

Joyce Emergency Shelter: Sanitation Protocols and Procedures A Staff Guide

March 2022

Background

Who is it written for?

This document is primarily written for the volunteers who will be working at the Joyce Emergency Shelter. Realizing these volunteers may or may not have a background in medical or sanitation fields, we endeavored to write this in lay terms. It is important that these volunteers establish and maintain a hygienic environment by following the recommendations found in this document.

Purpose

The Purpose of this document is to offer recommendations for the general guidelines and specific procedures intended to insure the safest sanitation practices for cleaning and disinfection of the JEPP Emergency Shelter during its operational phase. It is aimed at limiting the survival of disease and viruses in the environment.

It is important to remember that JEPP is a temporary community facility whose operational goal is to seek to achieve the best-case outcome for the health and safety of its residents. within the limitations of its volunteer personnel staffed by displaced resident volunteers.

Defining Terms

Terminology used when referencing sanitation and hygiene practices can be very confusing. For our purposes we will assume the following definitions whenever referencing these terms I our protocol

Cleaning

- Basic cleaning is a 2-step process.
 - * the mechanical removal of visible debris, dirt, dust and organic impurities from surfaces
 - * followed by thorough cleansing with either soap and water or a general purpose cleaner.
- It **does not kill germs**, but lowers their numbers and the risk of spreading infection.

Sanitizing

- Refers to the use of chemicals registered and approved by the Environmental Protection Agency to sanitize.
 - * applied to surfaces after they have been thoroughly **cleaned**
 - * lowers the risk of spreading infection by reducing the number of germs to safer levels
 - * It does not kill *all* germs

Disinfecting

- Refers to the use of chemicals registered and approved by the Environmental Protection Agency to kill up to 99.0% of germs
- Product must be used according to the product's specifications for use.
- While disinfecting does not entirely kill all germs, it does reduce them to the safest levels that can be realistically achieved.

Sterilization

- Describes a process of destroying or eliminating all forms of microbial life.
- This is unachievable, and not necessary in our shelter setting.

Mixing Steramine Solution

Steramine will be used for all disinfecting procedures.

- Use one or two tablets per 1 gallon of water
- Complete instructions are found in the appendix of this document.

General Infection Control at Shelters

CLEANING IS EVERYONE'S RESPONSIBILITY

Individuals in evacuation centers are required to share living spaces and sanitary facilities and may be exposed to crowded conditions. Evacuees may have health problems including traumatic injuries, infectious diseases, and chronic illnesses such as diabetes, or renal failure.

Use of appropriate infection prevention measures by all staff and evacuees can reduce the spread of infectious diseases.

It is critical to clean and sanitize articles and surfaces to reduce the spread of infections to residents and staff. Any object or surface soiled with bodily fluids should immediately be washed, rinsed and sanitized.

All shelter staff who are likely to handle infectious material should use personal protective equipment (PPE) and follow safety precautions. Shelter staff must understand the importance of handling infectious waste safely.

The following guidelines are designed to reduce the risks of infections in emergency shelters.

Shelter Residents' Sanitation Responsibilities

- Upon admission, each shelter resident is provided a document called *Hygiene Guideline for Shelter Clients* which outlines general housekeeping guidelines and responsibilities. These guidelines must be followed to keep everyone healthy.
- Residents should wash their hands with soap and water frequently.
- Children should be assisted in washing their hands with soap and water frequently.
- Hand sanitizer gels are an effective addition to hand washing and a reasonable temporary substitute when soap and clean water are not readily available.
- Hand sanitizer gel should be positioned throughout the evacuation center, especially at the beginning of food service lines and outside of toilet facilities.
- Encourage good personal hygiene practices including the following:
 - ✦ Cover your cough with an "elbow" cough' your hands; tissues or a masks. Dispose soiled tissues immediately in the trash.
 - ✦ . Wash your hands or use hand sanitizer gel after coughing. If possible, tissues should be provided in evacuation center living areas.
 - ✦ Follow good hygienic practices during food preparation.
 - ✦ Do not share eating utensils or drinking containers.
 - ✦ Do not share personal care items such as combs, razors, toothbrushes, or towels with anyone else.
- Facilities should be adequate to allow residents to bathe at least twice weekly.
- Laundry facilities should be available to allow appropriate laundering of clothes, cloth masks, and bed linens.
- Shelter staff welcomes involvement of any shelter resident willing to volunteer and help out with shelter operations. Those interested will be provided with more detailed training.

Shelter Staff Members' Sanitation Responsibilities

- Staff should wash their hands with soap and water frequently.
- Develop a regular cleaning and sanitizing routine.
- Post a cleaning schedule on the shelter bulletin boards.
- Authorized staff members will be responsible for the mixing and dilution of all cleaning solution concentrates before they are used as *point of use products* by others.
- The Shelter Manager will ensure a log of cleaning routines is kept.

- Posted Safety Signage in visible and appropriate areas to reduce injury risks.
 - * hand washing posters are located in bathrooms, kitchen and handwashing stations.
 - * Eye washing poster will be located next to the eye wash station.
 - * Information on cleaning up spills will be posted in the kitchen, dishwashing station, PPE sanitation area and in bathrooms.
- Wear minimally acceptable PPE when mixing cleaning concentrates
 - * mask
 - * splash shields or goggles
 - * apron or appropriate protective clothing
 - * gloves
- Discard used and outdated solutions in appropriate location
- Team Managers will properly train individuals in the safe use and practices of cleaning products including the proper use of PPE as necessary for that task.
- All dispensing containers will be clearly labeled and dated with expiration dates per product specifications.
- The inventory, distribution, and storage of cleaning equipment such as brooms, mops, buckets and dust pans are the responsibility of staff.
- All cleaning equipment must be maintained in a secure area when not in use

Hand Hygiene

After an emergency, it can be difficult to find running water. However, it is still important to wash your hands to avoid illness. It is best to wash your hands with soap and water but, when water isn't available, you can use hand sanitizer gels made for cleaning hands.

The ability to clean surfaces in non-residential settings may be limited by the size or other physical characteristics of the facility. This increases the importance of hand hygiene. However, such facilities are also likely to have limited availability of hand washing sinks. Thus, additional attention should be paid to positioning alcohol hand gel dispensers in convenient locations throughout the living areas and at the beginning of food service lines and ensuring that all arriving residents are instructed on their use and availability.

Below are some tips for washing your hands with soap and water and with alcohol hand gel.

