

ommunity association residents everywhere have been eager to get back to their routines after more than a year of social distancing, working from home, and otherwise limiting contact with anyone other than their immediate family members during the COVID-19 pandemic. As vaccinations continue, states and municipalities reopen a variety of public services and businesses, and as the onset of warmer weather entices people to parks, beaches, golf courses, and pools, community associations are confronted again with how and whether to safely operate common areas and recreational facilities.

Based on information developed by the Centers for Disease Control and Prevention*, Community Associations Institute has prepared this document to help community association board members, managers, and business partners determine how to safely and effectively operate in a world forever changed by COVID-19.

"As they have done throughout this crisis, we expect that association leaders will continue to operate their communities with compassion, flexibility, and understanding," says Thomas M. Skiba, CAE, CAI's chief executive officer. "Going forward, CAI will continue to provide updates about resources and guidance through transition to normal community operations to safeguard business continuity—and most important—healthy communities."

The recommendations below cover:

- Guiding principles and best practices
- What to do when a resident has COVID
- Communicating regularly and appropriately
- Protecting common areas
- Preventing the spread in pools, hot tubs, and water playgrounds
- Protecting pets
- Maintaining safe business operations
- Understanding water safety

To access the most up-to-date information on COVID-19 CDC guidelines, visit www.cdc.gov/coronavirus.

*The information from this document has been adapted from guidance published by the Centers for Disease Control and Prevention. The most relevant materials from CDC's vast resources have been selected and edited with community associations, management companies, and business partners in mind. CDC is continually updating its guidance. The information included below is relevant as of March 2021.



Community associations, particularly those where residents and staff live and work in close quarters, pose a challenge during the COVID-19 pandemic due to potential for increased risk of exposure. The following guidance is provided to help community association board members and managers work together with residents, staff, and public health officials to create a safe living environment and prevent the spread of COVID-19.

COMMUNAL SPACES, COMMUNITY ACTIVITIES, AND CLOSE LIVING QUARTERS IN COMMUNITY ASSOCIATIONS INCREASE THE RISK OF GETTING AND SPREADING THE VIRUS

COVID-19 is mostly spread person-to-person through respiratory droplets released when people cough, sneeze, or talk. Less commonly, COVID-19 also may be acquired when someone touches a surface or object that has the virus on it and then touches their nose, mouth, or eyes. COVID-19 may be spread by people who are not showing symptoms. Therefore, personal prevention practices such as social distancing, using masks, frequent handwashing with soap and water or hand sanitizing when handwashing with soap and water is not possible, cough etiquette, and staying home when sick, are important to reduce COVID-19. Other environmental prevention practices, such as environmental cleaning and disinfection, also are important. Community associations can take clear-cut actions to help lower the risk of COVID-19 exposure and spread in their communities and at their facilities.

DEVELOP A PLAN

- During an infectious disease outbreak, such as the current outbreak of COVID-19, community association leaders should prepare to identify residents at increased risk of severe COVID-19 illness, collaborate with their local health departments, and protect their employees' health and safety.
- See CDC's guidance for preparing businesses and employees for the effects of COVID-19.
- Consider the unique needs of your residents, such as disabilities, cognitive decline, or lack of access to technology.
- State and local public health departments can provide specific information on COVID-19 transmission and policies in your community, which can help you decide when and if you need to scale up or relax specific prevention measures.

SELF-ISOLATE OR QUARANTINE WHEN APPROPRIATE

- Educate residents on when they should stay home or self-isolate in their living quarters (e.g. during mandatory shelter-in-place orders, after possible exposure to COVID-19, or if showing symptoms of COVID-19).
 - Actively encourage those who have symptoms of COVID-19 or who are otherwise sick to stay home or in their living quarters unless seeking medical care.
 - Encourage adherence to recommendations for animals, including pets or service animals present in the household or facility.
 - Consider circumstances in which social distancing and self-isolating may be difficult for many people with disabilities.

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Guiding Principles and Best Practices, cont'd.

- Anyone who has had close contact with a person with COVID-19 should stay home and monitor for symptoms for 14 days.
- In the best way to protect yourself and others is to stay home for 14 days if you think you've been exposed to someone who has COVID-19. Check your local health department's website for information about options in your area to possibly shorten this quarantine period.

