed and, due to this, screening by temperature checks for employees, guests, patrons and visitors is an essential measure. An elevated temperature of over 100.4 degrees Fahrenheit (F) or 38 degrees Celsius (C) is cause for concern.

General Rule: Employees, guests, patrons and visitors must be screened with the use of a no-touch thermometer to ensure that temperatures are not elevated over 100.4 degrees Fahrenheit (F) or 38 degrees Celsius (C).

Staff:

- Employees should undergo daily temperature screening at the start of their shift/work day. Online monitoring forms should be considered for recording temperature checks
- Staff with elevated temperatures, i.e. over 100.4 F or 38 C, should not be allowed to work but should be sent for further screening at a designated health facility - on site if one is available or at the designated public or other facility off site
- Staff should stay at home if they are unwell and/or if they, or a household member, exhibit COVID-19 symptoms
- Staff with elevated temperatures or exhibiting COVID-19 symptoms should be tested

Guests, Patrons and Visitors:

- At accommodation facilities, temperature screening for guests, should be done on a regular basis during their stay
- Temperatures of patrons and visitors should be taken prior to commencing a tourism activity or tour, e.g. transportation, restaurant services, and at sites and attractions.
- Persons displaying elevated temperatures should not participate in planned activities, but local health authorities should be advised to facilitate screening and possible testing.

4. REAL-TIME MONITORING, RAPID RESPONSE AND REPORTING/CONTACT TRACING

√ Monitoring & Rapid Response Reporting

Tourism service providers must rapidly respond and report any changes, on a real-time basis, that may escalate risk to contagion to local authorities for immediate action. Due to this, it is best if systems are in place for real-time monitoring of the health of staff, guests and patrons, where appropriate. Where possible, applications should be utilized, such as CARPHA'S THiS, for confidential early warning, response and real-time monitoring of illnesses.

√ Contact Tracing: Contact details of employees, guests, patrons and visitors must be available in case they are needed for contact tracing. In the absence of formal contact tracing apps, guests and visitors should, at the minimum, be encouraged to keep their smart phone location sensor on for the duration of their stay to facilitate contact tracing around the destination.

Contact tracing measures must be strictly limited for the purpose of dealing with COVID-19 outbreak and established according to rules, which ensure the highest level of privacy and data protection.

SYMPTOMATIC VISITOR MANAGEMENT REPORTING PROCESS

The following CDC-approved five-step process must be implemented if staff, guests, visitors or patrons exhibit elevated temperatures and COVID-19 "Influenza-Like" symptoms. This is intended to assist the person and to protect everyone from potential COVID-19 transmission as quickly as possible.

5. SUPPLIES [12]

√ Checklist of General Supplies/Eco-Friendly Products

Tourism service providers must rapidly respond and report any changes, on a real-time basis, that may escalate risk to contagion to local authorities for immediate action. Due to this, it is best if systems are in place for real-time monitoring of the health of staff, guests and patrons, where appropriate. Where possible, applications should be utilized, such as CARPHA'S THiS, for confidential early warning, response and real-time monitoring of illnesses.

While supplies will vary depending on the service and activity, general and basic supplies will include where applicable:

- Thermometers: Infrared No-Contact Hand-Held Thermometers (minimum of four - two per entrance and two for staff) and/or Full Body Thermal Scan - one per entrance
- ISO Masks (PAPRs, CAPRs, N95s), enough for each staff for each shift to have at least one
- Face Shields and Protective Eyewear
- Bag (disposable for possibly contaminated items. Bags should be made from recycled or eco-friendly material as far as possible)
- Disposable Gloves[13] (mainly for cleaning and made of recycled or eco-friendly material)
- Disposable Aprons
- Alcohol-Based Hand Sanitizer (60% alcohol or above for personal use by employees/guests/patrons)
- Spray Disinfectant/Wipes
- Cleaning Disinfectant
- Cleaning Sanitizers (70% alcohol base or above)
- Single Use Paper Napkins or Towels
- Contactless Soap Dispensers
- Hands-Free Garbage Bins with Covers
- Contactless Automatic Dryers for Drying Hands
- Measuring Device (tape measure, yardstick, 6 ft. pole etc.)
- Indicators (flags, markers, stakes, cones, tapes, stickers etc.)
- Signage for Protocols, Awareness regarding Symptoms & Contact Information

[12] In consideration of elements of WHO COVID-19 Essential Supplies Forecasting Tools of April 29, 2020 https://www.who.int/who-documents-detail/covid-19-essential-supplies-forecasting-tool

[13] CDC recommends wearing gloves when you are cleaning or caring for someone who is sick. Otherwise, washing hands for 20 seconds with running water and wearing face masks along with other preventative measures such as physical distancing and using hand sanitizers are seen as most appropriate for general daily activities.

√ Delivery of Supplies

Attention must also be paid to the procedures involved in receiving the delivery of all supplies (including food) to ensure consistency of health safety across all service points in order.

Delivery personnel should:

- not be allowed to drop-off supplies without the use of a mask or face covering
- undergo temperature checks on entry to the delivery/drop-off point on the property/site/office
- practice hand hygiene and cough etiquette
- be denied entry if their temperature is elevated; and
- with elevated temperatures, be documented

Reporting

- Instances where entry is denied due to elevated temperature or visible symptoms must be reported to the relevant health authority on a real-time basis
- Receiving Supplies
- Delivery receiving areas must be kept clean and disinfected after each delivery
- Products must be removed from external containers or packaging before storage. Where this is not possible or practical, clean and sanitize packages and containers as appropriate prior to storage.