- ✧ When should you wash your hands or use an alcohol hand gel?
- ✧ Before eating food.
- ✧ After handling uncooked foods, particularly raw meat, poultry, or fish.
- ✧ After going to the bathroom.
- ✧ After changing a diaper or cleaning up a child who has gone to the bathroom.
- ✧ Before and after tending to someone who is sick.
- ✧ Before and after treating a cut or wound.
- ✧ After blowing your nose, coughing, or sneezing.
- ✧ After handling an animal or animal waste.
- ✧ After handling garbage.
- ✧ After using shared tools

PPE (Personal Protective Equipment)

Shelter worker safety and use of PPE

The shelter staff who clean dorm areas, food serving or prep areas, and other public areas must wear gloves and masks. These are found in the Cleaning Crew Job Bin. More can be ordered through managers.

Shelter staff who handle, disinfect, or clean contaminated supplies and equipment or dispose of wastes must wear more PPE. Thick rubber gloves over a second pair of nitrile gloves, rubber boots, N95 masks and aprons or Tyvek suits are required. Follow the procedures in the appendix for putting on and taking off protective clothing. A special tent will be set up for cleaning and sanitizing reusable PPE. Dispose of single use supplies only in waste bins labeled "Hazardous Waste".

Disinfection Protocols

What to Disinfect:

- Hands and skin after contact with infectious body fluids
- Gloved hands after contact with each infectious patient or after contact with infectious waste
- Thermometers, stethoscopes and other medical instruments
- Spills of infectious body fluids on the walls and floors
- Containers contaminated by bodily fluids.
- Reusable supplies such as protective clothing and patient bedding.

Removing PPE for Cleaning

The steps need to proceed in the following order of removing and cleaning.

Gloves

- Do not remove, your gloves. You will remove these last. While still wearing them, clean your gloves in the Steramine solution. Use the first bucket to clean the outside of the gloves. Rinse by pouring water over them to drip into the 1st bucket.

Face Shield and Goggles

- Remove your face shield, and goggles.
- Wipe with a disposable cloth.
- Wash, rinse, and hang to drip dry on a clothesline.

Coveralls or Aprons

- Remove top of coveralls, tie arms around your waist to avoid contamination while removing your boot covers and boots. If needed, remove shirt for washing.
- Stand on a tarp or mixing tray filled with disinfecting solution and carefully remove boots one at a time and step onto a clean surface, leaving boots on the tarp or tray.
- If wearing a rubber apron, remove it, wash in soapy water, rinse, and line dry.
- Note- See Cleaning of Protective Clothing in next section

Boots

- Boot covers and boots may be heavily contaminated. Wipe with a paper towel to remove debris, wash, rinse, and dry.

Finish Up

- Finally, remove and wash your gloves, rinse, and line dry.
- Pour any water from the tarp or mixing tray into the buckets and dispose of properly into a septic system.
- Check it all PPE for damage, boots, and gloves for leaks. Note what needs to be mended.
- Hang all of your dried PPE in a safe, dry place for use next time.

Clean and Disinfect Protective Clothing -

Set aside a special part of the laundry or cleaning area for clothing with bodily fluids. Make sure health facility staff who handle contaminated laundry wear protective clothing, including thick gloves as the second pair of gloves.

- Transfer laundry as soon as possible to area set aside for contaminated laundry.
- Carefully move the laundry to a bucket with fresh sanitation solution.
- Soak laundry in sanitation solution for 30 minutes. Be sure that all items are completely soaked.
- Remove items from the sanitation solution and place in soapy water.
- Soak overnight in soapy water.
- Scrub thoroughly to remove stains. Rinse and line dry.
- Use a needle and thread to repair any holes or torn areas.
- The clean clothing is now ready for use.
- Items that are very worn out should be discarded or used as cleaning rags.

Disinfecting Reusable Supplies and Equipment

Gloves

Reusing gloves is not recommended. If there are not enough nitrile gloves to allow staff to change to a new pair of outer gloves as needed, they can be reused after disinfecting. If it is necessary to reuse gloves because the supply at the shelter is limited, they must be cleaned and disinfected. Also, check them for holes. If gloves are not going to be reused, discard them in the container for disposable infectious waste.

To disinfect Nitrile gloved hands:

- If gloved hands are visibly soiled, wash them first in soap and water.
- Dip the gloved hands into the 1:100 bleach solution for 1 minute.
- Dry the gloved hands with a disposable-use (or paper) towel or let the gloved hands air-dry.
- If a bleach solution is not available, wash gloved hands with soap and water for 1 minute.
- Note: After several rinses in bleach solution, the gloves may become sticky and will need to be changed.

To clean and disinfect rubber gloves for reuse:

- Place gloves in a bucket of soapy water
- Take the bucket with soaking gloves to the specialized laundry area. Carefully move the gloves to a bucket with fresh soapy water.
- Gently rub the gloves to remove visible soiling and cover with water.
- Soak them overnight.
- Wearing at least an apron and thick gloves, rinse the gloves in clean water.
- To check for holes, fill each glove with rinse water. If any water squirts out, there is a hole in the glove. Discard any gloves with holes.
- Air-dry the remaining gloves.
- If available, put talcum powder in dry gloves.
- Return clean gloves to the storage shelf in the entry to the isolation area.

Shelter Cleaning and Sanitation

Cleaning the Dormitory, Food Service Area, and Common Areas including the Registration Area

Overall Procedures

It is critical to clean and sanitize surfaces and articles to reduce the spread of infections to residents and staff. Any surface or object soiled with bodily fluids should immediately be washed, rinsed and sanitized.

All shelter staff who are likely to handle infectious material should know and use personal protective equipment (PPE) and follow safety precautions. Shelter staff must understand the importance of handling infectious waste safely.

The following guidelines are designed to reduce the risks of infections in emergency shelters.

Housekeeping Plans SHOULD INCLUDE:

- Posted checklists of required cleaning tasks to be done
- Frequently sanitize commonly used items (desks, tables, pens, clipboards)
- Duty calendar of assigned tasks based on a rotating schedule. (Names – Dates and or Assignment sheets to include resident volunteers to be assigned to tasks whenever possible. - Shelter Staff will fill in as needed.
- List of products and supplies and how to find, use discard and store them
- Safety posters? (how to clean up spills and first aid for splashing in eyes mouth, hands)
- All dispensing containers will be clearly labeled and dated with expiration dates per product specifications.
- Include clear guidelines for use of PPE for anyone using them
- The inventory, distribution and storage of cleaning equipment such as brooms, mops, buckets and dust pans are the responsibility of staff.
- All cleaning equipment must be maintained in a secure area when not in use.
- Increased cleaning and disinfecting during the COVID-19 pandemic.

Instructions for Cleaning and Sanitizing Surfaces and Small Articles

It is important to follow the manufacturer's instructions for mixing and using all cleaning solutions. Material Safety Data Sheets (MSDS) for each cleaning supply stored and used in the shelter shall be retained in a labeled binder in the Shelter Operations Manual.

