COVID-19 PREVENTION: ENHANCED CLEANING AND DISINFECTION PROTOCOLS

This document provides guidance on cleaning and disinfection of rooms and areas occupied by DCAS employees, building tenants and visitors. It is aimed at reducing the risk of exposure to COVID-19 by limiting the survival of the virus in key environments, and protecting the DCAS Custodial Staff, who will clean and disinfect areas of the building. This guidance document addresses protocols for two scenarios:

1. Routine cleaning and disinfection of DCAS buildings; and
2. Enhanced cleaning and disinfection after notification of a confirmed case of COVID-19 person in a DCAS building.

**Note: Outdoor areas generally require normal routine cleaning and do not require disinfection.**

I. **COVID-19: Background**

The Centers for Disease Control and Prevention (CDC) state that the spread of COVID-19 virus from person-to-person happens most frequently between persons in close contact (within about 6 feet distance). This type of transmission occurs via respiratory droplets produced when an infected person coughs, sneezes, or talks and which land in the mouths or noses of, or be inhaled by, people who are nearby The CDC states that although transmission of COVID-19 occurs much more commonly through respiratory droplets than through objects and surfaces, there is evidence that COVID-19 may remain viable for hours to days on a variety surfaces made from a variety of materials. Cleaning of visibly dirty surfaces followed by disinfection is a best practice for prevention of COVID-19 and other viral respiratory illnesses.
II. Definitions

- **Cleaning** refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs, but decreasing the number of germs by removing them decreases the risk of the spread of infection.
- **Disinfecting** is the use of US Environmental Protection Agency (EPA)-registered disinfectants to kill germs on surfaces. Killing germs remaining on a surface after cleaning further reduces the risk of spreading infection.
- **Personal Protective Equipment**, commonly referred to as PPE, is equipment worn to minimize exposure to workplace hazards.

III. General Guidance

- **Clean first, then disinfect**
  
  - Determine what areas of the building need to be cleaned and disinfected, ensuring routine cleaning of high-risk locations and high-touch surfaces and objects, such as communal rooms, light switches, public restrooms, handrails, faucets, and doorknobs.
  
  - Establish a checklist for the locations and schedule for the cleaning and disinfecting. The cleaning schedule should document cleaning date, time and scope of cleaning and disinfecting. Rigorous cleaning and disinfection must occur at least after each shift daily, or more frequently as needed.
  
  - Weekly copies of completed cleaning schedules should be sent to the DCAS Safety and Health Coordinator.

- **Practice personal hygiene before and after cleaning/disinfecting:**
  
  - Wear the appropriate personal protective equipment.
  
  - Wash hands often with soap and warm water for at least 20 seconds.
  
  - If soap and warm water are not readily available, use an alcohol-based hand sanitizer that contains at least 60% alcohol. However, if hands are visibly dirty, wash hands with soap and water.
  
  - Wash hands and face thoroughly immediately after removal of personal protective equipment.
IV. **Employee Training**

DCAS Safety and Health Coordinator will train the custodial staff on the following safety topics:

- General cleaning and disinfection practices
  - Cleaning and disinfection dilution concentration
  - Application method
  - Contact time
  - Cleaning/disinfecting locations
    - Cleaning Schedule and scope of cleaning
  - OSHA Hazard Communication/Right-to-Know Law
    - Applicable safety data sheets
- Measures of control
  - Engineering controls
  - Administrative controls
  - Safe Work Practices
  - Personal Protective Equipment
    - Types of PPE for work operations
      - Donning and doffing procedures
- Storage and maintenance of cleaning/disinfection products
- Disposal practices
- Emergency procedures
  - Occupational injuries and illness
  - Chemical spills

Copies of the training records must be maintained with the DCAS Safety and Health Coordinator.

V. **Cleaning Protocols**

- Routine Cleaning
  - Safety guidelines during cleaning and disinfection:
    - Wear disposable nitrile and chemical resistant gloves when cleaning and disinfecting. Disposable nitrile gloves should be discarded after each use. Wash hands immediately after gloves are removed.
Facial coverings and shields as well as eye protection (safety glasses or googles) must be worn when there is a potential for splash or splatter to the face.

Chemical resistant aprons are recommended to protect employees from contact with disinfectants (e.g. diluted bleach).

Breathing protection should be worn in enclosed and/or poorly ventilated areas until hazard assessment is completed by the DCAS Safety and Health Coordinator.

Store chemicals in labeled and closed containers. Keep chemicals in a secure area away from food. Store chemicals in a manner that prevents tipping or spilling. Adhere to the practices in the Safety Data Sheet (SDS).