KNOW HOW TO HANDLE RESIDENT TURNOVER AND MOVE-INS

- Ask residents to follow CDC's guidance on cleaning and disinfecting a home.
- High-touch surfaces where move-ins and move-outs occur should be cleaned and disinfected.
- Wait at least 24 hours after previous residents leave before cleaning and disinfecting in preparation for new residents moving in. If 24 hours is not feasible, wait as long as possible.
- Frequently clean and disinfect high-touch surfaces, such as doorknobs, light switches, and faucets, during the moving
- Limit the number of family members present during the move-in/out process.
- Maintain social distancing between household members and movers and other residents.
- Request the proper use of masks.
- Provide handwashing materials—ideally soap, water, and a way to dry hands if water is on in the unit, or hand sanitizer with at least 60% alcohol—and encourage frequent hand hygiene.
- Keep windows and doors open, if possible, to increase ventilation.



If a resident in your community has COVID-19 (suspected or confirmed):

- Have the resident contact a healthcare provider to determine whether medical evaluation is needed.
- Residents are not required to notify the community if they think they may have or have a confirmed case of COVID-19.
- If you do receive information that someone in your community has COVID-19, work with the local health department to notify anyone in the unit who may have been exposed (had close contact with the sick person) while maintaining the confidentiality of the sick person as required by the Americans with Disabilities Act (ADA) and, if applicable, the Fair Housing Act, and the Health Insurance Portability and Accountability Act (HIPAA).
- Provide the sick person with information on how to care for themselves and when to seek medical attention.
- Help address misunderstandings about why people are being asked for personal information and why this information is important for stopping the spread of COVID-19 among family, friends, and communities.
- Encourage residents with COVID-19 symptoms to self-isolate and their roommates and close contacts to quarantine. This includes limiting contact of residents with COVID-19 symptoms with any pets or service animals in the household or facility to protect them from possible infection.
- Those with COVID-19 symptoms and their close contacts should limit their use of shared spaces as much as possible:
 - Follow guidance on when to stop isolation and when to end quarantine.
 - The best way to protect yourself and others is to stay home for 14 days if you think you've been exposed to someone who has COVID-19. Check your local health department's website for information about options in your area to possibly shorten this quarantine period.
- Minimize the number of staff members who have face-to-face interactions with residents who have suspected or confirmed COVID-19.
- Encourage staff, other residents, caregivers such as outreach workers, and others who visit people with COVID-19 symptoms to follow recommended precautions to prevent the spread of the virus that causes COVID-19.
- Staff at higher risk of severe illness from COVID-19 should not have close contact with residents who have suspected or confirmed COVID-19, if possible.
- Industrial Those who have been in close contact (less than 6 feet or 2 meters) with a resident for a total of 15 minutes or more who has confirmed or suspected COVID-19 should monitor their health and call their healthcare provider if they develop symptoms suggestive of COVID-19.
- Be prepared to provide accessible transportation to people with suspected or confirmed COVID-19 for testing or nonurgent medical care.
- Avoid transporting people with suspected or confirmed COVID-19 using public transportation, ridesharing, or taxis unless it is the only accessible option. Follow guidelines for cleaning and disinfecting any transport vehicles.
- If multiple cases are suspected, contact the local public health department to report the cases and to offer to an accessible community testing site, provide a platform for information-sharing, or share community insights.

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Prepare for when a resident gets sick, cont'd.

CLEAN AND DISINFECT

- Close off areas used by someone that has or may have COVID-19 and do not use these areas until after cleaning and disinfecting.
- Wait at least 24 hours before cleaning and disinfecting.
- If 24 hours is not feasible, wait as long as possible.
- Provide staff with training about the safe and correct use and storage of cleaning and disinfection products, including storing products securely away from children and pets.

WATCH FOR SYMPTOMS IN RESIDENTS AND THEIR FAMILY MEMBERS

People with COVID-19 have reported a wide range of symptoms, from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatique
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms. CDC will continue to update this list as we learn more about COVID-19.