To be effective these four steps must be followed in order:

1. Mechanically remove debris.
2. Cleaning: wash with soapy water, and rinse with clear water.
3. Sanitizing or disinfecting: Use the appropriate sanitizing or disinfecting solution as indicated:
 - * Small articles such as toys must be soaked in the solution for a minimum of 10 minutes
 - * Spray the surface of large items such as countertops, railings, and cots, with the solution until the entire surface is coated with the liquid.
4. Allow the article or surface to air dry.

Areas to be Cleaned

Cleaning the Kitchen and Surfaces in Food Preparation Area

All food processing equipment, sinks, countertops, refrigerated storage and other hard non-porous food contact surfaces must be cleaned and sanitized after each meal. Keeping surfaces and items clean helps to reduce the spread of infections to residents and staff.

- Clean surfaces with a household detergent when visibly dirty and on a regular schedule
- Sanitize Directions for Spraying to.
 - ✦ Wash with a detergent solution and rinse all surfaces thoroughly.
 - ✦ Use a solution of 200 to 400 ppm concentration by combining 1 or 2 tablets per gallon of warm water, allowing several minutes for tablets to dissolve completely before using.
 - ✦ Spray with hand trigger sprayer or wipe on and allow surface to remain wet for at least one minute followed by adequate draining and air drying.

Dishwashing

Dishwashing Procedure

Each client will be issued a bowl, cup, and utensils to use throughout their stay. Clients will be responsible for cleaning and disinfecting their own dishes. A tent will be set up outside where people will wash their dishes. In the tent, they will form a line and follow the instructional signs at each station. See Appendix for complete instructions and signage.

For cleaning and sanitizing dishes, glasses and utensils, they will proceed through the tent stations as follows-

- Scrape and dispose of waste
- Rinse debris from utensils and glasses whenever possible.
- 1-First sink compartment- wash with a good detergent. This soapy wash tub will need its water replaced the most often
- 2-Second sink compartment- Rinse with clean water.
- 3-Third sink compartment- Sanitize in a solution of 1 to 2 tablets of Steramine per 1 gallon of water (200 to 400 ppm). Immerse all utensils for at least one minute.
- A fresh sanitizing solution must be prepared at least daily or more often if the solution becomes diluted or soiled.
- Place sanitized utensils on a rack or drain board to air dry.

Living areas such as dorms, play rooms, and reception area

- Dorm and dorm reception areas must be cleaned weekly and more often if necessary.
 - ✦ Floors should be swept daily and mopped weekly with disinfectant solution.
 - ✦ Spills should be cleaned up immediately
 - ✦ Other furniture should be cleaned weekly and as needed.
 - ✦ Cots, blankets, and sleeping bags should be cleaned/laundered between occupants.
- Play areas must be cleaned and sanitized daily.
 - ✦ Floors swept and mopped daily with disinfectant solution.
 - ✦ Commonly used toys of wood or plastic should be sprayed and wiped disinfectant solution between uses.
 - ✦ Soft toys should not be shared.
- Sanitize high-risk surfaces using a sanitizing solution immediately. High-risk surfaces include:
 - ✦ Surfaces used for diaper changing.
 - ✦ Surfaces soiled with body fluid (e.g., vomitus, blood, feces)

Cleaning Laundry:

- ✦ Set up a primary shelter laundry facility for shelter kitchen laundry and for shelter residents to launder their own garments.
- ✦ Garments heavily soiled with stool should be handled carefully, wearing gloves, and placed in a plastic bag for disposal. If stool can easily be removed using toilet paper, the garment may be laundered as described below.
- ✦ Wash clothing in a washing machine using normal temperature settings and laundry detergent if available.
- ✦ Household bleach can be used at normal concentrations.
- ✦ Dry clothes completely on a clothes line. Tarps may be used to cover the lines from rain if needed.
- ✦ There is no need to disinfect the tubs of washers or tumblers of dryers if cycles are run until they are completed.
- ✦ Make sure donated clothing is washed before distribution.
- ✦ Set up a secondary, secure cleaning area for the sanitization of PPE and other reusable items like cots.

Cleaning the medical facility

- ✦ All equipment and surfaces must be sanitized between use by different people.
- ✦ Medical waste including used bandages must be contained in garbage cans with liners and lids and safely disposed of to avoid human contact.
- ✦ Everyone using the medical facility should use standard precautions and work within the scope of their practice.

Cleaning the Restrooms

Occupants of the shelter will be required to observe the same toileting discipline expected of them in pre-quake times. Sanitary napkins, diapers and wipes must be deposited in a trash can. Toileting must only occur in restrooms unless other arrangements are made in advance (i.e. bedpans, diaper changing).

Because of the potentially high ratio of residents to toilets, the emergency shelter will have a particular need for frequent and supervised cleaning and maintenance of sanitary facilities. Designated evacuation shelter personnel should be assigned to each restroom. By controlling the number of individuals using the facility at one time, ensuring that surfaces are wiped down with disinfectant at least hourly, and making certain that basic supplies such as hand soap, paper towels, and toilet paper are maintained, the restrooms will remain clean and orderly

Restroom Cleaning Procedures

It is essential that cleaning staffs follow consistent restroom cleaning procedures. Not only does this prevent cross contamination, but it also improves efficiency and reduces overall labor time.

• Safety Precautions

Before beginning with any cleaning task, be sure that you fully understand how to use the chemicals and equipment required for the job. Every employee has a right to know about the possible chemical hazards within their workplace.

- Be careful not to use cleaning chemicals on any surface for which they are not intended.
 - Never mix chemicals. It could cause serious or even fatal injury.
- ### • Wear the proper personal protective equipment (PPE)
- Protect yourself from exposure to cleaning chemicals. Gloves, a mask and goggles will prevent chemical splashes from coming into contact with your skin and eyes.
 - Practice universal precautions when cleaning any blood or body fluid spills, or soiled materials that could contain these or other potentially infectious substances.

