Industry Specific Guidelines for Businesses, Organizations, and Sectors Operating Pursuant to Paragraph 2 of Emergency Order 52

The Governor’s Economic Re-Opening Task Force recommends guidance to the Governor for safeguarding all New Hampshire businesses and individuals during the coronavirus disease 2019 (COVID-19) pandemic. This industry-specific guidance, once approved by the Governor, is based on what is currently known about COVID-19 and is intended to protect the public’s health and allow New Hampshire to remain open for business.

The intent of this guidance is to reduce transmission of COVID-19 among employees and customers; support healthy business operations; and maintain a healthy work environment.

In addition to complying with the U.S. Centers for Disease Control and Prevention (CDC), Equal Employment Opportunity Commission (EEOC), and Occupational Safety and Health Administration (OSHA), and US Food and Drug Administration (FDA) guidance, the State of New Hampshire issues emergency orders, guidance, policies, and procedures to protect consumers and employees.

Accordingly, the following businesses, organizations, and sectors may continue to operate according to the following guidance. Unless otherwise specified, this guidance is effective immediately.

A. Food Services Industry – Phase 2

This document has been updated and modified from the original Food Service Industry Guidance, issued on May 18, 2020, to allow expanded access and functioning of restaurants and other food service industry establishments. This updated guidance is effective on June 15, 2020.

General Business Guidance:

1) Review and follow the NH Universal Guidelines.
2) Review and follow the CDC guidance for cleaning and disinfection
3) Provide ServSafe COVID-19 training or its equivalent as soon as possible to all employees.
4) Business owners, managers, and all employees must familiarize themselves with the symptoms of COVID-19 and general information about COVID-19.
5) Educate, inform, and instruct employees and customers about policies and procedures related to hand hygiene, cloth face covering use, social distancing, cleaning and disinfection, illness policies, etc.
6) Build social distancing into food service operations to maintain a safe distance of at least 6 feet between employees and customers when feasible and between employees.
7) Direct customer contact employees shall wear cloth face coverings/masks over their noses and mouths when at work and around others in settings where social distancing may be difficult (e.g. serving clients, greeting, break rooms, kitchens, etc.).
   a. Cloth face masks/coverings should be worn and managed according to CDC guidance about use of cloth face coverings with social distancing cannot be maintained.
   b. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings/masks without first sanitizing their hands. After touching their faces or adjusting face coverings/masks, their hands must be sanitized.
   c. Face shields are not an adequate substitute for a cloth face covering/mask. Face shields do not provide adequate protection from the spread of droplets. Face shields can be worn in conjunction with cloth face coverings/masks but shall not be worn alone.
8) Ask customers to bring and wear a cloth face covering when entering and exiting a facility to protect other patrons and employees during the seating and exiting process, or when getting up to use the restroom. Cloth face coverings are not necessary while a customer is seated and dining outdoors or indoors.
9) Train all employees on the importance of frequent hand washing and the use of hand sanitizers with at least 60% alcohol content
10) Conduct employee health screening as outlined in the Universal Guidelines for All New Hampshire Employers and Employees prior to each shift.
11) Prohibit employee(s) with COVID-19 symptoms or those who report a risk of exposure for COVID-19 from entering the workplace:
   a. Person(s) with any COVID-19 symptoms, those who report close contact with someone suspected or confirmed with COVID-19, or those reporting travel risk factors outlined in the Universal Guidelines shall not be allowed into the facility.
      I. Symptomatic persons should be instructed to leave the premise immediately, contact their healthcare providers to be tested for COVID-19.
      II. Asymptomatic persons reporting close contact with someone suspected or confirmed with COVID-19, or who report one of the traveled-related risk factors should self-isolate for 14 days from their last exposure or return from travel.
12) Require all employees to report any symptoms of COVID-19, or close contact to a person with COVID-19 to a supervisor. Employees who are sick or not feeling well must stay home or, if at work already, must leave work immediately, isolate at home, and contact their healthcare providers for COVID-19 testing. Persons who do not have healthcare providers should seek out COVID-19 testing through one of the many local COVID-19 testing options including a State-run testing facility, local health department, or their health care provider. Person(s) with suspected or confirmed COVID-19 must stay home and self-isolate until symptom-based criteria are met for discontinuation of isolation which are:
   a. At least 10 days have passed since symptoms first appeared, AND
b. At least 3 days (72 hours) have passed since recovery (“recovery” is defined as resolution of fever without the use of any fever reducing medications, plus improvement in other symptoms)

13) Employers are required to maintain the confidentiality of employee health information in accordance with the EEOC, the Health Insurance Portability and Accountability Act (HIPAA), other federal and state pertinent guidelines and guidance, and state and federal laws. Prevent stigma and discrimination in the workplace by not making any determinations of health risk or health status based on age, race, gender, disability, or country of origin.

Consumer Protection:

1) Outdoor dining is permitted as an extension of the curbside and delivery model. Restaurants are permitted to expand outside wherever an outdoor area can be set up safely, such as parking spaces close to entrances, sidewalks, existing patios, and lawn areas. Outdoor areas must be able to be cleaned and disinfected, as required. The outdoor space must be clearly delineated and distanced from people walking by. If expansion is in a shared space, the business or organization must coordinate and seek approval from applicable local authorities.

2) Indoor seated dining is allowed in Belknap, Coos, Carrol, Cheshire, Sullivan and Grafton Counties. However, seated dining areas are limited in capacity to the number of people/tables where table spacing is able to be maintained as outlined below and congregating in other locations is avoided (e.g. lobby and reception areas, bathrooms, etc.).

3) Indoor seated dining is allowed in Rockingham, Hillsborough, Merrimack and Strafford County. However, seated dining is limited to 50 percent capacity of the permitted occupancy based on New Hampshire’s Building and Fire Code. Additionally, seated dining areas in these counties are limited in capacity to the number of people/tables where table spacing is able to be maintained as outlined below and congregating in other locations is avoided (e.g. lobby and reception areas, bathrooms, etc.).

4) Limit tables to no more than six (6) guests per table.

5) Table spacing (both indoors and outdoors) must be maintained so people sitting at adjacent tables are more than 6 feet apart, and servers and waiters/waitresses should be able to maintain social distance while interacting with tables (e.g. taking orders). People moving between tables (e.g. customers going to the restroom) should also have adequate space to move between tables.

6) Reservations or call ahead seating is recommended to promote social distancing and prevent groups of guests waiting for tables. Establishments may use a text alert system to alert guests of available seating, an intercom system for guests waiting in their vehicles, or allowing only one member of the party to wait in the waiting area for their table to be ready.

7) Reservations should be staggered to prevent congregating in waiting areas. Waiting areas should build in social distancing so customers are spaced at least 6 feet apart and so customers and employees are spaced at least 6 feet apart (either through spacing of seating while waiting or demarcations on the floor). Use of cloth face coverings/masks should be requested of customers while waiting.
8) Bar areas can open while following social distancing protocols between groups or individuals seated at the bar (capacity may be affected in order to maintain the appropriate 6 feet of social distancing). Customers are not allowed to stand/mingle in the bar area and must be seated with 6 feet of social distance between groups or individuals (no groups are allowed to sit within 6 feet of each other to interact with each other). Games and other bar functions (e.g. pool/billiards, darts, arcade games, corn hole, horse shoes, etc.) are allowed and should following their industry specific guidance.

9) Small group bands and solo music artists are allowed to perform in outdoor areas as long as they can maintain social distances of 6 feet apart from each other and any table. All customers must have table or bar seats and must be seated in them unless going to the restroom.

10) Signage must be prominently posted throughout the establishment to ask customers if they are experiencing COVID-19 symptoms, including:
   a. Fever,
   b. Respiratory symptoms such as sore throat, runny nose, nasal congestion, cough, or shortness of breath,
   c. General body symptoms such as muscle aches, chills, or severe fatigue,
   d. Changes in a person’s sense of taste or smell,
   e. If you answer “yes” to any of these questions, please do not put our employees and other guests at risk. Come back another day when you feel better.

**Business Process Adaptations:**

1) Ordering food and alcohol to go are still allowed per Emergency Order 6 and Emergency Order 52 Food Service Guidance.

2) Place hand sanitizer stations in restaurant lobby, reception, cashier stations, bathrooms, and other frequently used areas throughout the establishment.

3) Restrooms must be monitored and routinely cleaned and disinfected. Soap dispensers should be regularly filled.

4) Clean and disinfect all front-of-house surfaces including door handles, screens, phones, pens, keyboards, and other areas of hand contact every two hours, at a minimum.

5) To the extent possible, use menus that are disposable or sanitized between each use. If not possible, menus must be cleaned after each customer’s use. A disposable ordering system is also advisable when possible to limit guest interaction with wait staff.

6) Use of “self-serve” utensils, plates, or napkins are not allowed. Consider using rolled silverware and eliminating table presets.

7) Sanitize all tabletop items, including condiments, after each table turn (or use disposables).

8) Disinfect chairs, especially where contact occurs, after each table use.

9) No self-serve buffets, appetizers, condiments on a counter for use by multiple tables, or beverage station re-use are allowed.

10) Employee-staffed buffets are allowed with only staff touching serving utensils and serving customers. Social distancing of 6 feet in serving lines must be maintained. Barriers (e.g. Plexiglas barriers, sneeze guards, etc.) are recommended for employee-served buffets to protect employees and customers. Employees serving and customers
going through a buffet line must wear cloth face coverings while waiting in line, serving, being served, bringing food to the buffet, taking empty trays/food containers from the buffet, and walking to and from the buffet.

11) Evaluate building ventilation systems to increase room and overall building ventilation, increase the number of air exchanges, increase outdoor air ventilation, limit internal air circulation, and improve central air filtration. Ventilation systems’ filters must be routinely replaced and other necessary maintenance should be performed as needed. CDC guidance should be reviewed and used in evaluating building ventilation.

**Wedding, Catering, and Function Hall Addendum**

The following guidance applies to weddings and other function hall associated events. This guidance applies to events that bring individuals together for planned events or celebrations.

Group social gatherings, such as weddings, receptions and other celebrations, bring individuals from many communities together. In addition to guidance set forth in the Universal Guidelines, Food Service, and Places of Worship Guidance, the State of New Hampshire sets forth the following guidance to reduce exposure to COVID-19 to protect individuals attending and working at these events and the wider community.

**Considerations:**

When planning these events, please consider the following: crowd density, nature of contact between participants, number of participants coming from states or areas that are currently heavily impacted by COVID-19 within 14 days of the event, age or health of the participants, duration and mode of travel of participants, and the fact that the length of the event may increase the risk of transmission.

For wedding ceremonies, organizers should follow the Universal Guidelines and Places of Worship Guidance.

For post-wedding celebrations and meals, organizers must follow the Universal Guidelines and the Food Service Guidance in addition to the following:

1) Outdoor events are preferable to indoor events to reduce the risk of exposure and spread to attendees and event staff. All organizers, staff, volunteers, and attendees are strongly encouraged to follow physical distancing guidelines. This includes maintaining a distance of at least 6 feet between individuals and a distance of 6 feet between household groups.

2) Outdoor venues may operate within any existing occupancy limits, as long as social distancing can be maintained.

3) Indoor events in venues may operate at 50 percent of their permitted occupancy based on New Hampshire’s Building and Fire Code. **This 50 percent capacity limit applies statewide notwithstanding the Food Service Guidance that allows for 100 percent capacity in restaurants in certain counties.** There should be a limit of six (6) individuals at a single table. Other applicable provisions of the Food Service Guidance must be followed.
4) Crowding should be minimized, and organizers should consider using distancing measures to reduce close contact among people during the gathering. This includes staggering of arrivals and departures and minimizing congregation at sanitary stations, restrooms, and water/drink distribution areas.

5) Dancing within 6 feet of another individual is discouraged, with the exception of family members and individuals from the same household.

6) Face coverings should be worn when social distancing is not possible between household groups.

7) Consider displaying posters and signs around the venue to remind attendees and staff to take steps to prevent the spread of COVID-19.

B. Campgrounds: Public and Private

Employee Protection:

1. Campground employers must implement employee education and training around safe practices as they relate to hygiene, sanitation, and illness policies outlined in the Universal Guidelines for All New Hampshire Employers and Employees.

2. Campground employees must be screened as outlined in the Universal Guidelines.

3. Campground staff must be issued, depending upon their functions, latex/non-latex gloves, eye protection (goggles or face shields), and cloth face coverings/masks, and other appropriate protective equipment. Cashiers and customer services representatives must wear, at a minimum, a cloth face covering when interacting with other staff and customers.

4. There must be a limit of one person per truck/ATV/UTV. Vehicles must be disinfected after each use.

5. Campground employers must implement a daily screening process for all employees following the Universal Guidance.

Consumer Protection:

1. Effective immediately, campgrounds may be open to New Hampshire residents, members, or out of state visitors who have met the 14-day quarantine requirement. Members are not required to meet the quarantine requirement.

   a. Operators should require a copy of a NH driver’s license or a signed document from the guest(s) attesting that all the person(s) in the group staying at the campground/lodging facility remained at a home for at least 14 days before arriving in New Hampshire, only going out for essential errands or outdoor exercise, and when outside of the home maintained social distancing and wore cloth face coverings/masks when within 6 feet of another person during this 14 day “quarantine” period. Out-of-state guests should be made aware at the time of the reservation of this requirement and request for a signed document attesting to maintaining a quarantine period.

   b. A “membership” means an arrangement that involves a binding and ongoing legal or monetary commitment to a particular campground or campsite, such as a
seasonal pass/rental agreement, a year round pass/rental agreement, or a deposit on a seasonal or year round pass/rental agreement. Memberships in a generalized rewards/discount program do not qualify as memberships for purposes of this guidance.

2. Facilities:
   a. Tent and RV sites may be made available for rent/lease.
   b. Cabins, yurts, trailers/RVs, lean-tos, and tent platforms may be made available for rent/lease based on each campground owner’s discretion and ability to clean and disinfect.
   c. All indoor public gathering areas may be open but must be limited to a maximum of 50 percent of the permitted occupancy based on New Hampshire’s Building and Fire Code. People should be asked to maintain a physical distance of 6 feet from non-household members and to use cloth face coverings/masks over their noses and mouths when in public gathering areas.
   d. Outdoor public gathering areas are preferable to indoor gatherings to reduce the risk of exposure and spread to all attendees. Outdoor public gathering areas may operate within any existing occupancy limits, as long as physical distancing of 6 feet can be maintained. All staff and attendees are strongly encouraged to follow physical distancing guidelines including maintaining a distance of at least 6 feet between non-household people at all times. People should be asked to use cloth face coverings/masks over their noses and mouths when in public gathering areas.
   e. Swimming pools may be open in accordance with the Pools Guidance.
   f. Shower and laundry facilities may remain open pursuant to DHHS’s Universal Guidelines, CDC guidance on cleaning and disinfection, and maintaining proper social distancing of at least 6 feet. Cloth face coverings/mask should be worn while in common areas like restrooms and laundry facilities.
   g. RVs with and using full hookups or holding tanks are permitted without restriction.

3. Restrooms must be frequently cleaned and disinfected, especially high-touch surfaces. Where feasible, restrooms may be converted to family style, single use facilities where one campsite group may enter at a time.