Receiving Supplies

- Delivery receiving areas must be kept clean and disinfected after each delivery
- Products must be removed from external containers or packaging before storage. Where this is not possible or practical, clean and sanitize packages and containers as appropriate prior to storage.

OTHER NECESSARY GUIDELINES

Guidelines in this category fall under the following **six (6) broad headings:**

1. MANAGEMENT OPERATION

Management, which covers the owner or operator of tourism services, must set the direction to successfully achieve the priority areas and health safety objectives by implementing the following Measures and Protocols:

√ Local Regulatory Compliance

All tourism enterprises and services must comply with National Legislative and Regulatory requirement related to the tourism service and/or business activity in which they are involved.

√ Preparedness & Action Plan Development

An official COVID-19 Preparedness & Action Plan is necessary. This must allow for assessment of the visitor experience and staff assurance at all facilities and service points and the outline of Special Policies and Standard Operating Procedures (SOPs) adjusted for heightened health safety.

Specific actions to be taken in case of infection should be outlined within an established Quarantine Procedure. The role and responsibilities of staff should be detailed, presented to each staff and made available at all times.

√ COVID-19 Health Safety Management Team and/or Point Person

This protocol allows for an assigned COVID-19 Manager or Person to continually support, assess and ensure that protocols are being enacted. Large companies and those with multiple locations for operations should consider designating a team.

√ Local Coordination Arrangements & Partnerships

Communication and constant coordination are required at the local level between Ministries/Departments of Health; Tourism Ministries/Departments/Boards and Hotel and Tourism Associations and Tourism Service Providers. This is to ensure that the latest rules and regulations in any given geographical area are shared, applied and their implementation monitored.

Partnerships for additional support such as capacity development and human resources training must also be facilitated. This will further enable a wider participation in decision making and in ownership and uptake of the decisions made.

2. HUMAN RESOURCES & TRAINING

Human resource remains a central factor in the delivery of the tourism service. Managing staff and ensuring health safety and quality service standards must now take on different approaches and heightened levels as these too must adapt to requirements brought on by COVID-19.

√ Management of Staff

Measures that decrease the physical presence of staff at the workplace should be considered. Staff such as those performing duties that may be compatible with teleworking, could be encouraged to work from home. As a temporary measure, staff with serious underlying conditions, may need to be placed in other functional areas based on the level of physical interaction required.

√ Comprehensive Training & Capacity Development Plan

A COVID-19 Compliant Comprehensive Training Plan is necessary. A collaborative approach should be taken in the implementation of the training plan. This collaboration and partnership with Ministries of Tourism and Health as well as with National Tourism Sector Associations and similar Regional Tourism Agencies, such as the CTO and CHTA should be undertaken. These agencies are also involved in COVID-19 tourism training and capacity development. The Plan can, therefore, leverage the training of these agencies allowing resources to be utilized more effectively.

The Training and Capacity Development Plan should also consider the emotional impact of this COVID-19 crisis and its related “Paradigm Shift” on all persons in the tourism sector, which, in the case of employees, must be continually monitored and assessed.

Allowances for Counseling and Coaching must, therefore, be included as part of the capacity development and training program of tourism services providers. This likewise, should be done in collaboration with national and/or regional health and other relevant agencies.

√ Training and Capacity Development Focus Areas

Capacity development to deliver quality COVID-19 compliant service must now be at the forefront of awareness building and training.

Staff involved in providing a tourism service must be aware of "All Things COVID-19", with additional considerations made to mitigate emotional consequences due to COVID-19 that may impact negatively on the workplace and in the delivery of the tourism service.

Training and capacity development should include:

- COVID-19 Causes and Symptoms
- Physical Distancing Measures for the Workplace
- Infection Prevention and Control (IPC) Measures & Personal Protection, including use of face covering and other personal protective equipment (PPE)
- New cleaning, sanitizing, and disinfecting practices, along with manufacturers' ainstructions for the use of products for these purposes
- Monitoring and Reporting
- Rapid Response Actions (required if staff or guests/visitors present symptoms)
- Implementing Quarantine Protocols
- Interacting with visitors/guests and other staff
- Customer Service in the COVID-19 Era
- Sales and Selling Skills in a COVID-19 Era
- First Aid in a COVID-19 Environment
- Post COVID-19 Staff Counseling and Coaching Techniques

3. COMMUNICATION & INFORMATION

Information must be continually communicated to employees and visitors. Communication must also flow effectively among partners and stakeholder authorities national and regionally.

√ Information for Staff

Staff must inform and be informed regularly on all matters related to health and safety procedure, policies, operations, and expectations. Likewise, the information must be reliable, consistent and easily accessible and must be reinforced verbally and by other digital means.

√ Information for Visitors

For visitors, communications on protocols and measures in place and their role and responsibility, must begin before their arrival at the destination. The information must also include current national guidelines of the government and local health authority. The information must be reliable and consistent. This information can be reinforced and further detailed or expanded at touch points on site as they utilize the tourism service.