- Preparation
 - Review the supply checklist and set up the cart/bucket with all supplies that will be needed, such as: soap and paper dispenser refills, cloths, bowl mops and other proper cleaning equipment.
 - Be sure that the correct dilution rates are used according to the manufacturer's recommendations.
 - Display the proper caution signs to warn of wet floors and close the restrooms to patrons before beginning to clean.
- Daily Cleaning Procedures
 - Remember these three rules of restroom cleaning:
 - Rule #1:** *Always clean top to bottom.*
 - Rule #2:** *Clean from dry to wet.*
 - Rule #3:** *Work towards the exit door.*
- Trash Removal
 - Empty all trash receptacles and disposal units for sanitary napkins.
 - Remove the contents and replace the liners.
 - Never compress the trash and always be careful of sharp objects that may be sticking out of the liners.
 - Spray the receptacles with disinfectant spray.
- Dispensers:
 - Soap Dispensers
 - Check the soap dispenser and refill when necessary.
 - Clean the exterior of the soap dispensers with a damp cloth and a **disinfectant solution**.
 - If necessary, remove any buildup around the delivery area.
 - Allow it to air dry.
 - Paper Towel Dispensers
 - Unlock the dispenser and refill the paper towels.
 - Close and lock the dispenser making sure it is secure.
 - Damp wipe the outside of the towel dispenser or the hand dryer with a disinfectant solution and allow it to air dry.
 - Toilet Tissue Dispenser
 - Unlock the dispensers for the toilet tissue holders. Remove the roll and damp wipe the inside of the holder to remove any paper dust using a disinfectant solution. Allow it to air dry.
 - Install a new roll of tissue. Be sure the roll unwinds over the top of the roll and not from underneath. This allows it to be pulled out more easily and avoids unrolling and wasting of the product.
 - Damp wipe the outside of the dispenser with disinfectant solution.
 - Report any equipment, including dispensers that look damaged or do not work properly, to your supervisor.
- Dry Floor Care
 - Dust mop the floor starting at the farthest corner and working towards the door.
 - Collect the dirt with a dustpan and place it in the proper trash receptacle.
- Sinks and Countertops
 - Clean sinks by first using a paper towel to remove any hair or debris.
 - Spray disinfectant inside of the sink and exterior surfaces including all metal handles, faucets and the plumbing until covered.
 - Allow the product to stand for at least 10 minutes for proper disinfection.
 - Wipe using a clean cloth or sponge.

- Mirrors and Glass Surfaces

- Clean mirrors and glass surfaces.
- Spray glass cleaner, from the bottom to the top.
- Using a clean cloth, wipe the surface from the top to the bottom to prevent streaking.

Note: Be careful how you use your damp cloths or sponges. Avoid using the same cloth for cleaning the toilet, the mirrors, and the sink. This reduces the risk of cross-contamination.

- Spot Cleaning

- Spot clean with disinfectant solution to remove any stains and dirt from walls and switches.
- Make sure to spray the cleaner on the cloth or sponge when cleaning light switches or fixtures.
- Do final spot cleaning on the places that are most often touched in a restroom.
- Spray disinfectant on the handles of urinals, toilet seats, doors and towel dispensers as a final precaution to reduce cross-contamination.

- Wet Mopping

- Wet mop the floor with a disinfectant solution starting from the farthest corner of the room working toward the exit door.
- Go along the baseboards first to keep them from getting splashed.
- Apply the solution from the mop bucket moderately with special attention given to toilet areas, urinals and sinks.
- Be sure to change the solution once it becomes visibly diluted or contaminated with soil.

- Clean Your Equipment

- When finished with all necessary procedures and all surfaces are dry, remove posted signs.
- Wash all equipment thoroughly.
- Properly discard mop bucket solutions when cleaning is complete at the end of the day.
- Hang mops to dry.

- Summary

- Be sure to practice good safety precautions:
- Understand product labels and SDS information.
- Wear the proper personal protective equipment (PPE).
- Follow OSHA's bloodborne pathogen standards with regard to blood and bodily fluid cleanup.
- Post caution signs before cleaning.
- Review your supply checklist and stock your cart.
- Know your daily procedures and the routine in which to perform them.
- Remember these rules when cleaning and disinfecting a restroom:
 - * Always clean top to bottom.
 - * Clean from dry to wet.
 - * Work towards the exit door.
- Be sure to always clean up and wash your equipment at the end of your shift or at the end of a workday.
- Report any damaged or non-functioning dispensers, fixtures or equipment to proper personnel.
- Procedures for Cleaning Toilets

Procedure for Cleaning Toilets and Urinals

As you know, toilets and urinals can be tough and unpleasant to clean. By applying the proper disinfectant to the bowls ahead of time, your job will be less troublesome with cleaner results.

Part 1

- First, flush each unit. This is done to ensure that the unit is free of contamination and determine if it's working properly. Report any damage or malfunctioning units to your supervisor.
- For urinals, remove debris with your gloves on and place the urinal screen on a paper towel while you clean.
- Apply a disinfectant solution, to the interior and exterior surfaces of all urinals and toilets.
- Let it stand and move on to "dry cleaning."

Part 2

Now that the disinfectant has had ample contact time, you can continue cleaning the toilets and urinals.

- Clean the inside of the toilet with the bowl mop paying close attention to the underside of the flush rim. This prevents the accumulation of bacteria that can spread disease and create unpleasant odors.
- Flush toilet to rinse the bowl. Use the clean water to rinse your bowl mop.
- Flush toilet again.
- Wipe down the exterior surfaces of the fixture with a clean cloth.
- Damp wipe all the flush handles and all other chrome. Allow the disinfectant to air dry.
- For urinals, use a bowl mop and wash the pre-sprayed disinfectant from the top to the bottom.
- Replace the urinal screens.
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Procedure for Cleaning Diaper Changing Surfaces

- Should be washed, cleaned, and sanitized after each use.
- Spray with sanitizer then wipe the surface dry after approximately 2 minutes of contact with the sanitizing solution.
- You may also cover the changing surface with a non-absorbent paper liner that is disposed of between each diaper change.

Procedure for Cleaning Bedpan

- Cover the contents with a paper towel or toilet paper.
- Empty the bedpan contents directly into the toilet or latrine.
- Clean the bedpan with soap and water to remove solid waste. Pour into a toilet or latrine.
- Rinse the bedpan in sanitizing solution and return it to room.
- If a family member is responsible for carrying out this task, make sure the family member wears protective clothing.

Cleaning Pee and Poop Buckets

In the event that the plumbing and septic lines are broken and we can not use the flush toilets, the shelter has 5 gallon buckets that will be use along with potty seats as a temporary measure until latrines can be built.

Complete instructions for setting up the Pee and Poop buckets can be found in the Sanitation Managers binder in a section called "Emergency Portable Toilet Protocols". All supplies will be found in Conex#2

Use of the buckets will mean that a method of disposing of the contents will need to be devised. The protocols below explain the options

Cleaning the Latrines

In the event that the plumbing and septic lines are broken and we can not use the flush toilets latrines need to be built.

Information about how to build and manage latrines will be found in a document called “Toilet Scenarios and Procedures”.

Removal of Wastewater and Sewage

Basics of Disposing of Body Wastes –

Workers who handle human waste or sewage may be at increased risk of becoming ill from waterborne diseases. To reduce this risk and protect against illness, such as diarrhea, the following guidance should be followed by workers and employers. All workers should be trained on the risks of handling wastewater and/or fecal sludge.

