

MERC

Health practices: Restaurants

April 24th, 2020

Executive summary

Common set of practices for restaurants

- Will be scalable for small business and large chains
- Will be easy to communicate and executable
- Will not be cost prohibitive

Supporting documentation to be aligned with CDC and FDA guidelines. In case of any conflict between any of the foregoing guidance or requirements, the strictest shall apply.

There are a couple important considerations for restaurants

- Due to direct customer interaction, ensuring health and building trust is more difficult. This can be tackled with placing additional signage, counting customers, sealing packaging etc.
- PPE can be leveraged in environments where social distancing is more difficult given spacing constraints (e.g., kitchens)
- Ramp up is not only dependent on employee capacity but also customer risk appetite. Shifting operations to delivery and curbside are attempts to lower risk and maintain relationships with customers

Document is meant as a guide; not exhaustive

Across facility types, health practices fall into the following eight categories



1 Response owners and plan

Establish virus response team



2 Facility entry and health check protocols

Conduct health screenings, temperature checks, send sick employees home, restrict visitors/contractors



3 PPE requirements

What PPE is necessary in this environment? (Provide guidelines and PPE for different settings and roles)



4 Distancing

How do we ensure we are maintaining appropriate distance across the facility?



5 Cleaning

What are the cleaning protocols and how do we communicate these effectively to employees?



6 Case monitoring protocols

How do we ensure we can respond quickly to a potential case?



7 Facility/space temporary closure

What is our response plan? (e.g., Block off areas of exposure to allow appropriate deep cleaning)



8 Travel restrictions

How do we handle employee essential and personal travel?

Core practices (“must-haves”): Practices that can be implemented more broadly across different sized organizations

Next level implementation: Recommended additional practices that provide better risk mitigation (for better equipped facilities)

Restaurants can safeguard their facilities with health practices in the following focus areas

Categories	Health practice overview	Categories	Health practice overview
1 Response owners and plan	<p>Establish team or roles</p> <p>Define scope of team (e.g., manage implementation of practices and protocols)</p> <p>Communicate role of team and expectations to employees</p>	5 Cleaning	<p>Conduct frequent cleaning of kitchen</p> <p>Conduct frequent cleaning of front-of-house and post protocols publicly</p> <p>Supply guidance and conduct audit checks for cleaning procedures (incl. deep cleaning)</p>
2 Facility entry and health check protocols	<p>Reduce congestion at entry point(s)</p> <p>Screen staff health/exposure</p> <p>Screen customers</p> <p>Restrict entry of 3rd party suppliers and delivery</p>	6 Case monitoring protocols	<p>Define protocol for symptomatic employees</p> <p>Identify and contact exposed employees; (e.g., provide symptom checking, guidance)</p>
3 PPE requirements	<p>Ensure PPE (masks, hand sanitizer) is stocked</p> <p>Establish standard PPE distribution methods</p> <p>Enforce mask usage in front-of-house</p> <p>Enforce glove/mask usage in back-of-house</p> <p>Use tamper proof packaging for delivery</p>	7 Facility pause/shutdown	<p>Enforce appropriate shut down/ pause and cleaning protocol</p> <p>Communicate protocol to employees and customers</p>
4 Distancing	<p>Increase distancing for employee interaction</p> <p>Increase distancing for customer interaction</p> <p>Increase distancing for employee to customer</p> <p>Provide visual reinforcements (e.g., X's) and menu simplifications to enable distancing</p>	8 Travel restrictions	<p>Restrict business and personal travel and have employees self-quarantine if possible after travel</p>