√ Communication Modes/Signage

Information must be easily accessible including through digital means – online/via Short Message Service (SMS) on phones. Staff and Visitors/Guests should also be informed through specific signage (information infographics, including adaptations for those who are visually impaired) at entrances of tourism facilities; recreational and entertainment areas including sites and attractions. Signage must also be located in "back-of-house" or staff-only areas for information and directional purposes of employees and other individuals in those locations.

Leaflets with information could also be provided upon request. Information on leaflets and signage in different languages, including Spanish and French should also be considered. General leaflets could include information, on:

(i) the signs and symptoms of COVID-19;
(ii) what to do in case they develop symptoms and signage on where to go, e.g. "Check Health Station" or "Check Resort Nurse" during their stay; and
(iii) what to do if they develop symptoms within 14 days following departure.

√ External Communication

Mechanisms must be in place to ensure constant communication between local/national public health/ tourism authorities and sector associations. Communication with external travel trade, and sales and business partners must also be factored. They must also be kept fully apprised of what is happening locally and onsite for them to perform their function and support accordingly.

√ Building Trust & Assurance

Certification and Recognition Programs can play an even greater role as part of Public Relations (PR) and promotional communication activities. All tourism service providers are encouraged to seek certification or recognition, where possible, including CARPHA's regional stamp of approval (Caribbean Travel Health Assurance Stamp - CTHAS).

4. TECHNOLOGY & DIGITIZATION

Physical distancing and the measures required to mitigate the spread of COVID-19 have necessitated an increased use of technology for communication and the digitization of information and processes. This must now be maximized to the highest extent possible as touchless travel will become the norm.

Evaluation of areas that could be easily digitized must be undertaken. Areas for consideration include:

- contactless payments to reduce the physical handling of cash and credit cards
- contactless/mobile phone check-ins and check-outs
- digital keys
- e-tickets purchases and e-booking for visits and entertainment
- automatic faucets
- automatic dispensers for soaps, hand sanitizers and hand towels
- automatic/contactless hand dryers; and
- contactless garbage bins

5. LIABILITY OF POTENTIAL EXPOSURE

Tourism enterprises and operations should review all areas of potential liability and incorporate waiver and disclaimer language into contracts, reservations, bookings, sales agreements, activity waiver documents etc. The new era of COVID-19 presents a possibility for increased liability claims by employees, guests, and other customers who may claim negligence as a cause for contacting the virus.

This underscores the importance of having in place protocols, training commitments, communications materials and operational practices aimed at minimizing contagion. Tourism Services Providers should include, as part of the reservation or registration process, a Disclaimer which outlines guest responsibilities and limitations of liability.

6. EVALUATION AND ADJUSTMENTS

Health safety measures should be regularly monitored, re-evaluated and adjusted. As new and more efficient solutions become available, less efficient or more burdensome measures should be discontinued.

Tourism service providers should undertake scheduled drills and tabletop exercises to further develop and refine COVID-19 measures and protocols. Evaluation should also consider any new information and approaches needed, to remain current with public health needs.

2.1

CHECKLIST OF GUIDELINES FOR ALL TOURISM SERVICES

This checklist is a summary of the recommended Guidelines.
It allows a self-check to evaluate consistency with and coverage of core areas.

REQUIRED PRIORITY GUIDELINES FOR ALL TOURISM SERVICES

☑ = Yes:		☒ = No		⊟ =Not Applicable	
SPECIFIC COVID-19 HEALTH SAFETY MEASURES					
(1) PHYSICAL DISTANCING					
☐	Physical Distancing in place for Communal Areas			☐	Distancing, of 5 – 6 feet/1.5 - 2 meters, is applied to communal areas
				☐	Maximum numbers established for each common facility
				☐	Allocated slots for use of service is in place
☐	Alternate Measures are applied where Physical Distancing cannot be fully observed			☐	Sneeze Guards or Impermeable barriers are used
				☐	Masks are required and worn over nose, mouth and chin
				☐	Consideration has gone into temporarily closing some services
(2) INFECTION PREVENTION AND CONTOL (IPC) MEASURES					
Personal Protective Measures					
☐	Specific Personal Protective Measures	☐	Respiratory Etiquette	☐	Coughing or sneezing methods are communicated and practised
				☐	Contactless paper tissue dispensers with contactless bins are available for use
		☐	Hand Hygiene	☐	Infographics communicate hand hygiene (washing for 20 seconds)
				☐	There is easy access to contactless hand washing facilities and/or hand sanitizers 60% alcohol base and above (for personal use)
		☐	Face Covering	☐	Use of face covering by all is required
				☐	Appropriate type and use of face covering are communicated
Ventilation and Cleaning					
☐	Ventilation and Cleaning Protocols are Communicated and in place	☐	Ventilation	☐	Number of air exchanges per hour in enclosed areas are increased and as much outdoor air is supplied as possible
				☐	Cleaning of HVAC Systems has been increased and air filters replaced more frequently in indoor spaces
				☐	Rooms ventilated for at least 1 hour after guest check out
		☐	Cleaning, Sanitizing & Disinfection	☐	Heightened cleaning procedure after visitor use of facility/service and after check-out is performed
				☐	Staff informed of the treatment of cleaning equipment, waste management, laundry, & personal hygiene following cleaning
				☐	Frequently touched surfaces are cleaned very often

OTHER NECESSARY GUIDELINES FOR ALL TOURISM SERVICES

☑ = Yes: ☒= No ⊟ =Not Applicable

The following high touch surfaces in high use/Communal areas are cleaned daily, but preferably every 2 hours, or hourly or after use. Eco-safe and recycled products are used for cleaning where relevant and as far as possible:

