

**SERIES** Recommendations to Minimize the Risk of COVID-19  
Transmission in the Latin America and the Caribbean Tourism Sector

# Recommendations to Minimize COVID-19 Transmission in Restaurants



# R02.2



With the participation of



**OAS** | More rights  
for more people

With the support of



## Disclaimer

- The recommendations in this document are intended to provide guidance on reducing the risk of SARS-CoV-2 virus transmission in tourist establishments and spaces. They should therefore be regarded as guidance only and not prescriptive.
- The recommendations are based on the assumption that there is no zero-risk scenario and that it is therefore impossible to completely remove the risk of infection for the duration of the pandemic, although it is possible to reduce it.
- The recommendations are provided without prejudice to the current legislation in each country, and this document does not replace existing government regulations or guidelines.
- The content of the recommendations is based on publicly available scientific information at the time of publishing (August, 2021). New findings or future studies may require the document to be revised.

# Table of contents

<b>1</b>	<b>Scope</b> .....	<b>4</b>
<b>2</b>	<b>Preventive Measures against Risk Nodes (RNs)</b> .....	<b>5</b>
	<b>2.1. Risk map for restaurants</b> .....	<b>5</b>
	<b>2.2. Limitations of the general preventive measures in restaurants</b> .....	<b>7</b>
	<b>2.3. Customer arrival and departure</b> .....	<b>8</b>
	<b>2.3.1. Risk nodes (RNs): preparing the room, seating customers</b> .....	<b>8</b>
	<b>2.4. Taking orders</b> .....	<b>10</b>
	<b>2.4.1. Risk nodes (RNs): menu and taking orders</b> .....	<b>10</b>
	<b>2.5. Service</b> .....	<b>11</b>
	<b>2.5.1. Risk node (RN): table service</b> .....	<b>11</b>
	<b>2.5.2. Risk node (RN): bar service</b> .....	<b>12</b>
	<b>2.5.3. Risk node (RN): takeaway and delivery</b> .....	<b>14</b>
	<b>2.5.4. Risk node (RN): buffet service</b> .....	<b>15</b>
	<b>2.5.5. Risk node (RN): shared restrooms</b> .....	<b>17</b>
	<b>2.6. Payments</b> .....	<b>19</b>
	<b>2.6.1. Risk node (RN): payment</b> .....	<b>19</b>
	<b>2.7. Kitchen</b> .....	<b>20</b>
	<b>2.7.1. Risk node (RN): receiving and storing raw materials</b> .....	<b>20</b>
	<b>2.7.2. Risk node (RN): food preparation</b> .....	<b>21</b>
	<b>2.8. Staff common areas</b> .....	<b>23</b>
	<b>2.8.1. Risk node (RN): staff common areas</b> .....	<b>23</b>

This document includes, without prejudice to current legislation, the **recommended minimum specific preventive measures** to be implemented in food and drink establishments (hereafter referred to as restaurants) against COVID-19 infection risk nodes (RNs)<sup>1</sup>, in order to effectively protect customers and employees.

This document applies to restaurants, bars, cafés, *ghost* kitchens<sup>2</sup> and other similar establishments, regardless of the type of service they offer (table service, bar service, take away, delivery), their type or size.

**Note:** Before reading this document (R02.2), it is advisable to read document R01 (General Recommendations to Minimize the Risk of COVID-19 Transmission in Tourist Establishments and Spaces). Reading document R03 (Recommendations to Manage COVID-19 Prevention Protocols in Tourist Establishments and Spaces) is also recommended. The E02 documents will allow restaurants to assess the level of transmission risk in their spaces and activities, and comply with the measures set out in this document (R02.2) by using a checklist.

---

1. A RN is a critical point in the process or space where there is a greater chance of infection, considering SARS-CoV-2 transmission routes. More information can be found in document R01.

2. Kitchens where only orders for home delivery are prepared.



## Preventive Measures against Risk Nodes (RNs)

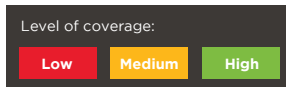
### 2.1

### Risk map for restaurants

These recommendations are based on a diagnosis **previously carried out to identify the main COVID-19 infection risk nodes at restaurants, as well as their level of coverage** in the current protocols in different countries and regions around the world<sup>3</sup>. The diagnosis concluded that, overall, the level of RN coverage by tourist accommodation protocols was **medium-high**. Figure 1 shows this level of coverage.



