

Reopening Dining: Are we there yet?

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Learning Objectives

- Discuss current CMS guidance on communal dining
- Identify conditions and steps to gradually open dining service
- Discuss best practices used in various dining settings



CMS Memos



1. QSO-20-14-NH, 3/13/20

- Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in Nursing Homes

2. QSO-20-30-NH, 5/18/20

- Nursing Home Reopening Recommendations for State and Local Officials

3. June 2020

- FAQ on Outdoor visits, compassionate care situations and communal activities

4. QSO-20-39-NH 9/17/20

- Nursing Home Visitation - COVID-19
- FAQ – October 2020



<https://www.cms.gov/files/document/qso-20-30-nh.pdf-0>

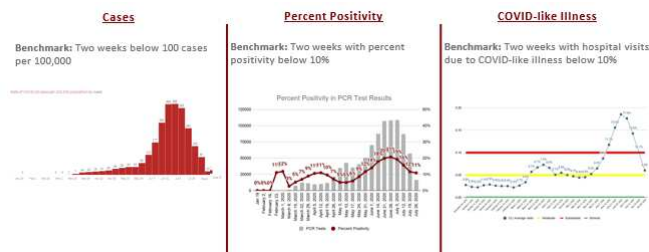
<https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfo/policy-and-memos-states-and/nursing-home-visitation-covid-19>

<https://www.cms.gov/files/document/covid-visitation-nursing-home-residents.pdf>



Key Components to Reopening Dining

- Level of spread
- CMS Core Principles



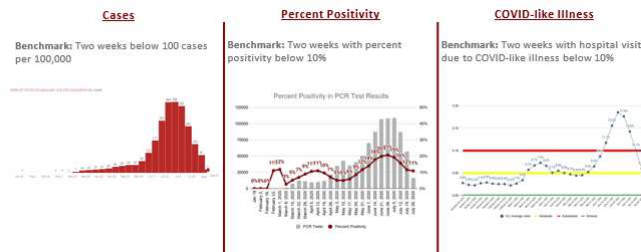
<https://www.azdhs.gov/preparedness/epidemiology-disease-control/infectious-disease-epidemiology/covid-19/dashboards/index.php>



Key Components to Reopening Dining

– Level of Spread

- Each state collaborates with the state survey agency, and state and local health departments to decide on criteria
- Facility COVID-19 status



<https://www.cms.gov/files/document/qso-20-30-nh.pdf-0>

<https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg>



NJ Executive Directive No. 20-026

The phased-in reopening is based on the outbreak status of a facility, its ability to meet criteria, including, but not limited to, testing of staff and residents, infection control protocols, and adequate staffing and Personal Protective Equipment (PPE), and is tied to the timing of the state's reopening plan.

<https://covid19.nj.gov/faqs/nj-information/reopening-guidance-and-restrictions/can-i-visit-a-nursing-home-or-long-term-care-facility-how-are-these-facilities-reopening-what-safety-precautions-must-they-take>



https://www.state.nj.us/health/legal/covid19/8-20_ExecutiveDirectiveNo20-026_LTCResumption_of_Svcs.pdf



NJ Road back to recovery phases

- Phase 0
- Phase 1
- Phase 2
- Phase 3

The provisions for LTCFs reopening are subject to the State of New Jersey remaining out of the "maximum restrictions Stage" described in *The Road Back: Restoring Economic Health through Public Health*

(http://d31hzhk6di2h5.cloudfront.net/20200518/ff/c9/8c/41/1917eaf623c02595b9225209/Strategic_Restart_Plan.jpg) reopening plan. If at any point during the public health response the state returns to the "maximum restrictions Stage," **all facilities** covered by this Directive must return to the maximum restrictions of Phase zero (0), as described herein.