☐	Doors	☐	Bar/Counter tops	☐	Light and AC Control Panels
☐	Door Handles & Knobs	☐	Check-in/Payment Counters	☐	Remote Controls
☐	Windows & Coverings	☐	Point-of-Sale Terminals	☐	Elevator Buttons
☐	Seats and Chairs	☐	Dining Surfaces	☐	Touch Screens & Tablets
☐	Seat Belt Buckles	☐	Food Preparation Surfaces	☐	Staff Personal Computers (PCs)
☐	Arm Rests	☐	Sinks, Faucets & Water Taps	☐	Telephones
☐	Hand Rails	☐	Keys (room) and Locks	☐	Pool/Water Safety Equipment
☐	Grab Handles	☐	Steering Wheels	☐	Gym Equipment
☐	Table-tops	☐	Driver/Vessel Controls	☐	Vending & ATM Machines

(3) TEMPERATURE CHECK SCREENING

For Staff		For Guests, Patrons, Visitors	
☐	Staff undergo daily temperature screening	☐	Temperature screening of guests is done on a regular basis during their accommodation/stay
☐	Staff with temperature over 100.4 F/38 C is sent home and/or for further screening	☐	Temperatures of patrons are taken prior to commencing a tourism activity or tour by the activity/tour providers
☐	Staff exhibiting other COVID-19 symptoms are sent for further screening and testing, if necessary at designated public facility	☐	Patrons with elevated temperature and or exhibiting COVID-19 symptoms are referred to the health authority for further screening and, if required must also be tested
☐	Staff stay home if they or household member are unwell	☐	Persons displaying elevated temperatures cannot participate in planned activities

(4) REAL-TIME MONITORING, RAPID RESPONSE & REPORTING/CONTACT TRACING

Monitoring & Rapid Response Reporting

☐	The WHO Symptomatic Reporting Process is in place and known by staff, i.e. Inform, Isolate, Trace, Clean and Report	☐	CARPHA THiS Daily/Regular Monitoring and Real-Time Reporting System is in place and used accordingly

Contact Tracing

☐	Contact details for tracing is facilitated	☐	Real-time Reporting is facilitated

(5) SUPPLIES & ECO-FRIENDLY PURCHASES

Supplies Checklist

☐	Supplies Checklist is in place for key areas along the points of service	☐	On the supplies list, contactless and automatic products are purchased, as far as possible
☐	Eco safe and recycled products are purchased, as far as possible	☐	Staff are supplied with relevant PPE for use at work

Receiving Delivery of Supplies

☐	Suppliers are aware that all delivery personnel cannot deliver supplies unless they are properly attired with the necessary mask/PPE	☐	If delivery personnel are denied entry due to elevated temperatures, it is documented and rapidly reported to the relevant health authority
☐	Delivery personnel undergo temperature checks at site/property entrances	☐	Delivery receiving areas must be kept clean and disinfected after each delivery
☐	Delivery personnel is denied entry if their temperature is elevated		
☐	Products are removed from external containers or packaging before storage. Where this is not possible or practical, packages and containers are cleaned and sanitized as appropriate prior to storage		

OTHER NECESSARY GUIDELINES FOR ALL TOURISM SERVICES

☑ = Yes:	☒= No	☐ =Not Applicable

OTHER MANAGEMENT, OPERATIONAL AND NECESSARY MEASURES

1. MANAGEMENT OPERATION

Local Regulatory Compliance			
☐	Business Compliant with Government Legislative and Regulatory Requirements		
☐	Required Business/Operational or Reopening License in Place (where required)		
Preparedness and Action Plans			
☐	Preparedness & Action Plan in Place	☐	Includes actions required to deal with Infection
		☐	Presented to each staff and available at all times
☐	SOPs for Contagion in Place	☐	SOPs Adjusted to include heightened Health Safety Measures
		☐	Quarantine SOP in place
		☐	Presented to each staff and available at all times
COVID-19 Health Safety Management Team and/or Point Person			
☐	COVID-19 Compliance Team in place	☐	Point Person designated to continually check and ensure compliance
Local Coordination Arrangements and Partnerships			
☐	Arrangements in Place	☐	With National Public Health Agency
		☐	With Tourism Ministry
		☐	With National Tourism/Hospitality Association (NHTA)

2. HUMAN RESOURCES AND TRAINING

Managing Staff			
☐	Measures in place to decrease physical contacts and time of physical contacts	☐	Measures decreasing physical presence of staff at work
		☐	Staff compatible with teleworking are encouraged to work from home
		☐	Shifts in Work and in Meal Times are introduced
		☐	Increased use of electronic means of communication
Comprehensive Training & Capacity Development Plan			
☐	Comprehensive Plan Developed	☐	Collaborative Approach to Training taken

Training & Capacity Development Focus Areas			
☐	COVID-19 Causes & Symptoms	☐	Implementing Quarantine Protocols
☐	Physical Distancing Measures	☐	Rapid Response Actions (required if staff or guests/visitors present symptoms)
☐	IPC Measures & Personal Protection, including use of face covering and other PPE	☐	Monitoring and Reporting
☐	Interacting with visitors/guests and other staff	☐	First Aid in a COVID-19 Environment
☐	New Cleaning, Sanitizing, and Disinfecting Requirements and Practices	☐	Customer Service in the COVID-19 Era
		☐	Sales and Selling Skills in a COVID-19 Era
☐	Manufacturer's instructions for use of cleaning, sanitizing & disinfecting product	☐	Post COVID-19 Staff Counselling & Coaching