- Use Personal Protective Equipment!
 - Wear personal maximum protective clothing and equipment including coveralls, a plastic apron, a face shield, goggles, rubber boots, and at least two pairs of gloves including thick gloves as the outer pair
 - Wear rubber boots at the worksite and during transport of human waste or sewage.
 - Remove rubber boots and work clothes before leaving worksite.
 - Clean contaminated work clothing daily with 0.05% chlorine solution (1 part household bleach to 100 parts water).
- Basic Hygiene Practices for Workers
 - Wash hands with soap and water immediately after handling human waste or sewage.
 - Avoid touching face, mouth, eyes, nose, or open sores and cuts while handling human waste or sewage.
 - After handling human waste or sewage, wash your hands with soap and water before eating or drinking.
 - Before eating, removed soiled work clothes and eat in designated areas away from human waste and sewage-handling activities.
 - Do not smoke or chew tobacco or gum while handling human waste or sewage.
 - Keep open sores, cuts, and wounds covered with clean, dry bandages.
 - Gently flush eyes with safe water if human waste or sewage contacts eyes.

Special Cleaning Instructions

Guidance for cleaning up blood and other body fluids

Blood and body fluids can spread infections such as hepatitis B, hepatitis C, and HIV. To protect yourself when cleaning up another person’s blood or body fluids:

- Avoid skin contact with the blood or fluids.
- Wear gloves and PPE to clean up the blood or fluids.
- After removing gloves, clean your hands with soap and water or an alcohol-based hand rub.
- Dispose of materials used to clean blood and body fluid spills in a sealed plastic trash bag.
- Discard any bodily fluid wastes in a container for collecting infectious waste or in the isolated latrine or toilet.
- On surfaces
 - ★ Blood and other body fluids must be thoroughly cleaned from surfaces and objects before application of sanitizing solutions.
 - ★ Use a solution of 200 to 400 ppm concentration by combining 1 or 2 tablets per gallon of warm water, allowing several minutes for tablets to dissolve completely before using.
- On your skin

- ✦ If your skin comes in contact with another person's blood or body fluids: Immediately wash the exposed skin with soap and water.
- For small amounts
 - ✦ Blot a small pool of blood or fluid with a disposable paper towel.
 - ✦ Clean and disinfect contaminated surfaces with a clean disposable paper towel and a disinfecting solution
- For larger amounts
 - ✦ Mop up as much fluid as possible.
 - ✦ Pour sanitizing solution on the spills to cover, taking care to prevent drops or splashes from reaching anybody.
 - ✦ Soak area for 15 minutes.
 - ✦ Remove the disinfected fluid with a cloth soaked in the disinfecting solution.
 - ✦ Wipe to dry.
- For contaminated walls
 - ✦ Wash the wall as usual with soap and water to remove visible soil.
 - ✦ Use a sprayer close to the surface to minimize splashing
 - ✦ Use a mop or towel to wash the walls with sanitation solution.
 - ✦ Rinse the mop/towel in sanitizing solution as was again.
 - ✦ Allow solution contact time of at least one minute before air drying
- Objects soiled with blood/body fluids
 - ✦ Spray with hand trigger sprayer or wipe on and allow surface to remain wet for at least one minute
 - ✦ Wash object as usual with soapy and water.
 - ✦ Followed by adequate draining and air drying.

The Eye Wash Station

- The station/kit is stored in Conex #1. It needs to be set up in the bathroom next to the sink
- Instruction for use will be posted nearby.
- The eye wash station will only be used for that purpose.

Garbage and Hazardous Waste Removal:

The county or its contractor is responsible for waste collection and disposal. We must alert them to our situation and ask for guidance/support. Lacking that, we fall back to an accepted international standard. If, for any reason, the county cannot collect and dispose of trash/garbage within a day we will have to do it ourselves. The Shelter Logistics Manager must arrange for daily shelter garbage/waste disposal

General Procedures

- Collect trash in receptacles lined with plastic bags that can be securely tied shut.
- Trash bags should not be overfilled.
- Place trash in an area separated from the living spaces, preferably in trash bins.
- Have waste pick-ups scheduled frequently; daily, if possible.
- Move trashcans on dollies, if available.
- Keep hazardous wastes separated from household and kitchen waste.
- Separate non-burnable material from the burnable stuff.
- Waste disposal should comply with local requirements including disposal of regulated medical waste such as used bandages and syringes. Area Command will contact EOC about temporary procedures to follow until waste can be removed.

Medical Waste

- Separate medical waste from household waste for pickup and disposal
- Containers designed for sharp waste disposal should be placed where sharp items are used, such as the medical unit, living area and restrooms. A heavy plastic laundry detergent or sports drink bottle with a lid may be used if official sharps containers are not available. When full, cover the lid with duct tape or other strong tape to secure.
- Follow local guidelines for disposal of medical waste.

Kitchen Waste

- Kitchen food waste that may attract pests needs to be removed from kitchen and eating areas immediately after each meal.
- Separate non-compostable trash from compostable.

Dorm and Reception Area

- Small trash cans in dorm and reception area should be emptied every few hours
- Signage should be posted to make sure hazardous waste is disposed of elsewhere.

Restroom Areas

- Small trash cans in dorm and reception area should be emptied every few hours

Human Body Waste

- In the event that toilets are not working and latrine pits are not yet dug, disposal of human wastes will need to be organized by the Sanitation Manager.
- The pee/poop buckets will need to be emptied frequently. It may be possible to dump these into current septic tanks.
- Toilet paper should be collected in a separate plastic lined container.
- Waste may need to be removed in double -lined heavy duty trash bags and sent to a pit.

Disposal of Trash

- A trash dump needs to be built on DNR (Department of Natural Resources) property on Crescent Beach Road. It is downhill and down wind from the shelter.
- The waste disposal area should be located away from sources of water, and down from prevailing winds to avoid odors, vermin, and pollution.
- If possible a trench or pit should be dug so bags of waste to be thrown into it.

- Burnable Trash will be taken to a burn pit.
 - * A 12 foot diameter stump fire capable of burning logs needs to be set up
 - * Burnable waste is paper waste, meat and bones, paper packaging, etc.
 - * If toilet paper is collected instead of flushed, it should be burned.
 - * Medical waste in plastic bags need to be burned on this pile daily.
 - * It may require a mini-excavator to feed and stir the fire to insure the waste is completely burned. This will prevent the bags from breaking open and scattering the contents around the countryside in the wind.
- Non-burnable materials will be stored off-site at the dump at the DNR site
 - * metal, cans, glass, broken tools and large pieces of plastic material
 - * Cans, bottles, and plastic food containers will have to be washed and squashed to keep from attracting vermin.
- Compostable Waste
 - * A separate pit for food compost needs to be dug at the DNR site.
 - * Only food waste from the kitchen/food services will be dumped in this pit.
 - * Compost material should be covered with a layer of dirt each day.

Special-Needs

Clients with special-needs are those who may require supervision by a healthcare professional. They include:

- People with health or medical conditions that require professional observation, assessment, and maintenance beyond the capabilities of the Joyce Emergency Shelter staff or facility.
- People with infectious diseases whose care requires protective equipment or isolation that are not available at the Joyce Emergency Shelter facility.
- People who require assistance with activities of daily living or skilled nursing care but do not require hospitalization.
- People who need medications or monitoring by health professionals.