Figure 1. Restaurant Risk Nodes (RNs)

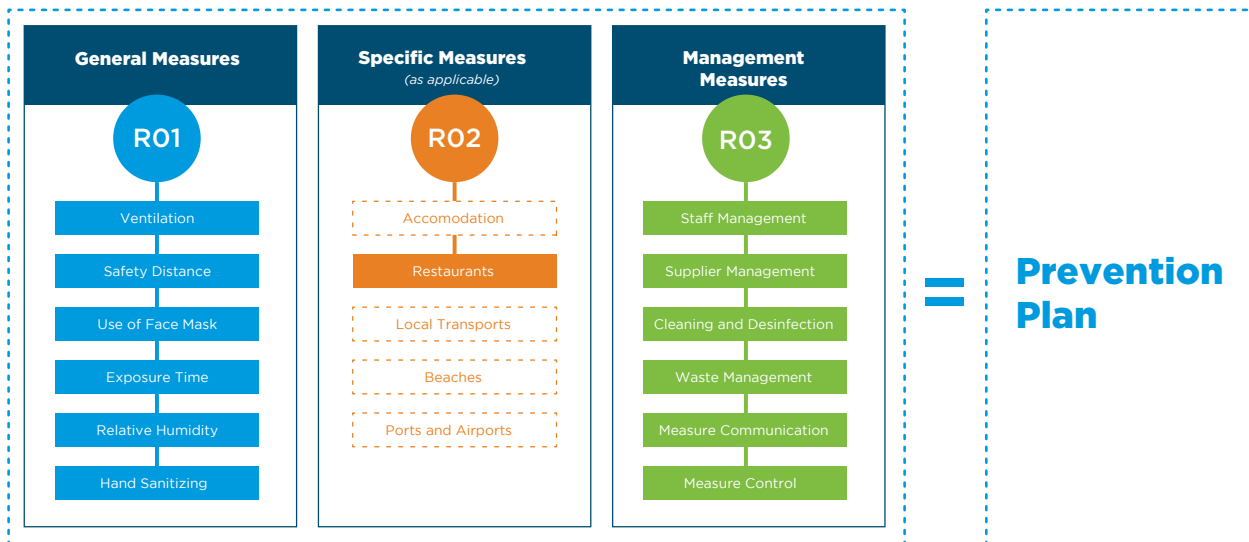


3. Inter-American Development Bank (2021): <https://publications.iadb.org/publications/english/document/Diagnosis-on-Biosafety-Protocols-in-the-Tourism-Sector-of-Latin-America-and-the-Caribbean-Diagnostic-Report.pdf>

Therefore, considering the results of the diagnosis:

- Document **R01** sets out the **general measures to minimize the risk of SARS-CoV-2 transmission in tourist organizations**. These are **cross-cutting factors that increase or reduce the risk of infection, such as ventilation, mask wearing, safety distance, exposure times, hand sanitizing and relative humidity (RH) control**. The measures in this document apply to all tourism subsectors.
- Document **R02** complements these cross-cutting measures with **specific ones that target the RNs unique to restaurants**. Namely, it includes the **most relevant measures and those considered to a lesser extent by the biosafety protocols assessed in the diagnosis**.
- Document **R03** provides recommendations to ensure the adequate implementation, communication and control of the protective measures against infection in the RNs, **regardless of the type of activity or tourist space** involved.

Restaurants **should consider the RNs** listed in this document to define their Prevention Plan. **The measures of the Prevention Plan should follow the recommendations of both documents R01 and R02.2.** Likewise, they should consider the recommendations for the proper management of these measures, which are found in document.



**Figure 2.** How to build the Prevention Plan

## Limitations of the general preventive measures in restaurants

Overall, the food and drink subsector presents a higher risk of SARS-CoV-2 infection compared to others because, by its nature, several general safety measures (**R01**) cannot be always applied.

Specifically, this is a subsector where customers cannot wear masks while eating or drinking. Moreover, it is not always possible to keep the safety distance between customers and staff (e.g., when taking orders, serving or clearing tables) or between staff (e.g., in the kitchen, due to the layout of equipment and it often not being possible to rearrange the space). All this limits the ability to achieve the highest possible level of protection when applying the general infection prevention measures, as listed in document **R01**.

For the aforementioned reasons it is particularly important that the other general measures are **strictly applied throughout the service**, especially in terms of adequate ventilation, which maximizes air renewal and minimizes recirculation, as well as capacity control (**R01**). Therefore, the use of outdoor spaces (terraces/patios, etc.) whenever possible is strongly recommended, prioritizing them over indoor spaces. Likewise, particular attention should be paid to ensuring that **customers wear masks** whenever they are not eating or drinking (including when moving around the facilities, (e.g., to the table, restrooms, cashier, bar), and of course, **that staff do too**. Finally, as this type of service involves constantly handling equipment and utensils that have been previously handled by other employees or by customers, it is vital that staff avoid **touching their eyes, nose and mouth** without sanitizing their hands first (**R01**). This applies throughout document **R02.2**.