Phases per this Directive:

Phase 0: Any facility with an active outbreak of COVID-19, as defined by the Communicable Disease Service (CDS), per the COVID-19 Communicable Disease Manual Chapter, any facility that cannot attest to criteria to advance phases, and all facilities if New Jersey is in maximum restrictions per the *Road Back to Recovery*:

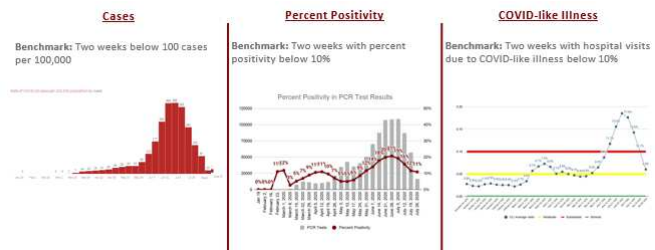
<https://covid19.nj.gov/faqs/nj-information/reopening-guidance/when-and-how-is-new->

<https://www.nj.gov/education/reopening/>



Key Components to Reopening Dining – Level of Spread

- Case status in community
- Case status in nursing home
- Adequate staffing
- Access to adequate testing
- Universal source control
- Access to PPE
- Local hospital capacity



<https://www.cms.gov/files/document/qso-20-30-nh.pdf-0>



Key Components to Reopening Dining – Core Principles

- Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions or observations about signs or symptoms), and denial of entry of those with signs or symptoms
- Hand hygiene (use of alcohol-based hand rub is preferred)
- Face covering or mask (covering mouth and nose)
- Social distancing at least six feet between persons
- Instructional signage throughout the facility and proper visitor education on COVID-19 signs and symptoms, infection control precautions, other applicable facility practices (e.g., use of face covering or mask, specified entries, exits and routes to designated areas, hand hygiene)



<https://www.cms.gov/files/document/qso-20-39-nh.pdf>



Core Principles (continued)

- Cleaning and disinfecting high frequency touched surfaces in the facility often, and designated visitation areas after each visit
- Appropriate staff use of personal protective equipment (PPE)
- Effective cohorting of residents (e.g., separate areas dedicated COVID-19 care)
- Resident and staff testing conducted as required at 42 CFR 483.80(h) (see QSO-20-38-NH)



<https://www.cms.gov/files/document/qso-20-39-nh.pdf>



Communal Dining

While adhering to the core principles of COVID-19 infection prevention, communal activities and dining may occur. Residents may eat in the same room with social distancing (e.g., limited number of people at each table and with at least six feet between each person). Facilities should consider additional limitations based on status of COVID-19 infections in the facility.



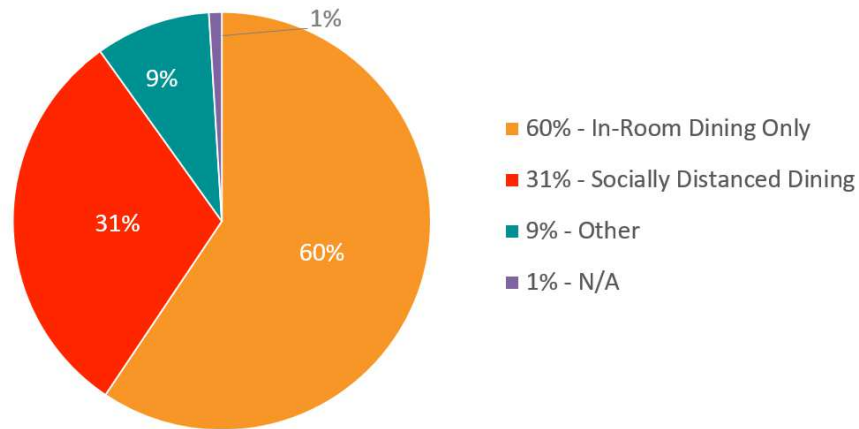
<https://www.cms.gov/files/document/qso-20-39-nh.pdf>



Reopening Dining: Are we there yet?



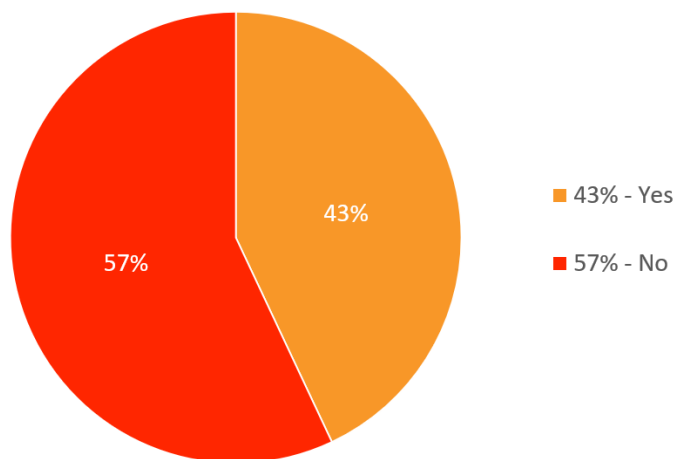
What are your current dining practices?