Provide timely updates on closings and reopenings and promote safe behaviors.

DISPLAY RELEVANT SIGNS AND MESSAGES

- Post signs in highly visible locations (e.g., building entrances, stairways, elevators) that promote everyday protective measures and describe how to stop the spread of germs (such as social distancing, by properly washing hands, proper cough etiquette, and properly wearing a mask).
- Include messages (such as videos and posters) about behaviors that prevent the spread of COVID-19 when communicating with residents, workers, volunteers, and visitors (such as on websites, in emails, in newsletters, and on social media accounts).
 - Find free CDC print and digital resources on CDC's communications resources main page.
 - Identify and address potential language, cultural, and environmental barriers associated with communicating COVID-19 information. Consider developing communication materials in alternative formats (e.g., large print, braille, ASL) for people who have low vision or are blind or people who are deaf or hard of hearing.
 - · Consider developing communication materials for people with low literacy and using plain or easy to understand language or visuals.
 - Communications may need to be framed or adapted so they are culturally appropriate for your audience and easy to understand. CDC has communication resources available in many languages.

FINE TUNE YOUR COMMUNICATION SYSTEMS

Identify platforms such as email, websites, hotlines, automated text messaging, newsletters, and flyers to help communicate information on:

- Guidance and directives from state and local officials and state and local health departments.
- How your community is helping to prevent the spread of COVID-19.
- How additional information will be shared and where to direct questions.
- I How to stay healthy, including videos, fact sheets, and posters with information on COVID-19 symptoms and how to stop the spread of germs, how to wash your hands, and what to do if you are sick.
- I How residents can receive services such as food delivery if they are at higher risk for severe illness.
- How staff and residents can cope and manage stress and protect others from stigma and discrimination.

Community association leaders should regularly communicate the status of common area and amenity reopening, closing, and other changes in the community as a result of COVID-19.



The CDC created specific guidance to help owners, administrators, or operators work together with residents, staff, and public health officials to prevent the spread of COVID-19 in shared (also called "congregate") housing facilities, including apartments and condominiums. Multiple strategies are available to help encourage and maintain social distancing in common areas.

CANCEL OR POSTPONE IN-PERSON ACTIVITIES AND EVENTS

- Offer alternative methods for activities and social interaction, such as online meetings
- If you must convene an in-person event, make sure that social distancing can be maintained in shared rooms by arranging chairs and tables so that attendees will be at least 6 feet apart
- Adhere to local or state gathering criteria

MINIMIZE TRAFFIC IN ENCLOSED SPACES

- Designate one-directional traffic in hallways and stairwells, if possible
- Limit elevator use to one person or family at a time

ENCOURAGE MASK WEARING

- Encourage use of CDC-recommended masks among residents, workers, and visitors in common areas and in public.
- Advise residents to avoid others who are not wearing masks or to ask others around them to wear masks.
- Some residents may not be able to wear masks or are recommended not to wear masks:
 - Wearing masks may be difficult for people with sensory, cognitive, or behavioral issues.
 - Masks should not be worn by children under age 2 or anyone who has trouble breathing, is unconscious, or is incapacitated or otherwise unable to remove the mask without assistance.
- Adaptations and alternatives should be considered whenever possible to increase the feasibility of wearing a mask or to reduce the risk of COVID-19 spreading if it is not possible to wear one.

ENCOURAGE SOCIAL DISTANCING

- In general, interacting with more people, especially closely and for longer times, increases risk of getting and spreading COVID-19.
- Avoid gatherings of 10 or more people.
- Encourage social distancing by asking workers and residents who are not from the same household and visitors to stay at least 6 feet apart whenever possible.
 - Social distancing may be difficult for many people with disabilities.
- Avoid close contact with visitors. For example, don't shake hands, elbow bump, or hug. Instead consider waving and verbal greetings.

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Protecting Common Areas, cont'd.

PROVIDE SOAP, HAND SANITIZERS, DISINFECTANT WIPES, CLEANING SUPPLIES, TISSUES, TRASH RECEPTACLES, ETC.