OTHER NECESSARY GUIDELINES FOR ALL TOURISM SERVICES

☑ = Yes:	☒= No	☐ =Not Applicable

3. COMMUNICATION AND INFORMATION					
Information on Health Safety Measures					
☐	Visitor Information	☐	Measures at the destination is given	☐	Information given at the point of/during use of the service
		☐	Measures at the Facility/Service Provided		
		☐	Information provided prior to arrival	☐	Easily accessible online
		☐	Information is given in two or more languages		
☐	Staff Information	☐	Staff Informed of Health Safety Procedure, Policies, Operations and Expectation		
☐	External Communication	☐	Travel Trade and External Partners kept informed and updated		
Building Trust and Confidence					
☐	National Assurance Certification or Recognition Planned	☐	CARPHA regional CTHAS Certification Planned		
☐	International Assurance Certification or Recognition Planned e.g. WTTC Safe Travel Stamp				
Communication by Signage					
☐	Signage used at entrances to facility/site/service and at other key points	☐	Signage used to provide information on symptoms of COVID-19		
☐	Signage used to facilitate Physical Distancing requirements	☐	Signage provides information in two or more languages		
4. TECHNOLOGY AND DIGITIZATION					
☐	Evaluation done of Digitization Possible	☐	Contactless Technology is used as far as possible, e.g. soap dispensers, faucets, hand dryers, paper towel dispensers, bins, for bill payments, e-ticketing etc.		
☐	Technology Needs Identified				
5. LIABILITY OF POTENTIAL EXPOSURE					
☐	Review done of all areas of Potential Liability	☐	Waiver & Disclaimer Language is Included in Contracts and information platforms		
6. EVALUATION AND ADJUSTMENTS					
☐	Policy in place to regularly re-evaluate and adjust measures to protect health of guest and workers				

REOPENING OF CARIBBEAN TOURISM & TRAVEL

GUIDELINES AND CHECKLIST FOR FOOD & BEVERAGE OPERATIONS

CARPHA-CTO-CHTA-OECS-GTRCMC COVID-19 Task Force

June 22, 2020

GUIDELINES FOR FOOD & BEVERAGE OPERATIONS

OVERVIEW

These guidelines provide a framework for reopening and operation for facilities offering food and beverages amidst the atmosphere of COVID-19. Due to the range of Food and Beverage (F&B) facilities, not every establishment is able to implement health safety protocols in the exact same manner. However, all facilities that offer food and beverage to visitors and residents should have the common priority objective of ensuring that health safety measures are in place at each and across all relevant and critical points of the food and beverage service experience.

These guidelines are offered to support the safe reopening and business recovery of F&B operations by focusing on the additional operational requirements to enable co-existence with COVID-19. It must, therefore, be used in tandem with the existing regulations that prevail at the destination for F&B sales.

TARGET GROUP

These guidelines target restaurant and food and beverage operations catering to tourists and visitors to the Caribbean region.

FOCUS

Heighten health safety assurance for staff and patron and at all relevant points of the Food and Beverage service.

KEY MEASURES FOR FOOD & BEVERAGE OPERATIONS

Adoption of the CARPHA-CTO-CHTA COVID-19 Health Measures to reduce the introduction and spread of COVID-19 is most suited for Food and Beverage (F&B) Operation across the region. Measures that are specifically important to F&B operations and included within these guidelines, require:

- ✓ Implementation of COVID-19 specific Hospitality Operational Guidelines in accordance with WHO recommendations
- ✓ Adherence to Health, Hygiene, Food Safety and Environmental Sanitation Standards i.e. standards required through National/Regional Health and Standards Agencies
- ✓ Advancing Certification for the adoption of Health, Hygiene and Food Safety Measures e.g. ServSafe Food and Alcohol Safety Certification for Food Service Staff, HACCP
- ✓ Joining the Caribbean Travel Health Assurance Stamp for Healthier Safer Facility Program

  NB: Available initially to hotels with food and beverage offerings

- ✓ Undertaking Training and Capacity Building
- ✓ Engaging relevant stakeholders and collaborate on public health messaging

PRIORITY

- ✓ Health Safety and Quality Service
- ✓ Enhanced Cleaning
- ✓ Reconfiguration of Facilities
- ✓ Adjustments of Service Delivery
- ✓ Education and Training
- ✓ Clear Communication and Messaging
- ✓ Collaboration and Partnerships

SEVEN (7) COMMON HEALTH SAFETY ELEMENTS

1. PHYSICAL DISTANCING

2. INFECTION PREVENTION
Coughing & Sneezing Etiquette;
Hand Hygiene
Face Mask, PPE

3. INFECTION CONTROL
Ventilate, Clean
Sanitize, Disinfect

4. MONITORING
Temperature Checks

5. RAPID RESPONSE & REPORTING

6. TRAINING

7. COMMUNICATION & MESSAGING

GUIDELINES

Guidelines are provided in Checklist Format in Section 6.1 and covers the following five (5) core areas:

(1) MANAGEMENT OPERATIONS & PROCEDURES

Operation excellence is a key factor in the reopening of F&B operations. F&B operations must not only adhere to the health, hygiene and food safety and environmental sanitation standards but should consider enhancing all areas to address the specific requirements of COVID-19. Readiness Plans and Policies and SOP must also be addressed under management operations.