© 2020 ANFP

<https://www.anfponline.org/news-resources/covid-19-resources#COVID-19Survey>

Do you anticipate your facility will move to less restricted dining patterns in the next 60 days?



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<https://www.anfponline.org/news-resources/covid-19-resources#COVID-19Survey>

QUICK POLL

What are your current dining practices?



- a. In Room dining only
- b. Limited dining for specific groups of residents (i.e., assisted, dementia, dysphagia)
- c. Dining room open to all residents
- d. Other

QUICK POLL

What is keeping you from opening communal dining?



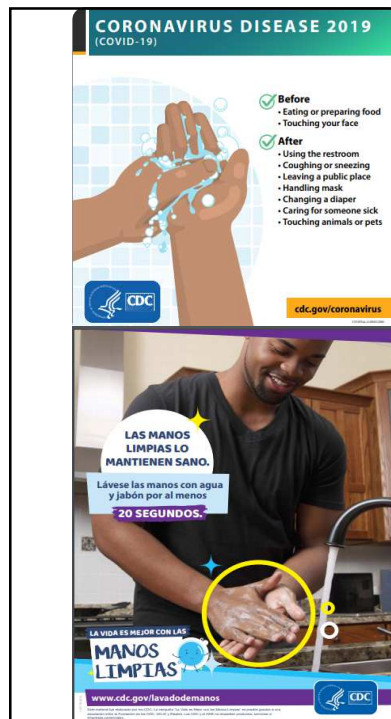
- a. Level of spread too high
- b. Staffing challenges
- c. PPE shortage
- d. Awaiting 2nd vaccine shot
- e. Other

Key Components to Reopening Dining – Core Principles

- Hand hygiene (use of alcohol-based hand rub is preferred)
- Face covering or mask (covering mouth and nose)
- Social distancing at least six feet between persons
- Cleaning and disinfecting high frequency touched surfaces in the facility often, and designated visitation areas after each visit
- Appropriate staff use of personal protective equipment (PPE)
- Effective cohorting of residents (e.g., separate areas dedicated COVID-19 care)



<https://www.cms.gov/files/document/qso-20-39-nh.pdf>



Hand Hygiene

- Hand washing
- Alcohol based hand sanitizer
- ABHS upon entering the dining room and at strategic locations



<https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc>



DO choose masks that

- Have two or more layers of washable, breathable fabric
- Completely cover your nose and mouth
- Fit snugly against the sides of your face and don't have gaps

Caution: Gaiters & Face Shields

- Evaluation is on-going but effectiveness is unknown at this time
- Evaluation is on-going but effectiveness is unknown at this time

Special Situations: Glasses

- If you wear glasses, find a mask that fits closely over your nose or one that has a nose wire to limit fogging

DO NOT choose masks that


- Are made of fabric that makes it hard to breathe, for example, vinyl
- Have exhalation valves or vents, which allow virus particles to escape
- Are intended for healthcare workers, including N95 respirators or surgical masks

Special Situations: Children

- If you are able, find a mask that is made for children
- If you can't find a mask made for children, check to be sure the mask fits snugly over the nose and mouth and under the chin
- Do NOT put on children younger than 2 years old


Face Covering or Mask

- Face Covering or Mask
 - Types of masks
 - Mouth and nose





KEY TIMES to Social Distance

Inside your home when someone is sick
If possible, stay at least 6 feet away.