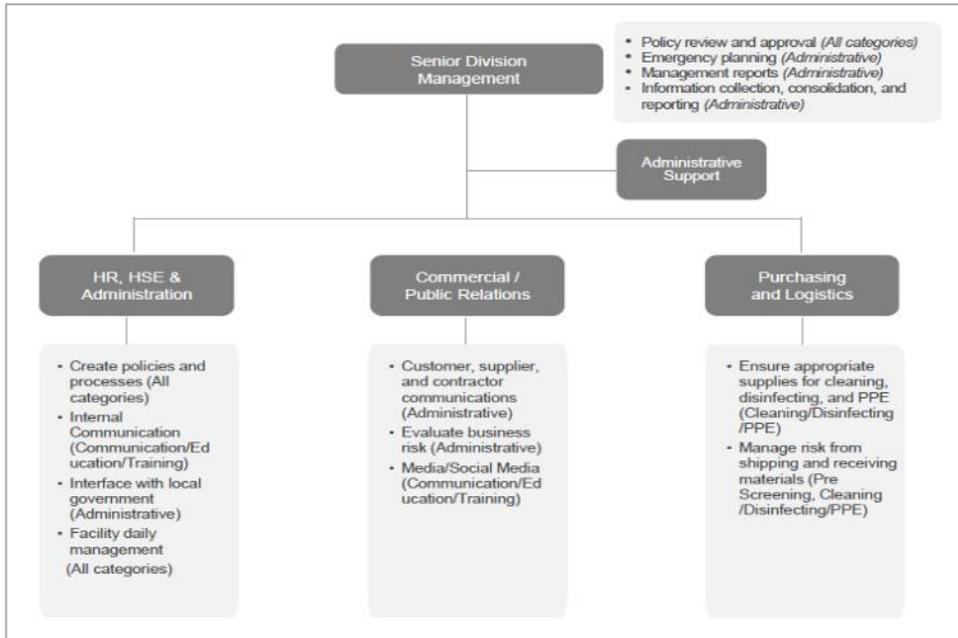
1: Response owners and plan (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Establish team or roles	Designate single point of contact for COVID-19 response, depending on size of operation may also create COVID-19 response team (<i>could be existing role/team with expanded scope e.g., safety and sanitation</i>) <ul style="list-style-type: none">Establish leader at each facility (e.g., manager or owner) and shift leader (PIC, designated person on each shift)	Dedicate staff to virus response team (sole focus)
Define scope of team (e.g., manage implementation of practices and protocols)	Ensure facility has proper signage for customer and employee confidence/adherence Ensure operations, cleaning, distancing etc. satisfy CDC and/or MRLA recommendations when possible (communicate with other businesses and Michigan leaders to gather insight and feedback) Leverage MRLA and CDC for updates on guidance Complete a daily health checklist (e.g., areas to clean pre-reopening – kitchen, bathrooms etc.), upon reopening include “ reopening food safety ” list	Leverage/modify (or develop) existing training and materials for employee Ensure consistent implementation across locations Establish new operating model for kitchen staff (e.g., flow of movement, number of prep stations)
Communicate role of team and expectations to employees	Share notices both on-site and digitally if possible to explain new policies to all employees Share clear timeline for implementation Conduct employee training <ul style="list-style-type: none">Review policies in morning check-in on Day 1 reopeningPost training documentation at restaurant locationsTrain front of house staff on food safety measures	Develop virtual training and send push alert to employees, require employees to take training before work (logins tracked) Send digital notice to managers explaining new policies, also post on-site

1: Response owners and plan (examples)

