

AMERICAN HOTEL & LODGING ASSOCIATION HOTEL-SPECIFIC FLU FAQs

Experts believe avian influenza has significant potential for affecting the U.S. lodging industry, including severe employee shortages, travel restrictions that may result in substantial cancellations, and housing employees or guests unable to evacuate. The following information can assist hotels in creating and implementing a pandemic preparedness and response plan.

This document is a generalized template for informational purposes only and cannot be used as is for any particular hotel. Any final plan **MUST** take into account the nature and configuration of the property, the nature and configuration of the locale and available resources, local and state laws, personnel availability, food and water sources and a myriad other fact specific considerations. AH&LA makes no warranty whatsoever concerning the accuracy or completeness of the template, and no person is entitled to rely thereon.

What happens if the property is designated as an emergency “medical facility”?

- Maintain up-to-date reliable information from public health organizations, including local authorities, CDC, and WHO. Involve legal counsel and the local authorities having jurisdiction for health matters, certifications and licensing within the jurisdiction.
- Under conditions of a pandemic, it is possible the hotel will become for all practical intentions and purposes a clinic. If guests are stricken and the local hospitals, clinics, and healthcare facilities are at – and in many instances over – capacity, the guest cannot be put out on the street. The hotel has now become a healthcare facility without certification or license and without professional staff. Be sure this matter is resolved within your community.
- Determine the chief medical officer for the community, probably the director of the department of health.
- Be conversant with all aspects of the community-wide plan.

What do we do if the responders within the community are disabled and are unable to respond?

- Be aware the community response capability may not exist. **YOU MAY BE ON YOUR OWN!** Phone and Internet services may still be available but there may not be an on-premises response capability from agencies in the community. This could very well include fire and police agencies.
- Collaborate with insurers, health plans, and major local healthcare facilities to share your pandemic plans and to understand their capabilities and plans.

- Communicate with local and/or state public health agencies and/or emergency respondents about the assets and/or services your business could contribute to the community.
- Collaborate with federal, state, and local public health agencies and/or emergency responders to participate in their planning processes, share your pandemic plans, and understand their capabilities and plans.
- Be prepared to conduct symptom and temperature checks for employees and guests.

What are the logistics of setting up an “isolation ward” within the hotel property?

- Should an “isolation ward” be established to house employees and guests who are waiting for transportation to a medical facility and/or treatment? If so, be sure the ventilation and all air movement systems are not moving contaminated air into other parts of the establishment. Remember air moves through bathroom stacks as well as through plenums, risers, and other duct systems throughout a multi-story property. Equip with a bed or couch, first aid kit, face masks, and gloves and locate away from main activity areas.
- If the isolation ward concept is instituted, who will serve those units? If there are a number of vaccinated staff from several departments, you might establish a premium pay arrangement and have those staff serve as an unofficial nursing staff. They will assume responsibility for laundry, food service, housekeeping, human waste removal, bedding and bed clothes changes, and coordination of medical services if such can be obtained under the emergency conditions.

How do we handle deaths?

- In the event of a death, what is your responsibility for having the body removed to the morgue? If the morgue is unable to function, what do you do with the body?
- What role should be assumed in reporting to the family of an infected guest who is unable to communicate? What is to be done on notification of next of kin in the event of a death? This role is normally handled through the police. What is your responsibility if the police operations have been crippled within the community? How do you secure the personal effects, possibly including a motor vehicle? These are issues to be reviewed with corporate counsel and the local authority having jurisdiction.

- Establish an emergency communications plan and revise periodically. Have a roster of community organizations and several contact persons in each organization. Have a similar listing for key personnel at corporate headquarters or owner contact data for independent or management contracted properties. There must be an internal employee contact system and a communication link with the appropriate health and emergency response agencies for the community. The internal system should include cell phone, email, home phone number, and out-of-area contact data for all staff. Update on a continuing basis and maintain an off-site back-up. Designate a spokesperson to address all inquiries from the media and friends or families of sick guests. For every essential staff position, establish several layers of designated back-up contacts to step in, should the designated person become incapacitated.

How do we shut down when it is no longer possible to operate?

- Develop protocol for shutting down should it become no longer possible to operate or you must evacuate. How will systems be shut down permitting departure of the last person? Is there a published listing of turn-off points for energy and water sources? Depending upon outside temperatures, what minimal HVAC must be maintained? How will the property be secured? Have a plan for back-up of critical financial and other management records. Is there a plan for securing the property against looters?

What logistics should be implemented to confront an influenza pandemic?