Attention: You are a volunteer. Do Not go beyond your training level. Do the best you can to prevent the spread of disease. An isolation space should be set up for those with infectious diseases.

Preventing the Spread of Infectious Diseases

Management of Persons with Infectious Diseases

Joyce Emergency Shelter should have a clear plan for transferring individuals with potentially communicable diseases from the Joyce Emergency Shelter to an appropriate healthcare facility. This includes plans for having ill individuals with respiratory symptoms wear a paper mask while awaiting evaluation or transfer. A waiting area should be designated that is separate from the main center living areas but which can be closely monitored by center staff. A system for identifying and notifying the receiving facility must be in place.

Evacuees who have open wounds, symptomatic infections like measles, and unrecognized or incubating infectious diseases such as COVID-19, may arrive at the shelter. Crowding and limited sanitary infrastructure increases the risk of infections spreading. COVID-19, Respiratory infections, measles, diarrheal diseases and skin infections or infestations are prone to spread under these conditions. Before entering the Joyce Emergency Shelter, all potential residents should be screened for these conditions.

Screening on Entry

Intake Desk Procedures and Screening Script

If the prospective client is not wearing a mask, ask them if they have one and to wear it. If they do not have a mask, give them a mask, and tell them to wear it and social distance. They should then tell the prospective client that they are going to ask them some health questions, and to please be truthful and candid in your answers and help us prevent the spread of COVID-19 and other infectious diseases in the shelter, This information is their private health information, and you cannot share it without their written consent.

Ask every client prior to entry into the shelter, if in the last two weeks they have:

- General disease screening questions
 - * Open sores or infected sores
 - * Skin rashes or bumps, like chicken pox, shingles or measles
 - * Parasitic infestations, like lice
 - * Do you have diarrhea?
 - * Do you have vomiting?
 - * Do you have nausea?
 - * Do you have unusual fatigue?

- ✦ Do you have body aches?
- ✦ Any open wounds?
- COVID screening questions
 - ✦ Fever, cough, sore throat, a runny nose, unusual difficulty breathing, body aches, unusual loss of smell/taste, nausea, vomiting, diarrhea.
 - ✦ Are they waiting on the results of a prior COVID-19 test.
 - ✦ Have they been in contact with someone who has tested positive for COVID 19 or been around anyone that they suspect might have it.
 - ✦ Do you have any unusual shortness of breath? Is it related to asthma, allergies, or COPD?
 - ✦ Do you have unusual sneezing, watery eyes, sinus pain that is not related to allergies?
 - ✦ Do you have diarrhea?
 - ✦ Do you have vomiting?
 - ✦ Do you have nausea?
 - ✦ Do you have unusual fatigue?
 - ✦ Do you have body aches?

If the registrant answered **no** to all the above, the person may proceed with shelter registration process.

If the registrant answered **yes** to any of the above questions, a health practitioner must determine if they are well enough to enter the shelter, or if they need to quarantine or isolate or seek immediate medical attention. A separate area or room should be identified in advance to be used to house potentially infectious residents awaiting evaluation.

- ✦ Persons with any of the above conditions should be admitted to the evacuation center only after appropriate medical evaluation and care.
- ✦ Wounds should be covered to prevent the spread of infectious disease.

Volunteer Self-Monitoring and Reporting

Residents of the center should be instructed to report any of the above conditions to the center staff. If a potentially infectious condition is identified in a person already residing at the evacuation center, the ill individual(s) should be separated from other residents or transferred to the isolation area.

Any volunteer who begins to experience any infectious disease symptoms or COVID-19 symptoms (fever, cough, shortness of breath, runny nose/nasal congestion, nausea, vomiting, diarrhea, sudden loss of smell or taste, sudden delirium, sore throat or respiratory distress, or other symptoms of infectious diseases, **MUST REPORT THESE TO THE DORM MANAGER**

Standard Precautions for staff interacting with any ill individual

- Wear a mask.
- Wear gloves if hand contact with blood, body fluids, respiratory secretions, or potentially contaminated surfaces is expected.
- When hands are visibly dirty or contaminated with respiratory secretions, wash hands with soap (either plain or antimicrobial) and water.
- Wash hands or use alcohol hand gel before and after touching a patient, after touching the patient's environment, or after touching the patient's respiratory secretions, whether gloves are worn or not.
- Wear a disposable gown or a gown that can be sterilized if clothes might become soiled with a patient's blood, body fluids or respiratory secretions.
- Change gloves and gowns after each patient encounter and wash hands or use alcohol hand gel immediately after removing gloves.

Appendix

Appendix A- Steramine Mixing, Storage, and Disposal

Steramine *

Steramine is an EPA approved sanitizer for dishes, glasses, and utensils, sinks countertops, and other non-porous hard surfaces when used at 200-400 parts per million (ppm) .It may also be safely used on “washable” children’s toys. It is effective when applied as directed as an immersion or a spray

DIRECTIONS FOR PRE-MIXING STERAMINE 1 GRAM SANITIZER:

Wear Personal Protective Equipment (PPE)– Minimum Required during Pre-mixing process:

- Gloves
- Goggles or Face Shield

First Aid Measures -Warning

- Tablet dust causes substantial but temporary eye injury. Do not get dust in eyes, on skin or on clothing. Wash thoroughly with soap and water after handling and before eating, drinking, chewing gum, using tobacco or using toilet. Tablets may be harmful if swallowed.

First Aid Procedures:

- IF IN EYES: Hold eye open and rinse slowly and gently with water for 15 –20 minutes. Remove contact lenses if present after first 5 minutes, then continue rinsing eye. Call a poison center or doctor for treatment advice.
- IF ON SKIN: Rinse immediately with water for 15 –20 minutes. If irritation persists, call poison control center or doctor for treatment advice.
- IF SWALLOWED: Call a poison control center or doctor immediately for treatment advice. Have a person sip a glass of water if able to swallow. Do not induce vomiting unless told to do so by poison control center or doctor. Do not give any thing by mouth to an unconscious person. Have the product label or container with you when calling a poison control center or doctor, or going for treatment.

Complete information for this product can be found in Appendix B- STERAMINE SAFETY DATA SHEET

Special Information regarding safety consideration when using “Point of Use pre-mixed STERAMINE solutions:

- PPE is NOT necessary when using “point of use concentrations” of STERAMINE of premixed solutions.