ENSURE ADEQUATE VENTILATION AND AIR FLOW IN SHARED ROOMS

Work with maintenance staff or HVAC experts to determine if the ventilation system can be modified to increase ventilation rates or the percentage of outdoor air that circulates into the system

PROMOTE CLEANING AND DISINFECTION

- Clean and disinfect frequently touched surfaces (e.g., door handles, handicap door access switches, sink handles, grab bars, hand railings,) within common areas of facilities at least daily or between use as much as possible.
 - Advise residents with sensory or respiratory issues to avoid these areas during and immediately after cleaning.
- Limit use of shared objects in common areas (e.g., computer equipment, remote controls, print materials) when possible, and clean and disinfect shared objects between use.
- Develop a schedule for increased, routine cleaning and disinfection.
- Provide staff with training about the safe and correct use and storage of cleaners and disinfectants.
- Encourage residents, workers, volunteers, and visitors to keep personal items (e.g., cellphones, other electronics), and personal work and living spaces clean.
 - Offer assistance with cleaning and disinfecting for residents with disabilities who may require supervision
- Encourage residents, workers, volunteers, and visitors to use disinfectant wipes to wipe down objects and surfaces before and after use.

IMPLEMENT EXTRA PRECAUTIONS IN LAUNDRY ROOMS, ACTIVITY ROOMS AND EXERCISE FACILITIES, PLAYGROUNDS, POOLS AND HOT TUBS, AND BEACHES

LAUNDRY ROOMS

- Maintain access and adequate supplies
- Limit the number of people allowed at one time so that everyone can stay at least 6 feet apart
- Require face masks and disposable gloves
- Provide soap for washing hands and household cleaners or EPA-registered disinfectants for cleaning and disinfecting buttons, knobs, and handles of laundry machines, laundry baskets, and shared laundry items
- Post guidelines for doing laundry, such as washing instructions and handling of dirty laundry

ACTIVITY ROOMS AND EXERCISE FACILITIES

- Consider closing or limiting access
- Limit the number of people allowed at one time so that everyone can stay at least 6 feet apart If these areas remain open
- Require disposable gloves and face masks
- Provide soap for washing hands and household cleaners or EPA-registered disinfectants for cleaning and disinfecting light switches, knobs, and handles
- Post guidelines for exercise and other equipment

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Protecting Common Areas, cont'd.

PLAYGROUNDS

- Consider keeping closed or preventing access to certain elements that are difficult to clean and disinfect
- Limit the number of people allowed at one time so that everyone can stay at least 6 feet apart
- Limit playground use to residents
- Avoid group events
- Stagger use
- Clean and disinfect high-touch surfaces between use or at least daily
- Encourage all parents and children to wash their hands often, and cover their coughs and sneezes
- Ask parents to bring and use their own disinfectant supplies when they're done playing
- Ask parents to consider if their children are capable of staying at least 6 feet apart from others
- Encourage the use of face masks for children over the age of 2
- Maintain restrooms that remain open and ensure they have functional toilets, clean and disinfected surfaces, and handwashing supplies
- Educate parents and children to stay home if they have symptoms of COVID-19, have tested positive for COVID-19, or were exposed to someone with COVID-19 within the past 14 days and when they can safely end their home isolation
- Post information to promote everyday preventive actions

POOLS AND HOT TUBS (see expanded section on pages 11–12)

- Consider closing pools and hot tubs or limiting access to essential activities only, such as water therapy
- Limit aquatic venue use to only staff and residents
- Properly operate, maintain, and disinfect (with chlorine or bromine) pools and hot tubs
- Limit the number of people allowed in locker rooms at one time so that everyone can stay at least 6 feet apart
- Clean and disinfect surfaces, such as locker handles, light switches, knobs, countertops, benches, etc., daily if not more often
- Ensure that lifeguards who are actively lifeguarding are not also expected to monitor handwashing, use of face masks, or social distancing; assign a staff member as a monitor instead
- Consult the company or engineer that designed the aquatic venue before altering aquatic features such as slides and structures designed for climbing or playing
- Familiarize yourself with local or state policies on gathering requirements or recommendations to determine if events, such as aquatic fitness classes, swim lessons, swim team practice, swim meets, or pool parties, can be held
- Stagger or rotate shifts to limit the number of staff present at the aquatic venue at the same time
- Designate a staff member to be your facility's point person for responding to COVID-19 concerns

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Protecting Common Areas, cont'd.

