

# HOTEL – HOSPITAL COVID-19 RESPONSE PLAYBOOK

# DISCLAIMER

This information is intended solely for the purpose of assisting AHLA members with top line guidance when hotels are utilized for alternate uses such as Alternate Care Sites. The information provided is obtained from publicly available sources, including federal agencies and governmental entities, member companies, other leading trade associations and consultants.

The information contained in this Playbook is general in nature and should not be considered to be medical, legal, insurance or any other professional advice. In all cases you should consult with professional advisors familiar with your particular factual situation before making any decisions.

While we have taken every precaution to ensure that the content of this Playbook is both current and accurate, errors can occur. AHLA assumes no responsibility or liability for any errors or omissions in the content of this Playbook. The information contained in this Playbook is provided on an "as is" basis with no guarantees of completeness, accuracy, usefulness or timeliness and without any warranties of any kind whatsoever, express or implied.

*In no event will any of the authors, contributors, administrators or anyone else connected with AHLA, in any way whatsoever, be liable to you, or anyone else, for your use of the information contained in this Playbook, or for any decision(s) made or action(s) taken in reliance upon the information contained in this Playbook, or for any direct, indirect, incidental, special, exemplary, punitive, consequential or other damages whatsoever whether in an action of contract, statute, tort or otherwise, relating to the use of this Playbook.*

Certain links in this Playbook lead to sites maintained by organizations or entities over which AHLA has no control. Any such links are provided for your convenience only, and AHLA makes no representations or warranties regarding the accuracy, usefulness, completeness, appropriateness or any other aspect of the information located on such sites.

# PLAYBOOK OVERVIEW

<b>01</b>	<b>Use cases and guidelines</b>	<ul style="list-style-type: none"><li>• Definitions of alternate uses for a hotel property</li><li>• Guidelines to determine types of alternative use/care sites a hotel property can offer the healthcare system</li></ul>	5 – 12
<b>02</b>	<b>Non-clinical conversion and operations</b>	<ul style="list-style-type: none"><li>• Details the conversion and operations of a hotel to house non-medical patients</li><li>• Information on preparing and operating a hotel property to house COVID-19 crisis responders</li></ul>	13 – 23
<b>03</b>	<b>Clinical conversion and operations</b>	<ul style="list-style-type: none"><li>• Defines the required preparation of a hotel property to house medical (COVID-19 and non-COVID-19) patients</li><li>• Guiding list of relevant staff who can perform operations</li></ul>	24 – 45
<b>04</b>	<b>Post COVID-19 assistance period</b>	<ul style="list-style-type: none"><li>• Information on converting a hotel back to its original purpose</li><li>• Conversion period will require space conversion and a defined waiting period prior to re-opening</li></ul>	46 – 47
<b>05</b>	<b>Appendix</b>	<ul style="list-style-type: none"><li>• Playbook references</li></ul>	48 – 49

# PRINCIPLES OF THE PLAYBOOK

## Document does...

- ✓ Provide guidance for converting a hotel to and from operating as an alternative care site
- ✓ Provide operating guidance for a hotel acting as an alternate care site
- ✓ Leverage industry expertise and the latest existing guidelines

## Document does not...

- ✗ Define the type of patient each facility (hotel) should accept
- ✗ Define how to triage new patients who arrive at a facility (hotel)
- ✗ Determine the payment model
- ✗ Define commercial agreements, leases and other legal terms

# REQUIREMENTS CONTAINED WITHIN THIS PLAYBOOK

- Requirements for the conversion and operations of a hotel property are indicative of what is required/recommended based on our knowledge today
- We leveraged several high-profile resources to collate the requirements/ recommendations

*Note: for a full list of resources see appendix: playbook resources*



[Home](#) / [Coronavirus](#) / [Alternate Care Sites](#)

## Alternate Care Sites (ACS)



US Army Corp of Engineers: Alternate Care Sites



## Federal Healthcare Resilience Task Force Alternate Care Site (ACS) Toolkit First Edition

HSS: Alternate Care Site (ACS) Toolkit: First Edition



CDC: Alternate Care Sites



## Hotels Supporting Healthcare: COVID Toolkit

AHLA: Hospitality for Hope Initiative Toolkit



## Converting alternate care sites to patient space options

ASHE: Converting alternate care sites to patient space options

---

**When a property chooses to go through a conversion it will be driven by government agencies; final requirements will be unique by property based on local need and may be led by several agencies**

---

**01**

**USE CASES AND GUIDELINES**

# THREE ALTERNATE USES FOR A HOTEL PROPERTY

To support the healthcare industry, there are three potential alternate uses for hotels during the COVID-19 crisis

Non-clinical use

## 01

### House COVID-19 crisis responders

- Guests are primarily responders to the COVID-19 situation:
  - Visiting volunteers
  - Healthcare professionals
  - FEMA and other emergency service providers/contractors
- **Operations closely resemble business as usual** with increased levels of cleaning, social distancing, and contactless operations

Clinical use

## 02

### Care for non-critical, non-COVID-19 patients (non-isolation)

- Guests are patients who require medical professional oversight and do not require isolation
- **Some modifications are required** to accommodate patients:
  - Physical space: sleeping rooms, conference space, offices, and public spaces
  - Standard operating plans: updates are required to comply with safety and compliance regulations

## 03

### Care for COVID-19 patients with mild symptoms (isolation)

- Guests are patients requiring isolation and medical oversight
- **Significant modifications are required** to accommodate patients:
  - Physical space: sleeping rooms, conference space, offices, and public spaces require transformation
  - Standard operating plans: significant updates to comply with safety and compliance regulations for treating isolation patients

*Note: A hotel property may become an alternate care site for one or more of the above use cases*

# WHAT KIND OF ASSISTANCE CAN MY HOTEL PROVIDE

There are key considerations to determine if/what assistance can be provided by a property when considering whether to become an alternate care site to assist in the COVID-19 response

Which hotels fit the need?

**Not all properties are created equal** and as such, different properties may lend themselves better to different use cases

Well-located, high sleeping room capacity, full-service properties may be better suited for all the use cases but properties with certain locations (e.g. distance to hospital), property characteristics (e.g. no commercial kitchen), or limited room types (e.g. a small number of accessible rooms) could restrict which use cases can be fulfilled

**Each hotel should be considered on an individual basis depending on the current and future needs of the healthcare system**

Not exhaustive

## Location considerations

- Proximity to **healthcare providers** such as:
  - Hospitals
  - Pharmacies
  - Diagnostics / labs
- **Ease of access** to property

## Property considerations

- **Interior versus exterior** corridor
- Number and location of **elevators**
- Use and function of **common space** areas
- Commercial **kitchen** for meal preparation
- **Security** access points
- **Parking** location and number

## Room considerations

- Number of **ADA/Accessible** rooms
- Number of **adjoining** rooms
- Number of **single vs. double** bed rooms
- Type of **locking mechanism** for rooms