4. Restrooms serving campsites for camping, other than RVs with and using full hookups or holding tank, will be supplemented by a limited number of portable toilets, at or near the restrooms or in other appropriate locations in the campground.

5. Dishwashing stations may be open but only under social distancing, signage, and cleaning and disinfection protocols.

6. All facilities must be cleaned and disinfected in a manner and frequency prescribed by the CDC. Campsites must be thoroughly cleaned after each party.

Campsite Availability:

1. Group campsites must remain closed. Campsites must be limited to 6-8 occupants depending upon campground and campsite configuration.

2. Camping, other than RVs using full hookups or holding tanks, will be limited to 50 percent of the campsites or every other site. However, the 50 percent capacity limit may
be exceeded if necessary to accommodate those with memberships obtained prior to May 1, 2020. In addition, in the case of RVs with and using full hookups or holding tanks, the 50 percent capacity limit may be exceeded in order to accommodate all members.

3. Camping for all RV sites using full hookups or holding tanks may be occupied as long as proper social distancing is maintained by the users.

Business Process Adaptations:

All reservations must be made online or by telephone in advance. Walk-in registrations are not allowed. COVID-19 messaging must be provided at the time of reservation. Staff taking reservations must advise that if anyone in a party is feeling sick or may have been exposed to someone who had COVID-19 in the past 14 days, that person must stay home.

Check in:

1. The individual checking in must be asked if anyone in his or her party is sick or not feeling well based on the screening guidance outlined in the Universal Guidelines for All New Hampshire Employers and Employees. If so, the campground must refuse service to the entire party and provide a refund in accordance with campground policies.
2. When checking campers in, campgrounds must minimize contact as much as possible between campers and staff. If possible, the check-in should be performed outside by the camper’s vehicle, have the camper pay in advance, pay by credit card, use gloves, use cloth face coverings/masks, and follow social distancing protocols.
3. When checking campers in, provide information to all campers of the need for social distancing, frequent hand hygiene/washing, cloth face covering use when in public places, and of limited activities and facilities.
4. Check-in may be conducted using one of the following options shown below. The options are in the order of preference:
   a. Campers will self-check-in via an online app at the campground. The app will not allow check-in unless the campers are at the campground and have their location services turned on. One router will be available for access outside the campground office to provide a WIFI connection. (Applies to State Park Campgrounds only).
   b. Curbside check-in with credit card, sneeze guards, and staff wearing cloth face coverings/masks.
   c. Staff will drive through campground to verify that the campers are on site. Staff will enter this information the system at the office.

Retail stores at campgrounds must follow Universal Guidelines for All New Hampshire Employers and Employees and specific Guidelines for Retail Establishments.

Boat, bicycle, and other equipment rentals are allowed in accordance with the Attractions Guidance.

C. State Parks

Employee Protection:
1.) Employees must be provided with education and training around safe practices as they relate to hygiene, sanitation, and illness policies outlined in the Universal Guidelines for All New Hampshire Employers and Employees.

2.) Employees must be screened as outlined in the Universal Guidelines for All New Hampshire Employers and Employees.

3.) Staff must be issued, depending upon their functions, latex/non-latex gloves, eye protection (goggles or face shields), and cloth face coverings, or other appropriate protective equipment. Cashiers and customer services representatives must wear, at a minimum, a cloth face covering.

4.) There shall be a maximum of one person per truck/ATV/UTV.

5.) State vehicles must be wiped down after staff use each day.

6.) Hand tools must be wiped down after each user.

**Consumer Protection:**

1.) Parks must post signage and messaging about COVID-19 and the need for social distancing, frequent hand hygiene/washing, and cloth face covering use when in public places.

2.) Parks must make hand washing stations and alcohol-based hand sanitizer readily available where able.

3.) Parks must build social distancing into the operation of restrooms and changing facilities.

4.) Messaging must be provided to visitors regarding the need for visitors to bring their own supplies of water if water fountains are turned off.

5.) Touchless transactions should be made available, as feasible.

6.) Parks must provide for cash payments in their reservation system, if feasible.

7.) Premises must be frequently cleaned and disinfected, especially high-touch surfaces.

8.) Visitors must be asked to:
   a. remain home if experiencing symptoms of COVID-19; and
   b. keep a safe distance of at least 6 feet from other people visiting the park/campground at all times; and
   c. wear a cloth face covering over their mouths and noses to protect others when in locations where other people might be present (e.g. restroom and changing facilities)

9.) Parks must refund the entire amount of the reservation, minus the reservation fee, and waive the $15 fee for campground cancellations within 5 day or less if the visitor and members of their party cancel due to illness.

**Business Process Adaptations:**
1.) Parks must either remove picnic tables or develop a process for cleaning and disinfecting them frequently.

2.) Water bubblers and fountains must be turned off.

3.) Parks must use no-touch trash cans without lids to open.

4.) Handling of cash and credit/debit cards must be limited and online sales must be utilized wherever possible.

5.) All surfaces in restrooms, pit toilets, and portable toilets must be regularly cleaned and disinfected.

6.) Campsites must be cleaned and hard surfaces must be disinfected after each use.

7.) Flume Gorge Guidelines:
   a. Online advance ticketing only is encouraged.
   b. A maximum of 10-20 transactions will be sold for each one hour time period in order to limit occupancy.
      I. Visitors must have a ticket to enter the visitor center
      II. Check-in for visitors will be done via tablet.
      III. Demarcations will be put in place showing waiting spots that are 6 feet apart.
      IV. Visitor flow will be managed to ensure social distancing and occupancy limits.
   c. Visitors must exit building to hike trail though one turnstile and return through a separate turnstile.
   d. Visitors must exit and return to the hiking trail through separate doors that will remain open.
   e. Any outdoor seating should be separated by at least 6 feet of distance.
   f. Most or all exhibits should not be on display for the remainder of the year to reduce congregating.
   g. No shuttle bus service shall be available until further notice.
   h. No bus groups shall be allowed until further notice.
   i. Food and beverage operations shall follow Food Service Guidance.
   j. Cash transactions will be discouraged and limited wherever possible. When possible, touchless transactions will be implemented and encouraged.
k. If seating is provided, must be only using tables that are separated so that seating is more than 6 feet apart.

8.) Inland Beaches Guidelines:

a. The capacity of each beach must be determined under social distancing guidelines and access must be limited to prevent overcrowding.

b. Picnic tables must be spread out 10 feet apart to maintain social distancing.

c. Visitors must reserve a picnic table online.

d. The following beach activities are permitted: Walking/running, swimming, sitting, playing, and sunbathing as long as social distancing is maintained.
   I. Group activities will not be allowed. Violators will be asked to leave the beach.

e. Lifeguards will be on duty, where feasible, and following the guidance from the US Lifeguarding Association Guidelines

f. Inland Beach Restrooms
   I. Implement single use family bathrooms when able.
   II. Limit occupancy to group restroom facilities.
   III. Make portable toilets available.

9.) Off-highway Recreational Vehicle (OHRV) Motorized Trails Guidelines

a. Properties to be opened, restroom, and parking facilities information:
   I. Phase 1: Only trails on DNCR state reservations will be opened (350 miles. See list below);

b. Hopkinton-Everett Riding Area (opened May 23-Army Corp license to DNCR)
   I. No restroom facilities.
   II. Main parking lot capacity (40 vehicles)

c. Hillsborough Recreational Rail Trail (opened May 23, DNCR property)
   I. No restroom facilities

d. Hillsborough Fish & Game Club
   I. Parking lot (10 vehicles)

d. Pisgah State Park (pen May 23, DNCR property)
   I. No restroom facilities
   II. Rte. 119 parking lot in (15 vehicles)
e. Jericho Mountain State Park (open May 23- DNCR property)
   I. Toilet facilities open: Pit toilet at scenic Warming Hut overlook (1) and Jericho Lake overlook (1); pit toilets in campground (3) and flush toilets Visitor Center entrance (2).
   II. Visitor Center Parking Lot (60 vehicles), Event Area parking (100 vehicles) and Beach parking lot (20 vehicles).
   III. All traffic from parking areas to be routed past Visitor Center to check for registrations.
   IV. Only the southern parcel (Jericho Lake Tract) will be open at this time. No parking on Rte. 110 or riding on Head Pond Tract.
   V. Fee collection:
      A. Option 1. No fee collection.
      B. Option 2. Online reservation system.

f. Millsfield Pond area trails (open May 23, administrative lease to BoT)
   I. Club provides portable toilet at parking area
   II. Club parking lot (30 vehicles)
   III. All connector trails S, N and E to be blocked with barricades with signage about trail closure beyond this point. No connection to Errol, Milan, Dixville, or Cambridge areas.

g. Sugar River Rail Trail (open year-round, DNCR property)
   I. No facilities

h. Newport and Claremont parking areas (25 vehicles combined)

i. Fremont Branch-Rockingham Recreational Trail (open year-round, DNCR property)
   I. No facilities

j. Fremont Rte. 107 lot (25 vehicles) and Warner Hill Road lot Derry (15 vehicles)
   I. Ammonoosuc Recreational Trail (open year-round- DOT property managed by DNCR)
   II. No facilities

k. Littleton parking (Industrial Park Drive- 25 vehicles)
   I. Club trail systems will open after assessment by local clubs.
   II. Coos club networks and connectors to remain closed at this time.
D. Hospitals – Elective Procedures

Hospitals are permitted to begin a responsible, phased-in approach to resuming elective and non-emergency healthcare services, according to the below guidance that ensures the health and safety of patients, the healthcare workforce, and our communities.

NOTE: This guidance can be operationalized only if adequate Personal Protective Equipment (PPE) and sufficient testing supplies and testing capacity exist for hospitals and health systems.

1. Timing for Resuming Services

In order to resume services, there should be a capacity to provide safe care for the current patient population, including both COVID-19 positive and non-COVID-19 patients, who require hospitalizations. The facility shall continuously monitor and have appropriate numbers of intensive care unit (ICU) and non-ICU beds, PPE, ventilators, medications, and trained staff to treat all patients. Crisis standards of care should not be active. Based on local assessments of the conditions in the communities they serve regarding levels of hospitalization and overall capacity, health system leaders may make the determination of when to begin the phasing in of time sensitive healthcare services.

Given the known evidence supporting healthcare worker fatigue and the impact of stress, the facility should be able to perform routine services without compromising patient safety or staff safety and well-being.

2. COVID-19 Screening and Testing

Facilities must have a defined process for screening all employees and patients for symptoms of COVID-19. Screening and enhanced use of PPE must be considered depending on the services or treatments performed. Facilities should also have a clear process for timely testing, whether in-house or referral to another testing provider, to protect staff and patient safety whenever possible. A facility policy should address requirements and frequency for testing surgical and procedural patients and include routine staff screening and testing as indicated.

3. Personal Protective Equipment

Facilities will be unable to resume time sensitive services, including elective surgical procedures, unless they have adequate PPE and medical surgical supplies appropriate to the number and type of procedures to be performed, and are confident that the future requests for PPE can be provided as additional services are phased in. Policies for the conservation of PPE should be continued as well as policies for any extended use or reuse of PPE per CDC and FDA guidance. Non-emergent services requiring utilization of PPE should be avoided if the facility is experiencing shortages of relevant PPE.

4. Determining Services to be Resumed
Facilities should create a plan to gradually reintroduce healthcare services, emphasizing those that are time sensitive, prioritizing patients with urgent needs, and avoiding further delays that may have an impact on patient outcomes, especially those that have been previously canceled or deferred. Decisions to add services also need to include strategies to access clinical and support services that may be required to enable the resumption of services such as diagnostic imaging, laboratory services, pharmacy support, therapeutic and diagnostic procedures, and others. The use of telehealth and its potential expansion should be maximized wherever appropriate.

5. **COVID-related Safety and Risk Mitigation**

Facilities should continue social distancing policies for staff, patients and patient visitors in non-restricted areas in the facility which meet current local and national recommendations for community isolation practices.

Current limitations on visitors should be continued.

Creating non-COVID-19 care zones within the facility, such as dedicated wings for hospitalized patients, should be done if possible, by segregating patients, clarifying safe patient flow coming into the building, and circulation within the building. Hospitals should have transfer agreements in place with other hospitals in their region to treat both COVID and non-COVID patients if those hospitals have that capability, when necessary, and when appropriate.

Universal masking should be employed for all persons entering the facility according to state and national guidelines.

6. **Patient Messaging and Communication**

It is critical to ensure patients and community members understand that the prioritization of the safety of patients and healthcare workers is paramount as services are reintroduced. Clear communication of the plans to reintroduce services, and considerations for ensuring their safety, needs to be reinforced in all messaging to the public.

As always, individual decisions about care and treatment must be driven by the clinical judgment of caregivers in partnership with their patients.

7. **Governance**

Each hospital shall maintain an internal governance structure to ensure the criteria and principles outlined above are followed. Providers should consult, as appropriate, with any guidance issued by relevant professional specialty societies regarding appropriate prioritization of procedures.
In order to proceed with any phase-in of additional services, the facility must ensure there are enough resources available including PPE, a healthy workforce, supplies, and medications so as not to jeopardize current care or surge capacity.

COVID-19 metrics should be continuously monitored on a daily basis to identify triggers that could signal imminent exponential growth requiring an immediate cessation of further service expansion or possible reduction in services.

**E. Manufacturing**

**Employee Protection:**

1.) Review and comply with the recommendations in the Universal Guidelines for All New Hampshire Employers and Employees.


3.) Review and follow the OSHA [Guidance on Preparing Workplaces for COVID-19](https://www.osha.gov/newmedia/differences/pantry/pantry0519.pdf) relative to implementing workplace controls, including engineering controls (e.g. increasing ventilation rates and improving ventilation and air filtration systems), administrative controls, safe work practices, and if applicable, personal protective equipment (PPE) for COVID-19.

4.) Personal protective equipment (PPE) is generally recommended for people caring for patients with suspect or confirmed COVID-19. Therefore, the role of PPE in the manufacturing workplace is likely minimal. But, employers should perform a workplace assessment to identify areas of risk to employees. Some limited PPE might be appropriate depending on the situation and in accordance with CDC recommendations.

5.) Employees should [wear cloth face coverings](https://www.cdc.gov/coronavirus/2019-ncov/workplaces/face-coverings.html) over their noses and mouths when at work and around others in settings where social distancing may be difficult.

6.) Encourage frequent hand hygiene and provide access to hand washing stations and alcohol-based hand sanitizer.

7.) Adjust manufacturing processes to build in social distancing and maintain a safe distance of at least 6 feet between employees.

8.) Stagger shifts, breaks, and meals, in compliance with wage and hour laws and regulations to maintain social distancing. If possible, have employees take breaks outside, weather permitting.

9.) Provide regular updates, education, and training for employees about protecting themselves and others in the workplace from COVID-19.
10.) Employers must require all employees to report any illness to their supervisors and require notification of COVID-19 positive cases in the employee’s household.

11.) Employers must implement a screening process for their employees in accordance with the Universal Guidelines.

12.) Implement flexible sick leave and supportive policies that allow an employee to stay home when sick or to stay home to care for a sick family member.