- Avoid group events, gatherings, or meetings both in and out of the water. Exceptions to social distancing guidance include:
 - Anyone rescuing a distressed swimmer, providing first aid, or performing cardiopulmonary resuscitation, with or without an automated external defibrillator
 - Individuals in the process of evacuating an aquatic venue or entire facility due to an emergency
 - If planned events must be conducted, stagger drop-off and pick-up times as much as possible to maintain distance of at least 6 feet between people
 - · Ask parents to consider if their children are capable of staying at least 6 feet apart from others
- Put systems in place so that staff, patrons, and swimmers can report if they have symptoms of COVID-19, a positive test for COVID-19, or were exposed to someone with COVID-19 within the past 14 days
- Notify local health authorities of any suspected or known COVID-19 cases
- Notify staff, patrons, and swimmers (as feasible) of potential COVID-19 exposures while maintaining confidentiality in accordance with the Americans with Disabilities Act (ADA)
- Notify staff, patrons, and swimmers of aquatic venue closures

BEACHES OR OTHER SWIMMING AREAS

- Follow state and local authority guidance on public beaches and swimming areas near your community
- Consider adopting the same rules as public beaches and swimming areas if your community has a private waterfront
- Limit use to residents
- Ask residents to stay at least 6 feet apart from others
- Avoid group events, gatherings, or meetings both in and out of water
- Clean and disinfect high-touch surfaces at least daily
- Require face masks in enclosed areas or in places where 6 feet of distancing cannot be maintained. They should not be worn in the water.
- Maintain restrooms that remain open and ensure they have functional toilets, clean and disinfected surfaces, and handwashing supplies
- Encourage all residents to wash their hands often, and cover their coughs and sneezes
- Limit the number of people allowed in locker rooms at one time so that everyone can stay at least 6 feet apart
- Ensure that lifeguards who are actively lifeguarding are not also expected to monitor handwashing, use of face masks, or social distancing; assign a staff member as a monitor instead
- Educate staff, patrons, and swimmers to stay home if they have tested positive for COVID-19, or were exposed to someone with COVID-19 within the past 14 days and when they can safely end their home isolation
- Post information to promote everyday preventive actions

The CDC has additional guidance on protecting yourself and others while visiting parks and recreational facilities.

Preventing the Spread in Pools, Hot Tubs, and Water Playgrounds



As public aquatic venues open in some areas, CDC recommends the following for the safety of those who operate, manage, and use public pools, hot tubs, and water playgrounds. While community association pools may not be deemed public, these guidelines offer valuable resources for consideration. CDC is not aware of any scientific reports of the virus that causes COVID-19 spreading to people through the water in pools, hot tubs, water playgrounds, or other treated aquatic venues.

- Encourage staff, patrons, and swimmers to wash their hands often, and cover their coughs and sneezes
- Encourage the use of face masks as feasible. Face coverings are most essential in times when physical distancing is difficult. They should not be worn in the water.
- Educate staff, patrons, and swimmers to stay home if they have symptoms of COVID-19, have tested positive for COVID-19, or were exposed to someone with COVID-19 within the past 14 days and when they can safely end their home isolation.
- Provide supplies like hand soap, hand sanitizer with at least 60% alcohol, paper towels, tissues, and no-touch trash cans
- Communicate regularly to staff and pool patrons about safe behaviors:
 - Post signs in highly visible locations on how to stop the spread of COVID-19 by properly washing hands and using everyday protective measures like face masks
 - Include messages about behaviors that prevent the spread of COVID-19 in contracts with individual patrons or households in emails, on facility websites, and through social media accounts
- Clean and disinfect frequently touched surfaces at least daily and shared objects each time they are used, including: handrails, slides, and structures for climbing or playing; lounge chairs, tabletops, pool noodles, and kickboards; and door handles and surfaces of restrooms, handwashing stations, diaper-changing stations, and showers
- Consult with the company or engineer that designed the aquatic venue to decide which disinfectants are best for your aquatic venue:
 - Devise a system so that furniture, like lounge chairs and tables, that need to be cleaned and disinfected are kept separate from already cleaned and disinfected furniture. Alternatively, encourage owners to bring their own chairs.
 - Label containers for used equipment that has not yet been cleaned and disinfected and containers for cleaned and disinfected equipment.
- Launder towels and clothing according to the manufacturer's instructions. Use the warmest appropriate water temperature and dry items completely
- Ensure safe and correct use and storage of disinfectants, including storing products securely away from children.
- Ensure proper operation of indoor ventilation systems:
 - Increase introduction and circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. However, do not open windows and doors if doing so poses a safety risk to staff, patrons, or swimmers.