(2) HUMAN RESOURCES (HR) AND TRAINING

Staff capacity must be built to meet the additional work requirements brought on by the COVID-19 crisis. Staff training is a central aspect of any reopening plan and specific measures are needed.

(3) PHYSICAL DISTANCING (REDUCING OPERATIONS & MITIGATING TRANSMISSION RISKS)

This remains a core principle for all F&B establishments. Individual considerations must be done to establish appropriate configurations to floor plans as required. Operating at a reduced capacity to mitigate opportunity for transmission of COVID-19 must be in place until local Health Authorities clears for regular capacity.

Utilizing New Technology: Linked to physical distancing is the utilization of new technology to help communicate and conduct business with the reduced need for close contact, i.e. contactless payment systems, automated ordering systems, mobile ordering apps, website updates and simple texts.

Service Type: Considerations must also go into the type/range of service or altering the service to be offered during the short and opening term, e.g. cafeteria style service with barriers vs open buffet etc.

(4) MANAGING EMPLOYEE HEALTH SAFETY

Pre-screening measures, the use of PPEs, and high hygiene for staff are critical management principles that must be addressed.

(5) FOOD & BEVERAGE SAFETY

Food and beverage safety and food handling requires constant vigilance and with COVID-19 this vigilance must be heightened. Certification of key staff in necessary. ServSafe Food Manager/Handler and HACCP certification are encouraged.

(6) ENHANCED CLEANING AND DISINFECTING

Measure focus on enhancing and increasing cleaning at each point of service and operation.

(7) COMMUNICATION, MESSAGING & SIGNAGE

Constantly communicate with staff about shift changes, protocol updates etc. is required. It is also necessary to keep communicating with customers (operating hours; menu items; reservations) and help promote physical distancing and safety efforts; and monitor communication put out by the National Health Authority/ Government.

NB: Along with these Guidelines, reference should be made to ***Section 3: "Guidelines for All Sub-Sectors of Tourism".***

CHECKLIST OF GUIDELINES FOR FOOD & BEVERAGE OPERATIONS

This checklist is a summary of the recommended Guidelines and its Key Elements.
It allows self-check to ensure consistency with and coverage of core areas

✓☑ = Yes: X☒= No ⊟ =Not Applicable			
MANAGEMENT			
1. MANAGEMENT OPERATIONS			
Legal Operation			
☐	Operational Legislative & Regulatory Requirements are met	☐	Operating/Reopening License is current
☐	Specific Local/National Health Authority, Hygiene, Food Safety & Environmental Sanitation Standards are adhered to		
☐	Operating/Reopening License is current		
COVID-19 Preparedness & Action Plans			
☐	COVID-19 Preparedness & Action Plan in Place	☐	HR & & Staff Training Plan Updated for COVID-19 Needs
☐	Plans are flexible to update as new data is available	☐	Plans consider a phased approach to reopening
Policies & Standard Operating Procedures			
☐	CTHAs Health Assurance/ Certification considered Available initially to hotels with food and beverage offerings	☐	SOPs for Food Service are enhanced for COVID-19
☐	Digitization and Contactless Policy in Place	☐	Temperature Screening Policy in place for Staff and Guests
☐	COVID-19 Health & Safety Management Team in Place **OR** Specific Individual for Health Safety Identified (to audit SOPs and regularly inspect to ensure compliance)	☐	New/Enhanced SOPs for Cleaning & Hygiene Routines
		☐	Receiving Delivered Supplies SOPs in place
Critical Service Type: Buffet			
☐	Policy on Buffet Service is developed according to national government requirement during reopening	☐	Where Buffet Service is allowed there is a serving attendant with and/or without protective glass in place
☐	Other forms of service are considered, provided if possible and/or enhanced, e.g. take-out options, open-air dining		
First Aid Measures			
☐	First Aid protocols have been updated to address how to manage patrons or employees with COVID-19 symptoms	☐	For subcontracted First Aid services, the subcontracting organisation must provide the appropriate PPE for their employees
☐	First Aid kits have been updated to include COVID-19 supplies, i.e. face masks, shields, extra gloves, etc.	☐	An isolation/quarantine area has been established for individuals and their immediate party to wait while first aid and any COVID-19 assessments are completed
☐	Appropriate Personal Protective Equipment (PPE) is provided for internal staff responsible for First Aid		

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2. HR MANAGEMENT & TRAINING			
☐	Employee Handbooks	☐	All employee and HR handbooks are COVID-19 updated
		☐	Employee sick leave policies have been reviewed and updated
☐	Shared Equipment	☐	Reducing the use of shared equipment (computers, phones, radios, etc.) by staff has been considered.
		☐	Where equipment must be shared, employees wash/sanitize their hands before and after using that equipment. The high-touch surfaces on the equipment are also sanitized frequently.
☐	Customer Service Heightened	☐	Customer Service has a COVID-19 script and staff are trained accordingly including how to greet patrons with warmth and friendliness and not by contact
		☐	Staff are trained
☐	Training Delivery	☐	Training is conducted utilizing strict physical distancing and hygiene protocols
		☐	Online training modules are used as far as possible
		☐	Collaborative Training Approach taken (with Tourism/Health Authority, Association etc.)
☐	Staff trained in new COVID-19 SOPS and Protocols	☐	COVID-19 Operational Plans Policies and Procedures
		☐	COVID-19 Causes and Symptoms
		☐	Physical Distancing Measures & Interacting with staff and patrons
		☐	Respiratory Etiquette & Personal Hygiene (IPC)
		☐	New Cleaning and Disinfecting Protocols
		☐	New Food Service or altered duties
		☐	First Aid in a COVID-19 Environment
		☐	Selling skills in the new reality of social distancing (for brand staff)
		☐	Post COVID-19 Staff Counselling & Coaching