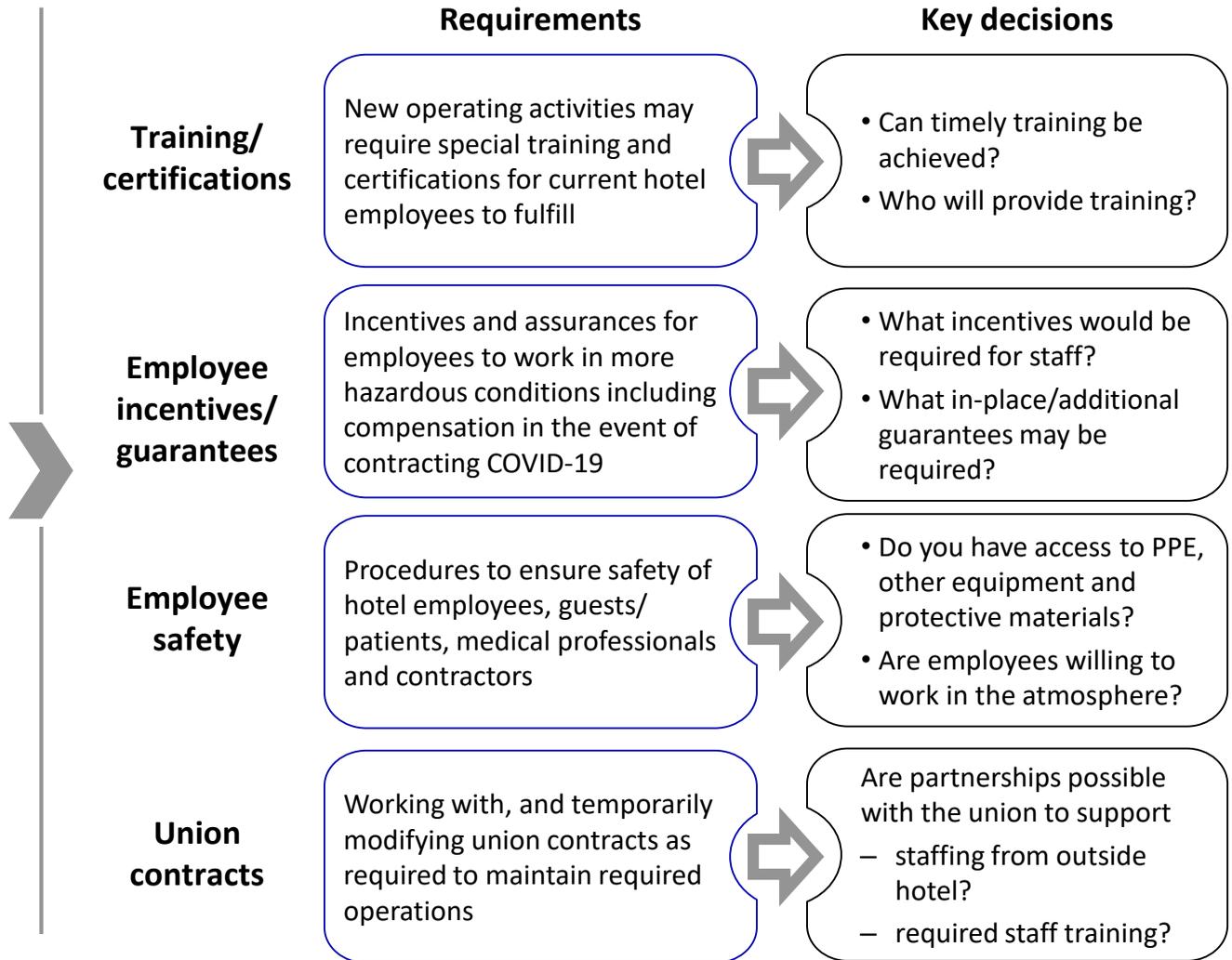
## Other considerations

- **Willingness to convert** rooms to hospital specifications
- Ability of **hotel staff workforce** to support where required
- Relationship of **third-party providers** where outsourcing is required
- **HVAC capabilities** needed for clinical care (e.g. negative pressure)

# HOTEL EMPLOYEE CONSIDERATIONS

Prior to converting a hotel, there are several talent related considerations to be taken into account

**There are several ways hotel leadership can work to protect and support their employees when operating during the COVID-19 crisis**



# ALTERNATE CARE SITE PRE-OPENING OPERATIONS PREP

Prior to opening a hotel property in an alternative manner, there are four critical components of the hotels operations which need to be addressed



## HOTEL LEADERSHIP

- Define temporary leadership model to include healthcare professionals for alternate clinical care sites
- Assign roles and responsibilities of leadership across hotel, healthcare, and government (where applicable)



## SLEEPING ROOM & RATE DEFINITION

- Define operational room types and counts based on capacity recommendations to avoid overcrowding
- Determine rate rules in conjunction with health experts (e.g. optimal length of stay restrictions) and organizations donating rooms (e.g. room sponsors)



## RESERVATION MANAGEMENT

- Non-clinical sites: Identify channels to accept reservations in non-clinical alternate care site
- Clinical sites: Determine new patient registration procedures for clinical alternate care sites



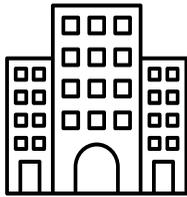
## TRAINING

- Identify staff who require additional education or certification required to carry out tasks
- Provide on-boarding to entire staff on overall operations and department operations

# HOTEL OPERATING STRUCTURES

Depending on the alternate purpose a hotel operationalizes, there are different team structures which can be implemented

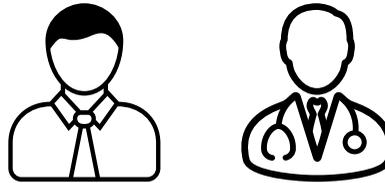
Non-clinical use



## Hotel

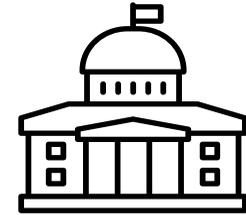
- Existing hotel management team operates the property
- Hotel ownership and leadership can determine if/how to supplement staff with specialized contractors as needed

Clinical use



## Hotel/ hospital partnership

- Joint operating model agreement between hotel and local healthcare professionals
- Existing hotel employees operate the hotel with healthcare professionals



## Government

- Can include city, state and federal government resources
- All core functions are resourced by government agencies, including conversion and operations

---

**HHS specifies that at no time will there be an Alternate Care Site that combines COVID-19 Symptomatic Patients with Asymptomatic Personnel**

---

# CONSIDERATIONS WHEN ASSIGNING ROLES AND RESPONSIBILITIES

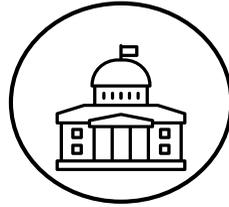
As you convert your hotel, different requirements will define the type of staff that can handle certain on-property activities and what sub-contacting is required



## Hotel employees

Hotel functions will fall into two categories depending on the hotel's alternate function:

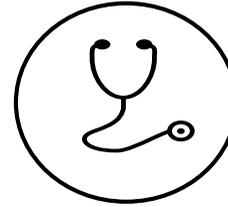
1. BAU activities that may be performed with existing staff with no training / certification (e.g. on-property maintenance)
2. Activities requiring special training / certification (e.g. medical waste removal) which may be undertaken by existing staff who obtain the certification



## Government resources

Government appointed resources to operate various portions of a hotel property

- Government agencies may include any combination of city, state, and federal
- Agencies will staff daily operating activities and subcontract function as required (e.g. F&B, laundry services, etc.)



## Healthcare professionals

- **Clinical professionals:** responsible to provide all medical activities requiring certification and credentials
  - Note: medical professionals will take an active lead in hotel leadership
- **Non-clinical healthcare professionals:** assist in daily operating activities. Including, but not limited to:
  - Environmental services (EVS)
  - Back of office hospital employees



## Specialized contractors

- **Operations activities:** roles and responsibilities which require additional resources outside hotel employees and healthcare professionals (e.g. security)
- **Functions:** entire hotel operating functions which cannot be performed by existing hotel infrastructure due to regulations or hotel leadership's desire (e.g. laundry of linens, F&B preparation)

# HOTEL CONVERSION AND OPERATING FRAMEWORKS

The conversion of a hotel to act in support of the healthcare industry is divided into a conversion and operating stage

## Hotel conversion plan framework

*Before housing COVID-19 crisis responders and/or patients, the hotel must be converted based on its alternative purpose*



### General site preparations

*Required and recommended general building infrastructure and utility requirements*



### Ground space conversion

*Areas supporting large group congregation (e.g. lobby and conference space) requiring modifications and new equipment*



### Sleeping room conversion

*Sleeping room transformations for patients use, and other guest floor space to accommodate medical requirements*

## Converted hotel operations framework

*Before operating as an alternate care site, modifications to standard operating plans (SOPs) must be developed based on the alternative purpose*



### Guest services

*Providing desk services, amenities, general help, and information to its guests / patients*



### Housekeeping/environmental services

*Maintaining cleanliness and aesthetic upkeep of sleeping rooms, public and back-of-house areas*



### Food & beverage

*Preparing food and beverage services to its guests and patients*



### Engineering / maintenance

*Performing general, preventative, corrective, and emergency maintenance*



### Security, safety, compliance

*Ensuring the alternate care site is secure and in-compliance with all relevant regulations*

The frameworks will be referred to for both the non-clinical and clinical portions of the playbook

**02**

**NON-CLINICAL CONVERSION AND OPERATIONS**

# HOUSE COVID-19 CRISIS RESPONDERS

Housing COVID-19 crisis responders requires a minimal amount of required property conversion elements and updates to standard operating plans

Non-clinical use

## 01

### House COVID-19 crisis responders

- Guests are primarily responders to the COVID-19 situation:
  - Visiting volunteers
  - Healthcare professionals
  - FEMA and other emergency service providers/contractors
- **Operations closely resemble business as usual** with increased levels of cleaning, social distancing, and contactless operations

Clinical use

## 02

### Care for non-critical, non-COVID-19 patients (non-isolation)

- Guests are patients who require medical professional oversight and do not require isolation
- **Some modifications are required** to accommodate patients:
  - Physical space: sleeping rooms, conference space, offices, and public spaces
  - Standard operating plans: updates are required to comply with safety and compliance regulations

## 03

### Care for COVID-19 patients with mild symptoms (isolation)

- Guests are patients requiring isolation and medical oversight
- **Significant modifications are required** to accommodate patients:
  - Physical space: sleeping rooms, conference space, offices, and public spaces require transformation
  - Standard operating plans: significant updates to comply with safety and compliance regulations for treating isolation patients

*Note: A hotel property may become an alternate care site for one or more of the above use cases*