CDC

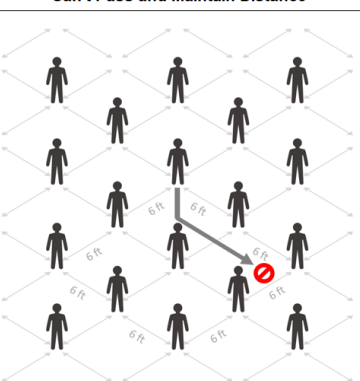
Outside your home
Stay at least 6 feet away from other people. Do not gather in groups. Stay out of crowded places and avoid mass gatherings.



cdc.gov/coronavirus


6 ft. Grid

Can't Pass and Maintain Distance




Social Distancing

- At least 6 feet social distancing
 - Between persons, between tables
 - Handy social distancing calculator
<https://www.calconic.com/calculator-widgets/social-distancing-calculator/5ef21c169444bf0029086759>



<https://covid19.colorado.gov/safer-at-home/social-distancing-calculator-for-indoor-and-outdoor-events>



Communal Dining

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<https://www.cms.gov/files/document/qso-20-39-nh.pdf>



Department of Health and Human Services LTC COVID-19 Phasing Guidance June 15, 2020

NEBRASKA
Good Life. Great Mission.

Communal Dining

- Communal dining must be limited to only COVID-19 negative or asymptomatic residents.
- Residents may eat in the same room with appropriate social distancing, spaced at least 6 feet apart or with appropriate barriers in place, such as plexiglass, with no more than 2 people at a table.
- No more than 50% of capacity in a dining area at one time.
- If staff assistance is required, appropriate hand hygiene must occur between assisting residents, as well as use of appropriate PPE.



<http://dhhs.ne.gov/licensure/Documents/LTCCOVID19PhasingGuidance.pdf>



Cleaning & Disinfecting

- Establish a disinfection routine
- Consider one staff member in charge of disinfecting
- Clean and disinfect tables, chairs and other high touch areas after each meal
- Do not disinfect while residents are in the dining room



STOP THE SPREAD OF GERMS

Help prevent the spread of respiratory diseases like COVID-19.

Clean and disinfect frequently touched objects and surfaces.



cdc.gov/coronavirus

COVID-19 May 12, 2020 10:10 PM

Facemask Do's and Don'ts

For Healthcare Personnel

When putting on a facemask

Clean your hands and put on your facemask so it fully covers your mouth and nose.



DO secure the elastic bands around your ears.



DO secure the ties at the middle of your head and the back of your head.

When wearing a facemask, don't do the following:



DON'T wear your facemask under your chin or mouth.



DON'T allow a drape to hang down. DON'T cover the straps.



DON'T allow a drape to hang down. DON'T cover the straps.



DON'T touch or adjust your facemask without cleaning your hands before and after.



DON'T wear your facemask on your head.



DON'T wear your facemask around your neck.



DON'T touch your facemask around your face.

When removing a facemask
Clean your hands and remove your facemask touching only the straps or ties.



DO lower the patient care side. Then, clean your hands with alcohol-based hand sanitizer or soap and water.



DO remove your facemask touching ONLY the straps or ties. Then, clean your hands again.



*If implementing limited reuse: Facemasks should be carefully labeled so that the outer surface is held forward and upward (not to reduce contact with the outer surface during storage). Facemasks can be stored and reused only in a clean, reachable paper bag or breathable container.



Additional information is available about how to safely put on and remove personal protective equipment, including facemasks:
<https://www.cdc.gov/coronavirus/2019-nCoV/guidance-gpe.html>

cdc.gov/coronavirus

Appropriate Staff PPE

- Mask
- other



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AHCA
AMERICAN HEALTH CARE ASSOCIATION
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NATIONAL CENTER FOR ASSISTED LIVING



I am a/an: I'm looking for:

Interim Guidance for Skilled Nursing Facilities During COVID-19

December 24, 2020

• Communal Dining Precautions

The following precautions are advised for communal dining in SNFs:

- Stagger arrival times and maintain social distancing (also known as physical distancing);
- Increase the number of meal services or offer meals in shifts to allow fewer residents in common areas at one time;
- Take appropriate precautions with eye protection and gowns for staff feeding the resident population at high-risk for choking, given the risk to cough while eating; and
- Staff members who are assisting more than one resident at the same time must perform hand hygiene with at least hand sanitizer each time when switching assistance between residents.



<https://www.health.pa.gov/topics/disease/coronavirus/Pages/Guidance/SNF-Guidance.aspx>



Cohorting in Communal Dining

- Same residents eat at the same location during meal-time
 - Same unit / hall
 - Room mates become table mates
 - Assigned seating
- Same staff serve and assist these same residents
- Set up serving and bussing schedule



Core principles in action



Phases 1 to 3 - Communal Dining

Restrict communal dining to COVID-19 negative and asymptomatic or COVID-19 recovered residents only.