**The aforementioned measures are emphasized in this document in the RNs where they are particularly relevant in order to facilitate reading, although they should be applied throughout the service.**

It has not been proven that SARS-CoV-2 is transmitted through eating.<sup>4, 5</sup>

4. European Commission Directorate-General for Food Safety (2020). [https://ec.europa.eu/cyprus/sites/default/files/biosafety\\_crisis\\_covid19\\_qandas\\_en.pdf](https://ec.europa.eu/cyprus/sites/default/files/biosafety_crisis_covid19_qandas_en.pdf)

5. CDC (2020). Food and Coronavirus Disease 2019 (COVID-19). <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/food-and-COVID-19.html>

## Customer arrival and departure

### 2.3.1 Risk nodes (RNs): preparing the room, seating customers



When preparing the room, there is a risk of virus transmission, mainly due to handling utensils that are subsequently used by customers (fomite transmission). Although the risk of infection is lower than in other activities, utensils may be contaminated if restaurant staff have not properly sanitized their hands beforehand.

Once customers arrive, managing their reservation (if applicable) and seating them involves a risk of infection, since there may be crowding at the entrance until they are seated, which increases potential droplet and aerosol transmission. As aerosols remain in the air, the risk is higher when the reception or welcome area is indoors. Likewise, when staff welcome and seat customers at their table, it is not always possible to maintain the safety distance between people in the room, which increases the risk of droplet transmission through direct contact.



Figure 3. Preparing the room and seating customers risk nodes (RNs)

## Recommendations



Encouraging advance bookings by telephone or online is recommended to reduce the risk of crowding at the entrance, especially at peak times. Regardless of this, customers should be urged to wait outside the restaurant to avoid creating increased aerosol in the (enclosed) space. Due to the high influx of customers, it is recommended that protective screens, which are easy to clean and disinfect, are installed to protect staff managing reservations (if serving customers from a fixed position), especially if the available space is small. These protective screens will reduce the risk of droplet transmission through direct contact (in addition to wearing a mask, as specified in document **R01**).

When preparing the room, the use of open-air terraces/patios should be prioritized as much as possible. Organizing the room<sup>6</sup> and service to comply with the safety distance and reduced capacity measures is therefore recommended. Establishing the safety capacity in the different areas of the restaurant is essential (e.g., in the different rooms or in private or "reserved" spaces). When defining the capacity, restaurants should consider the ventilation available (**R01**), as well as the safety distance to be maintained between diners.

Once customers are seated at their table, they should be urged to keep their masks on whenever they are not eating or drinking, especially if seated indoors (FFP2, KN95, N95).



Restaurants should offer hand sanitizing options upon arrival (e.g., through hydroalcoholic solution dispensers) and staff should avoid any type of physical contact when greeting customers.

Likewise, establishing a system to prevent customers from sitting randomly is recommended, in order to ensure that tables are properly cleaned and disinfected before customers are seated, and to reduce the risk of fomite transmission. This is especially important on terraces/patios, where it is sometimes more difficult to control the use of tables.

Clean table linen should always be used for each new customer, regardless of its type (textile, paper, table mats, etc.). Document **R03** includes recommendations for washing textiles that should be applied.

6. Throughout this document, the term "room" means the indoor and/or outdoor space where the table service is provided.

## Taking orders

### 2.4.1 Risk node (RN): menu and taking orders



When taking orders, it is not always possible to maintain the safety distance between staff and customers, which increases the risk of droplet transmission through direct contact, as well as airborne aerosol transmission. This risk increases even more when customers remove their masks.

To a lesser degree, when taking orders, there is a risk of fomite transmission from contact with potentially contaminated shared items which are handled by both customers and staff (e.g. menus in paper format).

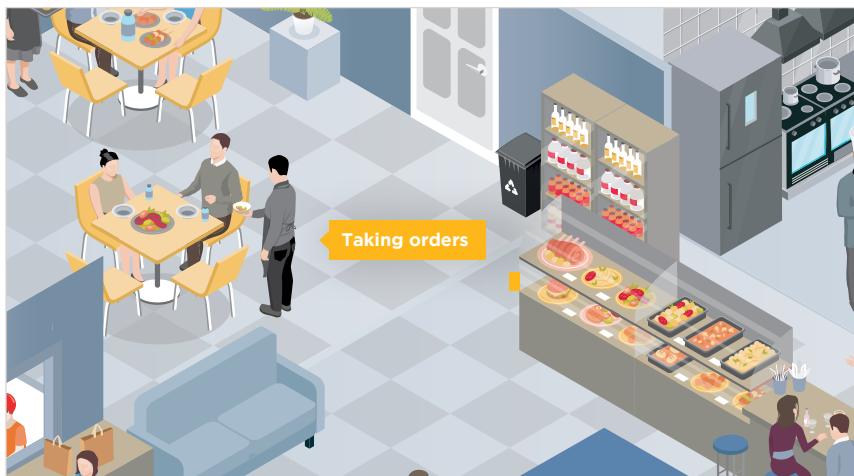


Figure 4. Risk nodes (RNs) when taking orders

### Recommendations



When taking orders, staff should maintain the safety distance as much as possible. Customers should always wear a face mask when not eating or drinking.