# MANDATORY REQUIREMENTS FOR GENERAL SITE PREPARATION

Requirement	What does this mean?
<input type="checkbox"/> Sprinkler system	Building must have complete operational sprinkler system compliant with local fire codes
<input type="checkbox"/> Fire alarm system	<ul style="list-style-type: none"> <li>• Building must have complete operational interior fire alarm system compliant with local fire codes</li> <li>• Fire alarm system must include manual stations at exit locations and smoke detection within the sleeping rooms</li> <li>• Fire alarm system must be arranged to transmit alarm automatically to notify the fire department</li> </ul>
<input type="checkbox"/> Exits	No fewer than two exits per story; compliant with local fire codes
<input type="checkbox"/> Asbestos-, mold-, lead-free	<ul style="list-style-type: none"> <li>• Building must be asbestos/mold/lead free</li> <li>• Rough assessment for asbestos/lead can be based on building age</li> </ul>
<input type="checkbox"/> HVAC	Rooms must be heated and air conditioned; ventilation must be compatible with clinical needs



# CHECKLIST FOR CONVERTING GROUND FLOOR COMMON SPACES

Original hotel space	Converted space	Conversion requirements
Parking and garage	Parking and garages	<input type="checkbox"/> If garage doesn't promote contactless entry/exit, update gate and security system <input type="checkbox"/> If garage space is leased, work with tenant on updated rules (e.g., in/out privileges)
Lobby	Lobby	<input type="checkbox"/> Install fridge for F&B meal access 24/7 <input type="checkbox"/> Install social distancing signs; use tape to encourage social distancing at elevators, etc. <input type="checkbox"/> Setup temperature/health monitoring stations at entrance, along with a designated "red zone" if an individual is to not pass the screening
Dining room	Dining room	<input type="checkbox"/> Follow environmental cleaning best practices described here: <a href="https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf">https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf</a>
Fitness and rec. areas	N/A	<input type="checkbox"/> Close area
Spa	N/A	<input type="checkbox"/> Close area
Laundry room for guests	Laundry room for guests	<input type="checkbox"/> Determine if patient laundry will be laundered on-premises or sent out to vendor <input type="checkbox"/> If creating an on-premises laundry facility: <ul style="list-style-type: none"> <li><input type="checkbox"/> Partition area into a "dirty" area for receiving/handling soiled laundry and a "clean" area for processing washed items</li> <li><input type="checkbox"/> Ensure handwashing station is available to workers</li> <li><input type="checkbox"/> Ensure equipment is maintained according to manufacturer's instructions to prevent microbial contamination of system</li> </ul> <p><i>When collecting and processing laundry, please follow these guidelines established by the CDC:</i>  <a href="https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/laundry.html">https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/laundry.html</a></p>
Kitchen (Food and Beverage – Back of House)	Kitchen	<input type="checkbox"/> Follow and elevate kitchen infection control best practices described here: <a href="https://spice.unc.edu/wp-content/uploads/2017/05/09-Infection-Control-Kitchen.pdf">https://spice.unc.edu/wp-content/uploads/2017/05/09-Infection-Control-Kitchen.pdf</a> <input type="checkbox"/> Order required F&B materials (e.g. trays, utensils) to abide by regulations <input type="checkbox"/> Setup contactless food delivery system

# CHECKLIST FOR CONVERTING SLEEPING ROOMS

Original hotel space	Converted space	Conversion requirements
Sleeping room	Sleeping room	<ul style="list-style-type: none"> <li><input type="checkbox"/> Remove minibar</li> <li><input type="checkbox"/> Remove decorative items (e.g. decorative pillows, etc.)</li> <li><input type="checkbox"/> Provide extra linens and towels</li> <li><input type="checkbox"/> Provide extra toiletries</li> <li><input type="checkbox"/> Provide sanitation supplies for guests to self-clean</li> </ul>

# HOTEL OPERATION TEAM

When housing COVID-19 responders, a property's standard operating plans will remain similar to existing activities, and hotel leadership has the opportunity to utilize their employees

## Team summary

- Operations will be lead by existing hotel management team
- Minimal required personnel assigned by government agencies
- Execution of SOPs will include:
  - Existing hotel employees
  - Special contractors to supplement hotel team, on an as needed basis (e.g. replace existing staff if they are not comfortable)

---

Hotels leadership can determine the extent of which their employees are involved in operating an alternate use site

---

# GUEST SERVICES OPERATION ACTIVITIES

Activity	Non-patient
Checking in / out of guests or patients	○
Triage of incoming patients <sup>1,3</sup>	■
Back of house operations such as assigning sleeping rooms to guests/patients	○
Coordinating logistics communication with hospital (e.g. guest or patient arrival / departure) <sup>1,3</sup>	■
Supporting infection control measures (e.g. wipes, sanitizers, PPE) <sup>1,3</sup>	○
Providing social support resources (e.g. TV, WIFI, magazines) <sup>2</sup>	○
Completing guest requests via room delivery (e.g. extra towels, toiletries, etc.)	○
Paging guests to deliver messages	○
Handling package reception, baggage handling and other valet activities	○
Monitoring guest and employee health statuses for COVID-19 and other infectious diseases (taking temperatures at door, etc.) <sup>1,2</sup>	● ●

Guest services

1. CDC – Alternative Care Sites, 2. AON Hotel Industry Perspectives for COVID-19, 3. HKS Response Study, 2020

# HOUSEKEEPING OPERATION ACTIVITIES

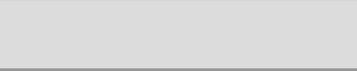
	Activity	Non-patient
<b>Housekeeping – Sleeping room</b>	Providing extra linens (bed sheets and towels)	
	Disinfecting beds, bathrooms, carpets, etc. <sup>4</sup>	
	Removing medical waste <sup>1</sup>	
	Removing non-medical waste	
	Restocking hotel supplies	
	Restocking of medical supplies <sup>1</sup>	
	Performing additional turnover cleaning or replacements (e.g. replacing mattress liners) <sup>4</sup>	
<b>Housekeeping – Laundry</b>	Laundering of bed sheets and towels <sup>1</sup>	
	Laundering of medical wear / patient clothing <sup>1</sup>	
<b>Housekeeping – Public spaces</b>	Cleaning public spaces (e.g. elevators, hallways)	
	Cleaning healthcare command center / spaces <sup>3</sup>	
<b>Housekeeping – Back of house</b>	Cleaning storage rooms, offices, break rooms	
	Cleaning of non-medical equipment	
	Cleaning of medical equipment <sup>1</sup>	

Note: frequency of cleaning will likely adjust from normal operations (e.g. increase in public areas and decrease for sleeping rooms)

1. CDC – Alternative Care Sites, 2. CDC -- Cleaning and Disinfecting your Facility; 3. US Army Corp of Engineers, 2020, 4. HKS Response Study, 2020



# FOOD & BEVERAGE OPERATION ACTIVITIES

	Activity	Non-patient
<b>Food &amp; Beverage – In the Kitchen</b>	Preparing food and beverage	
	Managing diet restrictions and special requests	
	Cleaning kitchen equipment	
	Clearing soiled trays, utensils, etc.	
	Utilizing non-disposable vs. disposable items <sup>1</sup>	
<b>Food &amp; Beverage – Other</b>	Coordinating patient dietary needs with doctors and/or nurses	
	Taking food and beverage orders	
	Preparing and settling bills	
	Delivering and removing food	
	Picking up outside food delivery	
	Cleaning staff / HP cafeteria areas <sup>1</sup>	

1. CDC – Alternative Care Sites  
© Oliver Wyman

# ENGINEERING/MAINTENANCE OPERATION ACTIVITIES

	Activity	Staff assigned
<b>Engineering / Maintenance</b>	Maintaining plumbing and electric	
	Servicing exhaust systems, dampers, fans continuously <sup>2</sup>	
	Upgrading power distribution when necessary <sup>2</sup>	
	Providing and servicing cameras or other patient visualization equipment <sup>2</sup>	
<b>Engineering / Maintenance – Worker Certification Req.</b>	Servicing HEPA filter units <sup>2</sup>	
	Creating negative pressure rooms when necessary <sup>2</sup>	
	Servicing HVAC systems and other ventilation controls for infection containment <sup>1,2</sup>	
	Maintaining emergency breakdown systems (e.g. generators, power supplies) <sup>2</sup>	
	Maintaining other temporary medical areas (e.g. medical gas storage) <sup>3</sup>	

1. CDC – Alternative Care Sites, 2. HKS Response Study, 2020, 3. US Army Corps of Engineers, 2020, 4. <https://www.ashe.org/education/certified-worker>



