



## MEL SAFETY INSTITUTE SHIFT BRIEFING

### Entering Public Housing Residences during COVID-19 Outbreak

The COVID-19 outbreak has led to a glut of information about how to best protect yourself as an essential worker who must interact with the public, or in this case our residents. This Briefing will review and discuss several aspects of protecting yourself, our residents, and your families that you need to know.

1. The U.S. Department of Housing and Urban Development has eased several processes that will minimize contact with residents to only essential services. This Authority will be implementing all measures that we can to help protect you.
2. The best science we have is the coronavirus is spread by residing on droplets in coughs, sneezing and the moisture on our breath, or when we breathe or talk. These droplets can enter your mouth, nose or eyes either directly, or if you touch a contaminated surface such as a doorknob, and then touch your face.

As with most viruses, there is a period when a person first becomes infected with the virus and can pass it to another person, and when the first person starts to show symptoms. This is called the incubation period and the strategy that viruses use to survive. If a person got infected and immediately became sick, that person would stay to themselves and not pass the virus on to others and the virus would die out. The incubation period for the coronavirus is thought to be about 2 – 3 weeks.

These are the basic facts that all protection strategies are based on.

3. The Center for Disease Control or CDC has just updated their recommendation to cover your face when out in public. ‘Covering your face’ is not the same as wearing a N95 respirator or a surgical mask. Let’s talk about these three things.

A tight-fitting respirator, such as the N95, is intended to keep any contaminant in the air from reaching the mouth and nose of the wearer. PROVIDED it is properly fit-tested and put on. This is why medical providers wear them, to keep the COVID on the patient’s breath from entering their mouth and nose.

A surgical mask was developed to keep the breath of the surgeon out of the wound of the patient. This is reason the CDC had directed sick people to wear surgical masks, to keep their germs from getting into the air an into another person. A surgical mask is not tight-fitting and therefore has gaps that allow contaminants from the air around the mask and into our mouths and noses.

Facial coverings such as, homemade masks, scarves and bandanas most closely resemble the function of a surgical mask. However, both will offer a higher level of respiratory protection than wearing nothing.

4. In conclusion all essential workers at the Authority should:
  - Wear a facial covering whenever on duty and when dealing with residents, either in public or in their homes.
  - Work with residents to maintain a social distance of at least 6 feet.
  - Wear rubber gloves when in residences. Do not touch your face or mask with your gloves. Wash your face and hands often with soap and water.

This lesson plan is intended for general information purposes only. It should not be construed as legal advice or legal opinion regarding any specific or factual situation. Always follow your organization’s policies and procedures as presented by your manager or supervisor. For further information regarding this bulletin, please contact your Safety Director at 877.398.3046.