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Preventing the Spread in Pools, Hot Tubs, and Water Playgrounds, cont'd.

- Take steps to ensure that all water systems (for example, drinking fountains, decorative fountains, hot tubs) are safe to use after a prolonged facility shutdown to minimize the risk of **Legionnaires' disease** and other diseases associated with water.
- Change deck layouts so that individuals in the standing and seating areas can remain at least 6 feet apart from others
- Provide physical cues (for example, lane lines in the water or chairs and tables on the deck) and visual cues (for example, tape on the decks, floors, or sidewalks) and signs so that staff and patrons stay at least 6 feet apart
- Stagger the use of communal spaces, such as in the pool or breakroom, if possible
- Discourage people from sharing items that are difficult to clean, sanitize, or disinfect or that are meant to come in contact with the face (for example, goggles, nose clips, and snorkels)
- Discourage sharing of items such as food, equipment, toys, and supplies with those they don't live with
- Ensure there is adequate equipment for patrons and swimmers, such as kick boards and pool noodles, to minimize sharing to the extent possible, or limit the use of equipment by one group of users at a time, and clean and disinfect between use

All decisions about implementing these considerations should be made in collaboration with local health officials. Operators of public aquatic venues can consult with local officials to determine if and how to implement these considerations while adjusting them to meet the unique needs and circumstances of the local jurisdiction. Their implementation also should be informed by what is feasible, practical, and acceptable.



Pets, including comfort and assistance animals, are important members of many households. Until the CDC learns more about how this virus affects animals, individuals should treat pets as they would other human family members to protect them from a possible infection. Managers and boards can share the following information regarding pets with residents.

In the U.S., there is no evidence that animals are playing a significant role in the spread of COVID-19. Based on the limited information available to date, the risk of animals spreading COVID-19 to people is considered to be low. However, because all animals can carry germs that can make people sick, it's always a good idea to practice healthy habits around pets and other animals.

- Wash your hands after handling animals, their food, waste, or supplies
- Practice good pet hygiene, and clean up after pets properly
- Talk to your veterinarian if you have questions about your pet's health
- Be aware that children 5 years and younger, people with weakened immune systems, and people 65 years and older are more likely to get sick from germs some animals can carry
- Don't let pets interact with people or other animals outside your household
- Keep cats indoors when possible to prevent them from interacting with other animals or people
- Walk dogs on a leash, maintaining at least 6 feet from other people and animals
- Avoid dog parks or public places where a large number of people and dogs gather

There are a small number of animals around the world reported to be infected with the virus that causes COVID-19, mostly after having contact with a person who has the virus. Talk to your veterinarian if your pet gets sick or if you have any concerns about your pet's health.

If you are sick with COVID-19 (either suspected or confirmed by a test), restrict contact with your pets and other animals, just like you would with people.

- When possible, have another member of your household care for your pets while you are sick
- Avoid contact with your pet, including petting, snuggling, being kissed or licked, and sharing food or bedding
- If you must care for your pet or be around animals while you are sick, wear a face mask and wash your hands before and after you interact with them

If you are sick with COVID-19 and your pet becomes sick, do not take your pet to the veterinary clinic yourself. Call your veterinarian and let them know you have been sick with COVID-19. Some veterinarians may offer telemedicine consultations or other plans for seeing sick pets. Your veterinarian can evaluate your pet and determine the next steps for your pet's treatment and care.