- a. Residents may eat in the same room while practicing infection prevention and control precautions including social distancing measures. This includes limiting the number of people at tables and using barriers and/or maintaining separation of space by at least 6 feet, as deemed appropriate based on facility risk assessment.
- b. When feasible, seat the same small group of residents together each day, so that each resident is in contact with the same small group. There should be no mixing of residents across these groups.
- c. When feasible, staff should be assigned to specific tables in order to minimize the number of residents they interact with and remain with that group each day, whenever possible.

<https://www.nj.gov/education/reopening/>



NJ: Phases 1 to 3 Communal Dining



- d. The sharing of condiments and serving utensils is prohibited. Sanitize/clean high-touch surfaces (e.g. chairs, tables) between seating/meals. The facility should use disposable utensils and cups when possible.
- e. The facility must ensure that processes are in place to maintain infection control protocols such as preventing staff from cleaning used tableware (e.g. plates and cups) and immediately serving food without proper handwashing. When feasible disposable cups and utensils are preferred.



NJ: Phases 1 to 3 Communal Dining



- Consider the following steps:
 - refrain from removing used plates and tableware from the table until all residents have finished eating or
 - utilize specific staff to service residents and refill drinks during the meal
 - and a separate group of staff to clear the plates and tableware who are finished.



<https://www.nj.gov/education/reopening/>



Best Practices



Pre-Opening Flowchart



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Pre-Opening Flowchart



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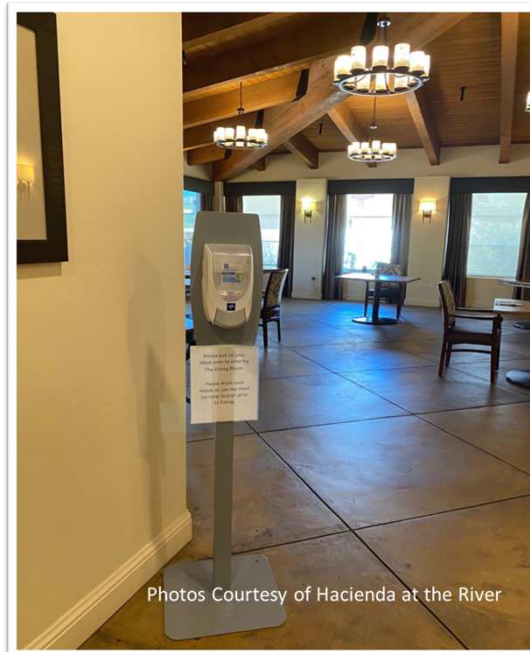
Dining Venue

- Inside versus outside
- Venue
 - Main
 - Private dining room
 - Assisted dining
 - Day room
- Signage
- 6 feet social distancing
 - # of seating
 - Physical barriers
 - Ventilation



Dining Venue: Entrance/Exit

- Separate entrance and exit
- Alcohol based hand sanitizer on entry and exit
- 6 ft spacing marked on floor
- Partitioned Hostess stand
- By reservation only
- Red carpet treatment



Photos Courtesy of Hacienda at the River



Photos Courtesy of Forum at Desert Harbor



Pre-Opening Flowchart



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Identify Eligible Residents

- No COVID-19 positive
- Not on transmission-based precautions
- Independent residents
- Assisted residents
 - Memory impaired
 - High risk of choking or aspiration
- Other high nutritional risk
- Resident choice



Pre-Opening Flowchart



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Menu

- Resident Centered
- Keep it simple and scaled back
- Menu
 - Posted
 - Disposable menus
 - Spoken
 - QR Code
 - Be creative

- Convenient cuisine
 - Consider using convenience food items that require less prep than all scratch items, if labor pool is compromised
 - Comfort foods
 - Lean labor
 - Interim staff – skill level
 - Product shortages



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Menu

- Soups - Frozen, canned
- Entrees - frozen, RTC
 - Lasagna, Mac and Cheese, stuffed shells
 - Meatloaf, Salisbury steak, Hamburger, Pot Roast, Beef Ribette
 - Southern Fried/Baked chicken, Chicken Filet/Nuggets, Chicken Fried Steak, Chicken Patty
 - Shredded Pork, BBQ Pork, Pork Chopette
 - Tuna Salad, Chicken Salad, Peeled Hard boiled eggs