13.) Prohibit congregating in break rooms or common areas and limit capacity of such areas to allow for safe social distancing of at least six (6) feet at all times.

14.) Restrict interaction between employees, outside visitors, and/or delivery drivers. Wherever possible, implement touchless receiving practices.

15.) Whenever possible, in accordance with social distancing protocols, erect impermeable barriers to limit contact with others.

16.) Require sanitization of equipment and/or workspace areas in the beginning, middle, and end of each shift, especially in “high touch” areas, as feasible.

F. Retail

Effective on May 11, 2020, all retail establishments must comply with the Universal Guidelines for All New Hampshire Employers and Employees and the Retail Guidance. Retail establishments will also follow CDC guidelines for cleaning and disinfection.

Employee Protection:

1. All staff must wear cloth face coverings at all times when in the retail facility and in public locations or shared staff areas (e.g. break rooms, restrooms, etc.), even if other individuals are not immediately present.
   • Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.
   • People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching faces or adjusting face coverings, their hands must be sanitized.

2. Alcohol-based hand sanitizer must be made readily available for both staff and consumers at entrances and exits to the retail facility, at checkout locations, and in staff break rooms and other commonly used staff areas.

3. Stagger shifts, breaks, and meals, in compliance with wage and hour laws and regulations to maintain social distancing. Encourage staff to take breaks outdoors, weather permitting.

4. Provide regular updates and training for employees about personal COVID-19 mitigation and store safeguards based on CDC guidelines.
5. Require all employees to report any symptoms of COVID-19 or close contact to a person with COVID-19 to supervisor.

6. Employees must be screened for (questioned about) symptoms of COVID-19 before each shift in accordance with the Universal Guidance.

7. Staff should be instructed to maintain a distance of at least 6 feet from others (staff and customers) at all times. Prohibit congregating in break rooms or common areas and limit capacity of such areas to allow for a safe social distancing of at least 6 feet whenever possible.

8. Restrict interaction between employees and outside visitors or delivery drivers. Wherever possible, implement touchless receiving practices.

Consumer Protection:

   a. Develop a process for limiting the number of customers inside a store at a given time, excluding employees and representatives of third-party delivery companies, to 50 percent or less of store occupancy based on New Hampshire’s Building and Fire Code.

   b. Ensure any waiting line outside the store has demarcations spacing customers at least 6 feet apart.

   c. Customers should wear cloth face coverings at all times when inside the store. Signage and staff should request this before customers enter the store.

   d. Consider dedicated shopping hours or appointment times for the elderly and medically vulnerable persons.

   e. If feasible and reasonable, establish one-way aisles and traffic patterns for social distancing.

   f. Where appropriate and possible, implement pay-ahead and curbside pickup and/or delivery service options to minimize contact and maintain social distancing.

   g. Assign dedicated staff (i.e. a safety officer) to monitor social distancing and compliance with protective actions, and to prompt customers and other staff about the importance of social distancing, hand hygiene, and use of cloth face coverings.

   h. Add social distancing reminder signage and floor stickers in key areas in the store (e.g. check-out counters).

   i. Offer self-checkout and/or self-bagging options when possible.

Business Process Adaptations:

1.) Services should preferably be paid for electronically, but retailers may accept cash or check.
2.) Establish enhanced cleaning protocols that follow CDC guidance relating to cleaning and disinfection for COVID-19. This includes cleaning and disinfecting shared resources and frequently touched surfaces at a minimum of every two hours. Check-out lanes should be wiped down and cleaned between each customer.

3.) When possible, use a clearly designated entrance and a separate clearly designated exit to maintain social distancing.

4.) Use plastic shields or barriers between customers and clerks at service counters and clean them frequently.

5.) Adjust store hours to allow time for enhanced cleaning.

6.) Continue to prohibit the use of reusable bags.

7.) Suspend the sampling of food and personal hygiene products.

8.) Task management-level employees within the store (i.e. a safety officer) to monitor compliance.

9.) Business owners can institute requirements over and above this guidance.

G. Dental

Employee Protection:

1.) Staff shall wear face protection and other personal protection items as recommended by the ADA, CDC, and OSHA.

2.) Staff shall be provided training on Personal Protective Equipment (PPE) based on CDC guidelines for using PPE.

3.) The employer shall provide regular updates and training for employees about personal COVID-19 mitigation and practice safeguards based on ADA, CDC, and OSHA guidelines.

4.) All employees must report any illness to their appropriate supervisor and notify their supervisor of any close contact to a person with COVID-19 in the preceding 14 days.

5.) Employees must be screened for symptoms of COVID-19 before each shift. Employers must implement a system for screening employees before each shift in accordance with Universal Guidance.

6.) Dental personnel known who are at higher-risk for severe illness from COVID-19 should carefully evaluate whether their participation in clinical activities is wise at this time. This includes older adults (especially people 65 years of age and older) and those with serious underlying medical conditions.

Consumer Protection:
1.) If ADA, CDC or OSHA approved PPE is not available to safely treat patients, patients will be referred to providers who have that equipment.

2.) Pre-appointment screening evaluations shall be required for all patients and include medical history for all patients.

3.) Patients will be pre-screened for symptoms of COVID-19 and with an in-office temperature check prior to treatment. Patients with an elevated temperature or symptoms of COVID-19 should be instructed to contact their primary care provider and rescheduled for their dental procedure.

4.) Patients should be asked to wear cloth face masks/coverings when entering dental offices and continue to wear them before and after dental care.

**Business Process Adaptations:**

1.) Dental providers shall continue to postpone elective treatment, surgeries, and non-urgent dental visits if the practice is unable to provide the recommended PPE to protect staff and safely treat patients.

2.) Pre-scheduled appointments are required to ensure time for proper cleaning, disinfection, and sterilization between patients. Phases of care shall be as follows:

   a. Dentists may perform emergency/urgent care procedures according to ADA guidelines.

   b. Dentists may add elective/non-emergent and orthodontic procedures for patients when practices are able to fully comply with ADA interim guidance (entitled “ADA Interim Guidance for Minimizing Risk of COVID-19 Transmission”) and align with OSHA guidance on PPE while there is ongoing community transmission of COVID-19. Treatment of high-risk patients is to be performed at the doctors’ discretion in alignment with ADA guidelines.

   c. During Phase I, the State of New Hampshire does not recommend the resumption of elective cosmetic procedures or the use of ultrasonic scaling.

   d. All guidance will be re-evaluated on an on-going basis to help ensure dental offices are maintaining best available practices to minimize COVID-19 exposure for patients and staff.

**H. Childcare**

**General Guidance to Protect Childcare Providers, Staff, and Children:**

1. Review and follow the [Universal Guidelines](#) for All New Hampshire Employers and Employees.

2. Review and follow CDC [guidance for childcare programs](#).

3. All childcare providers and other staff are encouraged to wear reusable/washable cloth face coverings over their noses and mouths at all times, especially when 6
feet of social distancing is not able to be maintained. and when caring for potentially vulnerable children with underlying health conditions or disabilities.

a. Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.

b. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching faces or adjusting face coverings, their hands must be sanitized.

4. All adults dropping children off at childcare should be asked to wear cloth face covering over their noses and mouths when within the childcare facility or public spaces where other individuals are present.

5. NH DHHS does not recommend children wear masks or face coverings at childcare programs for the following reasons:

a. CDC guidance states, “Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.”

b. There are safety issues with young children having cloth, ties, elastics, etc. around their mouths and necks that can pose choking or strangulation hazards.

c. The effectiveness of masks and other face coverings is impacted by proper handling and use. Children are more likely to play with the masks/face coverings, adjust them or remove them without washing their hands before or after touching the masks/face coverings, touch their faces, etc. Touching the face and then touching other objects (e.g. toys) can potentially put other children in a group at risk.

d. Staff would need to increasingly be in close contact with children to provide assistance with face coverings, which can be counter-productive to maintaining distance as much as possible.

6. Staff and children should practice frequent hand hygiene:

a. Wash hands often with soap and water for at least 20 seconds. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol.

b. Always wash hands with soap and water if hands are visibly dirty.

c. Supervise and help young children to ensure they are washing/sanitizing hands correctly, and to prevent swallowing of alcohol-based hand sanitizer. When soap and water are not readily available and hand sanitizer is used with children, it should be used under the direct supervision of staff. When not in use, hand sanitizer should be kept out of reach of children (on a high shelf, in a cabinet, or in a backpack worn by staff outside).

d. At a minimum, require handwashing when arriving at the facility, entering the classroom, before and after meals or snacks, before and during meal preparation or service as necessary to prevent cross contamination, after outside time, before and after going to the restroom or each diaper change, after handling any bodily fluid, before and after medication administration,
after cleaning up and handling any garbage, after handling animals or cleaning up animal waste, and prior to leaving for home.

7. Advise children, families, and staff to avoid touching their eyes, noses, and mouths with unwashed hands.


9. Cover coughs or sneezes with a tissue, then throw the tissue in the trash, and clean hands with soap and water or hand sanitizer (if soap and water are not readily available). Alternatively, cough or sneeze into elbows.

10. Children, families, and staff, should be reminded to maintain a distance of at least 6 feet from others whenever possible.

11. If there is a confirmed case of COVID-19 at a childcare facility, the facility must contact:
   a. The Bureau of Infection Disease Control (BIDC) at 603-271-4496.
   b. The Bureau of Child Development and Head Start Collaboration at 603-271-4242; and
   c. The Child Care Licensing Unit at 603-271-9025, or ccluoffice@dhhs.nh.gov.

**Employee Guidance:**

1. Employees must be provided with education and training around safe practices as they relate to hand hygiene, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines for All New Hampshire Employers and Employees.

2. Childcare providers and other staff must be screened for symptoms or risk factors of COVID-19 before each shift as outlined below in Business Process Guidance.

3. Require all staff to report any symptoms of COVID-19 or close contact to a person with COVID-19 to a supervisor.

**Business Process Guidance:**

1. All facilities should have a communication plan to educate staff, families, and children about COVID-19 health and safety practices at the childcare facility.

2. Restrict non-essential visitors, volunteers, and activities involving other groups at the same time.

   Childcare providers and other staff must be screened daily on arrival to the childcare facility. Employers must implement a screening process to screen employees prior to each shift in accordance with Universal Guidance.

10. Any person who develops symptoms of COVID-19 while at the childcare facility should be masked if they are over 2 years of age, removed from contact with others, and be immediately sent home.

**Social Distancing Strategies:**

1. Space seating, bedding (head-to-toe positioning), and activities so that children are at least 6 feet apart, whenever possible.
2. Childcare programs should, whenever possible, reduce group sizes to no more than 10 people total, including children and adults (e.g., one adult and nine children, two adults and eight children, etc.).

3. For childcare facilities that have multiple rooms or groups, where feasible, consistently keep the same groups of children and staff together and avoid intermixing or interaction between groups during the day (e.g., at opening and closing, during lunch, outdoor play, etc.), where feasible.

4. Close communal use spaces, such as game rooms or dining halls, if possible.

5. Where allowable by local codes, childcare facilities may divide rooms to accommodate additional groups of 10 provided the required 40 square feet per child is maintained. Childcare facilities wishing to divide larger rooms to accommodate smaller groups as a way to increase social distancing can reach out to local officials, or the childcare licensing unit if the program is licensed, to ensure compliance with local codes and childcare licensing rules.

**Pick-up and Drop-off:**

1. Develop a strategy to maintain social distancing practices during drop-off and pick-up, such as a drop-off and pick-up processes which stagger arrival/departure of children and parents/guardians so that children and parents/guardians from different groups do not interact. Attempt to also stagger drop-off and pick-up times to avoid congregating of parents and children within or outside the facility.

2. Wash hands or use hand sanitizer before and after signing in and out. No pens should be shared. Parents/guardians should use their own pens when signing in. If check-in is electronic, provide alcohol wipes and frequently clean the screens, styluses, and keyboards.

3. Limit direct staff contact with parents/guardians as much as possible and consider having childcare providers greet children outside as they arrive.

4. Keep each child’s personal items separated and in individually labeled storage containers, cubbies, or areas. Have children take their personal items home each day.

**Outdoor Play:**

1. Increase time outside, if possible.

2. Outdoor play should occur in staggered shifts. If multiple groups are outside at the same time, they should have a minimum of 6 feet of open space between outdoor play areas or visit these areas in shifts so that children are not congregating. Always ensure hand hygiene for staff and children immediately after outdoor playtime.

3. See guidance below for considerations of removal of certain toys and materials from outdoor play spaces, and how to clean and disinfect playground toys.

**Meal and Snack Time:**

1. Keep group sizes small and do not comingle groups during meal time. For example, have more than one time for meals and snacks to split the groups,
or seat children every other seat to create more space. Children are not allowed to share food, drinks, plates, cups, or utensils.

2. Meals and snacks should be provided in the group’s classroom if possible to avoid congregating in large groups, or eat outside if weather and seating permits.

3. If meals must be provided in a lunch room, stagger meal times, arrange tables to ensure that there is at least 6 feet of space between groups in the lunchroom, and clean tables between lunch shifts.

4. Eliminate family style meals. Employees (not children) can pre-plate meals with only employees handling utensils and serving food to reduce the spread of germs.

5. Food preparation should not be done by the same staff who diaper children, whenever possible.

**Transportation:**

1. Those providing transportation to childcare facilities should maximize space between riders (e.g. one rider per seat in every other row). Close seating on buses makes person-to-person transmission of respiratory viruses more likely. 6 feet of space, both side-to-side and front to back, should be maintained.

2. Windows should be open, weather permitting, as this action might reduce virus transmission.

**Cleaning and Disinfection Procedures:**

1. Review and follow CDC guidance on cleaning and disinfection for childcare programs.

2. Review and follow CDC guidance on creating a plan if staff or children become sick:

3. Plan to have an isolation room or area (such as a cot in a corner of the classroom) that can be used to isolate a sick child. Additional information about isolation in related settings can be found at: isolation at home and isolation in healthcare settings.

4. Be prepared to follow CDC guidance on how to disinfect your building or facility if someone is sick.

5. If a sick child has been isolated in your facility, clean and disinfect surfaces in your isolation room or area after the sick child has gone home.

6. If COVID-19 is confirmed in a child or staff member:
   a. Close off areas used by the person who is sick.
   b. Open outside doors and windows to increase air circulation in the areas.
   c. Wait up to 24 hours or as long as possible before you clean and disinfect the areas in order to allow respiratory droplets to settle and to reduce the risk to individuals cleaning.
   d. Clean and disinfect all areas used by the person who is sick, such as offices, restrooms, and common areas.
e. If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.

7. Continue routine cleaning and disinfection procedures.

8. All cleaning materials should be kept secure and out of the reach of children.

9. Develop a schedule for cleaning, sanitizing, and disinfecting. Perform frequent cleaning and disinfection of frequently touched surfaces, including door handles, toys, chairs, tables, surfaces, etc.

10. Increase the frequency with which you clean and disinfect toys, equipment, and surfaces, especially doorknobs, check-in counters, and restrooms.