One of the most widely implemented measures to reduce the risk of infection through contact with contaminated surfaces is using QR codes or e-menus (on the Internet). Using this type of menu avoids the need to handle physical formats, thus reducing the risk of fomite transmission. As this is an adequate measure to reduce the risk of infection, it should be noted that the ultimate aim is to avoid contact with surfaces handled by many people. Therefore, restaurants should consider not including these solutions (e.g., QR codes) on materials that will also be later handled by customers (e.g., on table stands). Regardless of the chosen digital solution, having a format that is



accessible to people with reading difficulties or without access to QR readers is also recommended (e.g., blackboards, single-use menus or physical menus that are disinfected after being handled by customers or staff).

2.5

## Service

### 2.5.1 Risk node (RN): table service



There is a risk of infection during table service because, as when taking orders, it is not possible to maintain the safety distance between customers and staff due to the nature of the service being provided. Furthermore, customers may not be wearing a mask while eating or drinking. All this increases the risk of droplet or aerosol transmission, especially in enclosed or poorly ventilated restaurants.

Finally, although to a lesser extent, customers use utensils that have been provided and handled by staff (cutlery, crockery, napkins) and likewise, staff handle utensils that have been used by customers (e.g., when clearing tables). All this increases the risk of infection through contact with contaminated surfaces.

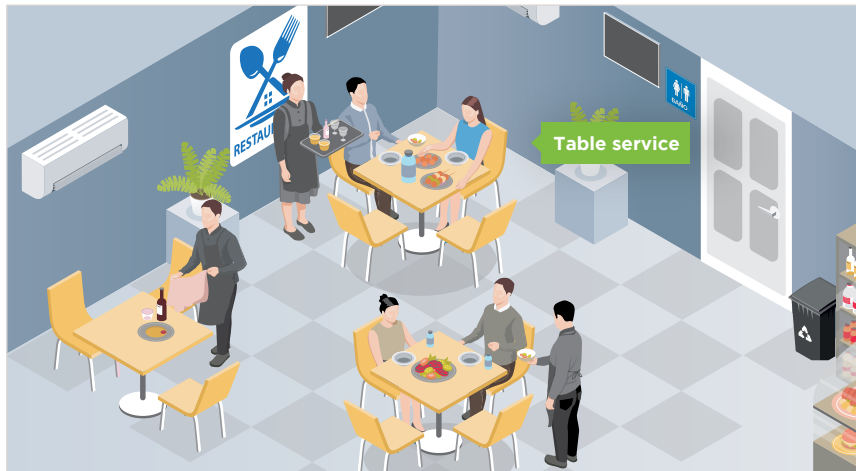


Figure 5. Table service risk nodes (RNs)

## Recommendations



As recommended in previous sections, if it is not possible to provide the service outdoors, it is essential that the room is adequately ventilated (**R01**). In these cases, it may be advisable to measure CO<sub>2</sub> levels to determine whether capacity should be reduced, in view of air renewal limitations.



Customers should be provided with protected cutlery, i.e. pre-packed for each diner. As plastic packaging has a high environmental impact, other solutions should be considered (e.g., covering cutlery with a napkin and staff handling this "pack" as little as possible, after sanitizing their hands).

Since staff generally serve many tables and therefore several groups of customers throughout the service, they should sanitize their hands frequently, and always after clearing a table. Ideally, the tasks of serving customers and clearing and cleaning tables should be divided among staff, in order to reduce the risk of fomite transmission and potential cross-contamination.

Staff should avoid touching their face, nose and mouth with their hands throughout the service.

### 2.5.2 Risk node (RN): bar service



Bars have been one of the most frequently closed services during the pandemic. This is because, depending on the premises, it is difficult to ensure the safety distance between customers, between staff and between staff and customers in this area. This increases the likelihood of crowding in a sometimes small space and therefore increases the risk of droplet and aerosol transmission when customers are eating or drinking and not wearing a mask.

To a lesser extent, fomite transmission may occur due to the high contact of different customers with the bar surface.

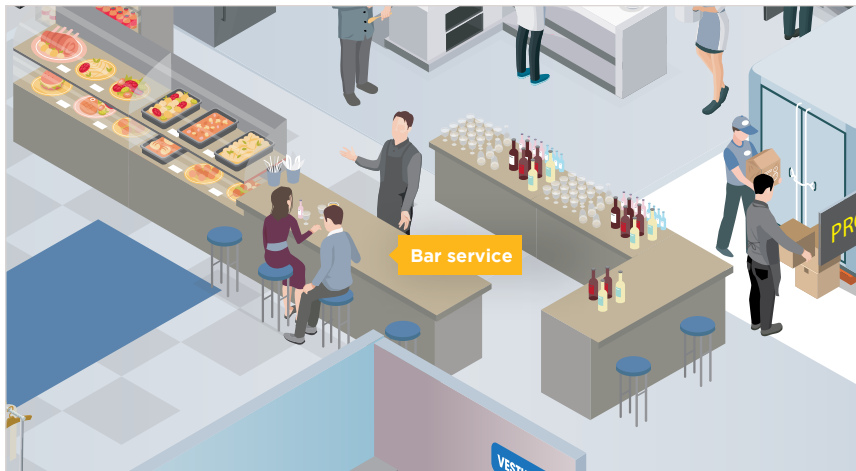


Figure 6. Bar service risk nodes (RNs)

## Recommendations



Ensuring adequate ventilation in this area is essential (**RO1**), considering that customers do not wear masks while eating or drinking. In these cases (and especially when no adequate ventilation is ensured), it may be advisable to measure CO<sub>2</sub> levels to determine whether capacity should be reduced, in view of the air renewal limitations.