- Sides - frozen, canned, dry, fresh
 - Instant mashed potato, au gratin, scalloped
 - Instant rice, pilaf, wild rice
 - Frozen vegetables
 - Salad Mixes
 - Pre-cut carrots, zucchini
 - Canned fruit
 - RTE refrigerated pre - cut fruits
 - Fresh fruit in season
 - Juices
 - BIB, RTS, RTM



Menu

- Bread and dinner rolls
 - RTE
 - Frozen bread
- Dessert
 - Sheet cakes, bars
 - RTE cookies
 - Frozen pies and cobblers
 - Ice cream & sherbet
 - Canned pudding
 - PC jello



- Snacks
 - Fun Graham crackers
 - Cheez Its, Goldfish
 - Cheese & crackers, PB crackers
 - RTE cookies
 - Protein and granola bars
 - Oreo, Lorna Doone
 - Ice cream & sherbet
 - PC jello, pudding
 - Cheese sticks






Convenient Cuisine


WEEK 1 REGULAR *		(01) Convenient Cuisine					Week-at-a-Glance	
M	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
B R E A K F A S T	JUICE HOT OR COLD CEREAL BACON SCRAMBLED EGG TOAST/JELLY MILK WHOLE COFFEE MARGARINE	JUICE HOT OR COLD CEREAL SAUSAGE PATTY FRENCH TOAST MILK WHOLE COFFEE SYRUP	JUICE HOT OR COLD CEREAL BACON SCRAMBLED EGG TOAST/JELLY MILK WHOLE COFFEE MARGARINE	JUICE HOT OR COLD CEREAL SCRAMBLED EGG SAUSAGE PATTY PANCAKES MILK WHOLE COFFEE MARGARINE SYRUP	JUICE HOT OR COLD CEREAL EGG TO ORDER HASHBROWNS TOAST/JELLY MILK WHOLE COFFEE MARGARINE	JUICE HOT OR COLD CEREAL SAUSAGE PATTY BISCUIT MILK WHOLE COFFEE JELLY	JUICE HOT OR COLD CEREAL SCRAMBLED EGG CINNAMON TOAST MILK WHOLE COFFEE MARGARINE	
N O O N	ROAST TURKEY MASHED POTATOES/GRVY SEAS GREEN BEANS ROLL/MARG STRAWBERRY SHORTCAKE MILK WHOLE BEVERAGE	CHEESE ENCHILADAS SPANISH RICE SHRED LETTUCE/TOMATO PINEAPPLE TIDBITS/CHERRY MILK WHOLE BEVERAGE	PULLED PORK MACARONI & CHEESE SEAS GREENS ROLL/MARG PEACH PIE MILK WHOLE BEVERAGE	MEATLOAF/KETCHUP SAUCE AU GRATIN POTATOES MIXED VEGETABLES CORN/BREAD/MARG VANILLA PUDDING MILK WHOLE BEVERAGE	FRIED CHICKEN MASHED POTATOES BUTTERED CARROTS ROLL/MARG SUMMER FRUIT CUP MILK WHOLE BEVERAGE	LASAGNA TOSSED SALAD/DRSG GARLIC BREAD ICE CREAM MILK WHOLE BEVERAGE	CHEESE RAVIOLI/MARINARA SCE GREEN SALAD/DRSG GARLIC BREAD STICK EMERALD PEARS MILK WHOLE BEVERAGE	
E V E N I N G	QUICHE LORRAINE GREEN SALAD/DRSG ROLL/MARG SEASONAL FRESH FRUIT MILK WHOLE BEVERAGE	PHILLY STEAK SANDWICH SWEET POTATO FRIES DELUXE COLESLAW BROWNIE MILK WHOLE BEVERAGE	VEGETABLE SOUP CHICKEN TENDERS CURLY FRIES BREAD STICK FRESH FRUIT CUP MILK WHOLE BEVERAGE	TOMATO SOUP GRILLED CHEESE SANDWICH BROCCOLI BACON SALAD APPLE COBBLER MILK WHOLE BEVERAGE	SALISBURY STEAK/GRVY PARSLEY NOODLES PEAS/PEARL ONIONS ROLL/MARG CHOCOLATE CAKE/ICING MILK WHOLE BEVERAGE	TUNA SALAD SANDWICH POTATO CHIPS CUCUMBER ONION SALAD AMBROSIA MILK WHOLE BEVERAGE	BBQ PORK RIBETTE BAKED BEANS CREAMY COLESLAW BISCUIT FRESH BAKED COOKIE MILK WHOLE BEVERAGE	
H S	BEVERAGE CHOICE OF SNACK	BEVERAGE CHOICE OF SNACK	BEVERAGE CHOICE OF SNACK	BEVERAGE CHOICE OF SNACK	BEVERAGE CHOICE OF SNACK	BEVERAGE CHOICE OF SNACK	BEVERAGE CHOICE OF SNACK	

