

Phase III Guidelines for Cooling Centers

Extreme heat is a major public health concern in Rhode Island and in the nation. Exposure to extreme heat can cause a variety of health problems, including heat stroke and death. The use of cooling centers, a cool site or air-conditioned building designated as a safe location during extreme heat, is a common strategy to protect the public from high temperatures. However, the use of cooling centers can result in groups of at-risk people congregating for extended periods of time. These at-risk groups include older adults or those with respiratory diseases and other underlying health conditions. Having these groups of people gathered together can potentially provide a route for the transmission of COVID-19 among visitors and staff.

Note: People infected with, or recovering from, COVID-19 are presumed more vulnerable to heat stress. Also, heat stress can present a range of symptoms that mimic early COVID-19 symptoms, including headache, exhaustion, raised body temperature, excessive sweating, and body cramps. Self-recognition of heat stress is sometimes difficult. Differential diagnosis between heat illness and COVID-19 is critical to facilitate accurate testing, diagnosis, and treatment and to prevent contraindications of treatment. All heat-related illnesses and deaths are preventable.

All State and local agencies and private sector organizations in Rhode Island considering operating cooling centers are required to prepare and implement a plan for resuming services in a phased approach in accordance with established Rhode Island COVID-19 executive orders (EOs) and emergency regulations.

All State and local agencies and private sector organizations considering opening or operating cooling centers must have established facility cleaning, health screening, physical distancing, and face covering procedures in line with the Rhode Island Department of Health's (RIDOH) emergency regulations entitled [Safe Activities by Covered Entities During the Covid-19 Emergency \(216-RICR-50-15-7\)](#).

Note that one of the requirements in these emergency regulations is the creation of a COVID-19 Control Plan. A template (in [English](#) and/or in [Spanish](#)) are available on Reopening RI's website.

The [Reopening RI](#) site includes guidance and other materials that state and local agencies and private sector organizations considering opening or operating cooling centers may find to be helpful and useful, including:

- Rhode Island's Phase II: General Business/Organization Guidelines ([English](#) and [Spanish](#))
- Rhode Island's Business/Organization Checklist ([English](#) and [Spanish](#))
- A poster for employers ([English](#) and [Spanish](#))
- A poster for employees ([English](#) and [Spanish](#))

I. Summary of Phase III Operations

Phase III operations consist of requirements and guidance to reduce the risk of spreading COVID-19 in cooling centers. This document should be used in conjunction with existing cooling center operation and management plans, procedures, guidance, resources, and systems. These guidelines are based on what is currently known about the transmission and severity of COVID-19.

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II. Physical Space and Occupancy Limits

Agencies and organizations are required to maintain physical distancing within cooling centers in accordance with current Rhode Island EOs and emergency regulations. Physical distancing means the practice of keeping space between oneself and others when outside of the home in order to restrict the spread of infectious disease. RIDOH's emergency regulations require agencies and organizations to ensure that individuals stay at least six feet from people who are not part of the same household unless separated by a physical barrier that prevents individuals from having direct contact and contact with any droplets from another individual's coughing, sneezing, or talking. They also require not gathering in large groups, staying out of crowded places, and avoiding mass gatherings. When social distancing is not feasible, individuals should minimize the time of exposure to the extent possible.

In order to operationalize these requirements, agencies and organizations may wish to consider separation of furniture and creating spaces for individual family units (families who live together do not need to maintain physical distancing in a cooling center). In larger cooling center facilities, it may be possible to provide adequate space for physical distancing among visitors. Smaller cooling centers should consider limiting the number of visitors, in accordance with current state EOs and emergency regulations that limit the size of gatherings. This could lower capacity, so agencies and organizations may wish to consider setting up more smaller cooling centers. If a lack of potential cooling center sites arises, emergency alternatives, such as using parked air-conditioned buses may be considered. Agencies and organizations may also consider partnering with closed businesses, such as movie theaters, as alternate cooling sites.

Where not specified in Rhode Island EOs or emergency regulations, all agencies and organizations are encouraged to follow general guidance from the Centers for Disease Control and Prevention (CDC) regarding gathering sizes and physical distancing.

III. Cooling Center Processes, Procedures, and Activities

Enhanced Cleaning and/or Disinfecting Procedures

RIDOH's emergency regulations require all agencies and organizations to conduct environmental cleaning of their establishments at least once per day. In addition, commonly touched surfaces, such as shared workstations, elevator buttons, door handles, and railings should be cleaned in [accordance with CDC guidance](#).