11. Use alcohol wipes to clean keyboards and electronics and wash hands after each use.

12. Minimize the potential for the spread of germs in the program space by temporarily removing items that are not easily cleanable (such as stuffed animals and pillows) and rotate the toys that are out at any one time so that they can be adequately cleaned and disinfected. Personal comfort items from home need to be sent home daily and not shared.

13. Outdoor areas, like playgrounds in schools and parks generally require normal routine cleaning:
   a. Do not spray disinfectant on outdoor playgrounds. It is not an efficient use of supplies and is not proven to reduce risk of COVID-19 to the public.
   b. High touch surfaces made of plastic or metal, such as grab bars and railings, should be cleaned routinely.
   c. Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.
   d. Sidewalks and roads should not be disinfected. Spread of COVID-19 from these surfaces is very low and disinfection is not effective.

14. If groups of children are moving from one area to another in shifts, cleaning measures must be completed prior to each new group entering the area.

15. Staff performing cleaning functions should follow the disinfectant manufacturer’s instructions:
   a. Use the proper concentration of disinfectant.
   b. Maintain the disinfectant for the required wet contact time.
   c. Follow the product label’s hazard warnings and instructions for personal protective equipment (PPE) such as gloves, eye protection, and adequate ventilation.

16. Use disinfectants in a well-ventilated space. Extensive use of disinfectant products should be done when children are not present. The facility must be thoroughly aired out before children return.

17. Childcare facilities must have a Safety Data Sheet (SDS) for each chemical used in the facility.

18. Disinfectants, sanitizers, and other cleaning supplies are the responsibility of the childcare facility to have available.

19. Hands-on teaching material needs to be cleaned at the end of the day, using soap and water where possible then disinfecting.
20. Facilities should consider removing water tables, sensory tables, etc. from use for the time being and limit shared teaching materials to those that can be easily cleaned and disinfected at the end of the day or more often as needed.

21. Playdough cannot be cleaned or sanitized, so consider individual containers labeled with each child’s name or discontinue use.

I. Golf – Phase 2

Effective June 5, 2020, golf courses may remain open if they operate according to the following guidelines.

Employee Protection:

1. Follow Universal Guidelines
2. Follow cleaning and disinfection guidance contained in this document and CDC’s guidance at all times.
3. Provide ServSafe COVID-19 training to employees as soon as possible.

Consumer Protection:

1) Players must arrive or remain in their cars until no more than 15 minutes before their tee-time, at which time they can check-in and proceed to the starting tee.;
2) Pro Shops/Clubhouses may open, including all indoor check-in and merchandising, but must follow the Retail Guidelines.
3) Golf bags should be carried by the player and not handled by anyone except the player.
4) Personal clubs must be used. No rental sets or sharing of clubs is permitted.
5) Clubhouses may provide restroom availability but should adhere to social distancing policies.
6) Staff must wear cloth face coverings over their noses and mouths when around others in settings where social distancing may be difficult.
   a. Cloth face coverings/masks should be worn and managed according to CDC guidance about use of cloth face coverings.
   b. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings/masks without first sanitizing their hands. After touching faces or adjusting masks, their hands must be sanitized.
7) Customers should be asked to wear cloth face coverings over their noses and mouths when around others in settings where social distancing may be difficult.
8) Food and Liquor Service should align with the Food Services phased schedule.
9) Beer/Food Carts may operate with appropriate PPE for employees, and proper sanitization of hard surfaces between sales.
10) Halfway Houses may open with strict social distancing precautions in place such as no cash payments, no self-service food and beverages, etc.
11) Spas and salon services must follow the Cosmetology Guidance.
12) Signage must be prominently posted throughout the venue asking customers about COVID-19:
a. Have you been in close contact with a person suspected or confirmed to have had COVID-19 in the past 14 days?
b. Are you experiencing any symptoms of COVID-19 including:
   i. Fever (feeling feverish or a documented temperature of 100.4 degrees Fahrenheit or higher)?
   ii. Respiratory symptoms such as sore throat, runny nose, nasal congestion, cough, or shortness of breath?
   iii. Whole body symptoms such as new muscle aches, chills, and severe fatigue?
   iv. Changes in sense of taste or smell?
c. Have you traveled in the past 14 days either:
   i. Internationally (outside of the U.S.)?
   ii. By cruise ship? or
   iii. Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g., bus, train, plane, etc.)?
c. If you answered “yes” to any of these questions, please do not put our employees and other guests at risk and come back another day.
d. If you are going to play, please remember to maintain proper social distancing of 6 feet from other players.

Business Process Adaptations:
1) Courses may open to the general public.
2) Provide sanitization materials, such as hand sanitizer and sanitizing wipes, to staff.
3) Direct customer contact employees shall wear cloth face coverings over their noses and mouths when at work and around others in settings where social distancing may be difficult.
4) Make hand washing stations and/or alcohol-based hand sanitizer readily available.
5) Sanitize all front-of-house surfaces including door handles, screens, phones, pens, keyboards and other areas of hand contact every two hours, at a minimum.
6) Restrooms should be frequently cleaned and disinfected, especially high-touch surfaces. Where feasible, restrooms should be converted to family style single use facilities. Consider single-use portable toilets to supplement restroom capacity if needed.
7) Group play of more than 4 may be permitted with tee times spaced at least 10 minutes apart.
8) Walking is encouraged. However double occupancy or individuals living in the same house may share a cart. Non-household members riding in the same cart should wear cloth face coverings over their noses and mouths when riding in the cart and within 6 feet of each other.
9) All carts must be properly sanitized following each use.
10) Cart staging for daily or event play must accommodate social distancing guidelines.
11) Push carts may be permitted, including club provided ones, provided they are sanitized after every use.
12) Golf course set up may return to normal.
13) Golf Instruction may resume with adherence to strict social distancing guidelines. Small group clinics may resume based upon the practice facility space available to follow social distancing requirements. All instruction should occur outdoors in open air spaces, and people should use their own clubs/gear. Individuals must remain at least 6 feet from others. Cloth face coverings are recommended for instructors and customers when engaging in small group activities/clinics and social distancing may be difficult.

14) League, clinic, camps, and organized activities can resume with strict social distancing guidelines and if they are kept under 50 people. Courses must adhere to tee time restrictions listed above in paragraph 7. Any larger group activities (with groups between 10-50 people) must be separated into smaller groups/cohorts to avoid large group interactions. For example, if there are 50 total individuals at a golf camp, the larger group must be broken up into five groups of 10 people, and groups must be kept separate. Instruction should occur outdoors in open air spaces, and people should use their own clubs/gear. Individuals must remain at least 6 feet from others. Cloth face coverings are recommended for instructors and customers when engaging in small group activities/clinics and social distancing may be difficult.

15) Youth activities may be resumed with strict adherence to and social distancing.

16) Caddie programs should be suspended.

17) Practice facilities may open under strict sanitation and social distancing guidelines including capacity restrictions on putting greens and minimum spacing distances between driving ranges.

**J. Cosmetology – Barbershops and Salons**

Effective June 15, 2020, barber shops, hair salons, and other cosmetology businesses were allowed to operate subject to the below guidelines.

"Barbering" means:
(a) Shaving or trimming the beard or cutting the hair;
(b) Giving facial or scalp massages or treatment with oils, creams, lotions, or other preparations, either by hand or mechanical appliances; or
(c) Shampooing, arranging, dressing, or styling the hair.

"Barbershop" means any establishment or place of business wherein the practice of barbering is engaged in or carried on

VI. "Cosmetology" means arranging, dressing, curling, waving, cleansing, cutting, bleaching, coloring, or similarly treating the hair of any person, and performing other work customarily performed by a cosmetologist such as giving facials, manicures, pedicures, and artificial nail enhancements, applying makeup or eyelashes to any person, and removing superfluous hair.

"Esthetics" means:
(a) Giving facials, applying makeup, giving therapeutic skin care treatments, removing superfluous hair, or applying eyelashes to any person;
(b) Beautifying the face, neck, arms, and shoulders, by use of cosmetic preparations, antiseptics, tonics, lotions, or creams;
(c) Massaging, cleansing, or stimulating the face, neck, arms, and shoulders, by means of the hands, devices, apparatus, or appliances, with the use of cosmetic preparations, antiseptics, tonics, lotions, or creams; or
(d) Providing pedicure and manicure services, including therapeutic skin and nail care treatments for the feet and hands, beautifying the feet and hands, and massaging, cleansing, or stimulating the feet and hands by means of the hands, devices, apparatus, or appliances, with the use of cosmetic preparations, antiseptics, tonics, lotions, or creams, trimming or filing the nails, and polishing the nails.

"Manicuring" or "pedicuring" means cutting, trimming, polishing, applying artificial enhancements such as tips or acrylic to the natural nails, or coloring or cleansing the nails of any person.

"Salon" means a beauty salon or other place kept open for the business of cosmetology, manicuring, or esthetics.

"School" means a school or other institution conducted for the purpose of teaching cosmetology, manicuring, barbering, or esthetics.

"Tanning device" includes any equipment, including a sunlamp, tanning booth, and tanning bed, that emits electromagnetic radiation with wavelengths in the air between 200 and 400 nanometers and is used for the tanning of human skin. The term also includes any accompanying equipment, including protective eyewear, timers, and handrails.

"Tanning facility" means any location, place, area, structure or business which provides access to a tanning device for a fee, membership dues or any other compensation.

General Guidance to Protect Employees and Consumers:

1. Review and comply with the Universal Guidelines for All New Hampshire Employers and Employees.
2. Review and follow CDC guidance for businesses and employers.
3. Review and follow CDC guidance for cleaning and disinfection.
4. All clients MUST wear, at a minimum, a cloth face covering over their noses and mouths when within the establishment. If a client does not have a cloth face covering, the establishment will provide a mask to the client that the client must wear while in the establishment.
5. All staff MUST wear, at a minimum, cloth face coverings over their noses and mouths at all times when within the establishment, even when alone in client service areas (e.g. cleaning and disinfecting after services) when clients are present.
   a. Cloth face coverings/masks must be worn and managed according to CDC guidance about use of cloth face coverings.
   b. Review also the NH DHHS information about using cloth face coverings.
6. Staff and clients wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings/masks without first sanitizing their hands. After touching faces or adjusting face coverings/masks, their hands must be sanitized.

7. Alcohol-based hand sanitizer must be made readily available at the reception area and client service areas for frequent use by both staff and clients.

8. Staff must be provided education and training around safe practices as they relate to hygiene, cloth face covering use, social distancing, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines and in this guidance document.

9. Clients must be informed of these policies and procedures and provided instructions on hand hygiene, cloth face covering use, social distancing, and sanitation (cleaning and disinfection policies).

10. Require all staff to report any symptoms of COVID-19 or close contact to a person with COVID-19 to a supervisor. Staff and members should not be present in the facility if they feel sick.
Staff must be screened (asked questions) before each shift. Clients should be screened before the appointment in accordance with Universal Guidance.). The questions are the same for staff and clients:

11. Person(s) with any COVID-19 symptoms, those who report close contact with someone suspected or confirmed with COVID-19, or those reporting travel risk factors must not be allowed into the facility:
   a. Symptomatic persons should be instructed to contact their healthcare providers to seek medical advice and to be tested for COVID-19. An employee who is symptomatic should also be told to self-isolate at home for 14 days or until otherwise directed by a healthcare provider.
   b. Asymptomatic persons reporting close contact with someone suspected or confirmed with COVID-19, or who report one of the traveled-related risk factors should be instructed to contact their healthcare providers to seek medical advice and to be tested for COVID-19. An employee who is symptomatic should also be told to self-isolate for 14 days from his or her last exposure or return from travel or until otherwise directed by a healthcare provider.
   c. Employees who develop symptoms of COVID-19, even mild symptoms, should consult their healthcare providers about COVID-19 testing, or seek testing through one of the public testing options, such as through a State-run testing center, local health department, or their healthcare provider.
   d. Employees who do not have a healthcare provider should seek out COVID-19 testing through one of the many local COVID-19 testing options including a State-run testing facility, local health department, or their healthcare provider.
   e. Per the Equal Employment Opportunity Commissioner (EEOC), the Health insurance Portability and Accountability Act (HIPAA), other federal and state pertinent guidelines and guidance, and state and federal laws, employers are required to maintain the confidentiality of employee health information. Prevent stigma and discrimination in the workplace by not making any determinations of health risk or health status based on age, race, gender, disability, or country of origin.
12. Employees with suspected or confirmed COVID-19 must stay home until symptom-based criteria are met for discontinuation of isolation which are:
   a. At least 10 days have passed since symptoms first appeared, AND
   b. At least 3 days (72 hours) have passed since recovery (“recovery” is defined as resolution of fever without the use of any fever reducing medications, plus improvement in other symptoms).
13. Staff and clients must maintain a distance of at least 6 feet from others in the salon, barbershop, school, or tanning facility at all times except when staff are providing cosmetology, barbering, or esthetics services.
14. Facilities should evaluate their building ventilation systems and engineering controls to increase room and overall building ventilation, increase the number of air exchanges, increase outdoor air ventilation, limit internal air circulation, improve central air filtration to the highest compatible with the filter rack, and seal edges of the filter to limit bypass. Ventilation systems’ filters must be routinely replaced and other necessary maintenance should be performed as needed. CDC guidance should be reviewed and used in evaluating building ventilation.

Business Process Adaptations:
Reception, Scheduling, Capacity, and Work Stations
1. Reception areas should be used only for the purpose of accepting payment from clients for services rendered. Waiting areas should be closed to avoid congregating, and clients must be brought directly to the work area.
2. Clients must be scheduled by appointment only either online or by phone. No walk-in appointments are permitted.
3. A maximum of no more than seven (7) operating stations per 1000 square feet is allowed at the facility at any time (possibly fewer depending on the size of the salon and ability to maintain 6 feet of distance between clients at all times). Additionally, the number of clients should not exceed the number of staff. For example, in a small salon with one staff member, the maximum number of people allowed in the salon at any one time is two (one staff and one client).
4. Each service provider may only manage one client at a time.
5. Businesses must ensure work stations are at least 6 feet apart; more distance is preferable. Ideally work stations should be in separate rooms or separated by barriers or partitions.
6. Clients must receive pre-visit remote consultations within 24 hours prior to their appointment to screen for symptoms of COVID-19, recent travel, or close contact with any person with suspected or confirmed COVID-19 in the prior 14 days. Standard screening questions are outlined above and in the Universal Guidelines.
7. Clients must wait in their cars until the business alerts them to enter. There should not be any waiting lines because scheduled and staggered appointments are going to be used. Waiting areas should be closed to avoid congregating, and clients must be brought directly to the work area.
10. There must be sufficient time between clients in order to complete cleaning and disinfection procedures.
11. Services should preferably be paid for electronically before arrival at the establishment. If electronic or card payment is unable to be submitted, clients may use cash or check.
12. Businesses must remove unnecessary clutter or items.
13. Businesses must cover any cloth or fabric items with non-permeable barriers that may come into client contact and would therefore need to be cleaned and disinfected.
14. Businesses must remove all product testers and samples. This does not include product for sale to clients.
15. Staff should change into work clothing at the start of each shift, and change out of work clothing after scheduled shift and before leaving the establishment. Worn work clothing should be transported in a plastic bag and laundered normally.
16. Businesses should avoid offering marketing materials and business cards for clients to take as needed, but instead refer clients to websites or other digital material, including for scheduling upcoming appointments if possible.
17. No physical contact is allowed with clients that is not necessary to provide services (e.g. no shaking hands or hugging).
18. Businesses must create and post signage informing clients about symptoms of COVID-19, screening and cleaning and disinfection policies and procedures. Signage must be posted on the front door or in the business lobby, at a minimum.
19. Clients are not permitted to eat, drink, smoke, or vape while in the establishment.
20. Staff must frequently perform hand hygiene by either washing hands with soap and water for at least 20 seconds, or using an alcohol based hand sanitizer that contains at least 60% alcohol if soap and water are not available. This includes, but is not limited to, hand hygiene before and after eating, before and after smoking, before and after using the restroom, before and after providing services to a client, and before donning and after doffing gloves and aprons/barrier items, or touching face coverings/masks.
21. Businesses must provide hand sanitizer for client use.
22. Staff must wear aprons or a similar barrier item while providing services that shall be changed between each client.
23. Staff are permitted to use blow dryers or hooded dryers in addition to heat rings.
24. Businesses are permitted to use air conditioning units and fans.
25. Businesses should consider providing physical barriers to protect clients and staff such as partitions or Plexiglas barriers.
26. For contract tracing purposes, businesses must maintain a record of clients receiving services, the date and time of those services, and the identities of staff who had direct interaction with clients receiving services.