- There will be a need for massive food, water, cleaning, sanitizing, housekeeping, laundry supplies, and personal protective equipment (PPE) Where will storage be located? Are “sample rooms” or certain meeting and guest rooms to be equipped with shelving, refrigerated or freezer units to supplement existing storage facilities? Who will be in charge? What requisition system will be implemented? Can the system be computerized to provide an immediate and current inventory control? Who will maintain oversight of materials and supplies?
- Designated members of the pandemic flu task force should focus on purchasing, hygiene, cleaning, and infection control.

Protocol for supply, use and disposal of Personal Protective Equipment (P.P.E.)

- Establish procedures for decontaminating infected rooms and/or common areas. The use of personal protective equipment (PPE) should be stressed, and employees should be trained on universal precautions and bloodborne pathogens. Approved PPE in the form of hair covers, dust masks, gloves, aprons, face and eye protection should be readily available

at all times for anyone directly involved in cleaning and sanitizing operations. Outline employee safety procedures for linen handling, disposal of sharp items like syringes, cleaning and disinfection of surfaces, and handling of items left behind by ill guests.

- Furnish PPE at no cost to employees or guests, as appropriate. And explain what the PPE will protect against and how to clean and/or dispose it. The hotel should obtain this information from the manufacturer and follow those instructions.
- Used disposable PPE (e.g., covers, masks, gloves, etc.) should be treated as *hazardous waste*. Reusable PPE (e.g., goggles) should be disinfected per manufacturer's instructions and kept in a sealed bag. Employees should remove protective clothing (except for gloves) first and discard before removing mask and goggles. The employee should immediately inform the supervisor of any defective PPE and it should be immediately replaced. This includes cracked, peeling, torn, punctured or otherwise damaged PPE.

How do we integrate and control supplies?

- Work with your Purchasing Department to compile supplies:

Masks – Disposable face masks, which should be used for only one day, are the most practical. A more effective mask is the N95 mask, but it is currently in short supply. Also, consider purchase of N99 and N100 masks. Consider back-ordering the preferred N95 style mask. Determine quantity. Should you purchase a month's supply per staff person and per guest, assuming a 100 percent occupancy level?

Gloves – Gloves should supplement a mandatory hand-washing protocol, and are critical when cleaning contaminated surfaces or when handling contaminated items. Latex examination quality gloves, plus a quantity of vinyl or other non-latex examination quality gloves made available for employees with latex allergies, should be in supply. Establish a level of supply in excess of current par (20% has been suggested) and maintain at that level. .

Soaps and Anti-microbial Hand Cleaners -- One of the more effective ways of preventing spread of any infectious disease is through the frequent and thorough washing of hands. Where water is not readily available, hand sanitizers should be provided. Maintain current specs for antibacterial soaps and hand sanitizers with all employee-designated hand sinks supplied with a soap source and hand sanitizer dispenser. Consider increasing the current par by 20% and maintaining supplies at that level. Consider requiring soap bars for the guestrooms at two pieces per room for four weeks at 100% occupancy.

Thermometers – Recommended thermometers, essential in the event temperature screenings become mandatory, include:

Otic (ear) and oral thermometers with disposable sheaths. One per 250 employees, plus one per hotel entrance. (For designated entrances only in the event of a flu outbreak).

Oral digital thermometers with disposable sheaths. One sheath per person per day for four weeks.

Disposable oral thermometers – One per person per day for four weeks.

Disposable forehead thermometers – One per person per day for four weeks.

Ensure a current battery supply for digital thermometers.

What additional and/or special cleaning supplies will be required?

Cleaning Supplies – Determine the sanitizer for use at your property (a quaternary ammonia-based sanitizer for primary use in food and beverage areas may be appropriate). A quaternary ammonia-based germicidal cleaner for sanitizing touch points in public places – hand rails, elevator buttons, door levers or knobs, etc., may also be appropriate. The current cleaning chemicals for room use should be continued. The effectiveness of chemicals used for cleaning and sanitizing should be regularly reviewed during an emergency period.

What protocol should be established for Food Service operations?

Purchasing professionals and all food service functions in the property should be represented in the development of strategies for providing food service during a pandemic. Coordinate with the health authorities in the community to identify any restrictions or requirements that might be mandated during a pandemic emergency. There may be a need for some menu adjustments as fowl and egg products may be prohibited. It will also be necessary to discuss quantity of perishable products as dairy and produce, which may be difficult to obtain, should the pandemic limit suppliers' delivery capacity. Consider alternative products (for example, powdered eggs and milk).

Consider developing a working and ongoing purchasing relationship with several quality suppliers. Having a single source could be disastrous in the event that source is incapacitated.