# SECURITY, SAFETY, AND COMPLIANCE OPERATION ACTIVITIES

	Activity	Staff assigned
<b>Security and Safety</b>	Ensuring hotel building security	○
	Ensuring sleeping room security	○
	Providing hallway security/safety monitors <sup>2</sup>	■
	Maintaining hotel data and technology security	○
	Ensuring medical records privacy and security (e.g. HIPAA) <sup>3</sup>	■
<b>Compliance</b>	Removing general waste (non-medical / non-contaminated)	○
	Removing medical waste (biohazard / contaminated) <sup>1</sup>	■
	Cleaning and disinfecting appropriately (daily and terminal cleaning) <sup>1</sup>	○
	Providing additional training and certifications <sup>1</sup>	●
	Preparing for potential inspections	○

1. CDC – Alternative Care Sites, 2. OW Research, 3. HKS Response Study, 2020

**03**

**CLINICAL CONVERSION AND OPERATIONS**

# HOTEL PROPERTY AS AN ALTERNATE CARE SITE

Hotel property conversion requirements/recommendations are significant and vary based on type of alternate use property; similarly standard operating plans will require significant updates to activities and personnel

Non-clinical use

## 01

### House COVID-19 crisis responders

- Guests are primarily responders to the COVID-19 situation:
  - Visiting volunteers
  - Healthcare professionals
  - FEMA and other emergency service providers/contractors
- **Operations closely resemble business as usual** with increased levels of cleaning, social distancing, and contactless operations

Clinical use

## 02

### Care for non-critical, non-COVID-19 patients (non-isolation)

- Guests are patients who require medical professional oversight and do not require isolation
- **Some modifications are required** to accommodate patients:
  - Physical space: sleeping rooms, conference space, offices, and public spaces
  - Standard operating plans: updates are required to comply with safety and compliance regulations

## 03

### Care for COVID-19 patients with mild symptoms (isolation)

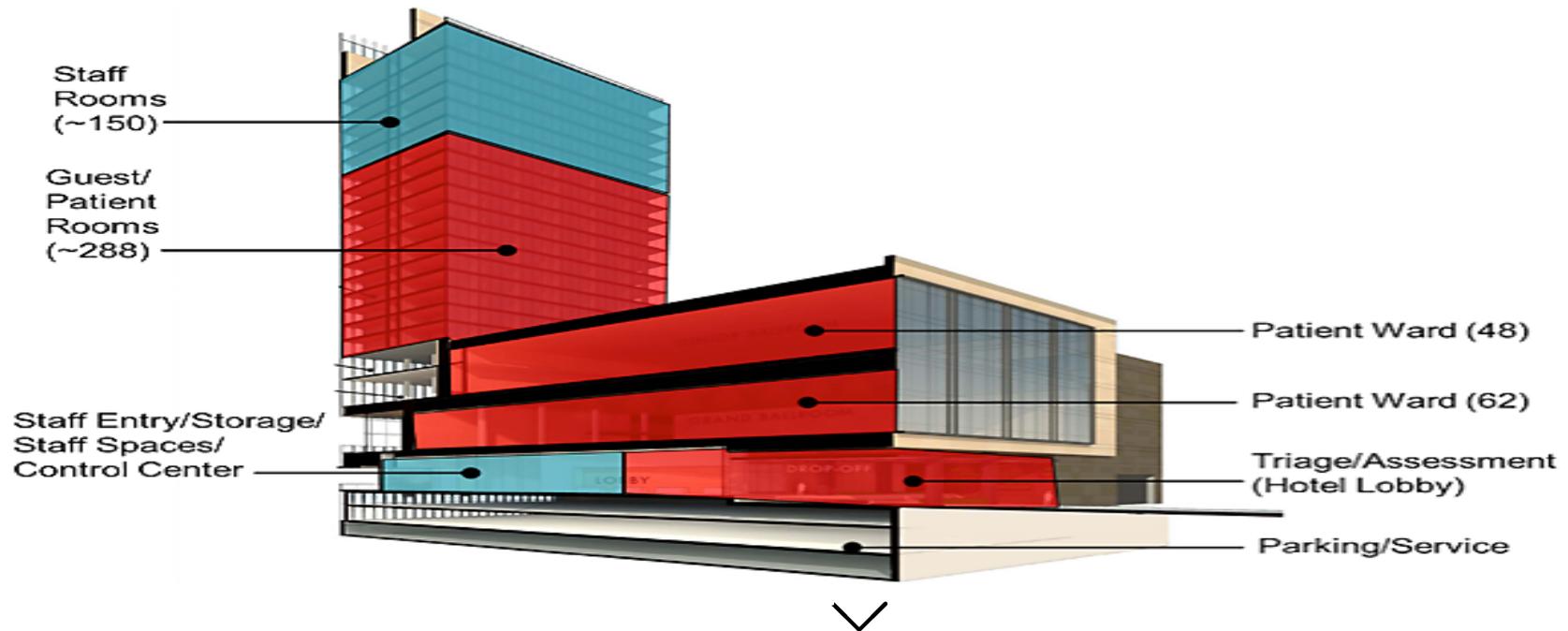
- Guests are patients requiring isolation and medical oversight
- **Significant modifications are required** to accommodate patients:
  - Physical space: sleeping rooms, conference space, offices, and public spaces require transformation
  - Standard operating plans: significant updates to comply with safety and compliance regulations for treating isolation patients

*Note: A hotel property may become an alternate care site for one or more of the above use cases*

# GENERAL SITE PREPARATIONS OVERVIEW

Prior to conversion, there are both mandatory and preferred building infrastructure and utilities requirements to be checked and met depending on the site's use case(s)

## Example general site overview for clinical use



- **Example mandatory requirements**
  - One bathroom per sleeping room, robust IP system, elevator/corridor/door size
- **Example preferred requirements**
  - 250+ patient sleeping rooms, power capabilities/flexibility, proximity to hospital, ventilation capabilities, in-room entertainment and connectivity



# MANDATORY REQUIREMENTS FOR GENERAL SITE PREPARATION

Requirement	What does this mean?
<input type="checkbox"/> Sprinkler system	Building must have complete operational sprinkler system compliant with local fire codes
<input type="checkbox"/> Fire alarm system	<ul style="list-style-type: none"> <li>• Building must have complete operational interior fire alarm system compliant with local fire codes</li> <li>• Fire alarm system must include manual stations at exit locations and smoke detection within the sleeping rooms</li> <li>• Fire alarm system must be arranged to transmit alarm automatically to notify the fire department</li> </ul>
<input type="checkbox"/> Exits	No fewer than two exits per story; compliant with local fire codes
<input type="checkbox"/> Asbestos-, mold-, lead-free	<ul style="list-style-type: none"> <li>• Building must be asbestos/mold/lead free</li> <li>• Rough assessment for asbestos/lead can be based on building age</li> </ul>
<input type="checkbox"/> HVAC	Rooms must be heated and air conditioned; ventilation must be compatible with clinical needs
<input type="checkbox"/> One room/one bathroom (for isolation care)	<ul style="list-style-type: none"> <li>• Each room must have one bathroom <ul style="list-style-type: none"> <li>– Note: if each sleeping room does not have its own bathroom, site may still be used to house medical professionals and provide non-isolation care, provided bathroom is on floor and accessible</li> </ul> </li> </ul>



# MANDATORY REQUIREMENTS FOR GENERAL SITE PREPARATION

Requirement	What does this mean?
<input type="checkbox"/> Elevator, corridor, and sleeping room entrance size	<ul style="list-style-type: none"> <li>• If building has multiple stories, an elevator car/cab that can clear:             <ol style="list-style-type: none"> <li>1. Ambulance Stretcher (Wide Car Configuration) eg. 6'-8" wide x 5'-3" depth with 3'-6" side opening door; or 7'-8" wide x 5'-4" depth with 4'-0" center opening door</li> <li>2. Hospital Bed/Gurney (Deep Car Configuration) eg. 5'-8" wide x 8'-5" depth with 4'-6" side opening door</li> </ol> </li> <li>• Minimum corridor/hallway width should be 8 feet</li> <li>• Doors widths should be capable of accommodating a gurney or stretcher</li> </ul> <p><i>Note: Requirements are needed to get non-ambulatory patients to upper floor levels using large equipment, and ambulance stretcher</i></p>
<input type="checkbox"/> Robust IP infrastructure to allow telehealth services	<ul style="list-style-type: none"> <li>• Rooms must have WAP connectivity able to stream videos</li> <li>• Each room must have RJ-45 outlets connected to existing telecommunication space</li> <li>• Note: This is particularly important when caring for isolation patients from remote sites.</li> </ul>