**Restroom Area**

1. Staff must regularly clean and disinfect all surfaces in the restroom according to CDC guidance for cleaning and disinfecting your facility.
2. Businesses should consider upgrading to touchless faucets, soap, and paper towel dispensers in the restroom.
3. Businesses must place trash container near the door in the restroom.
4. Businesses must remove any products that do not belong in the restroom.
5. Businesses must ensure soap dispensers in the restroom are regularly filled.
6. Restrooms should be single use (one-at-a-time) facilities, where feasible.

**Laundry Services**

1. Staff must place all dirty linens in a covered, non-porous container.
2. Staff must wash all laundry using hot water and detergent. Staff must dry all laundered linen until “hot to the touch,” ensuring no moisture or dampness remains in any linen.
3. Staff must launder (porous) or disinfect (non-porous) caps and capes.
4. Staff must store all linens in a closed cabinet or covered shelving until used.

**Cleaning and Disinfecting**

1. Clean and disinfect all surfaces, tables, chairs, medical safety glasses/goggles, other used equipment, workstations, and common areas between each client. Cleaning and disinfection should follow CDC guidance for cleaning and disinfecting your facility.
2. Use disposable gloves to clean and disinfect. Cleaning reduces the number of germs, dirt and impurities on a surface. Disinfecting kills germs on surfaces.
3. Use an EPA-approved disinfectant to disinfect anything the client came in contact with, including treatment table, face cradle, stool, bolsters, door knobs, side tables, chairs, etc. and follow manufacturer’s instructions for cleaning and disinfecting. Observe the complete contact time for disinfectant on manufacturers’ labels.
4. Staff must make fresh disinfectant for immersion daily and replace throughout the day if the disinfectant becomes contaminated.
5. Staff must remove immersed items at the end of the contact time, rinse the immersed items, and dry items with a paper towel or clean, freshly laundered towel.
6. Hard (Non-Porous) Surfaces: If such surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. For disinfection, use EPA-approved disinfectants for use against the virus that causes COVID-19.
7. Linens, Clothing, towels, and Other Items That Go in the Laundry: Clean and dirty linens must be stored in separate closed containers. Do not shake dirty laundry. Remove all linens, blankets, and table setups. Launder items using the warmest appropriate water setting for the items and dry items completely until “hot to the touch,” ensuring no moisture or dampness remains in the item.
8. Businesses must develop and implement a safety and cleaning/disinfection protocol per CDC guidelines, to be performed daily and in between clients.
9. Clean and disinfect point-of-sale (POS) terminals after each use.
10. Clean and disinfect reception counter, door handles, cabinets, and display cases at the beginning of the day and after every use.
11. Routinely and frequently clean and disinfect work stations, especially between client uses.
12. Clean and disinfect all non-porous implements used in the services before and after each use on a client.
13. Clean and disinfect all regularly used surfaces, such as countertops, pens, tablets, bathrooms, and door handles between clients.
14. Clean and disinfect tables, chairs, and headrests before and after each client.
15. Clean and disinfect all work stations, rolling carts, drawers, and any containers used for storage before and after each use.
16. Clean and disinfect all electrical implements before and after each use on a client.
17. After each use, staff must clean implements with a wipe or spray and remove any debris such as hair.
18. Use an EPA-registered bactericidal, virucidal, and fungicidal spray, foam, or wipe to disinfect implements for the complete contact time listed on the manufacturer’s label.
19. When the contact time is complete, staff must dry implements with a paper towel or clean, freshly laundered towel.
20. Store properly disinfected implements in closed containers that have also been disinfected.
21. Clean and disinfect all bowls, handles, hoses, spray nozzles, and shampoo chairs before and after each client use.
22. Clean and disinfect floors daily.

Authorized Services and Additional Service Specific Information

Cosmetology and Barbering Services:

1. Cosmetologists and barbers may provide all services within their scope of practice as long as a client is capable of wearing a cloth face covering at all times, except while receiving cosmetology or barbering services on areas covered by the mask. Cloth face masks/coverings must be worn and managed according to CDC guidance and use of cloth face coverings.

Manicuring and Pedicuring Services:

1. Manicurists and pedicurists services may offer all manicuring and pedicuring services as long as a client is capable of wearing a cloth face covering at all times. Staff must wear disposable gloves when servicing clients and change gloves between each client. Staff must wash hands with soap and water or use an alcohol based hand sanitizer before putting on gloves, and again after taking gloves off.
2. For dip nails, staff must not “double dip.” Staff must either dispose of the entire product or place extra product into another vessel or dish other than the vessel or dish used on the client. The product used on the client must be discarded at the end of service.
3. Practitioners must wear a cloth face covering, face shield or medical safety glasses/goggles, and gloves while providing all body art services. All face shields and medical safety glasses/goggles must be disinfected after each client.

Esthetics Services:

1. Estheticians may offer all esthetics services as long as a client is capable of wearing a cloth face covering at all times, except while receiving esthetics services on areas covered by the mask. Estheticians must wear a cloth face covering, face shield or medical safety glasses/goggles, and gloves while providing all esthetics services. All face shields and medical safety glasses/goggles must be disinfected after each client.

Tanning Facilities:

1. Tanning facilities may offer all tanning services within their scope of practice. Clients must wear cloth face coverings at all times except for when alone in a tanning booth.
However, the clients must place face coverings back on immediately after tanning sessions are finished and before emerging from the tanning booth.

2. The tanning bed or booth must be thoroughly cleaned and disinfected after every client.

Electrology Definitions

1. "Electrologist" means any person who engages in electrology for compensation, except the following persons:
   a. A physician licensed to practice medicine in this state who performs electrology in such practice.
   b. A person who engages on behalf of a manufacturer or distributor solely in demonstrating the use of any machine or other article for the purpose of sale, without charge to the person who is the subject of such demonstration.

2. "Electrology" or "electrolysis" means the process by which hair is removed from the normal skin by the application of an electronic current to the hair root by means of a needle or needles, whether the process employs direct electric current or shortwave alternating electric current.

Authorized Services and Additional Service Specific Information for Electrology:

1. All clients MUST wear, at a minimum, cloth face coverings that covers their noses and mouths when within the facility, except while receiving electrolysis on areas covered by the face coverings. Cloth face coverings must be worn and managed according to CDC guidance about [use of cloth face coverings](#).

2. Electrologists may provide all services within their scope of practice.

3. All staff must wear protective goggles with a side shield or a face shield, in addition to a cloth face covering/mask, while protecting electrology services to clients.

4. Electrologists must manage one client at a time per electrologist, except that minors shall be permitted to be accompanied by one parent or guardian while receiving services.

K. Drive-In Movie Theaters

Employee Protection:

1. Review and comply with the [Universal Guidelines](#) for All New Hampshire Employers and Employees.

2. Review and follow CDC [guidance for businesses and employers](#).

3. Review and follow CDC [guidance for cleaning and disinfection](#).

4. All staff MUST wear, at a minimum, cloth face coverings over their noses and mouths at all times within the establishment and when serving customers.

5. All customers should be encouraged to wear masks when inside the establishment.

6. Cloth face coverings/masks must be worn and managed according to CDC guidance about [use of cloth face coverings](#).

7. Review also the NH DHHS information about [using cloth face coverings](#).
8. Staff and customers wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings/masks without first sanitizing their hands. After touching faces or adjusting face coverings/masks, their hands must be sanitized.
9. Alcohol-based hand sanitizer must be made readily available at the reception area and client service areas for frequent use by both staff and clients.
10. Staff must be provided education and training around safe practices as they relate to hygiene, cloth face covering use, social distancing, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines and in this guidance document.
11. Require all staff to report any symptoms of COVID-19 or close contact to a person with COVID-19 to a supervisor. Staff and members must not be present in the facility if they feel sick.
12. Staff must be screened (asked questions) before each shift in accordance with Universal Guidance. Employees who are sick or not feeling well must stay home. All employees must report any onset of illness during working hours to supervisor.
13. Maintain six feet social distancing between workers and between customers.
14. Employers must provide sanitizing stations such as hand washing sinks with soap and bottles of hand sanitizer.
15. Provide regular updates and training for employees about personal COVID-19 mitigation based on CDC guidelines.

Consumer Protection:

1.) Customers must maintain proper social distancing, including staying in or immediately around their cars.
2.) Employees must wear a cloth face covering when serving customers.
3.) Premises must be frequently cleaned and disinfected, especially high-touch surfaces, in accordance with CDC guidance on cleaning and disinfection.
4.) Restrooms must be supplemented by a limited number of portable toilets to eliminate the need for customers to wait in line for the restrooms and to promote social distancing.

Business Process Adaptations:

1. A minimum of 10-feet spacing between cars must be maintained.
2. Any food available onsite must be sold as pick-up only and taken back to vehicles for consumption by the customer. Social distancing must be maintained between patrons when transiting to and from food sale areas and vehicles and while waiting to purchase items.
3. Demarcations showing distances of 6 feet must be provided to maintain social distancing standards for individuals waiting in lines.
4. Touchless transactions should be made available, as feasible.
L. Attractions

This guidance applies to outdoor activities situated in recreational or natural settings that occur individually or in small groups. This includes centers for biking, canoe and kayak rentals, mini-golf, outdoor driving ranges, outdoor shooting ranges, small fishing charters, paint ball, outdoor guiding services (fishing, hunting, hiking), and other small group outdoor activities that are able to follow the guidance below.

Additionally, this guidance shall apply to outdoor and nature-based experiential attractions and businesses, including, but not limited to: agro-tourism, outdoor walking trails, tours and paths, batting cages, zip lines, chairlifts, ropes courses/aerial parks, disk golf, open off-road vehicle tours (no enclosure), natural science centers, garden tours, diving tours and lessons, caves, petting zoos, balloon rides, helicopter and plane rides (groups fewer than 5) and white water rafting.

General Guidance to Protect Employees and Consumers:

1. Review and comply with the Universal Guidelines for All New Hampshire Employers and Employees.
2. Review and follow the Retail guidance.
3. Review and follow the Golf guidance for driving ranges.
4. Review and follow the State Parks guidance.
5. Review and follow CDC guidance for businesses and employers.
6. Review and follow CDC guidance for cleaning and disinfection.
7. If providing Food Services, follow Food Service Industry guidance.
8. Staff must wear cloth face coverings at all times when in the facility, in public locations, or shared staff areas (e.g. break rooms), even if other individuals are not immediately present, and when interacting with clients when social distancing is not possible.
   a. Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.
   b. People wearing face coverings must not touch their eyes, nose, mouth, or face, or adjust their face mask without first sanitizing hands. After touching face or adjusting mask, hands must be sanitized.
9. All clients should be asked to wear a cloth face mask covering nose and mouth when within the facility or public spaces with other individuals present.
10. Alcohol-based hand sanitizer must be made readily available and must be placed throughout the facility, including on entry, in key walkways, in food and beverage locations, in shops, at checkout locations, and at exits. Hand sanitizer must also be provided in non-public settings such as maintenance areas, workshops, offices, and break areas.
11. Commonly touched surfaces, work areas, and public areas should be frequently cleaned and disinfected according to CDC guidance at a minimum every 2 hours and at the end of each shift.
12. Staff and clients should maintain a distance of at least 6 feet from others at all times.

Employee Protection:
1. Employees must be provided with education and training around safe practices as it relates to hand hygiene, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidance and Retail Store Guidance.

2. Employees must be screened (questioned about) symptoms of COVID-19 before each shift. Employers must implement a system to screen employees prior to each shift in accordance with Universal Guidance.

3. One person per company vehicles (including trucks, over-the-road, UTV/ATV). The vehicle or work carrier should be cleaned and disinfected after each staff use.

4. Employees must work at least 6 feet apart at all times (whether indoors or outdoors) and must maintain at least 6 feet of distance with clients.

5. Shared use tools and equipment will be cleaned and disinfected after each use.

Consumer Protection:

1. All facilities should have a communication plan to educate guests prior to their visits about the health and safety practices at the venue and what the guests need to be aware of when they arrive. Such communication plans shall include, but not be limited to, online methods (e.g., website, social media sites) of information, email or other electronic communication, such as reservations or confirmations, and print mailings to the guest.

2. Facilities must build social distancing into the operation of restrooms.

3. Guests and visitors should be asked the following questions at check-in:
   a. Have you been in close contact with a confirmed case of COVID-19 in the last 14 days?
   b. Are you experiencing any respiratory symptoms, including a runny nose, sore throat, cough, or shortness of breath?
   c. Have you had a fever or felt feverish in the last 72 hours (at temperature exceeding 100.4 degrees Fahrenheit)?
   d. Are you experiencing any whole body symptoms such as new muscle aches, chills, or severe fatigue?
   e. Have you had any new changes in your sense of taste or smell?
   f. Guests and visitors should be told: If you answered “yes” to any of these questions, please do not put our employees and other guests at risk and come back another day when you feel better. Any deposit will be returned.
   g. A version of this checklist should be included in all reservation confirmations.

4. Signage must be prominently posted at the entrance informing guests/visitors about symptoms of COVID-19 and guests/visitors should be asked to:
   a. remain home if experiencing symptoms of COVID-19 (list common symptoms of COVID-19); and
   b. keep a safe distance of at least 6 feet from other people visiting the attractions and amusement parks at all times; and
   c. Practice frequent hand hygiene/washing; and
   d. wear a cloth face covering over mouth and nose to protect others when in public locations where other consumers might be present (e.g. bathroom facilities).

Business Process Adaptations:
1. Capacity is limited to the number of people where social distancing is able to be safely maintained with at least 6 feet of separation between individuals and between groups at all times. Close household contacts (e.g. a parent and child) are allowed closer than 6 feet to each other.