Agencies and organizations are required to use cleaning/disinfecting products and have them readily available to service providers. These cleaning/disinfecting products should be designed to clean/disinfect surfaces and shall be used in the manner intended. Agencies and organizations must maintain records documenting the date, time, location, and procedures for the required cleaning activities.

Agencies and organizations should consider following [CDC cleaning and disinfection guidelines for community facilities](#) and cleaning the facilities if someone is sick. Because even individuals with no symptoms can still transmit the virus, and the virus can survive for several days on non-porous surfaces, it is important to continue routine cleaning and disinfection (every day) with a focus on high touch surfaces, including those in common areas and bathrooms.

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Screening Procedures

Agencies and organizations are required to implement and ensure compliance with COVID-19-related screening of all individuals entering its establishment(s) at any time for any reason.

The purpose of COVID-19-related screening for staff of a cooling center is to exclude them if they are COVID-19 positive, have COVID-19 symptoms, or have had close contact in the last 14 days with individuals who are COVID-19 positive or who had COVID-19 symptoms.

The purpose of screening for visitors of a cooling center is to triage them into four separate groups, to be grouped separately within the cooling center, or in a coordinated set of separate cooling centers:

- Group 1: Positive (visitors who report that they are COVID-19 positive)
- Group 2: Symptomatic (visitors who report or display COVID-19 symptoms)
- Group 3: Exposed (visitors who have had COVID-19 or have had close contact in the last 14 days with individuals who are COVID-19 positive or who had COVID-19 symptoms)
- Group 4: Negative (visitors who are not positive, symptomatic, or exposed)

RIDOH strongly recommends that all visitors to cooling centers or a coordinated set of cooling centers be permitted to enter the center(s) regardless of triage status, as they may be at risk of serious heat-related illnesses or death if entry is denied.

RIDOH strongly recommends that triage groups be separated in a cooling center to avoid disease transmission in the cooling center. If possible, it is recommended that triage groups be provided with separate bathrooms. If not possible, it is recommended that common bathrooms be disinfected (commonly touched surfaces wiped or sprayed with disinfectant) after every use by a person in triage group one, two or three to reduce the risk of disease transmission.

A coordinated set of cooling centers (a set of cooling centers within a municipality) may be organized to accommodate a specific triage group or groups at a specific center or centers, as long as visitors in all four triage groups have equal access to cooling accommodations. Nevertheless, each cooling center must be capable of accepting visitors in any of the four groups and separating them by group, as excluding visitors in some circumstances, such as directing them to another cooling center, could put them at grave risk.

COVID-19-related screening shall include, at a minimum:

1. Visual assessment, self-screening, or a written questionnaire, or a combination of any of these screening methods to ascertain, at the point of entry, if individuals are COVID-19 positive, have COVID-19 symptoms, or have had contact in the last 14 days with any other individuals who are COVID-19 positive or who had COVID-19 symptoms,

and

2. Plainly visible notices at all entrances to the site, stating that all individuals entering must be screened or self-screened, and must inform management at the point of entry if (and that) they are COVID-19 positive, have COVID-19 symptoms, or have had close contact in the last 14 days with individuals who are COVID-19 positive or who had COVID-19 symptoms.

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Agencies and organizations are encouraged to use the screening tool located on the Reopening RI website to screen employees, clients, and/or visitors for symptoms of COVID-19. This tool is available in [English](#) and in [Spanish](#).

Aiding Visitors Who are Ill

RIDOH strongly recommends that the agency's required COVID-19 Control Plan should include procedures for offering to connect individuals with symptoms who do not appear to need emergency care with medical follow-up services to address their symptoms.

RIDOH strongly recommends that agencies be prepared to contact emergency officials (call 9-1-1) in the case of severe illness requiring medical assistance. Cooling centers are encouraged to call **2-1-1** or the Point at **401-462-4444** to **determine if a visitor with symptoms can be provided with an air conditioner for their home to help prevent the visitor from having to return to the cooling center during a subsequent heat wave.**

Face Masks and Other Personal Protective Equipment (PPE)

All individuals in public or in an establishment are required to wear a cloth face covering unless physical distancing can be maintained easily and continuously. Employers must arrange for cloth face coverings or materials for the making of such face coverings for each employee at no expense to the employee.