Likewise, customer seating or standing positions should be determined at the bar to reduce the risk of droplet transmission. This can be done by placing tables (e.g., high tables and stools) in the bar area, or by marking positions on the floor, so that customers are encouraged to remain in that spot. This measure will consequently reduce the capacity of the space.

Installing partitions in the bar area to reduce the risk of droplet transmission through direct contact is also recommended. For hygiene reasons, and as a precautionary principle, it is also advisable to protect any food exposed at the bar (if applicable), although it has not been proven that SARS-CoV-2 is transmitted through eating.



To reduce the risk of infection through contact with contaminated surfaces, the recommendations established for table service apply.

### 2.5.2 Risk node (RN): takeaway and delivery



Food and drink establishments are increasingly offering takeaway and home delivery services. Restaurant staff, customers and delivery workers (whether in-house or subcontracted) all interact during these types of services, and it is not always possible to maintain the safety distance between them.

With takeaways, the risk of infection is created by close contact between customers collecting their orders and staff handing them over, and by potential crowding in the takeaway collection area.

With regards to home deliveries, the risk is also caused by potential crowding, but this time, by delivery workers in the collection area, especially when they have to wait. It should be noted that these workers deliver to customers at an agreed location. This involves contact with customers and, occasionally, access to buildings or neighborhood communities, with the related risks.

To a lesser extent, there is also a risk of contact from handling cash or credit cards at the time of payment (if the transaction has not been done electronically, such as through an app).



## 2.5.4 Risk node (RN): buffet service



Buffet services (whether for breakfast, lunch or dinner) present an infection risk for two reasons:

- Firstly, as this is a type of service where customers choose and serve the products available and displayed for consumption themselves, there is a risk of infection through contact with contaminated surfaces (fomites). In this "self-service" process, customers have to touch the products and sometimes also the utensils available for serving, which are shared with the other guests. Thus, without ensuring proper hand hygiene, the risk of fomite transmission may increase. It should be noted that most of the preventive measures defined so far in the buffet service protocols have been against this transmission route; measures that, contrary to what was intended, have sometimes increased the risk of infection by other much more likely transmission routes (aerosols and droplets), because they have not been adopted with a holistic view<sup>7</sup> of risk management.
- Secondly, as is the case with the other types of dining covered in this document (**RO2.2**), it should be remembered that customers are often seated indoors (enclosed spaces) with varying levels of ventilation, and do not wear a mask for long periods of time due to the nature of the activity (they are eating and drinking). In this case, the risk of aerosol transmission is higher than the risk of infection through contact with contaminated surfaces described above.

In short, efforts to implement measures that minimize the risk of infection in buffet services should be primarily aimed at neutralizing droplet and aerosol transmissions instead of fomite transmission, although recommendations are also offered in this regard, as a matter of hygiene and precaution.

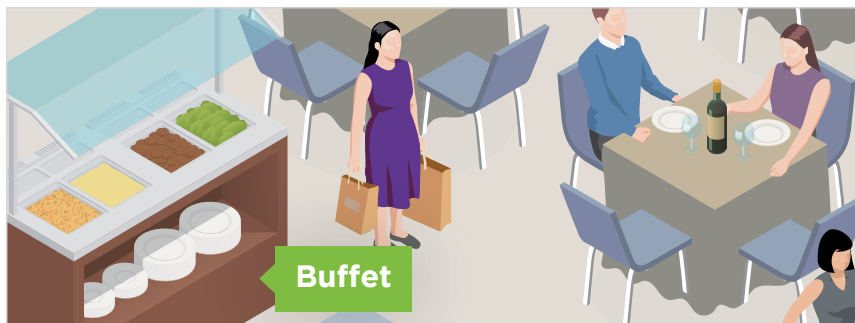


Figure 8: Buffet service risk nodes (RNs)

7. One example of this is introducing staff-assisted buffets (to reduce contact) in tourist resorts with a large number of guests, which has resulted in crowds of customers (queues) with prolonged exposure times. In other words, reducing the risk of infection from one transmission route (fomites) has resulted in an increased risk from other infection routes (droplets and aerosols). Another example is establishing breakfast time slots to reduce the capacity of the restaurant, which causes crowding at the entrance at the start of these time slots. Here, the risk is transferred from one space to another.

## Recommendations



Whenever possible, buffet services should be entirely or partly provided in outdoor spaces (e.g., if it is not possible to move hot tables, at least the dining tables could be located outside). If entirely indoors, this space should be kept ventilated before, during and after the service, in accordance with the recommendations of document **RO1**. In any case, customers should be encouraged to wear an FFP2, KN95 or N95 mask when not eating or drinking, and to remain in this space for the minimum time required.