Cleaning and disinfection of surfaces:

- Clean surfaces and objects that are visibly soiled first. If surfaces are dirty to sight or touch, they should be cleaned using Zep DZ-7 Neutral Disinfectant Cleaner or detergent or soap and water prior to disinfection.
- Use an EPA-registered disinfectant for use against the novel coronavirus. Products that are EPA-approved for use against the virus that causes COVID-19 can be identified here: [https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19](https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19)
  - If an EPA-approved product is not available, a diluted bleach solution may be used for hard, non-porous surfaces:
    - Mix five tablespoons of bleach per gallon of water.
    - After application, allow 2 minutes of contact time before wiping, or allow to air dry (without wiping).
    - Do not mix bleach or other cleaning and disinfection products together--this can cause fumes that may be very dangerous to inhale.
    - Ensure adequate ventilation.
    - Use water at room temperature for dilution (unless stated otherwise on the label).
- Label diluted cleaning solutions.
  - For soft (porous) surfaces such as carpeted floors and rugs: Soft and porous materials are more difficult to disinfect than hard and non-porous surfaces. Follow the manufacturer’s instructions or use a cleaning product specifically intended for that item.
  - For electronics, remove visible contamination if present, and follow manufacturer’s instructions. If the instructions are not available, use alcohol-based wipes or sprays containing at least 70% alcohol to disinfect touch screens. Dry surfaces thoroughly to avoid pooling of liquids.
- Follow the manufacturer’s instructions for safe and effective use of all cleaning and disinfection products (e.g., dilution concentration, application method and contact time, required ventilation, and use of PPE). Review SDS for potential health hazards and the recommended protective measures for common active disinfectant agents.

### Enhanced Cleaning

This protocol is for cleaning and disinfection of areas after receiving notification that a confirmed COVID-19 employee, visitor or tenant accessed a DCAS building. After notification of a person with suspected or confirmed COVID-19, the cleaning and disinfecting protocol below must be followed. If it has been more than 7 days since the person with confirmed COVID-19 visited or used the facility, additional cleaning and disinfection is not necessary.

- Close off all areas used by the person who is sick.
- Wait 24 hours before cleaning and disinfecting affected spaces. If 24 hours is not feasible, wait as long as possible.
- Buildings and/or specific rooms and areas where a COVID-19 positive person spent time will be assessed on a case-by-case basis. The cleaning scope will be implemented based on the risk of potential contamination as determined by the DCAS Safety and Health Coordinator in coordination with DCAS Facilities Management (FM).
- Before beginning disinfection. DCAS FM must consider factors such as the size of the room and the ventilation system design (including flow rate [air
changes per hour] and location of supply and exhaust vents) when deciding how long to close off rooms or areas used by confirmed COVID-19 persons.

- Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, common areas, and shared electronic equipment.
  - When cleaning and disinfecting rooms with increased surface area due to desks, tables, and other furniture, and where a spray application of disinfectant is needed, the Custodial Director will notify the building occupants in advance if the spraying will occur during normal work hours. Advanced notice allows the building occupants to be apprised of the schedule for disinfection of the space and any areas that may require restricted access during cleaning.

- Vacuum the space if needed. Use a vacuum equipped with a high-efficiency particulate air (HEPA) filter, if available.
  - Do not vacuum a room or space that has people in it. Wait until the room or space is empty before vacuuming it.
  - Consider temporarily turning off room fans and the central HVAC system that services the room or space, so that particles that escape from vacuuming will not circulate throughout the facility.

- The DCAS Custodial Director must do the following (as applicable):
  - Draft a memorandum of understanding concerning the scope of cleaning/disinfection to DCAS custodial staff.
  - Identify the areas that require restricted access during and immediately following enhanced cleaning.
  - Communicate with the impacted Line of Service, DCAS Safety and Health Coordinator, DCAS Police and Building Tenants.
  - Coordinate with building coordinators/managers.

- The cleaning team must:
  - Follow the *Enhanced Cleaning for Prevention* guidance outlined in this document.
    - The DCAS Safety and Health Coordinator may implement additional safety measures based on a hazard assessment.
  - If possible, open windows and doors to the outside to increase air circulation.
• If possible, wait 24 hours after the ill person was present in a space prior to cleaning and disinfection.
• Wear the following required PPE during cleaning and disinfecting:
  o Chemical resistant gloves and chemical resistant suits to protect contamination of clothing.
  o Facial shields and eye protection (safety glasses or goggles) must be worn when there is a potential for splashing/spraying the disinfectant.
  o Respirator protection (such as a KN-95 mask).

• All staff must be fully trained on donning and doffing, disposal and storage of required PPE to prevent cross contamination.

  ▪ Contract Cleaning and Disinfection
    If an outside contractor is used for cleaning and disinfection, the proposed scope of work, including the products and their respective Safety Data Sheets (SDSs) and application methods, must be reviewed by the DCAS Safety and Health Coordinator prior to commencing the work.

VI.  **Point of Contact**

If you have questions or concerns about worker safety practices, please contact the DCAS Safety and Health Coordinator.

VII.  **Resources**

New York State, Reopening New York: Office-Based Work Guidelines for Employers and Employees

Centers for Disease Control and Prevention (CDC) Reopening Guidance for Cleaning and Disinfecting
CDC Cleaning and Disinfection Decision Tool

United States Environmental Protection Agency (EPA) Six Steps for Safe and Effective Disinfectant Use
https://www.epa.gov/pesticide-registration/six-steps-safe-effective-disinfectant-use

New York City Department of Health and Mental Hygiene, COVID-19: General Guidance for Cleaning and Disinfection for Non-Health Care Settings

List N: Disinfectants for Use Against SARS-CoV-2 (COVIS-19)
https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19