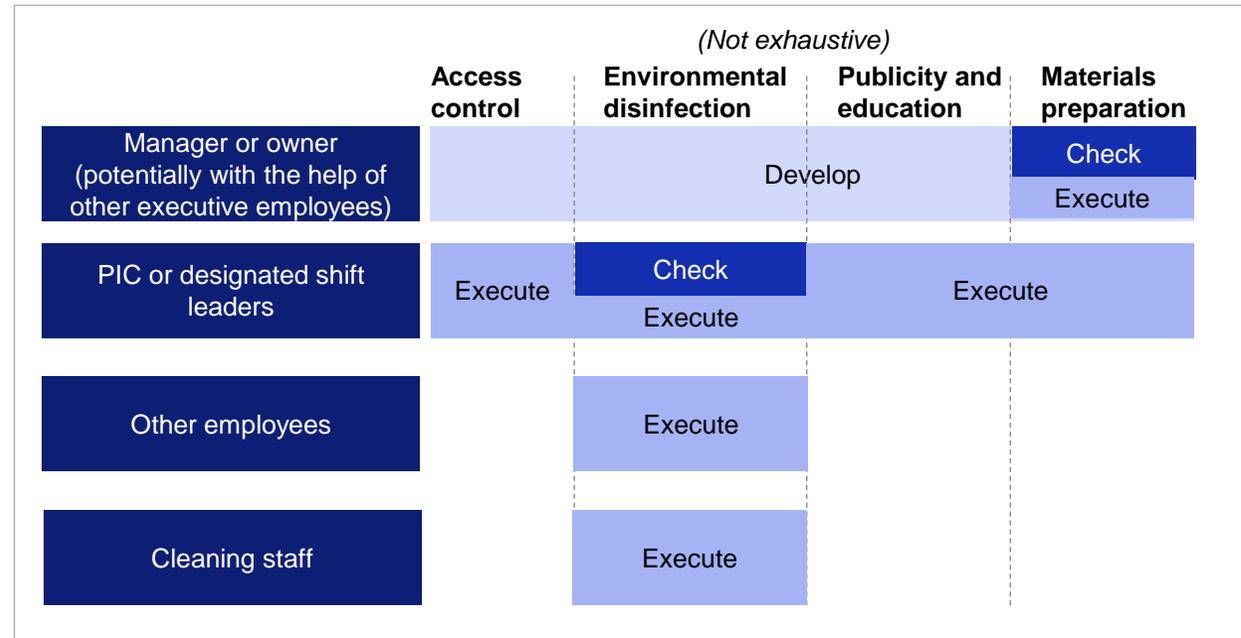
Establish team or roles

Example: Large restaurant chain plan



Policy modifications can be developed at a corporate level and communicated to franchisee owners for execution (monitored by corporate field teams virtually)

Example: Small restaurant plan



All team members likely to dedicate some, not all of their time developing/ executing health practices

2: Facility entry and health check protocols (e.g., pre-work, who is involved, check-in upon arrival) (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Reduce congestion at entry point(s)	<p>Close waiting area and ask customers to wait in cars (e.g., customer to calls ahead or have one person check-in upon arrival to go on waiting list, customer contacted when table is ready)</p> <p>Entry ways should be marked to delineate 6ft</p>	<p>Reserve time/area for dining or pickup to vulnerable populations</p> <p>Leverage call-ahead seating or reservations to reduce entrance crowding</p>
Screen employee health/exposure (home, entrance)	<p>Conduct common employee screening protocol (e.g., temperature check, overall health status check, screening questions at home or upon entry)</p> <p>Send employee home with fever/ potential case and close restaurant for a deep cleaning</p>	<p>Assign one person to take employee temperatures and record in centralized log</p> <p>Limit number of workers commuting to and from region of work (allow local employees to return to work first (China))</p> <p>Track employee travel between locations (e.g., District managers; go to one location per day or have manager track/record)</p>
Screen customers	<p>Post questionnaire/signage outside of restaurant with appropriate screening questions</p> <p>Empower employees (e.g., train) to handle potential issues with screening or any customer health concerns</p> <p>Post sign at entrance to ensure customers are healthy (leverage standard communication by MRLA)</p>	<p>Ask customers upon entry/call-ahead/reservation if their group is in good health (e.g., not symptomatic)</p>
Restrict entry of 3rd party suppliers and delivery	<p>Place signage on door for all to wear mask (including delivery personnel)</p>	<p>Restrict food delivery operators from building entry and have suppliers deliver/enter at night when possible</p> <p>Set up times for supplier delivery separate from heavy customer traffic</p>

2: Facility entry and health check protocols (e.g., pre-work, who is involved, check-in upon arrival) (examples)

Illustrative

Screen employee health/exposure (home, entrance)

Questions:

Enter the team member EmplID (If KBS, Paramount or Serv U, enter name) * Required Response

Do you have any new and unusual of the following symptoms: fever greater than 100.4 degrees F, cough, difficulty breathing or shortness of breath, diarrhea, chills or sore throat? * Required Response

- Yes
- No

If a touchless thermometer has been provided to your store, confirm the team member's temperature below.