# PREFERRED REQUIREMENTS FOR GENERAL SITE PREPARATION

Requirement	What does this mean?
<input type="checkbox"/> Available space	Ideal hotel would have capacity of at least 250 patient rooms <i>Note: size of hotel requirements may differ based on requirements and geography</i>
<input type="checkbox"/> Fire extinguishers	Fire extinguishers must be provided and be compliant with local fire codes
<input type="checkbox"/> Power – capacity and flexibility	<ul style="list-style-type: none"> <li>• Floor panel capacity to supply one 20 ampere normal power circuit per bedroom</li> <li>• Flexibility and capacity in service panel and transformer to connect roll-up generator</li> </ul>
<input type="checkbox"/> Proximity to existing, permanent hospital (<30 minutes)	Needed for logistics and support, materials, dirty/clean utilities, nutrition care.
<input type="checkbox"/> Access to hazardous Disposal	Access to permanent/temporary facilities for med waste, sanitary, soiled linen
<input type="checkbox"/> Hotel room size	<ul style="list-style-type: none"> <li>• Minimum bedroom size 140 SF / bathroom 60 SF</li> <li>• Two room configuration is ideal (bedroom with king or two queen beds and bathroom)</li> <li>• Suite rooms with multiple rooms are not preferred for patient care spaces as it requires non-standard conversion steps</li> </ul>



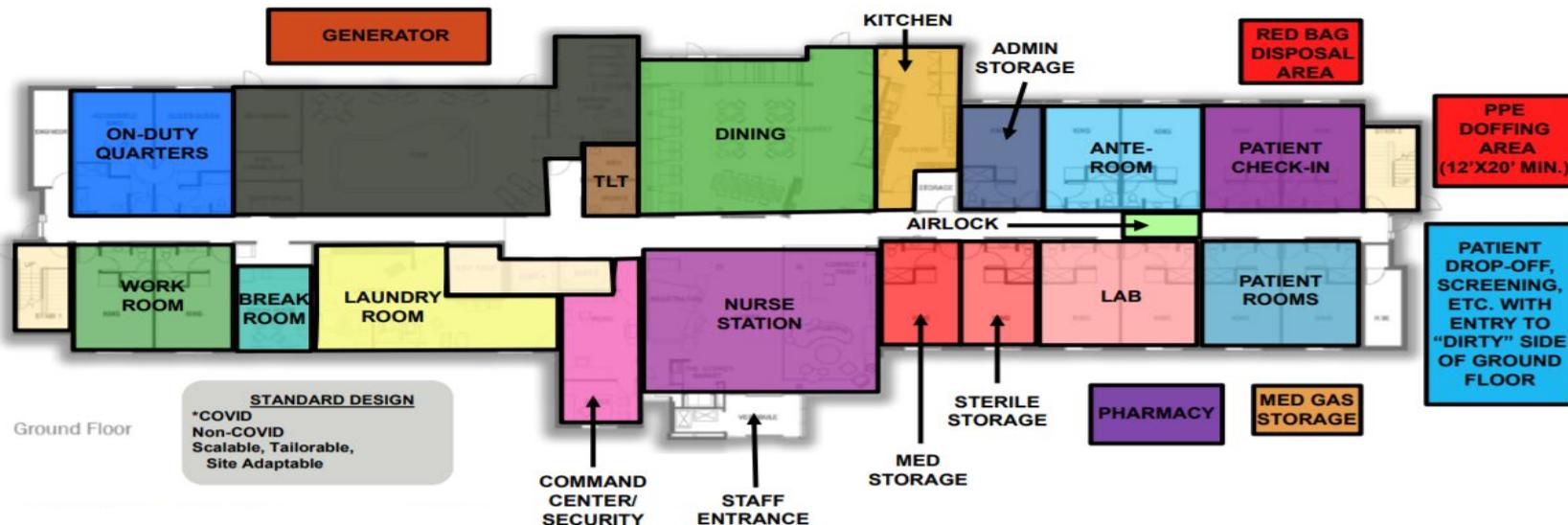
# PREFERRED REQUIREMENTS FOR GENERAL SITE PREPARATION

Requirement	What does this mean?
<input type="checkbox"/> In-room entertainment and connectivity	<ul style="list-style-type: none"> <li>• Sleeping rooms should be equipped with TV and programming</li> <li>• All areas should be equipped with WIFI</li> <li>• Hotel should have a centrally connected phone system, with phones in each room</li> </ul>
<input type="checkbox"/> Bathroom exhaust	<ul style="list-style-type: none"> <li>• Bathroom exhaust must be centralized so that it can be augmented for negative pressure</li> <li>• Need sufficient space to upgrade/replace the exhaust AHU to incorporate a HEPA filter pulling ~200cfm per room             <ul style="list-style-type: none"> <li>– Rooftop arrangement is preferred.</li> </ul> </li> <li>• Lack of centralization would make augmenting exhaust difficult             <ul style="list-style-type: none"> <li>– It would then be necessary to add additional exhaust system which serves every room which would significantly impact the conversion schedule</li> </ul> </li> </ul>
<input type="checkbox"/> Supply air handling unit	<ul style="list-style-type: none"> <li>• Need sufficient space to upgrade or replace the supply air handling unit to provide the additional makeup air             <ul style="list-style-type: none"> <li>– Rooftop mounted equipment would likely provide the most flexibility</li> <li>– Anticipate an increase of supply air of 100cfm per room</li> </ul> </li> </ul>

# GROUND SPACE CONVERSION OVERVIEW

Transformation of areas supporting large group congregation (e.g. lobby and conference space) require modifications and new equipment

## Example ground floor plan for clinical use



- **Engineering changes:** Make all floor plan additions
- **Reuse with minimal modifications:** Hotel furniture for staff quarters, kitchen, dining, vestibule, CCTV for security, card readers
- **New equipment:** Metal detector, video teleconferencing for command center, controlled access, storage equipment, eye and handwash stations, and signage



# CHECKLIST FOR CONVERTING GROUND FLOOR COMMON SPACES

Original hotel space	Converted space	Conversion requirements
Other patient rooms available on the ground floor	Patient check-in	<ul style="list-style-type: none"> <li><input type="checkbox"/> Create and place signage designating room</li> <li><input type="checkbox"/> Ensure that room is located on the “dirty side” of the airlock, next to patient entrance on side of the hotel</li> <li><input type="checkbox"/> Remove bed</li> <li><input type="checkbox"/> Install workstation, monitor, printer, and telephone</li> <li><input type="checkbox"/> Install chairs for staff and patient seating</li> </ul>
Other patient rooms available on the ground floor	Patient holding room	<ul style="list-style-type: none"> <li><input type="checkbox"/> Create and place signage designating rooms</li> <li><input type="checkbox"/> Ensure that room is located on the “dirty side” of the airlock, next to patient entrance and check-in areas</li> </ul>
Parking and garage	Parking and garages	<ul style="list-style-type: none"> <li><input type="checkbox"/> If garage doesn’t promote contactless entry/exit, update gate and security system</li> <li><input type="checkbox"/> If garage space is leased, work with tenant on updated rules (e.g., in/out privileges)</li> </ul>
Guest services area (check-in, etc.)	Nurses station	<ul style="list-style-type: none"> <li><input type="checkbox"/> Designate original main entrance leading to the guest services area to become the staff entrance by posting appropriate signage</li> <li><input type="checkbox"/> Convert guest services area into a nurses station by               <ul style="list-style-type: none"> <li><input type="checkbox"/> Install additional desks and chairs</li> <li><input type="checkbox"/> Install adequate number of workstations with clinical software</li> <li><input type="checkbox"/> Install adequate monitors to support workflow</li> <li><input type="checkbox"/> Setup printers and scanners</li> <li><input type="checkbox"/> Install telephones / paging comms. devices</li> <li><input type="checkbox"/> Create storage space for common supplies</li> <li><input type="checkbox"/> Ensure workstations have backup power</li> <li><input type="checkbox"/> Setup hand sanitizing station(s)</li> <li><input type="checkbox"/> Provide access to hotel wide paging system</li> </ul> </li> </ul>



# CHECKLIST FOR CONVERTING GROUND FLOOR COMMON SPACES

Original hotel space	Converted space	Conversion requirements
Dining room <i>(Food and Beverage – Front of House)</i>	Dining room	<input type="checkbox"/> Follow environmental cleaning best practices described here: <a href="https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf">https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf</a>
Valet – guest entrance	N/A	<input type="checkbox"/> Close area and redirect all patients to side entrance as shown in conversion floor plan map
Fitness and Rec. Areas	N/A	<input type="checkbox"/> Close area
Spa	N/A	<input type="checkbox"/> Close area
Meeting and Conference space <i>(or any ground floor room)</i>	Medical storage	<input type="checkbox"/> Clear the room to allow for maximum storage space <input type="checkbox"/> Install shelving in the room <input type="checkbox"/> Create and place signage designating room
Meeting and Conference space <i>(or any ground floor room)</i>	Sterile storage	<input type="checkbox"/> Clear the room to allow for maximum storage space <input type="checkbox"/> Install shelving in the room <input type="checkbox"/> Create and place signage designating room
Meeting and Conference space <i>(or any ground floor room)</i>	Admin. storage	<input type="checkbox"/> Clear the room to allow for maximum storage space <input type="checkbox"/> Install shelving in the room <input type="checkbox"/> Create and place signage designating room
VIP Lounge <i>(or any ground floor room)</i>	Ante-room	<input type="checkbox"/> Close area if not located on ground floor <input type="checkbox"/> Convert into an ante-room for waiting patients and family members <input type="checkbox"/> Create and place signage designating room