2. Admission limits will be determined for daily and hourly capacities to ensure appropriate social distancing pursuant to the Universal Guidelines for recreational facilities. Advance reservations will have priority and general admission will be permissible based on availability.

3. Where possible, clearly mark physical distancing spaces/guidelines with floor/ground markings, seat markings, or signs.

4. Visitors will enter and exit via separate areas and facilities will develop plans to make traffic flow one directional, wherever possible. One-directional flow will be mapped out at all facilities, including clearly marked ingress and egress points and easy-to-understand directional signage that will show the direction of traffic flow.

5. Utilize touch-free/contactless payment options when possible, reducing face-to-face purchase transactions. Guests should purchase tickets or schedule appointments online whenever possible.

6. Place Plexiglas or other types of barriers/hygiene screens between guests and staff who are in frequent close interaction areas wherever practical to reduce exposure to a person’s respiratory droplets. Clean the barriers/hygiene screens regularly.

7. Any seating will be spaced more than 6 feet apart to maintain social distancing.

8. Limit surfaces touched by visitors and employees (i.e. leave doors open where possible). Do not allow access to public water fountains and remove lids from trash cans.

9. All Camps and Organized Groups are not allowed to visit the facilities at this time.

10. Amusement park type rides will follow Amusement Park Guidance.

11. Retail settings must follow the guidelines outlined in the New Hampshire Retail Store Guidance.

M. Equestrian Facility

General Guidance to Protect Employees and Consumers:

1. Review and comply with the Universal Guidelines for All New Hampshire Employers and Employees.

2. Owners of equestrian facilities should review CDC guidance for businesses and employers.

3. Review CDC guidance for cleaning and disinfection.

4. All persons should wear cloth face coverings over their noses and mouths when within an enclosed building (e.g. barn), but can remove them when outdoors as long as at least 6 feet of distance is maintained between other people at all times. Cloth face masks/coverings should be worn and managed according to CDC guidance about use of cloth face coverings.

5. Employees must wear cloth face coverings over their noses and mouths when within an enclosed building (e.g. barn), but can remove them when outdoors as long as at least 6 feet of distance is maintained between other people at all times. Cloth face
masks/coverings should be worn and managed according to CDC guidance about use of cloth face coverings.

6. Persons wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching faces or adjusting face coverings, their hands must be sanitized.

7. Alcohol-based hand sanitizer must be made readily available at the barn and service areas for frequent use by both staff and clients.

8. Persons should maintain a distance of at least 6 feet from others at the facilities at all times.

9. Inform and communicate with staff, riders, and families about COVID-19 policies and procedures in place to prevent COVID-19 transmission within equestrian facilities.

Consumer Protection:

1. **Boarders** (people who own/lease horses but have someone else taking care of them):
   a. Boarders will use their own tack which is to be only handled by them.
   b. Boarders will be required to sign up for time slots to ride. Time slots should be staggered to avoid congregating/crowding in the barn. Specifically, time slots should be scheduled to avoid multiple people in the tack room at the same time, and to avoid multiple people grooming, tacking up, un-tacking, or bathing horses at the same time and in the same location.
   c. No congregating or “hanging out” at or in the barn.

2. **Lessons and Clinics:**
   a. Lessons will be scheduled in a manner where social distancing is appropriately applied.
   b. Riders will arrive no earlier than 15 minutes prior to the time needed to tack up their horses for their lessons at which time they will check in with their trainers to find the horse’s location and proceed to get their lesson horses ready (i.e. groomed and tacked up). If a rider is unable to tack up his or her horse, the trainer will do so for them.
   c. Group lessons and limited clinics are allowed, but no truck-ins will be conducted (i.e. group clinics are allowed only with riders of the same barn). The number of people in the group lesson or clinic will be limited to 50% of ring capacity guidelines, or no more than 10 total people in the ring at one time (including instructors), whichever number is lower. Minors may be accompanied by a parent/guardian, but other spectators are not allowed, and all persons must maintain at least 6 feet of distance from others at all times both inside and outside the ring.
   d. Multiple people grooming, tacking up, un-tacking, and bathing horses at the same time and in the same location must be avoided.
   e. Lesson tack and grooming tools will be cleaned and disinfected after every ride. Follow CDC guidance for cleaning and disinfecting.
f. Students must ride with their own personal riding gear (boots, helmets, etc.). No helmets, vests, boots, or other riding gear shall be shared. Students are encouraged to store their personal riding gear at home.
g. No congregating before or after lessons.

3. **Sanitation of Communal Areas:** Follow CDC guidance for cleaning and disinfecting of communal areas, such as restrooms, locker rooms and other member accessed spaces. These spaces will be cleaned and disinfected at regular intervals based upon usage by members or staff and at a minimum of every 2 hours during open hours.

**Business Process Adaptations:**

1. Provide cleaning and disinfection materials to staff and riders.
2. Provide and make accessible hand washing stations and/or alcohol-based hand sanitizer to staff and riders.
3. Each rider who is a minor may have one legal adult guardian who may be at the barn but must follow all social distancing guidelines with other people.
4. Staff and riders must sanitize all communal surfaces including doorknobs, latches, gate handles, crossties, and other areas of contact after use.
5. All communal tools (i.e. pitchforks, brooms, wheelbarrow handles, etc.) must be properly cleaned and disinfected following each use.
6. Cleaning and disinfection of communal tack (e.g. lesson tack) should be performed after every use in accordance with CDC guidance for cleaning and disinfecting using an EPA approved disinfectant.
7. Cloth face coverings should be worn when in the barn but may be removed for riding at a distance of 6 feet and when outdoors away from other people.
8. Total rider capacity will be capped to 50% of safe riding space of the riding rings/areas, and there must not be more than 10 total people in the riding area at one time (including instructors).
9. All Riders (boarders and lessons) and guardians will be asked by the trainers or barn owners about any symptoms of COVID-19, recent travel, or close contact with any person with suspected or confirmed COVID-19 in the prior 14 days. Screening questions are outlined in the Universal Guidelines. Persons answering “yes” to any of the questions should not be allowed within the equestrian facilities to protect other people and the horses (some animals have been found to be able to be infected from humans with novel coronavirus causing COVID-19).
10. All riders will maintain social distancing guidelines when entering/leaving the ring, riding, line-ups and waiting for lessons to begin.

**N. Acupuncture**

*Definitions* – According to Section 328-G:2 I. "Acupuncture" means the insertion of needles primarily through the skin at certain points on the body, with or without the application of electric current and/or heat, for the purpose of promoting health and balance as defined by the principles of oriental medicine. II. "Acupuncturist" means a person licensed to practice
acupuncture as defined in this chapter, and whose license is in good standing. Acupuncturists must use sterile, disposable, one-use needles and must use the CCAOM Clean Needle Technique.

**Scope of Practice**

Acp 601.03 - The Scope of Practice of Licensed Acupuncturists provides that pursuant to RSA328-G:10, I and II, the scope of practice of licensed acupuncturists shall include, but is not to be limited to, the following services:

a) Acupuncture and related techniques, including:
   a. Percutaneous techniques,
   b. Transcutaneous acupuncture techniques, such as:
      Non-penetrating surface stimulation with needles or related surface stimulation devices, Surface stimulation with magnets, rhythmic tapping devices, pieces of metal, or seeds; and Cupping, the application of suction devices on the skin;

b) Moxibustion and other treatments using heat, light, color, sound, electromagnetism, and herbs

c) Electroacupuncture, with or without needles, for detection of acupuncture points, diagnosis of energetic imbalances, or treatment with devices.

d) Bodywork, including massage and oriental manipulation of skeletal and soft tissue for the correction of blockages of energy in the acupuncture channels and the surrounding tissue.

f) Diagnostic and physical examination procedures.

g) Therapeutic exercise, martial arts, and breathing techniques.

h) The prescribing of herbs, oriental patent medicines, and homeopathically prepared substances.

i) Stress reduction through such methods as meditation and relaxation techniques.

j) Lifestyle counseling towards achieving physical, mental, emotional, and spiritual balance in daily life.

To include:

RSA 328-G:2, X, Acupuncture detoxification specialist (ADS) or (certificate holder) means an individual certified by the board to practice acupuncture detoxification in this state, under supervision provided by a New Hampshire licensed acupuncturist who shall be available by phone or other electronic means during business hours and who conducts at least two site visits per year as defined in RSA 328-G:9-a, II(b).

Acupuncture detoxification specialist scope of practice shall include and is limited to the use of the five auricular acupuncture points known as shen men, sympathetic, kidney, liver, and lung: the treatment by means of the insertion of acupuncture needles in a combination of points on the ear using the standardized NADA ear protocol.

**General Guidance to Protect Employees and Clients:**

1. Review and comply with the [Universal Guidelines](#) for All New Hampshire Employers and Employees.
2. If massage or therapeutic body work is being conducted, review and follow NH guidance for massage and bodywork.
3. Review CDC guidance for businesses and employers.
4. Review CDC guidance for cleaning and disinfection.
5. Review and follow the Council of Colleges of Acupuncture and Oriental Medicine’s (CCAOM) Clinic Infection Control Advisory.
6. All clients MUST wear cloth face coverings over their noses and mouths when within the facility. If the client does not have a cloth face covering, the practitioner will provide a face mask to the client. When the client is face down in a headrest, a ready-made face cradle cover can be used in place of a face mask. The cover must create a sizable hammock-type pocket underneath the mouth and nose to both allow the client to breathe and to catch respiratory droplets.
7. All staff MUST wear at a minimum cloth face coverings over their noses and mouths at all times when within the facility, even when alone in client service areas (e.g. cleaning and disinfecting after services). If available, a surgical face masks can be worn by practitioners providing direct patient care in accordance with CCAOM guidance.
   a. Cloth face coverings/masks should be worn and managed according to CDC guidance about use of cloth face coverings.
   b. Review also the NH DHHS information about using cloth face coverings.
8. Staff and clients wearing face coverings/masks must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching their faces or adjusting face coverings, their hands must be sanitized.
9. Alcohol-based hand sanitizer must be made readily available at the reception area and client service areas for frequent use by both staff and clients.
10. Require all staff to report any symptoms of COVID-19 or close contact to a person with COVID-19 to a supervisor. Staff and members should not be present in the facility if they feel sick.
11. Staff and clients both should be screened before each shift (for staff), and before the appointment (for clients) in accordance with Universal Guidance.

Employee Protection:

1. Staff must be provided education and training around safe practices as they relate to hygiene, cloth face covering use, social distancing, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines and in this document.
2. Review and follow CDC guidance for healthcare professionals if applicable.
3. Review and follow the CCAOM clinic infection control advisory.
4. Limit visitors to the facility and use a curbside pickup or direct mail delivery for herbs, supplements, and products.
5. If there is a confirmed case of COVID-19 or potential exposure at your facility, contact the Bureau of Infection Disease Control (BIDC) at 603-271-4496. Client Protection
6. Clients must be informed of new policies and procedures and provided instructions on hand hygiene, cloth face covering use, social distancing, sanitation (cleaning and disinfection policies), and illness policies.

7. Review and follow the CCAOM clinic infection control advisory.

**Business Process Adaptations:**

1. Review the CCAOM clinic infection control advisory for helpful business process information.

2. Use Telehealth as much as possible to limit time that clients are physically in the facility.

3. A home-based acupuncture business must allow a separate entrance and a designated restroom.

4. If you work in a hospital or medical office, follow guidelines issued by the facility.

5. Acupuncturists must provide to clients an additional Consent to Treat form to sign. The Consent to Treat must inform patients that despite adherence to these enhanced guidelines, there is a potential risk of exposure to COVID 19.

6. Clients must be scheduled by appointment only, either online or by phone. No walk-in appointments are allowed.

7. Stagger client appointment times to allow for adequate time for cleaning and disinfecting.

8. Eliminate time spent in check-out. Services should preferably be paid for electronically before arrival at the facility. If electronic or card payment is unable to be submitted, clients should come with an exact cash payment or check.

9. Clients must receive pre-visit consultation within 24 hours prior to their appointments to screen for symptoms of COVID-19, recent travel, or close contact with any person with suspected or confirmed COVID-19 in the prior 14 days. Standard screening questions are outlined above and in the Universal Guidelines. This screening must be documented in client’s chart notes.

10. Practitioners will manage one client at a time per practitioner. Clients should wait in their cars until the business alerts them to enter, or until the exact time of their appointments. For multi-practice offices or clinics, stagger appointments to avoid overlap of waiting clients. Allow ample time between appointments for cleaning and disinfection, and to avoid even brief interaction between clients (e.g. avoid clients passing each other as one leaves and another enters the facility.

11. Practice capacity will be based on the size of the facility and ability of the practice to maintain 6 feet of distance between people at all times. For facilities that can treat multiple clients at once (by different staff), clients must be managed in separate areas with treatment tables set up in different rooms or at a least 6 feet or more apart so that each staff/client pair is always at least 6 feet from another staff/client pair. If treating multiple clients in a larger room, consider constructing barriers between treatment areas.
12. Minimize physical, social, and face-to-face interaction. No physical contact with clients that is not necessary to provide services (e.g. no shaking hands or hugging) is allowed.

13. Waiting area should be closed and clients should enter the facility and be brought to the service area at the appointed time.

14. Remove any unnecessary clutter or items.

12. Cover any cloth or fabric items that may come into client contact with nonpermeable barriers that can be cleaned and disinfected after each client.

13. Treatment table setup linens/bedding should be changed completely for each client. Use products with non-permeable barriers to cover your table, table warmers, etc. (i.e. before placing linens on the table to facilitate cleaning and disinfection of the table when linens are removed and laundered). Put similar nonpermeable coverings on bolsters and pillows. Apply a ready-made face cradle cover to the table’s face cradle, and top it with a pillowcase, leaving a large hammock-type pocket underneath that could catch clients’ aerosols when they are prone. Each client will receive a completely new table setup.

14. Consider opening treatment room windows, if feasible and weather permits, to increase ventilation.

15. Hands, forearms, elbows, and any other body part used in the treatment of clients MUST be cleaned and sanitized before and after bodywork for each client.

16. Clean and disinfect treatment room, treatment table, other used equipment, and common areas between each client. Cleaning and disinfection should follow CDC guidance for cleaning and disinfecting your facility, including the following:
   a. Use disposable gloves to clean and disinfect. Cleaning reduces the number of germs, dirt and impurities on a surface. Disinfecting kills germs on surfaces.
   b. Use a hospital grade, EPA-approved disinfectant to disinfect anything the client came in contact with, including treatment table, face cradle, stool, bolsters, door knobs, side tables, chairs, etc.
   c. Hard (Non-Porous) Surfaces: If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. For disinfection, use EPA approved disinfectants for use against the virus that causes COVID-19.
   d. Linens, Clothing, towels, and Other Items That Go in the Laundry: Clean and dirty linens will be stored in separate closed containers. Do not shake dirty laundry. Remove all linens, blankets, and table setups. Launder items using the warmest appropriate water setting for the items and dry items completely so they are “hot to touch” and no moisture remains in the item.