How To Mix

- Dissolve 1 to 2 tablets in 1 gallons of warm water to prepare 200 to 400 ppm sanitizing solution –
- Allow several minutes for tablets to dissolve completely before using.
- When mixed, **STERAMINE solutions** turn BLUE in color to help identify them as such
- When preparing larger quantity for dispensing into spray or other containers:

STORAGE OF STERAMINE MIXTURE

- Store pre-mixed solution in 3-5 gallon plastic spigot dispensers
- Clearly Label all **STERAMINE** dispensing containers with a **Blue Label** (to differentiate it from the **Red Labeled 3- M Disinfectant** Product which will be addressed in a separate document) to include:
 - Name of product
 - PPM concentration
 - Mixing date and Discard Date
- Fresh sanitizing solution should be prepared at least daily or more often if the solution becomes diluted
- Monitor pre-mixed **STERAMINE** solutions daily or more often with appropriate **Quaternary Testing Strips** to maintain effective PPM
- Discard solution daily or if PPM falls below 200-400

Complete information for this product can be found in Appendix B- STERAMINE SAFETY DATA SHEET

STORAGE AND GENERAL CONSIDERATIONS FOR DISPOSAL:

Do not contaminate water, food or feed by storage and disposal.

Store STERAMINE 1 Gram tablets in their original container in areas inaccessible to persons unfamiliar with its use.

The product comes in a non-refillable container. Do not reuse or refill the container. Triple rinse promptly after emptying. Offer empty container for recycling if available or discard in trash.

RINSATE DISPOSAL

Wastes resulting from the use of this product must be disposed of on site or at an approved waste disposal facility.

DIRECTIONS FOR USING STERAMINE POINT-OF-USE PRE-MIX SOLUTION FOR SANITIZING

FOR IMMERSION :

1. Scrape and prewash utensils and glasses, and other non-porous equipment to be sanitized
2. Wash with a good detergent or compatible cleaner in first sink compartment.
3. Rinse with clean water in second sink compartment.
4. Sanitize in a solution of 1 (1.5g) to 2 TABLETS per 1 GALLON OF WATER (200 to 400 ppm) in third sink compartment. Immerse all utensils for at least one minute or for contact time specified by governing sanitary code.
5. Place sanitized utensils on a rack or drain board to air dry.
6. A fresh sanitizing solution must be prepared at least daily or more often if the solution becomes diluted soiled or diluted as indicated by test strips.

FOR SPRAYING:

For sinks, countertops, tables and other hard non-porous surfaces:

Sanitizing is a 3 step process:

1. Remove surface debris and soil by sweeping and /or washing and rinse all articles and surfaces-thoroughly.
2. Apply a solution of 200 to 400 ppm concentration spraying with hand trigger sprayer or wipe on and allow surface to remain wet for at least one minute followed by adequate draining and air drying.
3. Do not rinse or wipe.

SPECIAL INSTRUCTIONS FOR CLEANING AND DECONTAMINATION AGAINST HIV OF SURFACES/OBJECTS SOILED WITH BLOOD/BODY FLUIDS:

Wear Personal Protection (PPE): The specific barrier protection items required to be used when handling items soiled with blood or body fluids are

- disposable gloves,
- gowns,
- masks and
- eye coverings.

CLEANING PROCEDURE:

- Blood and other body fluids must be thoroughly cleaned from surfaces and objects before application of this product.
- Contact Time: One minute.

DISPOSAL OF INFECTIOUS MATERIALS:

- Blood and other body fluids should be disposed of according to local regulation for infectious waste disposal.

STORAGE AND GENERAL CONSIDERATIONS FOR DISPOSAL:

Do not contaminate water, food or feed by storage and disposal.

Store STERAMINE 1 Gram tablets in their original container in areas inaccessible to persons unfamiliar with its use.

Non refillable container. Do not reuse or refill this container. Triple rinse promptly after emptying. Offer empty container for recycling if available or discard in trash. [PESTICIDE AND RINSATE DISPOSAL:]

Wastes resulting from the use of this product must be disposed of on site or at an approved waste disposal facility.

Appendix B- Steramine Safety Data

Safety Data Sheet

STERAMINE 1-G TABLETS

Date Prepared: 01-01-2016

1. PRODUCT AND COMPANY IDENTIFICATION

Product Name: STERAMINE 1-G TABLETS

Product Use Description: Tablets are dissolved at the ratio of one tablet (weight 1.5 grams each) per gallon of water to produce the 200 ppm concentration of quaternary sanitizing solution required for sanitizing food contact articles and surfaces in public eating places, schools, institutions, and food and dairy processing establishments.

Product Manufacturer: Edwards-Councilor Co., Inc.
1427 Baker Road
Virginia Beach, VA 23455

Phone for Information: 800-444-8227
Emergency Phone No. : 800-424-9300 (ChemTrec)

2. HAZARDS IDENTIFICATION

SIGNAL WORD: WARNING

PICTOGRAM: EXCLAMATION MARK



Hazard Summary: This product being in solid tablet form, with a weight of 1.5 grams, is unlikely to present a hazard in handling to the eyes, skin, or nose as opposed to the hazards of spilling and splashing inherent when handling liquid or powdered products. However, if tablets are crushed and dust is created, the dust may be irritating to the nose, eyes and skin if contact is prolonged. Oral ingestion may be harmful. Tablets taste extremely bitter, especially to children, which helps reduce the chance of accidental ingestion of enough tablets to be harmful.

3. COMPOSITION / HAZARDOUS INGREDIENTS

CHEMICAL NAME	C.A.S. Number	WEIGHT – Percent
Alkyl (C14 95%, C12 3%, C16 2%) Dimethyl Benzyl Ammonium Chloride Dihydrate (Quaternary Ammonium Compound)	68424-85-1	50%
Other Ingredients (proprietary)		50%

4. FIRST AID MEASURES

WARNING: Tablet dust causes substantial but temporary eye injury. Do not get dust in eyes, on skin or on clothing. Wash thoroughly with soap and water after handling and before eating, drinking, chewing gum, using tobacco or using toilet. Tablets may be harmful if swallowed.

First Aid Procedures:

IF IN EYES: Hold eye open and rinse slowly and gently with water for 15 – 20 minutes. Remove contact lenses if present after first 5 minutes, then continue rinsing eye. Call a poison center or doctor for treatment advice.

IF ON SKIN: Rinse immediately with water for 15 – 20 minutes. If irritation persists, call poison control center or doctor for treatment advice.

IF SWALLOWED: Call a poison control center or doctor immediately for treatment advice. Have a person sip a glass of water if able to swallow. Do not induce vomiting unless told to do so by poison control center or doctor. Do not give any thing by mouth to an unconscious person. Have the product label or container with you when calling a poison control center or doctor, or going for treatment.

5. FIRE FIGHTING MEASURES

Flammable properties

Flash point: > 212°F (100°C)

Ignition Temperature: No data available

Lower explosion limit: No data available

Upper explosion limit: No data available

Suitable extinguishing media: Water Spray - Dry Powder - Foam

Protective Equipment and precautions for firefighters

Specific hazards during fire-fighting: Heating or fire can release toxic gas.