Select N/A if no thermometer has been provided * Required Response

- Yes (Temperature is > 100.4° F)
- No (Temperature is <= 100.4° F)
- N/A

Have you had or have you been notified that you have had close contact with a person that has been diagnosed with COVID-19 through a positive test result? * Required Response (does not apply to Pharmacists or Pharmacy Techs)

- Yes
- No

Have you travelled internationally or domestically (i.e. air travel or cruise) within the last 14 days?

* Required Response (does not apply to Pharmacists or Pharmacy Techs)

- Yes
- No

If "Yes" was answered to any questions above:

- The team member is not permitted to work that day
- The team member must contact ILM at 1-800-854-7062
- The team leader must enter 2 hours of pay for the team member

3: PPE requirements (e.g., what do you need before walking in facility) (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Ensure PPE (masks, hand sanitizer) is stocked	<p>Incorporate measures into procurement process to ensure necessary supplies (e.g., soap, hand sanitizer) are available (set restrictions to reduce hoarding by locations)</p> <p>Ensure employees have access to face covering (based on FDA guidance)</p>	<p>Ensure PPE (e.g., sanitizer, masks) are on order to provide proper lead time for refills</p> <p>Procure contactless thermometers, cloth masks, sanitizer for employees etc.</p>
Establish standard PPE distribution methods	<p>Assign one person to hand out masks and place glove boxes in visible locations and refill hand sanitizer</p> <p>Ensure all employees (food prep, waiters, hosts, bussers) have facial coverings (e.g., distribute in the morning: 1mask/day for kitchen staff, 2mask/week or cloth masks for others – follow public health specifications)</p> <p>Ensure employees understand the use of PPE (including training of storing, doffing and re-donning facial covering, infection control practices, and fabric covering limitations)</p>	<p>Give gloves to kitchen staff (and all staff if high risk area), and ensure access to supply for changes as needed (e.g., place box in kitchen with instructions/best practices)</p> <p>Record and track who has received their weekly masks</p> <p>Establish proper disposal facilities separate from standard waste containers for PPE (particularly in kitchens)</p>
Enforce mask usage in front-of-house	<p>Ensure hosts and servers wear masks in the dining area to encourage safety and proper hygiene</p> <p>Ensure customers wear face coverings before they get to their table (e.g., post signage)</p>	<p>Accommodate hearing-impaired customers by using face shield</p>
Enforce glove/mask usage in back-of-house	<p>Wear masks in the kitchen area when handling food (follow updated FDA guidelines)</p>	<p>Wear fresh gloves when handling unheated food (kitchen staff) – refer to CDC guidelines</p>
Use tamper proof packaging for delivery	<p>Use stickers to seal packaging for delivery and takeout</p>	<p>Leverage tamper proof packaging for delivery</p>

3: PPE requirements (e.g., what do you need before walking in facility) (examples)

Illustrative

Ensure PPE (masks, hand sanitizer) is stocked

Cloth mask (form fitting to the face)



Surgical mask



Enforce mask usage in front-of-house



While Wearing a Face Mask/Covering

Individuals who are not accustomed to wearing a face mask might find the mask uncomfortable or distracting. An important component of a disease-prevention strategy is to limit touching the face. An uncomfortable or poorly fitted mask could encourage touching the face, which is counter to the goal of wearing a face covering. It is critical that wearers do not inadvertently increase their exposure by continually adjusting the mask/covering and touching the face.