PHYSICAL DISTANCING			
1. DINING IN			
☐	Evaluation done on restaurant/dining capacity	☐	Only groups that are distancing together are seated together
☐	A temporary capacity reduction to 50% with rotational or extended dining times are considered	☐	A reservation or call-ahead seating is implemented to better space diners
☐	Floor plan is updated, where allowable, and redesigned for seating arrangements to ensure at least 6 ft (2 m) of separation between table setups.	☐	Determine ingress/egress to and from restrooms to establish paths that mitigate proximity for staff and guests
☐	Restaurants and bars are reconfigured to accommodate physical distancing with reduced seating capacity	☐	Where 6 ft (2 m) of separation is not possible, consider other options (e.g., face coverings) and increase the frequency of surface cleaning and sanitizing
☐	Where practical, especially in booth seating, physical barriers are used		

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2. RECEPTION & PAYMENT/DEPARTURE			
☐	Contactless hand sanitizing stations are strategically placed in the reception/waiting area for the use of patrons on arrival/departure	☐	To avoid allowing patrons to congregate in waiting areas or bar areas they are also allowed outdoor distancing and to wait in cars
☐	The re-seating floor plan that reflects physical distancing protocols is posted at the entrance for viewing of patrons	☐	Practical physical barriers such as partitions or Plexiglas barriers are used at pay out registers
☐	Floor markings are placed for physical distancing to enable patrons to stay separated while waiting for seating	☐	Spacing between customers while in line for pay-out is indicated and maintained
☐	Displays that may result in customer gatherings are avoided	☐	An exit separate from the entrance is utilised where possible
3. HEIGHTENED USE OF TECHNOLOGY			
☐	Technology solutions are used where possible to reduce person-to-person interaction	☐	Contactless payment options are utilized
☐	Text is facilitated on arrival for seating	☐	Contactless hand cleaning/sanitizing dispensers are placed at designated locations (for staff and patrons)
MANAGING EMPLOYEE HEALTH AND SAFETY			
4. MONITORING STAFF HEALTH			
☐	Temperature screening for staff is done on arrival at work/start of a shift.	☐	Staff sanitize or wash hands regularly throughout their shift (minimum once per 30 minutes)
☐	Staff with temperatures over 100.4 F/38 C are not allowed to work	☐	The use of other PPEs by staff, e.g. aprons, face shield, cleaning gloves, is used where and when necessary
☐	Staff are required to stay at home if they or a household member are not feeling well or exhibiting WHO-defined symptoms associated with COVID-19. They are required to consult and follow the health authority guidelines	☐	Staff sanitize or wash hands after handling cash or credit card exchanges, touching common areas and upon serving food and drinks
☐	If a staff member is sick at work, they are sent home. Their workspace surfaces are cleaned and disinfected. Other staff with close contact (i.e., within 6 ft (2 m) of the employee during this time are considered exposed	☐	Staff are required to regularly self-monitor for symptoms of COVID-19 and are informed of and required to follow the health authority requirements
☐	Staff who are well but know they have been exposed to COVID-19, are required to notify their supervisor and follow precautions set by the health authority.		
5. STAFF PERSONAL PROTECTIVE EQUIPMENT (PPE)			
☐	PPEs are provided for staff use at work and include hair restrains, face coverings, disposable gloves, food coats/ overalls shoe covers	☐	Where possible, food production areas are rearranged so that employees are staggered on either side of the workstation in such a manner where they are not facing each other
☐	PPE are always used in areas where the risk for food contamination is high especially where ready to eat food items such as salads and cooked food are prepared, displayed and served.	☐	Providing disinfecting mats/foot baths at the entrance to the food establishment is considered
☐	The number of food handlers/ employees on the floor at any one point is limited (Bearing in that this may lead to slower processing at the establishment)	☐	Staff are organised in smaller teams and in such a manner to minimise staff interactions during work and shift change