# CHECKLIST FOR CONVERTING GROUND FLOOR COMMON SPACES

Original hotel space	Converted space	Conversion requirements
Other patient rooms available on the ground floor ( <i>double room preferable</i> )	On-duty staff quarters	<input type="checkbox"/> Create and place signage designating room
Laundry room for guests	Laundry room for staff and patients	<input type="checkbox"/> Determine first if medical staff and patient laundry will be laundered on-premises or sent out to vendor <input type="checkbox"/> If creating an on-premises laundry facility: <ul style="list-style-type: none"> <li><input type="checkbox"/> Partition area into a “dirty” area for receiving/handling soiled laundry and a “clean” area for processing washed items</li> <li><input type="checkbox"/> If possible, ensure areas receiving soiled textiles are at negative air pressure relative to clean areas</li> <li><input type="checkbox"/> Ensure handwashing station is available to workers</li> <li><input type="checkbox"/> Ensure equipment is maintained according to manufacturer’s instructions to prevent microbial contamination of system</li> </ul> <p><i>When collecting and processing laundry, please follow these guidelines established by the CDC:</i>  <a href="https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/laundry.html">https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/laundry.html</a></p>
Office space	Command center and security monitoring space	<input type="checkbox"/> Check that security video equipment is functional and can be monitored from the space <input type="checkbox"/> Install storage space for administrative supplies <input type="checkbox"/> Install camera / badging equipment for medical staff



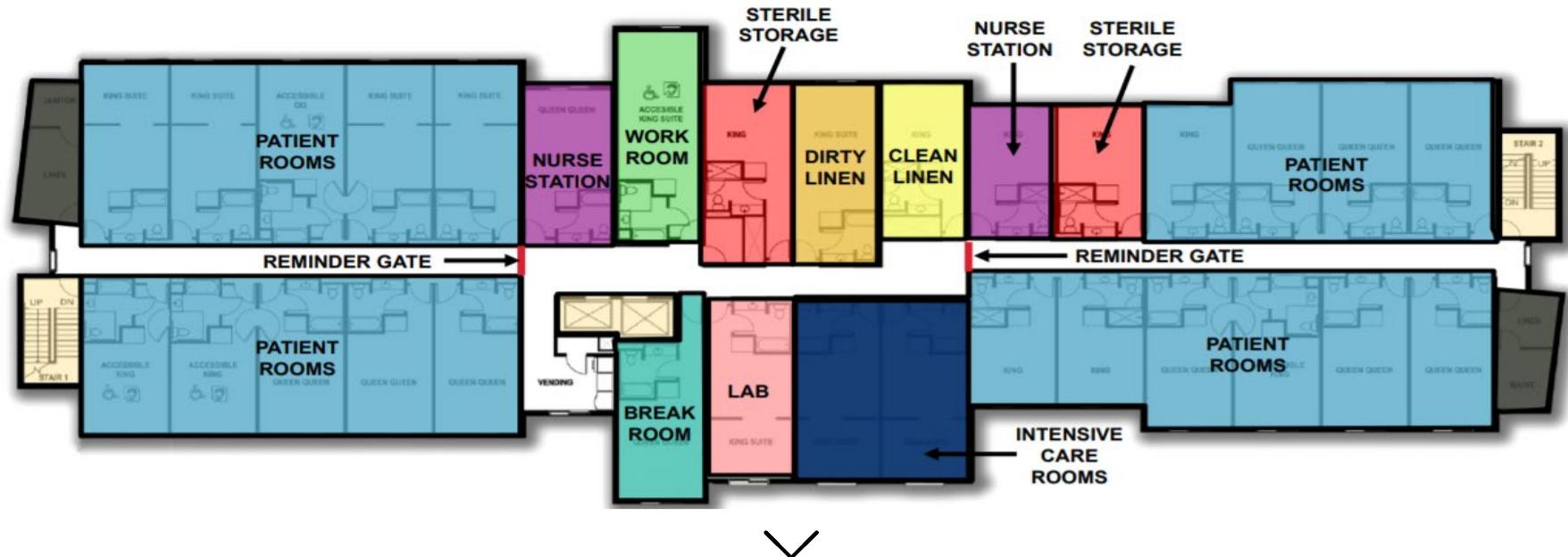
# CHECKLIST FOR CONVERTING GROUND FLOOR COMMON SPACES

Original hotel space	Converted space	Conversion requirements
Other patient rooms available on the ground floor	Staff work room	<input type="checkbox"/> Create and place signage designating room <input type="checkbox"/> Remove bed <input type="checkbox"/> Place additional desks and chairs <input type="checkbox"/> Install workstations, monitors, printers, and telephones
Staff break rooms	Staff break rooms	<input type="checkbox"/> Install workstation with required clinical software <input type="checkbox"/> Install fridge, microwave, table/chairs for staff use
Loading docks	Loading docks	<input type="checkbox"/> Ensure ramps, loading equipment (e.g., carts, etc.) exist <input type="checkbox"/> Create storage space of extra medical equipment (temp. and non-temp. controlled areas if possible)
Kitchen ( <i>Food and Beverage – Back of House</i> )	Kitchen	<input type="checkbox"/> Follow and elevate kitchen infection control best practices described here: <a href="https://spice.unc.edu/wp-content/uploads/2017/05/09-Infection-Control-Kitchen.pdf">https://spice.unc.edu/wp-content/uploads/2017/05/09-Infection-Control-Kitchen.pdf</a> <input type="checkbox"/> Order required F&B materials (e.g. trays, utensils) to abide by regulations <input type="checkbox"/> Setup contactless food delivery system
Other patient rooms available on the ground floor	Lab	<input type="checkbox"/> Create and place signage designating room <input type="checkbox"/> Remove bed and desk <input type="checkbox"/> Install workstation, monitor, printer, and telephone <input type="checkbox"/> Install lab equipment <input type="checkbox"/> Place chairs for lab staff and patients <input type="checkbox"/> Install shelving to store lab and other medical supplies

# SLEEPING ROOM FLOOR CONVERSION OVERVIEW

Sleeping room transformations for patient use, and other guest floor space to accommodate medical requirements

## Example sleeping floor plan for clinical use



- **Engineering changes:** Make all floor plan additions, install pressure monitoring, modify HVAC to isolate by floor, modify elevator controls
- **Reuse with minimal modifications:** WIFI, phone system, network infrastructure, ice-machine, packaged HVAC
- **New equipment:** Nurse call buttons, storage shelving, workstations, med-dispense units, ventilators, crash carts, eye and handwash stations, signage

Source: US Army Corps of Engineers, 2020



# CHECKLIST FOR CONVERTING SLEEPING ROOMS

Original hotel space	Converted space	Conversion requirements
Sleeping room	Patient sleeping room (non-isolation and isolation)	<ul style="list-style-type: none"> <li><input type="checkbox"/> E1 – Storage (for vent.)</li> <li><input type="checkbox"/> E2 – Tel. pump, IV stand</li> <li><input type="checkbox"/> E3 – Stool for provider</li> <li><input type="checkbox"/> E4 – Over bed table</li> <li><input type="checkbox"/> E5 – Work stations</li> <li><input type="checkbox"/> E6 – Linen hamper</li> <li><input type="checkbox"/> E7 – Sharps, gloves disp.</li> <li><input type="checkbox"/> E8 – Hand sanitizer</li> <li><input type="checkbox"/> E9 – Infectious waste</li> <li><input type="checkbox"/> E10 – Privacy curtain</li> <li><input type="checkbox"/> H1 – Bed (replace linens with medical linens)</li> <li><input type="checkbox"/> H2, H4 – Desk and Chair</li> <li><input type="checkbox"/> H3 – Wardrobe</li> <li><input type="checkbox"/> H5 – Bathroom</li> <li><input type="checkbox"/> Other – Television, centrally connected telephone, WIFI</li> <li><input type="checkbox"/> Remove carpet and install vinyl flooring, or install carpet tape</li> <li><input type="checkbox"/> Remove nonessential furniture and porous surfaces (e.g., upholstered furniture)</li> <li><input type="checkbox"/> Wrap furniture and mattresses with removable plastic</li> <li><input type="checkbox"/> Add back-up power and outlets</li> <li><input type="checkbox"/> Units with multiple beds: <ul style="list-style-type: none"> <li>– Install with at least 6 feet of space in between each bed</li> <li>– Install a physical barrier between beds</li> <li>– Placement of beds should alternate in head-to-toe configuration</li> <li>– Install beds and barriers oriented parallel to directional airflow</li> </ul> </li> </ul>



