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

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

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

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

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

The Reopening RI site includes guidance and other materials that State and local agencies and private sector organizations considering opening or operating warming or cooling centers may find to be helpful and useful, including:

- Rhode Island’s Phase III: General Business/Organization Guidelines (English and Spanish)
- Rhode Island’s Business/Organization Checklist (English and Spanish)
- A poster for employers (English and Spanish)
- A poster for employees (English and Spanish)

**Summary of Operations**

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

**Physical Space and Occupancy Limits**

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

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

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

**Warming and Cooling Center Processes, Procedures, and Activities**

**Enhanced Cleaning and/or Disinfecting Procedures**

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

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

Agencies and organizations should consider following CDC cleaning and disinfection guidelines for community facilities and cleaning the facilities if someone is sick. Because even individuals with no symptoms can still transmit the virus, and the virus can survive for several days on non-porous surfaces, it is important to continue routine cleaning and disinfection (every day) with a focus on high touch surfaces, including those in common areas and bathrooms.
Screening Procedures
Agencies and organizations are required to implement and ensure compliance with COVID-19-related screening of all individuals entering its establishment(s) at any time for any reason.

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

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

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

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

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

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

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

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

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

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

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

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

**Face Masks and Other Personal Protective Equipment (PPE)**
All individuals must wear a mask and watch their distance when they are near people they don’t live with. Employers must arrange for cloth face coverings or materials for the making of such face coverings for each employee at no expense to the employee.

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

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

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

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

**Clear Communications Plan**
All covered entities shall ensure the placement of posters or signs at all entrances to its
establishments for awareness about entry screening, required physical distancing, use of cloth face coverings, and other subjects as provided in guidance issued by RIDOH. Copies of acceptable posters are available on RIDOH’s website. Agencies and organizations should use health messages and materials developed by credible public health sources, such as RIDOH and/or CDC. Agencies and organizations should consider:

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

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

Agencies and organizations are required to instruct any person entering an establishment to wear a mask whenever they’re near someone who doesn’t live with them or the individual is exempt from wearing a mask.

Other Processes and Activities

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

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

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

Human Resources

Agencies and organizations should plan for staff and volunteer absences and develop flexible leave policies. Staff and volunteers may need to stay home when they are sick, caring for a sick household member, or caring for their children during school dismissals. Agencies and organizations should identify critical job functions and positions, and plan for alternate coverage by cross-training warming or cooling center staff.

CDC has guidance on developing flexible leave policies on its website.
Supplies

Agencies and organizations should consider providing COVID-19 prevention supplies at warming or cooling centers. Specifically, they may wish to have supplies for staff, volunteers, and visitors, such as soap, alcohol-based hand sanitizers that contain at least 60% alcohol, tissues, and trash baskets. If water bottles are distributed at the warming or cooling center, ensure visitors to not share bottles or glasses.