What is the role of the Human Resources Department during a pandemic:

- Monitor employees for signs of illness. Those with symptoms of cough, nasal congestion, sneezing, and high fever should be directed to seek medical assistance. Set health standards for reporting and returning to work.
- Retain information on local clinics and medical facilities where employees and guests can see medical attention.
- Contact the local health department if a guest or employee has symptoms, and follow their recommendations, including protocol for dealing with a potentially infected individual.
- Freeze all new hires.
- Postpone appointments for interviews and all training activities.
- Work with senior management to craft policies on absence and compensation for absence.
- Implement sick-leave policy. What other leave policies will be available and implemented (for example, an unpaid leave program for non-essential personnel and selectively for essential personnel, to accommodate those in isolation or whose absence is mandated by local health authorities)?
- Communicate work scheduling and possible temporary reduction in staff due to the impact of the pandemic on occupancy. Provide both Internet and telephone contacts on a 24/7 basis. Staff should understand that they should verify by phone or e-mail before reporting for a work shift.
- Educate employees on ways to contain flu and stop virus spreading, including frequent hand washing, use of alcohol-based hand sanitizers, daily sanitization of public surface areas, use of disposable gloves, seasonal flu shot, etc.
- Post appropriate bulletins and posters with hygiene, safety, security, and other operational instructions and reminders for staff. Provide current updates from WHO (www.who.int) and the CDC (www.cdc.gov).
- Maintain a current roster of all employees with home phone, cell, phone, email, or other contact data. This should be updated in instances where the employee may have moved the family to stay with relatives or friends in another geographic location. Retain in a preferred format and back up with an off-site reserve.
- Use ALL communication means to keep staff fully informed on status of the property, occupancy, any community data concerning the pandemic and its extent. Serve as source for any quarantine instructions or prohibitions mandated by local authorities.

What training should continue during a pandemic?

- Provide information on infection control, hygiene, and medical advisories pertaining to the pandemic.

- Train staff on identifying symptoms and the procedure for reporting suspected cases.
- Involve the appropriate department when providing instructions on food service, room service, housekeeping, and maintenance functions involving a room where the guest may be infected.
- Provide cross-training where it may become necessary, due to absences for remaining staff, to serve in multi-function assignments.
- If possible, involve medical and training support through medical or health department personnel from the community. This seems unlikely in the event of a pandemic, but might be considered as a proactive training function for “key personnel.” Work closely with the staff of the clinic or medical facility providing medical services to your establishment. They should be the source for development of strategies and procedures in sanitizing, handling infected guests and staff.

What elements must be considered in the development of a Business Continuity Plan?

- Determine phases applicable to several levels of business activity. For example:
 - Phase One: Limited operations with guest services. No event functions.
 - Phase Two. Guest services with limited menu
 - Phase Three. Close operations due to quarantine or impact of pandemic on staff and guests.

Determining applicable phases should be a management decision based upon careful analysis of potential options under pandemic conditions.
- Handle all function cancellations without penalty. Suspend guest penalties for failure to cancel within time limits.
- Identify those who will serve as basic staff for maintaining minimal operations.
- Will they and their family take up residence in the property during the pandemic?
- Are there staff who may be able to work from home? Identify tasks and contacts for implementation in an emergency.
- Determine the basic records and operating systems to be maintained. Who will be in charge? Are there to be off-site assignments? Where will back-up be established and maintained?
- What will the critical communication needs be? How are they to be implemented?

How will employees be compensated during a pandemic ?

- Develop a compensation schedule. All staff should understand the alternatives when they are unable to work which may include sick leave, compensated time off, involuntary time off, and eligibility for workers compensation when operations are limited for a significant period of time.
- What staff should be moved to unpaid leave status? Who will notify and how? Phone, Internet, mail, etc.
- There will undoubtedly be a major insurance challenge under business interruption insurance policies as insurance companies will confront potential bankruptcy in meeting policy obligations over an extended period of time. Under many such policies monies for key staff are included. Consider alternatives should the insurance fail to pay. What contingency plans and structures are feasible under such an income relief failure?
- Release interns, trainees, casual/contract, and temporary workers.
- Close under-utilized facilities (e.g., gift shop, business center, etc.)
- Consider reducing work week and shorten operational hours.

What elements must be considered in the development of a Crisis Communications Plan?

AH&LA has created a general flu crisis communications checklist, which is available at www.ahla.com.

Additional Resources:

- Check AH&LA's Website (www.ahla.com)
- Review the government's business planning checklist
- Learn about state pandemic plans.
- Resources are available on the government's pandemic Website (www.pandemicflu.gov).
- Check travel advisories (www.cdc.gov/travel).
- The plan should incorporate any and all guidance provided by local and state laws. Additionally, federal, state and local laws should be consulted to determine your rights and obligations should civil authorities request or demand your assistance during an outbreak.