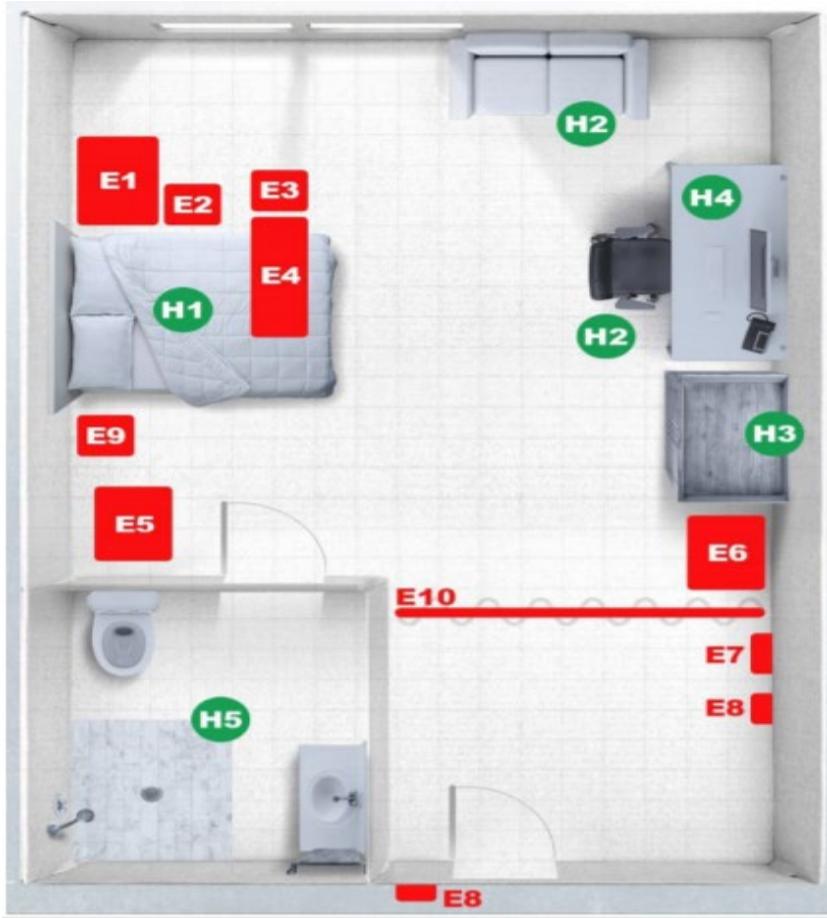
# CHECKLIST FOR CONVERTING SLEEPING ROOMS

Original hotel space	Converted space	Conversion requirements
Sleeping room	Patient sleeping room (isolation only)	<p>HVAC considerations</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Replace/modify exhaust fan to pull more air and MUA to increase air flow to guest rooms; dampers/fans should operate continuously at full capacity; confirm bathroom exhaust location is far from accessible areas</li> <li><input type="checkbox"/> Verify HVAC systems serving common areas don't recirculate air between patient care and staff areas</li> <li><input type="checkbox"/> PTACS remain for more precise room temperature control</li> <li><input type="checkbox"/> Upgrade central exhaust system with system able to provide at least negative pressurization to each suite</li> <li><input type="checkbox"/> To have a converted patient room be at negative pressure, add the UVGI for infection control and the air scrubber for filtration</li> </ul>



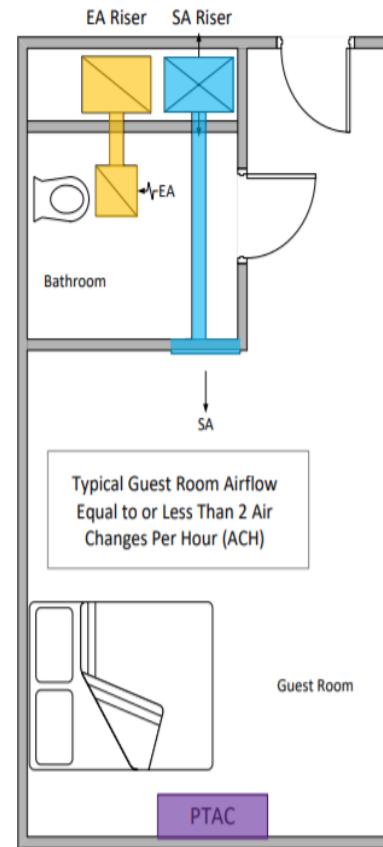
# CHECKLIST FOR CONVERTING SLEEPING ROOMS WITHIN A HOTEL

### Sample sleeping room for clinical use

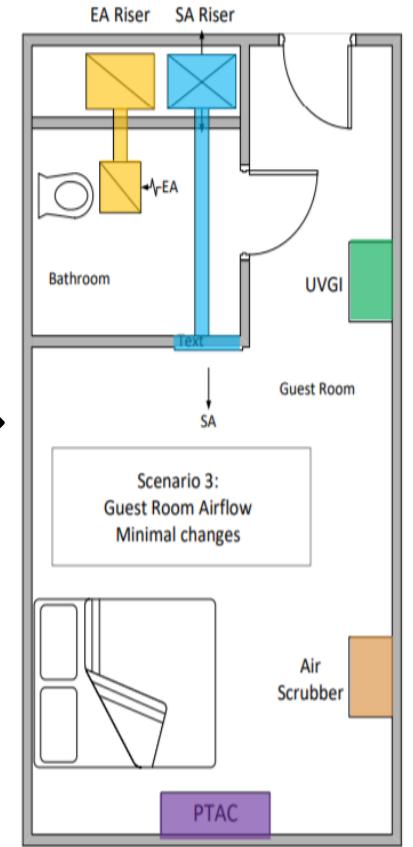


### Sample HVAC setup for clinical use

#### Typical hotel HVAC setup



#### Modified ACS HVAC setup



Source: US Army Corps of Engineers, 2020; CDC – Alternative Care Sites; ASHE COVID-19 Response Concept Study

© Oliver Wyman

# HOTEL OPERATION TEAM FOR CLINICAL ALTERNATE CARE SITES

When housing patients (COVID-19 and/or non-COVID-19) significant variations in operating plans may exist across hotel properties based on need, location, and government agency involvement

## Clinical care operations

- Care for non-critical, non-COVID-19 patients (non-isolation)
- Care for COVID-19 patients with mild symptoms (isolation)

*Note: alternate care sites can house a mixture of patient types (isolation and non-isolation) depending on situational needs and hotel property layout*

## Team overview

1. **Government appointed resources:** all core operating functions will be conducted by government appointed resources (e.g. FEMA workers, subcontractors, etc.)
2. **Healthcare workers:** Joint agreement on personnel roles and responsibilities with government agencies
3. **Hotel employees:** Limited back-of-house functions such as property management system operations

*Note: HHS specifies that at no time will there be an Alternate Care Site that combines COVID-19 Symptomatic Patients with Asymptomatic Personnel*

---

Hotels leadership can work with government agencies to determine the extent to which their employees are involved in operating an alternate care site

---

# GUEST SERVICES OPERATION ACTIVITIES

Activity	Non-isolation patient	Isolation patient	Notes
Checking in / out of guests or patients	 	 	
Triage of incoming patients <sup>1,3</sup>		 	
Back of house operations such as assigning sleeping rooms to guests/patients			
Coordinating logistics communication with hospital (e.g. guest or patient arrival / departure) <sup>1,3</sup>	 	 	<ul style="list-style-type: none"> <li>• Modifications should be made to enable contactless service</li> <li>• In isolation alternate care sites, employees should be provided PPE and adequate training on usage</li> <li>• HHS specifies that at no time will there be an Alternate Care Site that combines COVID-19 Symptomatic Patients with Asymptomatic Personnel</li> </ul>
Supporting infection control measures (e.g. wipes, sanitizers, PPE) <sup>1,3</sup>	 		
Providing social support resources (e.g. TV, WIFI, magazines) <sup>2</sup>			
Completing guest requests via room delivery (e.g. extra towels, toiletries, etc.)	 	 	
Paging guests to deliver messages			
Handling package reception, baggage handling and other valet activities			
Monitoring guest and employee health statuses for COVID-19 and other infectious diseases (taking temperatures at door, etc.) <sup>1,2</sup>			