DO	DO NOT
<ul style="list-style-type: none"> Wash hands before and after putting on mask Make sure the mask has no defects (e.g. tears, torn straps, or ear loops) Secure the mask around head and neck or ears Ensure mask is covering nose, mouth, and chin Only touch straps/bands when removing and disposing a mask 	<ul style="list-style-type: none"> Don't wear if wet or soiled Don't leave mask hanging off one ear, hanging around neck, or place on top of head Don't place mask on surfaces (e.g. countertops) to store for reuse Don't reuse a single-use mask, dispose after wearing once Don't touch the front or back sides of the mask, as they could be contaminated after use

<https://www.feedingus.org/>

Enforce glove/mask usage in back-of-house



HAND WASHING HOW TO:

- 1 WET YOUR HANDS AND ARMS WITH RUNNING WARM WATER.
- 2 APPLY ENOUGH SOAP TO BUILD UP A GOOD LATHER.
- 3 VIGOROUSLY SCRUB HANDS & ARMS for at least 10-15 seconds. Clean the finger tips, under fingernails, and between fingers.
- 4 RINSE HANDS & ARMS THOROUGHLY UNDER RUNNING WARM WATER.
- 5 DRY HANDS & ARMS with a single-use paper towel to keep paper. Use a paper towel to turn off the faucet. If using the restroom, use a paper towel to open the door.

For more information and resources on food safety, visit: foodsafetyfocus.com

ServSafe

<https://app1.unmc.edu/nursing/heroe/s/mpv.cfm?updateindex=132&src=yt>

Use tamper proof packaging for delivery



4: Distancing (health practices)

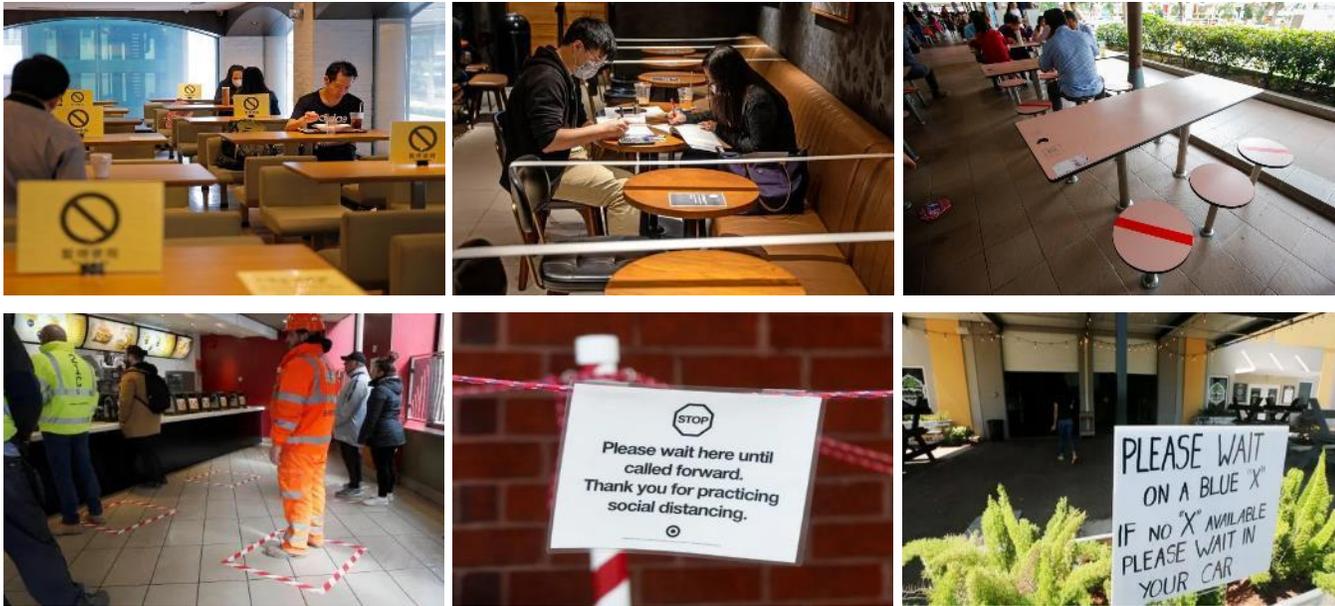
Health practice overview	Core practices	Next level implementation for better equipped facilities
Increase distancing for employee interaction	Have employees stand 6 feet apart when possible Leverage PPE usage (e.g., masks), increased cleaning, and physical barriers especially if distancing is not possible and in smaller kitchens	Reduce # of employees in the kitchen (may result in longer prep times) Adjust the flow of kitchen staff to encourage spacing or install physical barriers between workers when possible (create map for guidance to employees) – <i>restrictions for size, cleanliness, and flammability</i>
Increase distancing for customer interaction	Require 6ft of separation between parties/groups at different tables/bar top (e.g., spread tables out, every other table, remove or put up chairs/barstools that will not be in use). To facilitate this determine max capacity of restaurant before reopening Ensuring social distancing in the restroom (<i>enforcement TBD</i>) Limit placement of shared items for customers (e.g., condiments, menus – post on wall) – eliminate or set up cleaning routine between customers	Limit number of people in the restroom by closing stalls Mark pathways for foot traffic, especially to the restroom
Increase distancing for employee to customer interaction	Restrict number of employees and customers in restaurant to facilitate distancing (especially upon initial reopening) Establish consistent policy for reservation only or call ahead queuing from your car so host stand does not get crowded	Minimize cash transactions and unnecessary tampering during delivery Install shields for drive thru windows Incorporate contactless payment
Provide visual reinforcements (e.g., X's) and menu simplification to enable distancing	Place X's on the ground near host station for people to stand on (encourage customer and employee spacing) Consider paring down menus to accommodate reduced kitchen capacity	Ensure physical barriers for drive through windows