Notes:
REGULAR* is the Regular diet without a salt packet (NAS). Fruit and vegetable juice is available at all meals. All texture modified menu items must be tested at Point of Service using IDDSI Audit Tools to ensure the product is suitable for each resident's needs. Puree/Mech Soft serve extra gravy/soe.

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Menus Approved By:  2/9/2021
Dates: 2/7/21, 2/14/21, 2/21/21, 2/28/21, 3/7/21, 3/14/21, 3/21/21, 3/28/21, 4/4/21, 4/11/21, 4/18/21, 4/25/21



Pre-Opening Flowchart



May be reprinted with author's permission

Dining Set up & Service

- Bare tables
- 6 feet apart
- Disposable placemats or tablecloths
- Single use condiments & no sharing
- Wrapped silverware
- Disposables vs regular dish ware



Sample Seating Arrangements



QUICK POLL



Do you use plexiglass on your dining tables?

- a. Yes
- b. No

QUICK POLL



If yes, do you maintain 6 ft distancing between residents?

- a. Yes
- b. No, not required by our state regs



Dining Set Up & Service

- Buffets
 - Aroma
 - Activity
 - Servers only



Photo Courtesy of The Peaks Senior Living

Dining Set up & Service

- Start slow
 - Lunch only
 - One dining venue only
 - One seating
- Increase # of seating or venues
- Increase # of mealtimes
- Rotate who eats in the dining room, for smaller locations



Photo courtesy of Surprise Health & Rehab

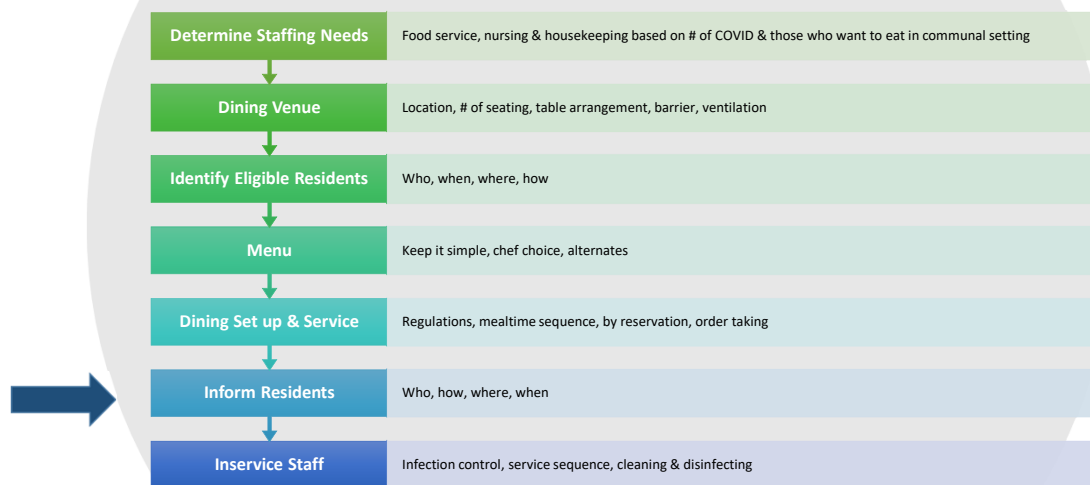


Dining Service

- Hand hygiene between residents
- Minimal service sequence
- Keep dining time at 1 hour max
- Have 2 different staff members serve and bus tables
- Clean and disinfect tables and chairs after all residents are done
- If more than 1 seating, allow time to ventilate