1. CDC – Alternative Care Sites, 2. AON Hotel Industry Perspectives for COVID-19, 3. HKS Response Study, 2020



# HOUSEKEEPING / ENVIRONMENTAL SERVICES OPERATION ACTIVITIES

	Activity	Non-isolation patient	Isolation patient	Notes
<b>Housekeeping / EVS – sleeping room</b>	Providing extra linens (bed sheets and towels)			<ul style="list-style-type: none"> <li>Housekeeping should be minimized to reduce risk</li> <li>Extra linens, towels, and toiletries should be provided</li> <li>Cleaning should be focused on terminal cleaning rather than daily cleaning</li> </ul>
	Disinfecting beds, bathrooms, carpets, etc. <sup>4</sup>			
	Removing medical waste <sup>1</sup>			
	Removing non-medical waste			
	Restocking hotel supplies			
	Restocking of medical supplies <sup>1</sup>			
	Performing additional turnover cleaning or replacements (e.g. replacing mattress liners) <sup>4</sup>			
<b>Housekeeping / EVS – laundry</b>	Laundering of bed sheets and towels <sup>1</sup>			<ul style="list-style-type: none"> <li>Laundry services, to meet regulations, may be contracted out for infectious patients</li> </ul>
	Laundering of medical wear / patient clothing <sup>1</sup>			
<b>Housekeeping / EVS – public spaces</b>	Cleaning public spaces (e.g. elevators, hallways)			<ul style="list-style-type: none"> <li>Increased frequency of cleaning for common areas</li> <li>Disinfectants should be widely used in all shared spaces</li> </ul>
	Cleaning healthcare command center / spaces <sup>3</sup>			
<b>Housekeeping / EVS – back of house</b>	Cleaning storage rooms, offices, break rooms			<ul style="list-style-type: none"> <li>Gloves and gowns should be worn for all steps in cleaning</li> </ul>
	Cleaning of non-medical equipment			
	Cleaning of medical equipment <sup>1</sup>			

1. CDC – Alternative Care Sites, 2. CDC -- Cleaning and Disinfecting your Facility; 3. US Army Corp of Engineers, 2020, 4. HKS Response Study, 2020

# FOOD & BEVERAGE OPERATION ACTIVITIES

	Activity	Non-isolation patient	Isolation patient	Notes
<b>Food &amp; beverage – in the kitchen</b>	Preparing food and beverage	●	●	• Food and beverage for patients may be provided by outside healthcare food services based on patient special needs
	Managing diet restrictions and special requests	●	●	
	Cleaning kitchen equipment	●	●	
	Clearing soiled trays, utensils, etc.	●	●	
	Utilizing non-disposable vs. disposable items <sup>1</sup>	●	●	
<b>Food &amp; beverage – other</b>	Coordinating patient dietary needs with doctors and/or nurses	●	●	
	Taking food and beverage orders	●	●	
	Preparing and settling bills	●	●	
	Delivering and removing food	● ●	● ●	
	Picking up outside food delivery	●	●	
	Cleaning staff / HP cafeteria areas <sup>1</sup>	● ●	● ●	

1. CDC – Alternative Care Sites  
© Oliver Wyman

# ENGINEERING / MAINTENANCE OPERATION ACTIVITIES

	Activity	Non-isolation and isolation patient	Notes
<b>Engineering/ maintenance</b>	Maintaining plumbing and electric	●	<ul style="list-style-type: none"> <li>Number of outside contractors needed will be determined based the extent of extensive medical care equipment maintenance</li> </ul>
	Servicing exhaust systems, dampers, fans continuously <sup>2</sup>	●	
	Upgrading power distribution when necessary <sup>2</sup>	●	
	Providing and servicing cameras or other patient visualization equipment <sup>2</sup>	● ●	
<b>Engineering/ maintenance – worker certification req.</b>	Servicing HEPA filter units <sup>2</sup>	● ●	<ul style="list-style-type: none"> <li>Those working in or around healthcare facilities should have a Health Care Physical Environment Worker Certification which covers basic healthcare facility orientation for concepts such as patient privacy, infection control, and interim life safety measure<sup>4</sup></li> </ul>
	Creating negative pressure rooms when necessary <sup>2</sup>	●	
	Servicing HVAC systems and other ventilation controls for infection containment <sup>1,2</sup>	● ●	
	Maintaining emergency breakdown systems (e.g. generators, power supplies) <sup>2</sup>	● ●	
	Maintaining other temporary medical areas (e.g. medical gas storage) <sup>3</sup>	● ●	

1. CDC – Alternative Care Sites, 2. HKS Response Study, 2020, 3. US Army Corps of Engineers, 2020, 4. <https://www.ashe.org/education/certified-worker>



# SECURITY, SAFETY, AND COMPLIANCE OPERATION ACTIVITIES

	Activity	Non-isolation and isolation patient	Notes
<b>Security and Safety</b>	Ensuring hotel building security	●	
	Ensuring sleeping room security	● ●	
	Providing hallway security/safety monitors <sup>2</sup>	● ●	
	Maintaining hotel data and technology security	●	
	Ensuring medical records privacy and security (e.g. HIPAA) <sup>3</sup>	●	
<b>Compliance</b>	Removing general waste (non-medical / non-contaminated)	●	
	Removing medical waste (biohazard / contaminated) <sup>1</sup>	●	<ul style="list-style-type: none"> <li>Electronic medical records may be difficult to implement given lack of hardware, connectivity to systems, security, etc.<sup>3</sup> A paper medical record should be considered in such cases</li> </ul>
	Cleaning and disinfecting appropriately (daily and terminal cleaning) <sup>1</sup>	●	
	Providing additional training and certifications <sup>1</sup>	●	
	Preparing for potential inspections	● ●	

1. CDC – Alternative Care Sites, 2. OW Research, 3. HKS Response Study, 2020

**04**

**POST COVID-19 ASSISTANCE PERIOD**

# POST COVID-19 CONVERSION

Following the usage of a hotel for COVID-19 purposes, there will need to be a conversion period back to normal BAU operations



## Timing

- Agreement on **length of usage** of property, with clear end date or trigger point
- Clarity on how long property will **stay vacated** between last medical worker / patient and first returning hotel guest
- Clear timeline for how long **conversion** back to hotel once use is complete



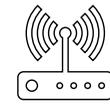
## Cleaning

- Understanding of who will be doing the required **deep-clean** and what equipment is needed
- Defined **cleaning protocol** to satisfy any CDC requirements as well as hotel corporation requirements
- We recommend a **certification** from a governing authority that cleaning has been done to the appropriate standards



## Conversion

- **Physical conversion** of hotel spaces, including:
  - Public space
  - Sleeping room space
  - Meeting space
- **Returning of any materials** which have been “on loan”
- **Cleaning or replacement of certain materials** such as:
  - Hospital mattress cleaning or hotel mattress replacement
  - Deep carpet cleaning
  - Linen replacement



## Employee and guest comms

- Development of **employee messaging** and communication of cleaning / conversion execution
- Development of **customer messaging** and communication to instill trust in hotel’s safety and cleanliness

# **APPENDIX: PLAYBOOK RESOURCES**

# PLAYBOOK RESOURCES

Publisher	Description	Link
Akin Gump	Potential Use of Hotels for COVID-19 Medical Car <i>What You Need to Know</i>	<a href="https://tinyurl.com/Akin-Gump-COVID19-hotel-use">https://tinyurl.com/Akin-Gump-COVID19-hotel-use</a>
American Hotel & Lodging Association	AHLA's Hospitality for Hope Initiative	<a href="https://www.ahla.com/ahlas-hospitality-hope-initiative">https://www.ahla.com/ahlas-hospitality-hope-initiative</a>
American Hotel & Lodging Association	AHLA's Hospitality for Hope Initiative <i>Toolkit</i>	<a href="https://www.ahla.com/sites/default/files/Hotels%20Supporting%20Healthcare%20COVID%20Toolkit-4.7.20.pdf">https://www.ahla.com/sites/default/files/Hotels%20Supporting%20Healthcare%20COVID%20Toolkit-4.7.20.pdf</a>
Centers for Disease Control and Prevention	Alternate Care Sites <i>Infection Prevention and Control Considerations</i>	<a href="https://tinyurl.com/CDC-alternate-care-sites">https://tinyurl.com/CDC-alternate-care-sites</a>
Centers for Disease Control and Prevention	Cleaning and Disinfecting your Facility <i>Everyday Steps, Steps when Someone is Sick, and Considerations for Employers</i>	<a href="https://tinyurl.com/CDC-cleaning-and-disinfecting">https://tinyurl.com/CDC-cleaning-and-disinfecting</a>
Illinois Department of Public Health	Recommended Guidance for Preventing Spread of COVID-19 in Hotels	<a href="https://tinyurl.com/IDPH-COVID19-hotel-guidance">https://tinyurl.com/IDPH-COVID19-hotel-guidance</a>
US Department of Health & Human Services	Alternate Care Site (ACS) Toolkit: First Edition	<a href="https://tinyurl.com/HHS-ACS-Toolkit">https://tinyurl.com/HHS-ACS-Toolkit</a>
US Army Corps of Engineers	Alternate Care Sites (ACS) <i>Alternate Care Sites Implementation Process</i>	<a href="https://tinyurl.com/USACE-COVID19-ACS">https://tinyurl.com/USACE-COVID19-ACS</a>

**ASHE COVID-19 alternate care site hub:** <https://www.ashe.org/converting-alternate-care-sites-patient-space-options>

**AHLA COVID-19 alternate care site hub:** <https://www.ahla.com/covid-resources>