Special protection equipment for fire-fighters:..... In the event of fire, wear self contained breathing apparatus.

6. ACCIDENTAL RELEASE MEASURES

No special precautions are required in the event of spillage of tablets when handling. If tablets are not broken, they may be used. If tablets are broken and crushed, sweep them up and dispose of them on site or at an approved waste disposal facility.

7. HANDLING AND STORAGE

Handling: No special handling measures required.

Storage: Store STERAMINE 1-G TABLETS in original container in areas inaccessible to persons unfamiliar with its use.

8. EXPOSURE CONTROLS / PERSONAL PROTECTION

Exposure Guidelines : Tablets contain no substances with occupational exposure limit values.

Personal Protective Equipment

Eye protection equipment:..... None required.

Skin and Body Protection:.....None required.

Hand Protection: None required.

Respiratory protection:.....None required.

Hygiene measures: Wash hands after handling tablets.

Appendix B- EPA-Steramine Information

1561-11

6/12/2014

1/9

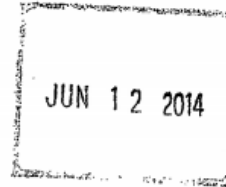


UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

OFFICE OF CHEMICAL SAFETY
AND POLLUTION PREVENTION

Robert G. Butz
Agent for Edwards-Councilor Co., Inc
Sullivan & Worcester, LLP
1666 K Street, NW
Washington, DC 20006



SUBJECT: Steramine I-G Tablets
EPA Registration Number: 1561-11
Application Dated: March 14, 2014
Receipt Date: March 14, 2014

Dear Mr. Butz:

The following amendment, submitted in connection with registration under the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA), as amended, is acceptable.

- Minor revisions to label

Submit and/or cite all data required for registration/reregistration/registration review of your product when the Agency requires all registrants of similar products to submit such data. A stamped copy of your labeling is enclosed for your records.

Should you wish to retain a reference to the company's website on your label, then please be aware that such a reference transforms the website into labeling under the Federal Insecticide Fungicide and Rodenticide Act sec 2 (p) (2) and then the website is subject to review by the Agency. If the website content is false or misleading, the product would be misbranded and its sale or distribution unlawful to sell or distribute under FIFRA section 12(a)(1)(E).

In addition, regardless of whether a website is referenced on your product's label, claims made on the website may not substantially differ from those claims approved through the registration process. Although EPA has not yet determined the extent to which it will routinely review company websites, if the Agency finds or if it is brought to our attention that a website contains false or misleading statements or claims substantially differing from claims approved through the registration process, the website may be referred to the EPA's Office of Enforcement and Compliance Assurance.

CONCURRENCES							
SYMBOL							
SURNAME							
DATE							

EPA Form 1320-1A (1/90)

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Appendix C- PPE Cleaning Station

Cleaning PPE

Location: a tent for cleaning and drying PPE, away from children, animals and surface water or drinking water sources.

Materials needed:

- 2 5-gallon buckets or kitty litter buckets or other larger containers that will hold PPE
- Clean water
- Measuring jug, like a beverage pitcher
- Detergent and/or sanitizing solution
- Paper towels or rags
- A mixing tray or a solid tarp at least 3' square
- Garbage can with plastic garbage bags
- Tent
- Clothes lines, clothespins, hangers
- Safety signs (no children, no pets, no potable water)

Caution: Always wash your PPE clothes separately from your daily clothes. Keep children and animals away from the PPE cleaning area. Use safety signs.

Procedure in order:

1. While still wearing your gloves, clean them in the solution, do not remove, you will remove these last. Use the first bucket to clean the outside of the gloves. Rinse by pouring water over them to drip into the 1st bucket.
2. Remove your face shield, goggles, wipe with a disposable cloth, then wash, rinse, and hang to drip dry on a covered clothesline.
3. Remove top of coveralls, tie arms around your waist to avoid contamination while removing your boot covers and boots. If needed, remove shirt, wash, rinse, and line dry.
4. If wearing an apron, remove, wash, rinse, and line dry.
5. Stand on a tarp or mixing tray and carefully remove boots one at a time and step onto a clean surface, leaving boots on the tarp or tray.
6. Remove coveralls, wash, rinse, and line dry. If coveralls are disposable, dispose of in a plastic garbage bag.
7. Boot covers and boots may be heavily contaminated. Wipe with a paper towel to remove debris, wash, rinse, and dry.
8. Finally, wash your gloves, rinse, and line dry.
9. Pour any water from the tarp or mixing tray into the buckets and dispose of properly into a septic system.
10. Hang all of your dried PPE in a safe, dry place for use next time. Check it all for damage, boots, and gloves for leaks. Note what needs to be mended.

Appendix C- PPE Cleaning Station Sign

Make the section below into a sign and hang in the PPE Cleaning Station

PPE CLEANING STATION

- **PERSONAL PROTECTIVE EQUIPMENT ONLY**
- **NO POTABLE WATER**
- **NO CHILDREN OR ANIMALS ALLOWED**
- **CAUTION: WATER MAY BE ON GROUND**

Appendix D- Dishwashing Station

Dishwashing Station

Location

in a tent, near where food is served, with a table for washing and an area for drying.

Materials needed:

- Tent
- 1 or 2 Waterproof tables
- 3 wash tubs
- Clean water
- Dish soap and sponges or rags, towels
- Bleach for food safe sanitizing rinse
- Lidded garbage can with liners

Set up:

Set a garbage can to the left of a table. On the table, space three tubs and place soap and sponges near the left tub. Fill tubs halfway with hot, clean water. Add a tablespoon of bleach to the right (sanitizing rinse) tub.

Dishwashing Procedure:

Have people form a line starting at the left of the table, and have a sign placed near the tent on how to use the dishwashing station. As they wash, they will proceed from left to right along the table, allowing a maximum of four people to use the station at a time. The soapy wash tub will need its water replaced the most often.

1. Scrape food debris from your plate into the garbage can. Proceed to the left tub (wash).
2. Wash with soapy water in the left tub to clean your items. Proceed to the middle tub (rinse).
3. Rinse your items. Proceed to the right (sanitizing rinse) tub.
4. Swish items in the tub to sanitize.
5. Take your items to the second table to dry on racks or with towels. If you do not have towels, items can be shaken outside to dry.

Appendix D- Dishwashing Station Sign

Make the section below into a sign and hang in the Dishwashing Station

WELCOME TO THE DISHWASHING STATION

- **PLACE ALL FOOD WASTE AND TRASH INTO THE TRASH CAN**
- **WASH IN THE 1ST TUB UNTIL CLEAN**
- **RINSE OFF SOAP IN THE 2ND TUB**
- **FINAL SANITIZING RINSE IN THE 3RD TUB**
- **DRYING AREA ON EXTRA TABLE OR RACK**