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6. STAFF HYGIENE AND OPERATION			
☐	Employees are trained on the importance of frequent hand washing, the use of hand sanitizers with at least 60% alcohol content. They are given clear instruction to avoid touching hands to face	☐	Communication boards or digital messaging is used to convey pre-shift meeting information particularly where there are large staff numbers
☐	Staff are aware that they must cough or sneeze with a tissue, then throw the tissue in the covered garbage bin trash and wash hands	☐	Contact between wait-staff and patrons are limited. Wait-staff is required to wear face coverings if they have direct contact with guests
☐	The number of employees allowed simultaneously in break rooms has been limited	☐	Staff, because they have been adequately sensitised to the signs and symptoms of COVID-19, are able to identify both patrons and staff exhibiting symptoms.
☐	Employee gatherings are discouraged		
7. OPERATION GUIDELINES FOR SUPPLIERS			
☐	Third party delivery drivers and all suppliers are reminded of internal distancing requirements	☐	Farmers are advised and encouraged to bring washed produce to the restaurant
☐	As far as possible, individuals delivering food and supplies and anyone else coming on to restaurants undergo temperature checks	☐	An area is established where food and vegetables are washed and sanitized
☐	Protocols for receiving food are in place and implemented	☐	A suppliers' delivery schedule is in place to avoid delivery congregation
FOOD AND BEVERAGE SAFETY			
Regulations and Certification			
☐	Requirements of the Health Ministry/Authority are adhered to	☐	Staff has Food Handling Certification/Licenses
☐	HACCP requirements are followed for F&B safety	☐	The recommendation that staff are Certified ServSafe professional is considered
Other General Measures			
☐	Before preparing food, staff wash their hands with soap and water for 20 seconds	☐	Food and drink are kept at the appropriate temperature required for safety and use
☐	When a "grab and go" service is provided, coolers are stocked to no more than minimum levels	☐	Lemons and unwrapped straws from self- service drink stations are removed
☐	Gloves are used, as needed to avoid direct bare hand contact with ready-to-eat foods	☐	Pastry/bakery items and other similar items are pre-bagged using appropriate bags and tongs
☐	Ensure cooked foods reach the proper internal temperatures prior to service or cooling.	☐	Expired food and drink are discarded
ENHANCED SAFETY AND CLEANING			
1. RESTAURANT AND BAR FACILITIES			
☐	Where national protocols have been required, plant/ and associated fixtures and fittings etc. have been inspected and gaps for upgrade/modification according to health protocols identified.	☐	Adequate wall mounted sanitizer dispensers at strategic locations for use by both staff and patrons are available
☐	Extensive cleaning & sanitizing of all furniture and equipment are undertaken and maintained	☐	Hand washing stations for staff along with contactless paper towel dispensers and foot pressed bins are located at designated points for use by staff

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2. HEIGHTENED CLEANING AND DISINFECTING			
☐	Food contact surfaces, dishware, utensils, food preparation surfaces, and beverage equipment are washed, rinsed and sanitized after use	☐	Table condiments are individually wrapped for use by each patron at the table
☐	Surfaces repeatedly touched by employees or patrons such as door knobs, equipment handles, check-out counters, and cart handles, etc are frequently disinfected	☐	There are procedures and equipment to ensure that cutlery and wares are properly cleaned and sanitized are in place. Pre-setting tables are avoided as far as possible.
☐	Seldom- touched surfaces are not-overlooked. Procedures to increase how often back-of-house surfaces are cleaned and sanitized are implemented	☐	If reusable menus must be used, they are cleaned and sanitized regularly. Paper menus are discarded after each customer use
☐	Ware-washing machines are operating at the required wash and rinse temperatures and with the appropriate detergents and sanitizers	☐	Approved disinfecting products that are effective against viruses are prepared and used in a safe and controlled manner according to label instructions
☐	Remember that hot water can be used in place of chemicals to sanitize equipment and utensils in manual ware-washing machines.	☐	Sanitizing material guidance is followed to ensure it's at effective sanitizing strength and to protect surfaces
ENVIRONMENTAL CLEANING/JANITORIAL SERVICES			
☐	Cleaning staff wear the recommended PPE including, disposable gloves and face mask for all tasks in the cleaning process and in handling trash	☐	If surfaces are dirty, they are cleaned using a detergent or soap and water prior to disinfection
☐	Gloves are compatible with the disinfectant products being used	☐	Diluted household bleach solutions can be used if appropriate for the surface. The manufacturer's instructions for application and proper ventilation are followed
☐	Gloves are removed carefully to avoid contamination of the wearer and the surrounding area (hands are cleaned after removal)	☐	For soft (porous) surfaces such as carpeted floor, rugs, and drapes, visible contamination is removed, if present and cleaned with appropriate cleaners for use on these surfaces
☐	Cleaning staff are required to clean their hands often	☐	Increase frequency of routine cleaning and disinfection, is in place and emphasizes cleaning and disinfecting frequently touched objects and surfaces such as water coolers, desks, countertops, doorknobs, seating, faucet handles, phones.
Restrooms			
☐	Restrooms are regularly clean and sanitized (at a minimum every two hours)	☐	Touchless paper towel dispensers and Hands-free garbage bins with covers are utilized for no touch waste disposal
☐	Contactless faucets and soap dispensers are provided	☐	Covered foot pressed bins are available for use
☐	Signage is in place to require that toilet covers are closed when flushing especially for those cleaning the bathrooms (particles can be sent airborne several feet high in the air if not closed)		
COMMUNICATION AND SIGNAGE			
☐	Signage is posted to remind patrons about physical distancing		
☐	Floor signs are placed to remind and encourage physical distancing		
☐	A signage program has been implemented to encourage proper hygiene		
☐	Signage is in place to encourage staff and guests to report if they have any symptom of illness		
☐	Information is placed at designated spots at the restaurant/bar of the COVID-19 actions of the facility e.g. frequent handwashing, frequent use of hand sanitizers, cough and sneeze etiquette etc.		
☐	Signage also indicating proper use and disposal procedures for mask		
☐	Emergency numbers are readily available and displayed		

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