The safety distance should be maintained in both indoor and outdoor spaces. Indoors, a maximum capacity should be established according to air renewal limitations, specific foot traffic flows should be defined to prevent customers from crossing each other, and other organizational systems should be assessed (e.g., time slots, table spacing, expanding service space by utilizing terraces or other indoor spaces, among other possibilities).

Shared use of tables by people from different traveling parties<sup>8</sup> should be avoided when it is not possible to maintain the safety distance between them.



The above measures should be prioritized over any others aimed at minimizing infection through contact with contaminated surfaces. In this regard, although it is advisable to prevent customers from using shared utensils to serve themselves, reorganizing this process should not have a detrimental impact on the other preventive measures. Therefore, restaurants should assess how to deal with this contact route, depending on the characteristics of the restaurant and the influx of customers, for example:

- Providing a hydroalcoholic solution at the entrance to the buffet area and near communal self-service equipment (e.g., coffee machines, milk, juice, etc.), and urging customers to sanitize their hands every time they go to the buffet.
- Providing customers with self-service tongs as part of their cutlery pack.
- Providing individual portions for self-service.
- Having staff available to serve customers (thus preventing crowding), and protecting staff with screens that are easy to clean and disinfect if they cannot maintain the safety distance due to the nature of the service. It is important that the risk of droplet or aerosol transmission is not increased for the sake of avoiding fomite transmission, as staff are more exposed to the former.
- Changing the type of service to an *à la carte* service (this will be possible in smaller establishments or those with a lower occupancy rate).

8. Group of people traveling together.



Customers and staff should avoid wearing plastic gloves, as they provide a false sense of security and contribute to carrying germs (and not just Coronavirus) from one surface to another. Furthermore, their indiscriminate use has a negative impact on the environment.

Finally, staff dedicated to clearing and cleaning tables should sanitize their hands regularly.

### 2.5.5 Risk node (RN): shared restrooms



Restrooms shared by customers or employees are a source of infection, since they are usually small, unventilated spaces (or with insufficient ventilation), where many users can converge in a short space of time, favoring aerosol or droplet transmission of the virus through direct contact because safe distances cannot be maintained.

Although no cases have been described of fecal-oral transmission from aerosolized feces when flushing the toilet<sup>9</sup>, hand-mouth fomite transmission can occur in these spaces from touching high-contact surfaces.

Finally, there is a high level of contact with surfaces (faucets, toilets, doors, etc.) that may pose a risk of infection if they are contaminated.



Figure 9. Shared restrooms risk nodes (RNs)

9. Evidence has been presented to suggest that COVID-19 may be found in feces. However, only one study has cultured this virus from a single stool sample, and, to date, no fecal-oral transmission has been reported: <https://www.who.int/es/news-room/commentaries/detail/modes-of-transmission-of-virus-causing-covid-19-implications-for-ipc-precaution-recommendations>

## Recommendations



Ventilation in restrooms is crucial, both in communal areas and in toilet cubicles. Thus, efforts should be made to avoid crowding in these spaces and to ventilate them adequately and continuously:

- If present, external windows should be kept open whenever weather conditions allow.
- If there is a window or grill to an interior duct shared with the rest of the building (e.g., if the restaurant is located in a residential building), it is advisable not to open it to avoid potential aerosol transmission from other spaces that share the duct.
- With regards to toilet cubicles, the following is specifically recommended:
  - Encourage users to keep their mask on inside toilet cubicles, where they might think it is not necessary because they are alone in an enclosed space, isolated from other people.
  - Have extractor fans and ensure they operate continuously throughout the day (even if there are outside windows that are kept open).
  - Urge users to close the lid before flushing the toilet, as a general hygiene measure and as a precautionary principle.

To ensure that the safety distance is maintained in restrooms, it is important to determine and indicate their capacity so that it is visible before entering.



Shared restrooms should have water, soap, disposable paper towels and a lidded wastebasket with a non-manual opening mechanism lined with a bag to facilitate waste collection and subsequent cleaning, thus promoting hygiene and reducing the risk to staff. Supplies (disposable paper towels, soap and toilet paper) should be replenished as necessary and be checked at least daily.

Given the high level of contact with surfaces in these spaces, the management should consider installing hands-free faucets, automatic soap dispensers and automatic toilet flushing mechanisms (via a pedal or sensor), if they are not already installed.

These spaces should be included in the Cleaning and Disinfection Plan, as specified in document **R03**. Depending on the service schedule (e.g., continuous or set times), it is advisable to carry out regular restrooms checks. In any case, they should be cleaned at least daily and whenever necessary.

## Payments

### 2.6.1 Risk node (RN): payment



The risk of infection during the payment process is determined by interactions between staff and customers (and the difficulty in maintaining the safety distance, which increases the risk of aerosol and droplet transmission through direct contact).