Pre-Opening Flowchart



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Inform Residents

- WHO
 - Resident have a choice
 - Non-COVID-19/not on transmission-based precautions
 - Residents at high risk or independent?
 - Visitors
- HOW
 - Memo to residents
 - Get activities and nursing involved
 - Discuss process including meal-time, reservation/seating chart, rotation, core principles, menu
- WHERE
 - Dining venues
- WHEN
 - Start date
 - Stop Date - situations when communal dining may cease



Pre-Opening Flowchart



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Inservice

- | | |
|--|---|
| <ul style="list-style-type: none"> • All Staff <ul style="list-style-type: none"> ○ Infection control as it pertains to communal dining • Food & Dining Service <ul style="list-style-type: none"> ○ Cleaning and disinfecting communal dining areas ○ Cohorting: Staff, residents, visitors ○ Table Set up ○ Order taking and service sequence ○ Seat assignments & reservation process | <ul style="list-style-type: none"> • Residents <ul style="list-style-type: none"> ○ Who, What, Why, Where, When, How • Nursing <ul style="list-style-type: none"> ○ Cohorting: Staff, residents, visitors ○ Seat assignments & reservation process • Housekeeping <ul style="list-style-type: none"> ○ Cleaning and disinfecting dining areas |
|--|---|



Reopening Dining Checklist



REOPENING DINING CHECKLIST DURING A PANDEMIC

DINING VENUE AND SERVICE

- ☐ All Staff, residents and visitors are required to use face coverings/masks, wash hands or use ABHS frequently, and maintain social distance of at least 6-feet as much as possible.
- ☐ Designated areas/markings indicate 6-foot distancing for residents/staff while waiting to be seated.
- ☐ Instructional signage is posted on COVID 19 signs and symptoms, infection control precautions and other facility practices.
- ☐ Residents must wear face coverings/masks any time they are not eating or drinking and when staff approach their table.
- ☐ Tables are placed to ensure that residents are at least 6-feet apart. Cohort residents & staff. A physical barrier (clear divider) may be used but does not replace the 6-foot distancing.
- ☐ Laminated menus that can be disinfected are used, otherwise use spoken or disposable menus.
- ☐ Centerpieces may only be used if easily cleaned and disinfected between service/seatings.
- ☐ Tables may be pre-set with tablecloths, beverageware & wrapped silverware, unless contamination is likely.
- ☐ Tables are cleared of all items including tablecloths and placemats, after each service.
- ☐ Condiments like salt & pepper are provided on request. Use either pc packets or individual containers that are cleaned and sanitized after each use (e.g., ramekins). Discourage residents from sharing items.
- ☐ When order-taking, allow at least 3-foot social distance by servers. Residents have masks on while ordering.
- ☐ Sanitize hands (ABHS) between residents, and whenever contamination occurs.
- ☐ Encourage visitors to use touchless payment options and sanitize any pens or other equipment after each use.

- ☐ Encourage visitors to use touchless payment options and sanitize any pens or other equipment after each use.
- ☐ No tableside preparation, action stations or self-service buffets.
- ☐ Keep dining times at 1 hour to minimize exposure.
- ☐ Leftover containers provided only upon request.
- ☐ No activities including singing, piano playing, to avoid added exposure.

CLEANING AND DISINFECTING

- ☐ Disinfect each dining location before opening each day and after every use.
- ☐ Disinfect highly touched surfaces (e.g., doors, handles, faucets, tables, chairs) and high traffic areas (e.g., waiting areas, hostess stand) after each meal.
- ☐ ABHS available at each entrance and exit to dining venues and at point of sales area.
- ☐ Reusable items (e.g., utensils, plates, glasses) are properly washed, rinsed and sanitized after each use.

VENTILATION

- ☐ If possible, windows and/or doors are open to ventilate areas.
- ☐ Consider use of air purifiers/HEPA filter for smaller dining venues, if unable to ventilate well.
- ☐ Allow the dining area to ventilate for at least 15 minutes between service.
- ☐ Maintenance ensures proper maintenance of HVAC system and air flow.

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Questions are the path to learning



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Thank you!

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