17. For each treatment room, create a checklist for disinfecting procedures to be carried out after each treatment, and daily disinfecting systems. Initial and date for each instance of disinfection between treatments and at the end of the day. Keep the completed checklists for your records. Cleaning and disinfection includes, but is not limited to:
   a. Before and After Every Client:
      i. Clean and disinfect treatment table, instrument tray, electrical implements, countertop, chairs/stools, door handle, sink, faucets, light
switches, hand sanitizer pump handle, as well as any other identified high-touch surface.

b. Daily:
   i. Clean and disinfect other high contact surfaces throughout the office (not identified to have been touched by a client).
   ii. Clean and disinfect treatment room floors (hard surface).

c. If the floor is carpeted, consider removal of the carpet if practical. If not feasible, ensure that any visible contamination is removed and carpet is cleaned with EPA-approved products for these surfaces. Repeat and maintain cleaning regularly.

18. Laundry Procedures

   a. Wear gloves when handling dirty laundry. These gloves may be reusable rubber gloves. After use, disinfect gloves according to the manufacturer's instructions. Always wash hands before and after removing gloves.
   b. Clean laundry should be stored in a closed cabinet or sealed container.
   c. Sheets, pillowcases, patient coverings, cloth heating pads, mattress pads, cloth pulse pillows, or blankets cannot be re-used without laundering.
   d. Roll used laundry so that areas in direct contact with patients are inside. Practitioners or staff must not carry used linens against their bodies.
   e. All laundry used during a client visit should be isolated into a closed leak proof hamper after treatment. Use a disposable bag or reusable laundry bag that is cleaned with the laundry. Hampers should be disinfected daily.
   f. Commercial processing of clinic laundry is preferred. If you are processing laundry, it must be handled separately from personal items. Do not shake out laundry before washing.
   g. Follow best practices for laundering soiled linens. Use hot water (70–80°C X 10 min) [158–176°F] and approved laundry detergent. Disinfectant is generally not needed. Dry linens completely in a commercial dryer until “hot to touch” and no moisture remains in the linens.

19. Written exposure plan

   a. Each clinic/facility must have a written Exposure Control Plan in compliance with OSHA standard 29 CFR 1910.1030, even if the clinic/facility is a sole proprietor.
   b. A written plan must be reviewed and updated annually. If there already is an updated policy, the protocols in it should be reviewed and revised for the prevention of the SARS-CoV-19 virus. These protocols must be written and documented. Check with local public health agencies concerning any mandatory requirements for timeliness of review and revision of written safety protocols.
   c. Reduce scope of in-person evaluation and management to exclude prolonged bodywork (Tuina, Shiatsu, Acupuncture, Amma, Gua sha, Jin shin Jitsu, Jin shin do, Polarity therapy, Reiki, Therapeutic touch, Zero Balancing; and
Craniosacral therapy) and follow the Massage Therapy Guidance for bodywork, until further guidance is issued.

O. Amateur and Youth Sports

Amateur and Youth Sports: Phase 2

Amateur and youth sports (including for-profit and non-profit athletics leagues and organizations) will be limited to outdoor team sporting events and practices. Team sporting events (e.g. competitive scrimmages, games, etc.) are only allowed for low physical contact sports.

Phase 2 includes return to competitive for low physical contact sports as well as expanding group training sessions and practices and the reopening of indoor recreational facilities. This updated guidance is effective June 15, 2020.

General Guidance to Protect All Staff, Volunteers and Athletes:

1. Review and comply with the Universal Guidelines for All New Hampshire Employers and Employees.
2. Review and follow CDC guidance for cleaning and disinfection.
4. All staff, volunteers, and athletes should bring to sporting events and wear reusable/washable cloth face coverings over their noses and mouths when around others and not actively engaged in athletics and when social distancing is difficult to maintain.
   a. Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.
   b. Review the NH DHHS information about using cloth face coverings.
   c. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching faces or adjusting face coverings, their hands must be sanitized.
5. Parents/guardians of minors attending a sporting event should be asked to wear cloth face coverings while around other spectators, staff, volunteers, and athletes when social distancing is not possible.
6. Alcohol-based hand sanitizer with at least 60% alcohol must be readily made available to staff, volunteers, and athletes and kept with staff and equipment at all times. Frequent hand hygiene should be required including, but not limited to, hand hygiene upon arrival, before and after meals or snacks, before and after going to the bathroom, before and after touching a person’s face or face covering, and prior to leaving the event.
7. Commonly touched surfaces and areas should be frequently cleaned and disinfected according to CDC guidance at the end of each event. Shared equipment must be cleaned and disinfected between uses.
8. Staff, athletes, volunteers, and spectators should be reminded to maintain a distance of at least 6 feet from others.
9. Assign a dedicated staff member (i.e., a safety officer) to monitor social distancing and compliance with protective actions, and to prompt other staff, volunteers, athletes, and spectators about social distancing, hand hygiene, and the use of cloth face coverings.

**Employee, Volunteer, and Athlete Protection:**

1. Athletes, volunteers, and staff (including administrative, coaches, trainers or officials) must be provided education and training around safe practices as it relates to hygiene, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines and in this document.

2. Require all staff, volunteers, and athletes to report any symptoms of COVID-19 or close contact to a person with COVID-19 to a coach. Staff, volunteers, and athletes should not attend events if they feel sick. Athletes, volunteers, and staff must be asked to leave the training activity, sporting event, practice if the potential of sickness is identified during screening or during the activity.

3. Staff, athletes, and volunteers must be screened on arrival to each competitive sporting event, training session, or practice. All staff, athletes and volunteers must have their temperatures taken and shall be asked if they:
   a. Have any symptoms of COVID-19:
      i. Fever (feeling feverish or a documented temperature of of 100.4 degrees F or higher)?
      ii. Respiratory symptoms such as a runny nose, nasal congestion, sore throat, cough, or shortness of breath?
      iii. Whole body symptoms such as new muscle aches, chills, or severe fatigue?
      iv. Changes in your sense of taste or smell?
   b. Have had any close contact with someone who is suspected or confirmed to have had COVID-19 in the past 14 days.
   c. Traveled in the past 14 days either:
      i. Internationally (outside the U.S.),
      ii. By cruise ship, or
      iii. Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g., bus, train, plane, etc.).

4. Person(s) with any COVID-19 symptoms, those who report that in the past 14 days they have had close contact with someone suspected or confirmed with COVID-19, or report travel risk factors must not be allowed into the sporting event or practice, and:
   a. Symptomatic persons should be instructed to contact their healthcare providers to be tested for COVID-19 and self-isolate at home following the instructions below or until otherwise advised by their healthcare provider.
   b. Asymptomatic persons reporting that in the past 14 days they have had close contact with someone suspected or confirmed with COVID-19, or who report one of the traveled-related risk factors should be instructed to contact their healthcare providers to be tested for COVID-19 and self-isolate for 14 days from their last exposure or return from travel or until otherwise advised by their healthcare provider.
5. Person(s) with a suspected or confirmed diagnosis of COVID-19 must stay home until symptom based criteria are met for **discontinuation of isolation which are**:
   a. At least 10 days have passed since symptoms first appeared, AND
   b. At least 3 days (72 hours) have passed since recovery (“Recovery” is defined as resolution of fever off any fever reducing medications plus improvement in other symptoms).

6. Staff and volunteers should not transport any athletes who are not immediate family members. In the event that transportation becomes necessary due to an emergency situation, all parties must wear cloth face coverings and space out seating to maintain maximal distance from each other.

**Business Process Adaptations:**

1. Practices and training sessions for any sport are allowed but should be non-contact focused on skills and drills that can be developed while maintaining physical distancing.
2. Practices and training sessions may begin and are allowed for groups of up to 50 participants (e.g., 45 athletes per training area with 5 staff/coaches/volunteers).
3. Practices should be planned and implemented to maintain a minimum of 6 feet of distance between all athletes, volunteers, and staff. In circumstances where closer contact for brief periods of time is necessary, staff, volunteers, and athletes must wear cloth face coverings/masks when possible.
4. No teams/groups/athletes other than from New Hampshire, Maine, and Vermont are allowed at the competitive sporting events, training sessions, or practices in New Hampshire.
5. Athletes shall bring their own equipment, including, but not limited to, gloves, helmets, bats, and not share their personal equipment with other athletes.
6. Shared equipment provided by staff or volunteers must be cleaned and disinfected according to CDC guidance after every use between athletes and at the completion of each practice, training session, or sporting event.
7. Staff and volunteers will carry hand sanitizer with team equipment. Athletes should carry hand sanitizer in personal equipment bag.
8. Both during practices, training sessions, and competitive sporting events, close-contact, non-athletic activities shall be avoided.
9. Adequate breaks for water and sanitization should be provided and are encouraged to occur between changes in activities.
10. Athletes, staff, and volunteers should bring their own water bottles. No sharing or common use water bottles or drinking stations are allowed.
11. Equipment bags and backpacks should be placed 6-feet apart. Athletes should not touch other athletes’ bags, equipment, or water bottles. Benches and dugout areas must not be used for storage of personal or group equipment.
12. Centralized areas for congregating, such as benches and dugouts, should be avoided unless there is enough room to allow for at least 6 feet of space between staff, volunteers, and athletes.
13. During sporting events (competitive scrimmages and games for low physical contact sports), the dugout/bench areas shall be allowed to extend to areas around the dugout in
order to provide for 6-foot separation of athletes during time in dugout/bench areas. Areas outside of the dugout/bench shall be protected by a safety fence/barrier from the field of play. Care should be taken when choosing fields for competitive sporting events.

14. An isolation area shall be identified and communicated to all staff, volunteers, and athletes at the beginning of every sporting event, training session, and practice for anyone who develops symptoms during the competitive sporting event, training session, or practice.

15. All mouth-based activities often encountered with sporting events shall not be allowed. This includes, but is not limited to: spitting, chewing gum, licking fingers, and chewing/spitting sunflower seeds.

16. Staff or volunteers shall bring trash bags to each competitive sporting event, training session, or practice and remove all garbage following each competitive sporting event, training session, or practice.

17. During practices, parents/guardians and other spectators are encouraged to remain in their cars in a designated parking area. However, when/if watching from the sidelines or are outside cars in the parking area, they should maintain a safe social distance from others.

18. A limited number of spectators will be allowed at competitive sporting events, and must be limited to close/immediate family of athletes. Competitive sporting events will not be open to the public and should not be advertised publically.

19. During competitive sporting events, parents/guardians and spectators shall remain outside of all “in play” areas and shall maintain physical distancing while watching events. They should be at least 6-feet from anyone from another household.

20. Back-to-back competitive sporting events, training sessions, or practices must be avoided. Sequential competitive sporting events, training sessions, or practices should be scheduled to allow adequate time for cleaning of facilities and to allow for spectators, staff, volunteers, and athletes to exit the area and avoid interaction with other incoming or exiting groups.

21. Teams must be provided a designated area for warm-ups that provides for the necessary social distancing.

22. During competitive sporting events (competitive scrimmages and games), each team shall provide its own game balls to be used while on defense (if applicable).

23. Athletes preparing to play defense should sanitize hands prior to leaving the bench or dugout.

24. In spaces that are able to have a concession stand, employees or volunteers of that concession stand must wear masks and gloves at all times in accordance with the Food Service Guidance. For patrons ordering food, if social distancing cannot be achieved then cloth face coverings/masks shall be required when ordering and picking-up the food. Buffet/self-serve food and beverage must be avoided.

**Amendment to Phase 2 Amateur Sports Guidance:**

Guidance is provided for organized endurance events to be allowed to occur which often include activities such as running, jogging, walking, mountain or road cycling, or triathlon (swim, bike, run), typically using municipal streets, bike paths, public parks, and, in some cases, trails, nature
paths, or other private venues. Commonly such and event is known as: “road race”, “5k” (3.1 miles), “10k” (6.2 miles), “half marathon” (13.1 miles), “marathon” (26.2 miles), “walk”, “triathlon”, “trail race”, or “mountain race,” “century or half-century” (100 or 50 miles), “sportive,” “cyclo-cross.”

In addition to the Guidance contained in this document, review and follow Food Service Guidance if applicable.

Starting Line
1. “Mass Starts” are allowable where all participants have enough space to remain at least 6 feet apart.
2. In cases where space limitations prohibit a mass start, a staggered start format will be necessary to reduce the number of people at start line. Recommendations include:
   a. Starting participants “fastest to slowest,” based on data collected at registration. Corrals can be organized and started based on their anticipated race pace;
   b. Create a starting “corral” for each group to allow for each participant to remain safely socially distanced.
3. On-course, participants are encouraged to pass and remain at least 6’ apart.

Post-Race Areas:
1. Participant results shall be displayed on touchless displays via TV screens, published on the internet, or sent to participants’ mobile devices or Apps.
2. All staff must wear cloth face coverings when social distancing is difficult to maintain or when directly serving participants.
3. Post event food and drink should be pre-packaged and made available as a “grab and go” option.

Registration:
1. Check-in procedures must avoid contact between event staff and participants.
2. Staff and participants must wear cloth face coverings at check-in.
3. Waiting lines and areas of congregation must be avoided. Clearly demarcate areas for people to wait/stand so that people are 6 feet or more distanced from others.
4. Event organizers are encouraged to offer extended registration windows and/or a mail option for participant bib numbers, apparel, or any other give-a-way included in registration.

Aid Stations:
1. Participants are encouraged to carry their own water or nutrition while participating such as hand-held water bottles, camelbacks, waist packs, or bike rack bottles.
2. Touchless trash receptacles must be provided at the water stop locations.
3. Each event organizer is ultimately responsible for all clean-up using applicable guidance

Spectators
1. Spectators may attend the events. However, spectators must follow physical distancing guidance and remain spaced 6 feet or more apart.
2. Spectators should be encouraged to wear cloth face coverings when physical distance of at least 6 feet is not possible.
3. No physical contact between participants and/or spectators with each other (i.e. no high fives).
4. Spectators must not approach racing participants.

**Indoor Recreational Facilities:**

1. In addition to the guidance herein, review and follow Health and Fitness Guidance.
2. Food services must review and follow Food Services guidance.
3. Common areas must be closed, and no congregating is allowed in lobby areas.
4. Sneeze guard barriers are recommended at check-in/out counters. Digital check-in should be implemented where possible.
5. Where possible, establish one-way flow of traffic through the facility, with separately designated entrances and exits, to facilitate distancing. It is recommended that staff or volunteers be positioned throughout the venue to address potential congestion points, to address crowd control, and to adhere to social distance guidelines.
6. Enhanced cleaning and disinfection after every room/facility use is required.
7. Sanitize door handles, faucet handles and all other customer touch-points in common areas, and other areas of hand contact at least every two hours, at a minimum.
8. General public group events and activities (e.g. open public skating) are closed.
9. Only New Hampshire, Maine, or Vermont residents or members, registered participants and students are allowed to participate. Massachusetts residents, students and participants may return to play on June 29, 2020.

**Small Group / Staff, Volunteers and Athletes / Personal Training Appointments:**

1. Group training activities are encouraged to be limited to small group or team based training activities. Competition sporting events are permitted but shall be limited to 2 teams per field or designated area of play. Training sessions are encouraged to be non-contact and focused on skills and drills that can be developed while maintaining physical distancing.
2. Group size is to be limited to 50% of the facility’s capacity. Capacity limits may be exceeded but only to include one parent/guardian per athlete.
3. Multiple groups may practice or play competitive games and scrimmages in one large area but separate groups should not mix or interact
4. Training sessions should be planned and implemented to maintain a minimum of 6 feet of distance between all athletes, volunteers, and staff. In circumstances where closer contact for brief periods of time is necessary, staff, volunteers, and athletes are encouraged to wear cloth face coverings as discussed above when possible.