To a lesser extent, there is a risk of fomite transmission from exchanging payment elements (credit cards, cash, receipts, etc.). The payment process occurs during table service, bar service and delivery/takeaway (although online payments are more common in the latter).



Figure 10. Payment risk nodes (RNs)

## Recommendations



During the payment process, it is advisable to maintain the safety distance between staff and customers as much as possible. If payments are made at a cash desk, installing a protective barrier, which is easy to clean and disinfect, is recommended to reduce the risk of droplet transmission through direct contact.



Restaurants should encourage customers to use contactless payment methods, e.g., online payments, via mobile apps, using QR codes or contactless cards. If handling cash or customer belongings for payment, staff should maintain proper hand hygiene after each transaction. Likewise, they should disinfect the Point of Sale (POS) Terminal after each contact usage.

## Kitchen

This section only includes the food safety measures that are relevant to reduce the risk of COVID-19 infection through the proven transmission routes. These measures strengthen the implementation of food safety measures included in the regulations of each country according to the guidelines of the Codex Alimentarius<sup>10</sup> and the Hazard Analysis and Critical Control Point (HACCP) system.

### 2.7.1 Risk node (RN): receiving and storing raw materials



Although the section on supplier management in document **R03** includes general recommendations that apply to this process, in this document (**R02.2**), it is worth specifying the specific aspects that apply to supplier management for food and drink establishments.

There are different risks in this process:

- In food and drink establishments, goods are generally received in small spaces, where it is not always possible to maintain the safety distance between people, which increases the risk of droplet and aerosol transmission. Some establishments do not even have a specific space for this purpose.

Furthermore, with regards to the risk of infection through contact with contaminated surfaces:

- Shared work tools (e.g., thermometers, gauges, scales, etc.) are handled by both different employees and suppliers.
- With regards to the goods received, their packaging has been in contact with other surfaces and has also been handled by different people from the time they were shipped to the time they were received at the restaurant

Ultimately, these spaces are accessed by external staff who may not know or comply with the preventive measures aimed at minimizing the risk of SARS-CoV-2 infection.

10. Food and Agriculture Organization of the United Nations (FAO). <http://www.fao.org/fao-who-codexalimentarius/en/>

First of all, it is necessary to comply with the different measures set out in document **R03** regarding supplier management.

In addition to this, the measures to reduce the risk of infection through contact with contaminated surfaces listed in this document (**R02.2**) should be implemented in any establishment with a Hazard Analysis and Critical Control Point (HACCP) food safety system. These measures include the following:

- Suppliers should not enter the kitchen, and should wear a mask (FFP2, KN95 or N95) at all times.
- There should be a space reserved to receive and return goods (specific area, table, etc.), located near the supplier access door, but physically separate from the other areas. In this space:
  - The outer packaging of received goods should be removed before being distributed and stored.
  - Fresh food should be transferred to the restaurant's containers before being refrigerated or frozen.
- If equipment or devices (scales, thermometers, gages, etc.) are shared, they should be disinfected after each use.
- The goods receiving area should be disinfected after receiving or handling goods.
- Staff should wash their hands with soap and water before and after handling received goods.

## 2.7.2 Risk node (RN): food preparation



Kitchens are generally small, enclosed, poorly ventilated spaces where staff congregate for long periods of time, without being able to maintain the safety distance from each other due to the nature of their work and the layout of the equipment they use. In some cases, high temperatures or the fact that they do not share the space with customers may cause staff to work without a mask. All this increases the risk of droplet and aerosol transmission.

To a lesser extent, there is a risk of infection through the shared use of work surfaces and equipment.



Figure 11. Food preparation risk nodes (RNs)

## Recommendations



Air renewal should be ensured in these spaces, while avoiding air recirculation. If windows and/or doors are opened, they should prevent insects from entering the kitchen (e.g., with good-condition mesh or mosquito nets). Likewise, staff should wear a mask (FFP2, N95 or KN95) at all times.



Measures to reduce the risk of infection through contact with contaminated surfaces should be found in any establishment with a properly implemented Hazard Analysis and Critical Control Point (HACCP) food safety system. These measures include the following:

Soap and paper towels should be available in a dispenser next to the sink, which should be non-manual (elbow, foot or sensor operated). Staff should wash their hands at the start of the service and frequently throughout the day. Used paper towels should be disposed of in a lidded, touchless trashcan lined with a bag, and waste should be managed as specified in document **R03**. Hand towels should not be used in the kitchen.

- At the end of each service, surfaces, utensils and work equipment used should be thoroughly disinfected. Special attention should be paid to cleaning extractor hoods and their filters, sinks, chopping boards and work surfaces after each service, as well as cleaning other high contact points, such as switches or handles, at least daily.
- Dishes used by customers (glasses, room service) should be disinfected by washing them in hot water. Ideally, they should be washed at temperatures above 60°C<sup>11</sup> (this temperature can be achieved by using mechanical washers/dishwashers).
- Staff should wear clean work clothes every day, and at the end of the working day, these should be laundered.
- Trashcans should be emptied at least daily and whenever full, by sealing the bags and moving them either to the trash room (if available) to be later taken to the dumpster or directly to the dumpster, in accordance with the recommendations of document **R03**.