4: Distancing (examples)

Illustrative

Increase distancing for customer interaction

Examples with visual reinforcements (e.g., X's)



Increase distancing for employee to customer

Examples with visual reinforcements (e.g., X's)



5: Cleaning (e.g., daily cleaning routine) (health practices)

Health practice overview

Core practices

Next level implementation for better equipped facilities

Conduct frequent cleaning of kitchen

Require hand washing before delivery

Elevate guidelines leveraging CDC for disinfection frequency and cleaning requirements for each facility area (e.g., front door handle, bathroom, counter 1hr or more)

Leverage michiganfoodsafety.com resources

Sanitize entire facility multiple times per day (depends on stage of reopening, 2x/day vs 1/hr)

Leverage third parties if possible (e.g., Zero-hour health, NORO emergency protocols)

Conduct frequent cleaning of front-of-house and post protocols publicly

Change the way menus are handled (e.g., disposable, digital tablets, written on wall, wipe down menus after each use)

Train all employees on food safety health protocols

Clean high contact areas after each customer based on FDA and CDC guidelines (tables, chairs, payment tools, condiments)

Post protocols for cleaning practices for employee adherence and customer trust (e.g., clean bathroom handle frequently)

Set up **hand sanitizing station** at entry way for customers

Provide hand sanitizer to customers before food arrives to tables

Communicate and **make cleaning visible** to customers (e.g., increase frequency, post protocols, visible high touch surface cleaning)

Provide cleaning products (e.g., disinfectant spray/wipe) to customers for use on high-touch areas (e.g., tabletop, bathroom handle)

Supply guidance and conduct audit checks for cleaning procedures (including deep clean as needed)

Fill out cleaning checklist and share each day with management

Train employees (if responsible for cleaning) to use cleaning materials in accordance with manufacturing guidelines (e.g., mix disinfectant with hot water)

Conduct virtual visits to check adherence for more remote or smaller locations (field team)

Incorporate sealed packaging and thermo detection for delivery handling (e.g., "ServSafe" policies)

Ensure easy adoption/ adherence (e.g., purchase different color bucket for **new bleach solution** and create labels, peroxide cleaner)

6: Case monitoring protocols (health practices)

Health practice overview

Core practices

Next level implementation for better equipped facilities

Define protocol for symptomatic employees

Employees are responsible for reporting health (employee and family) before coming in via phone/email

Ensure employees with symptoms are sent home immediately and employees are informed

Clean potentially exposed areas of restaurant

Require a doctor's note release (for returning to work) if an employee has laboratory confirmed COVID-19. If an employee has symptoms, but not laboratory confirmed COVID-19, they should remain based on CDC requirements