For more information, visit CDC's COVID-19 and Animals, and Healthy Pets, Healthy People website.



To maintain safe operations, community associations, management companies, and business partners should review CDC guidance regularly and consider the following:

DEVELOP FLEXIBLE POLICIES

- Implement sick leave (time off) policies and practices that are flexible and nonpunitive
- Develop return-to-work policies aligned with CDC's criteria to discontinue home isolation
- Offer options, such as telework or modified job responsibilities, that reduce the risk of infections to vulnerable staff, i.e., anyone who has a pre-existing or chronic medical condition
- Develop a backup staffing plan

TRAIN AND EDUCATE

- Learn to recognize signs and symptoms of infection
- Communicate safety protocols
- Conduct daily staff health checks (for example, temperature screening or symptom checking). Ensure safe and respectful implementation that is aligned with any applicable privacy laws and regulations. Consider using examples of screening methods in CDC's General Business FAQs as a guide.
- Conduct virtual training or ensure that social distancing is maintained during in-person training
- Identify a list of health facilities where staff with COVID-19 can receive treatment

PROTECT

- Encourage social distancing between staff and residents, i.e., 6 feet apart
- Supply staff with face masks and gloves, and encourage their use when appropriate
- Use physical barriers at desks where staff regularly interact with residents
- Follow guidance and directives on community gatherings from state and local authorities
- Limit the presence of nonessential volunteers and visitors in shared areas
- Provide soap, hand sanitizers, disinfectant wipes, cleaning supplies, tissues, trash receptacles, etc.
- Limit the number of times staff enters a resident's living quarters
- Clean and disinfect shared areas such as restrooms, exercise rooms, laundry facilities, elevators, pools, and playgrounds
- Monitor use of face masks and social distancing, if required in your community
- Identify services and activities that could be limited or temporarily discontinued



Many people have serious concerns about the effect of COVID-19 on drinking water, treated recreational water, and wastewater. These FAQs can help.

CAN THE VIRUS THAT CAUSES COVID-19 SPREAD THROUGH DRINKING WATER?

It has not been detected in drinking water. Conventional water treatment methods that use filtration and disinfection, such as those in most municipal drinking water systems, should remove or inactivate the virus that causes COVID-19.

CAN THE VIRUS THAT CAUSES COVID-19 SPREAD THROUGH POOLS, HOT TUBS, SPAS, AND **WATER PLAY AREAS?**

There is no evidence that it does. Proper operation and maintenance (including disinfection with chlorine and bromine) of these facilities should inactivate the virus in the water.

While there is ongoing community spread of COVID-19, it is important for individuals as well as owners and operators of these facilities to take steps to ensure health and safety:

- Everyone should follow local and state guidance that may determine when and how facilities may operate.
- Individuals should continue to protect themselves and others at recreational water venues both in and out of the water, for example, by practicing social distancing and good hand hygiene.
- In addition to ensuring water safety and quality, owners and operators of community pools, hot tubs, spas, and water play areas should follow the interim guidance for businesses and employers for cleaning and disinfecting their community facilities.

CAN THE COVID-19 VIRUS SPREAD THROUGH SEWAGE SYSTEMS?

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The virus that causes COVID-19 has been found in untreated wastewater. Researchers do not know whether this virus can cause disease if a person is exposed to untreated wastewater or sewage systems. There is no evidence to date that this has occurred.

Researchers have analyzed the available information that suggests that standard municipal and individual septic system wastewater treatment practices should inactivate the virus that causes COVID-19.

IF MY UTILITY HAS ISSUED A "BOIL WATER ADVISORY," CAN I STILL USE TAP WATER TO WASH MY HANDS?

In most cases, it is safe to wash your hands with soap and tap water during a "boil water advisory." Follow the guidance from your local public health officials. If soap and water are not available, use an alcohol-based hand sanitizer containing at least 60% alcohol.

CAI has compiled extensive resources related to local, state, and federal government actions related to community associations and COVID-19. In addition, CAI has developed guidance, sample forms and documents, and FAQs on the COVID-19 outbreak. Bookmark these pages and return regularly for updates and additional resources.