11. ISO/PAS 5643:2021 Requirements and guidelines to reduce the spread of SARS-CoV-2 in the tourism industry.



## Staff common areas

### 2.8.1 Risk node (RN): staff common areas



Staff common areas are spaces for the sole use of staff (e.g., locker rooms), cafeterias or canteens. They are usually small, poorly ventilated indoor spaces and busy at certain times of the working day (e.g., when entering and leaving, shift changes, lunchtime, etc.), which can make it difficult to keep a the safety distance. Furthermore, in canteens or cafeterias, there are the added risks of any space where people remove their masks for a prolonged period of time to eat or drink while other staff are doing the same.

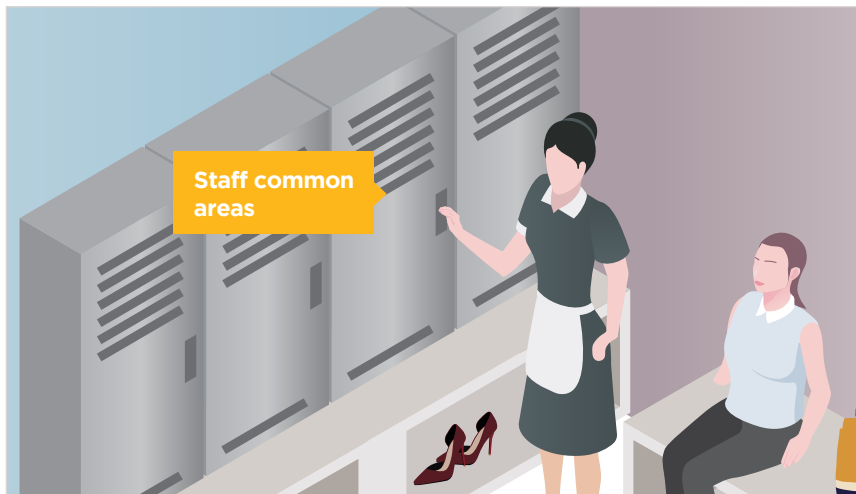


Figure 12. Staff common area risk nodes (RNs)

## Recommendations



Due to the characteristics and use of these spaces, it is especially important to ensure the ventilation and capacity control measures set out in document **RO1**. This is also particularly relevant to avoid outbreaks caused by staff in the restaurant.

In addition to ventilation, organizational measures should be established (shifts, staggering arrival, departure and break times, establishing capacities etc.), which are necessary to avoid crowds of employees in these spaces at certain times of day and to reduce their potential exposure to the virus. For meals, establishing small groups (e.g. bubble groups<sup>12</sup>) is recommended.

With regards to restrooms, the measures previously defined in this document should be applied.

Generally, staff should be urged to stay in these places for the shortest time necessary and to wear masks at all times (FFP2, KN95, N95), even if they are in an area with no customers.



Lockers should be provided with a space for work clothes and another for street clothes. Furthermore, lockers should not be shared, unless they are cleaned and disinfected between staff.

These facilities (lockers, restrooms, etc.) should be included in the restaurant's Cleaning and Disinfection Plan, as indicated in document **RO3**. These areas should be cleaned at least once a day, and this frequency should be increased if necessary.

---

12. A bubble group is a certain number of people who are permanently grouped together for a specific period of time and avoid contact with others who are not in that group. By avoiding contact with other people outside the group, it reduces their potential exposure to the virus and prevents it from spreading if someone becomes infected. In tourism organizations, a bubble may consist of a group of employees who always work the same shift, have lunch together, etc.

**This document has been prepared for the Inter-American Development Bank (IDB)  
by the Institute for Spanish Tourist Quality (ICTE)  
August, 2021**

Pictures: [www.shutterstock.com](http://www.shutterstock.com)

Copyright © 2021 Inter-American Development Bank. This work is licensed under a Creative Commons IGO 3.0 Attribution-NonCommercial-NoDerivatives (CC-IGO BY-NC-ND 3.0 IGO) license <https://creativecommons.org/licenses/by-nc-nd/3.0/igo/legalcode> and may be reproduced with attribution to the IDB and for any non-commercial purpose. No derivative work is allowed.

Any dispute related to the use of the works of the IDB that cannot be settled amicably shall be submitted to arbitration pursuant to the UNCITRAL rules. The use of the IDB's name for any purpose other than for attribution, and the use of IDB's logo shall be subject to a separate written license agreement between the IDB and the user and is not authorized as part of this CC-IGO license.

Note that link provided above includes additional terms and conditions of the license.

The opinions expressed in this publication are those of the authors and do not necessarily reflect the views of the Inter-American Development Bank, its Board of Directors, or the countries they represent.