Nothing shall prevent an employee from fashioning his or her own cloth face covering or voluntarily providing and wearing other equivalent or more protective face coverings (such as N-95 respirators and surgical masks). Cloth face coverings are not required for individuals who are required by their employers or by state or federal law to wear other more protective respiratory protection (such as N-95 respirators and surgical masks). Cloth face coverings are not required for:

- Anyone for whom use of such face covering would damage his or her physical or mental health;
- Anyone who is developmentally unable to use a cloth face covering, including young children who may not be able to effectively wear a cloth face covering;
- When a face covering would directly inhibit an activity of daily living (e.g. eating);
- When a face covering would itself negatively impact the safety of an individual or lead to an increased risk of harm to others (e.g. near open flames); and/or
- In outdoor settings when people can easily and continuously maintain at least six feet of distance from other people.

If any employee or volunteer refuses to wear a cloth face covering when required by these regulations and such individual is not otherwise exempt from the requirements, an agency or organization is required to deny access to the establishment. Agencies and organizations are not required to refuse entry to a visitor not wearing a face covering.

All agencies and organizations shall ensure that their establishments have their restrooms open and that they have running water and soap readily available. If access to restrooms or running water is limited, the establishment is required to ensure ready access to hand sanitizer at all times.

Clear Communications Plan

All covered entities shall ensure the placement of posters or signs at all entrances to its establishments for awareness about entry screening, required physical distancing, use of cloth face coverings, and other subjects as provided in guidance issued by RIDOH. Copies of acceptable [posters are available on RIDOH's website](#).



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Agencies and organizations should use health messages and materials developed by credible public health sources, such as RIDOH and/or CDC. Agencies and organizations should consider:

- Posting signs at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, cough etiquette, and cloth face coverings;
- Providing educational materials about COVID-19 for non-English speakers, as needed; and
- Encouraging ill staff and volunteers to stay home (or be sent home if they develop symptoms while at the facility) to prevent transmitting the infection to others.

Agencies and organizations should identify and address potential language, cultural, and disability barriers associated with communicating COVID-19 information to workers, volunteers, and those visiting cooling centers.

Agencies and organizations are required to instruct any person entering an establishment to wear cloth face coverings except when physical distancing from others in the establishment is easily, continuously, and measurably maintained or the individual is exempt from wearing a cloth face mask. Individuals must wear a cloth face covering when at an entrance, exit, and/or common areas of any establishment including, but not limited to, check-in, registration, reception, waiting areas, hallways, corridors, bathrooms, elevators, and stairways.

Other Processes and Activities

If possible, cooling centers should be equipped with air exchange systems and be located in buildings with tall ceilings. Agencies and organizations should consider ensuring utilization of the highest efficiency filters that are compatible with the cooling center's existing HVAC system, and adopt "clean-to-dirty" directional airflows. If resources allow, ceiling fans with upward airflow rotation combined with upper-air ultraviolet germicidal irradiation (UVGI) disinfection systems can be utilized. When conditions allow (low humidity), shaded outdoor spaces with cross-draft airflow augmented by evaporative coolers may provide a safer alternative. [CDC guidance on air exchange systems](#) is available on its website.

Cooling centers may find the following links helpful to informing overall planning efforts, especially in the event there is exposure at a cooling center that impacts operations:

Continuity Pandemic Flu Resources

- [Business Preparedness Framework for Pandemic Influenza](#)
- [FEMA COOP Multi-Year Strategy and Program Management Plan Template Guide](#)
- [National Pandemic Influenza Plans](#)
- [Pandemic Influenza Brochure](#)

IV. Human Resources

Agencies and organizations should plan for staff and volunteer absences and develop flexible leave policies. Staff and volunteers may need to stay home when they are sick, caring for a sick household member, or caring for their children during school dismissals. Agencies and organizations should identify critical job



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functions and positions, and plan for alternate coverage by cross-training cooling center staff. CDC has [guidance on developing flexible leave policies](#) on its website.

V. Supplies

Agencies and organizations should consider providing COVID-19 prevention supplies onsite at cooling centers. Specifically, they may wish to consider having supplies on hand for staff, volunteers, and visitors, such as soap, alcohol-based hand sanitizers that contain at least 60% alcohol, tissues, and trash baskets.

If water bottles are distributed at the cooling center, ensure visitors to not share bottles or glasses.