Check in periodically on employee symptoms and work ability

Identify and contact exposed employees (e.g., provide symptom checking and guidance)

Educate employees on how to manage symptomatic customers upon entry or in the restaurant

Notify employees if a positive case individual visited the restaurant (customer, supplier, employee)

Inform team members/manager of potential exposure when employee is sent home

Allow employees uncomfortable with coming in to stay home

Conduct tracing procedures for **3-7 days prior to onset of employee symptoms** (based on where employee was and whether PPE was worn)

Communicate procedures with employees

6: Case monitoring protocols (examples)

Illustrative

Define protocol for symptomatic employees

IF YOU ARE AN EMPLOYER OF WORKERS EXPOSED TO COVID-19

DO

- Take employee's temperature and assess symptoms prior to their starting work.
- If an employee becomes sick during the day, send them home immediately.
- Test the use of face masks to ensure they do not interfere with workflow.
- Increase air exchange in the building.
- Increase the frequency of cleaning commonly touched surfaces.

https://www.cdc.gov/coronavirus/2019-ncov/downloads/Essential-Critical-Workers_Dos-and-Donts.pdf

Provide symptom checking and guidance to exposed employees

MONITORING

Keeping Employees Safe: What to do if an employee shows flu-like symptoms

- It is highly recommended that any employees who are showing flu-like symptoms should be excluded from the operation until they are symptom free.

Keeping Customer Safe: What to do if a customer shows flu like symptoms in the restaurant

According to the CDC, the spread of COVID-19 occurs when people are in close contact (less than 6 feet) with an infected person. Some basic steps that could be taken are:

- Provide the customer with additional napkins or tissues to use when they cough or sneeze
- Make sure alcohol-based hand sanitizer is available for customers to use
- Be sure to clean and sanitize any objects or surfaces that may have been touched

Bodily Fluid Event: What to do if there is a bodily fluid event

If a customer or employee vomits or has diarrhea it is recommended (AT THIS TIME) that the operations follows protocols that are in place for Norovirus be used

- Ensure the employee who is cleaning up the area is using Personal Protective Equipment (PPE)
- Segregate the area that has been contaminated
- Dispose of any food that has been exposed
- Ensure any utensils that might have been exposed are cleaned and sanitized
- Frequently clean and sanitize the area to include the floor, walls and any other objects contaminated by the incident
- Properly dispose any of the equipment that was used to clean up the area

For additional recommendations and resources, please visit www.cdc.gov/coronavirus



7: Facility/space temporary closure (e.g., clear area if someone comes to work sick) (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Enforce appropriate shut down/pause and cleaning protocol	Require employees to report if they test positive Leverage and reference NORO emergency group and michiganfoodsafety.com guidance when a positive case is identified (e.g., from symptomatic employee with test) Close restaurant immediately if an employee shows multiple symptoms per CDC guidance¹ (cleaning may occur overnight) Conduct deep clean based on FDA and CDC guidelines	Require employees to report reason for not coming into work (e.g., symptoms, family with symptoms, uncomfortable with coming in) Bring employees in to work who have not interacted with an employee with a presumptive or confirmed case Close building to all employees and customers Hire outside service to conduct deep cleaning
Communicate protocol to employees and customers	Post signage on front door notifying customers of closure and deep cleaning being conducted (apologies for the inconvenience) Provide documentation of positive cases for necessary parties (labor union, health services, health insurance). Record confirmed cases in accordance with OSHA guidance ²	Communicate potential exposure or positive cases, while maintaining employee privacy

1. <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>

2. <https://www.osha.gov/memos/2020-04-10/enforcement-guidance-recording-cases-coronavirus-disease-2019-covid-19>

8: Travel restrictions (health practices)

Health practice overview

Core practices

Next level implementation for better equipped facilities

Restrict business and personal travel and have employees self-quarantine if possible after travel

Reduce risk by **restricting air travel** to only essential travel
Requiring **14 day quarantine** after return from travel/vacation

Send digital notice to employees and managers before entering premises on new requirements (includes travel questionnaire)