**Locker Rooms (including shower and sauna):**

1. Locker room facilities can be used for changing clothes, showering, and toileting. Members should preferably practice wear-in/wear-out clothes.
2. Saunas and steam rooms are closed.
3. Alcohol-based hand sanitizer must be made available at entrances to locker rooms and changing facilities.
4. Members should bring their own locks for lockers. Locks that are provided by the facility for use must be cleaned and disinfected before handing back in.
5. Facility hairdryers stations should be removed or taken out of operation.

Tennis Courts:

1. Use of tennis courts is limited to small group or team-based training activities. No competition sporting events are allowed. Review the guidance for Amateur and Youth Sports.
2. Group size is to be limited to 4 total people or less on the court at a time.
3. Individuals should stay at least 6 feet away from others at all times (unless individuals are close household contacts).
4. Multiple groups of 4 or less are allowed to play on multiple courts as long as the separate groups do not mix or interact in any way.

P. Health and Fitness –

This guidance applies to health and fitness centers such as gyms, personal and group fitness classes, studios (e.g., aerobics, yoga, gymnastics, dance, martial arts, etc.), and indoor playgrounds. This updated guidance is effective June 15, 2020.

General Guidance to Protect All Staff and Athletes:

1. Review and comply with the Universal Guidelines for All New Hampshire Employers and Employees.
2. Review and follow CDC guidance for businesses and employers.
3. Review and follow CDC guidance for cleaning and disinfection.
5. All staff and members must wear reusable/washable cloth face coverings over their noses and mouths when in the facility and not actively engaged in workout where a face covering may make it difficult to breathe (e.g. sitting on benches, listening to instructions, resting, talking with others in work-out/fitness room, etc.). Exceptions to this policy on cloth face coverings use are outlined in the CDC guidance below, and include younger children who may not be compliant with cloth face covering use or to whom cloth face coverings may pose a health risk.
   a. Provide training and information on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.
   b. Review the NH DHHS information about using cloth face coverings.
   c. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face covering without first sanitizing their hands. After touching their faces or adjusting face coverings, their hands must be sanitized.
6. Alcohol-based hand sanitizer with at least 60% alcohol must be made readily available to staff and members at entrances and exits to the facility, within every workout or training room, in hallways, and at the front desk. Members and staff are also encouraged to carry individual supplies of alcohol-based hand sanitizer.  
   a. Frequent hand hygiene should be performed including, but not limited to, hand hygiene upon arrival at the facility, before and after going to the bathroom, between workouts, before and after touching a person’s face or face covering, and prior to leaving the class and/or facility.
7. Commonly touched surfaces and areas should be frequently cleaned and disinfected according to CDC guidance throughout the day by staff. Shared equipment must be cleaned and disinfected between use by members and staff (if not cleaned by a member). Cleaning supplies must be made readily available in each fitness room for easy access and cleaning by members.
8. Staff, members and other attendees within the facility should be reminded to maintain a distance of at least 6 feet from others (Note: further distances outlined below in certain circumstances).
9. Assign a dedicated staff member (i.e., a safety officer) to be present at all times during normal business hours to monitor social distancing and compliance with protective actions, and to prompt other staff and members about social distancing, hand hygiene, and use of cloth face coverings.

Employee Protection:
1. Staff must be provided education and training around safe practices as it relates to hygiene, cloth face covering use, social distancing, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines and in this document.
2. Staff should stay at least 6 feet apart from other staff and members at all times. If staff must be within 6 feet of others, then staff must wear cloth face coverings at those times.
3. Require all staff to report any symptoms of COVID-19 or close contact to a person with COVID-19 to a supervisor. Staff and members should not be present in the facility if they feel sick.

Member Protection:
1. Members must be informed of policies and procedures and provided instructions on hand hygiene, cloth face covering use, social distancing, sanitation (cleaning and disinfection policies), and illness policies.
2. Members must stay at least 6 feet apart from other members and staff at all times.
3. Signage must be prominently posted in all entry areas to the facility and fitness rooms to inform members that if any of the following apply, they should not enter the facility and put other members and staff at risk:
   a. Any symptoms of COVID-19 (see Universal Guidelines for list of potential symptoms) or fever of 100.4 degrees F or higher.
   b. Close contact with someone who is suspected or confirmed to have had COVID19 in the past 14 days.
   c. Traveled in the past 14 days either:
      i. Internationally (outside the U.S.),
ii. By cruise ship, or
iii. Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g., bus, train, plane, etc.).

4. Members should be asked to review information and signage at each check-in to the facility.

**Business Process Adaptations:**

**Capacity, Spacing, and Social Distancing Requirements:**

1. Admissions to the facility should be limited to, at most, 50% of the maximum licensed capacity, or the number where people can consistently maintain at least 6 feet of separation from others while in workout rooms, whichever number is lower. Fitness class attendance should be limited as discussed below.

2. All staff and members should be clearly instructed to maintain a minimum of 6 feet or more between other people at all times while in the facility or workout rooms.

3. Fitness machines, benches, and weight-lifting and other equipment should be re-arranged to allow more than 6 feet of space between machines and work-out spaces.

4. If fitness class equipment or machines cannot be physically moved to accommodate spacing and distance requirements, then fitness class equipment or machines should be taken out of order, or a process should be developed to prevent adjacent machines that are 6 feet or closer from being used at the same time. Safety officers should strictly enforce these requirements.

5. Group recreational activities outside of structured classes are allowed (i.e., pick-up games of racquetball, volleyball, basketball, group sparring sessions, etc.) for groups of 10 or less.

6. Indoor communal or common areas should be closed to discourage gatherings.

7. Facilities should evaluate their building ventilation systems and engineering controls to increase workout room and overall building ventilation, increase the number of air exchanges, increase outdoor air ventilation, limit internal air circulation, and improve central air filtration to the highest compatible with the filter rack and seal edges of the filter to limit bypass. Ventilation systems’ filters must be routinely replaced and other necessary maintenance should be performed as needed. CDC guidance should be reviewed and used in evaluating building ventilation.

8. Water fountains must be disabled but water bottle refill stations may remain available. Members and staff should be encouraged to bring their own water bottles.

9. Members who do not comply with requirements must be asked to leave the facility. Repeat offenders must not have access the facility or classes until the facility is allowed to return to normal operations after COVID-19 has decreased to low levels of community transmission.

**General Cleaning and Disinfection Guidance:**

1. Members are required to thoroughly clean and disinfect used equipment (machines, benches, bars, dumbbells, weights, sporting equipment, etc.) after each use.

2. Only clean equipment should be placed back on a storage rack or in a container to be ready for the next use.
3. Facilities must supply cleaning and disinfecting materials and make them readily available in each room with instructions on use.

4. Staff should develop a process and schedule to routinely and frequently clean and disinfect all frequently touched surfaces (e.g., door handles, pens, keyboards, etc.), common areas (e.g., bathrooms, locker rooms), and equipment at a minimum of every 2 hours while the facility is open and in operation.

5. Cleaning and disinfection should follow CDC guidance for cleaning and disinfection.

6. Follow the cleaning and disinfectant instructions for use for appropriate wet time to ensure proper disinfection. Check that the product is not expired.

Check-in Process:

1. Plexiglas protective shields should be added to service desks as needed.

2. Check-in processes should involve non-touch, self-scan cards or other automated systems that do not require close contact between individuals nor handling of an individual’s keys, cards, etc. by staff members.

3. Avoid congregating in entry areas. Develop a process to avoid congregating in entry areas.

4. Develop a process to monitor building capacity and limit entry into the facility and workout areas when their capacity levels have been reached.

Group Fitness Classes:

1. Conduct outdoor group fitness classes if possible with appropriate social distancing built into the classes.

2. Consider developing or maintaining online fitness classes in addition to the more limited in-person classes to accommodate demand and to give people options for remote fitness instruction.

3. Group classes requiring close or prolonged physical contact between non-household individuals (e.g., ballroom dancing) are discouraged.

4. Group fitness classes should limit attendance to the number of individuals where at least 8-10 feet of distance can be maintained between attendees/members at all times, taking into account movement during class sessions (e.g., Zumba, karate, etc.). Greater distances (8-10 feet of separation) is required given that the physical exertion and heavy breathing involved in workout activities may lead to respiratory droplets being propelled longer distances putting surrounding individuals at risk.

5. Group fitness rooms should be well ventilated with outdoor air circulation as discussed above.

6. Attendance at classes should be by appointment only and scheduled prior to the class.

7. Scheduling should be accomplished electronically or by phone utilizing a reservation system prior to arrival.

8. Physical distances during class should be marked using tape or decals on the floor or walls to denote where members should stand to ensure appropriate distancing.

9. There should be enough space to allow people to enter and exit without coming into close contact with others (i.e. create a buffer zone for ingress and egress).
10. Fitness instructors should be tasked with ensuring appropriate physical distancing, but the facility’s safety officer should also monitor group fitness classes to ensure appropriate precautions are being taken.

11. Multiple classes should be scheduled and spaced out so that one group is not exiting one class at the same time another group is attempting to enter.

12. At least 30 minutes between classes to allow for appropriate ventilation of the fitness room and cleaning and disinfection of the floor and commonly touched surfaces. The room should be made off limits until this has occurred after each class has ended.

13. Congregating outside of fitness classrooms with people putting on shoes or equipment should be avoided. People should arrive at the fitness class dressed and prepared with appropriate shoes and individual gear (e.g. floor mats).

Cleaning and Disinfection after Group Fitness Classes:

1. Microphones will be used only by the instructor and should be cleaned and disinfected after each use.

2. Members are required to clean all equipment and weights used in class with the disinfectant provided. Members should bring their own mats for each visit if necessary for group class (e.g., yoga).

3. Younger children may require assistance with cleaning and disinfection. A process should be developed for children to deposit used equipment in a “dirty” area for cleaning and disinfection by adult staff before moving to “clean” areas.

4. Instructors will direct members to gather equipment and return equipment one-by-one to avoid congregating near the equipment storage space.

5. Floors should be cleaned and disinfected after everyone has exited and before the next class.

6. Instructors will enforce guidelines in each space to ensure proper cleaning.

Personal Training:

1. Personal training sessions that require physical contact are not allowed.

2. Personal training sessions that can be done with at least 6 feet of separation between trainer and trainee are allowed with appropriate precautions.

3. If one-on-one instruction by facility staff is conducted, the staff member should observe and give instruction from at least 6 feet away. If it becomes necessary to come within 6 feet to assist and spot a member, a face covering is to be worn by the staff person with hand hygiene before and after assisting the member.

4. Staff should wear a cloth face covering while interacting and giving instruction to a member, even if 6 feet or more away.

Locker Rooms (including shower and sauna):

1. Locker room facilities can be used for changing clothes, showering, and toileting. Members should preferably practice wear-in/wear-out clothes.

2. Saunas and steam rooms are closed.

3. Alcohol-based hand sanitizer must be made available at entrances to locker rooms and changing facilities.
4. Members should bring their own locks for lockers. Locks that are provided by the facility for use should be cleaned and disinfected before handing back in.

5. Facility hairdryers stations should be removed or taken out of operation.

Q. Massage

328-B:2 Definitions. –VI. "Massage" means the application of a system of structured touch which includes holding, pressure, positioning, or causing movement, by manual means, for the purpose of promoting, maintaining, and restoring the health and well-being of the client. Massage is designed to promote general relaxation, improve movement, relieve somatic and muscular pain or dysfunction, stress and muscle tension, and provide for general health enhancement, personal growth, and the organization, balance, and integration of the body.

328-B:2-a Scope of Practice. –
A massage therapist may do any of the following when performing massage, including, but not limited to:

I. Use of heat and cold, hydrotherapy, heliotherapy, and external application of herbal or topical preparations not classified as prescription drugs.

II. Analysis of posture and movement.

III. Provision of education in self-care and stress management.

IV. Performance of techniques in which the massage therapist had been trained intended to affect the systems of the body.

328-H:3 Scope of Practice for Reflexologists, Structural Integrators, and Asian Bodywork Therapists. –

I. Reflexologists practice the use of alternating pressure applied to the reflexes within the reflex maps of the body located on the feet, hands, and outer ears.

II. Structural integrators restore postural balance and functional ease by systematically aligning and integrating the human body in gravity. Structural integrators work through manipulation of the connective tissue matrix, enhancement of the client's awareness, and education.

III. Asian bodywork therapists treat the human body, mind, emotions, spirit, and energy field using traditional Asian techniques and treatment strategies for the purpose of promoting, maintaining, and restoring health. Asian bodywork therapists use methods of assessment and treatment based on the principles of Chinese medicine. Treatment may include, but is not limited to touching, pressing or holding the body along meridians and/or acupoints, application of heat or cold, stretching, external application of herbal or other topical preparations not classified as prescription drugs, and dietary or exercise suggestions.

General Guidance to Protect Employees and Consumers:

1. Review and comply with the Universal Guidelines for All New Hampshire Employers and Employees.
2. Review CDC guidance for businesses and employers.
3. Review CDC guidance for cleaning and disinfection.
4. All clients MUST wear cloth face coverings over their noses and mouths when inside the facility. If the client does not have a cloth face covering, the practitioner will provide a mask to the client. Refer to “business adaptions” below for alternative guideline when client is face down.
5. All staff MUST wear cloth face coverings over their noses and mouths at all times when inside the facility, even when alone in client service areas (e.g. cleaning and disinfecting after services).
   a. Cloth face masks/coverings must be worn and managed according to CDC guidance about use of cloth face coverings.
   b. Review also the NH DHHS information about using cloth face coverings.
6. Staff and clients wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching their faces or adjusting their face coverings, their hands must be sanitized.
7. Alcohol-based hand sanitizer must be made readily available at the reception area and client service areas for frequent use by both staff and clients.
8. Clients must be informed of policies and procedures and provided instructions on hand hygiene, cloth face covering use, social distancing, sanitation (cleaning and disinfection policies), and illness policies.
9. Require all staff to report any symptoms of COVID-19 or close contact to a person with COVID-19 to a supervisor. Staff and members should not be present in the facility if they feel sick.
10. Clients must be screened before each appointment in accordance with Universal Guidance.
11. Staff and clients should maintain a distance of at least 6 feet from others in the facility at all times except for when staff are performing massage or bodywork.

**Work-Flow Guidance:**

1. Clients must be scheduled by appointment only, either online or by phone. No walk-in appointments are allowed.
2. Clients should wait in their cars until the business alerts them to enter, or until the exact time of their appointment. For multi-practice offices or clinics, stagger appointments to avoid overlap of waiting clients. Allow ample time between appointments for cleaning and disinfection.
3. All social distancing rules apply at all times. Waiting areas should be closed and clients should enter the facility and be brought to the service area at the appointed time.
4. Remove any unnecessary clutter or items. Cover any cloth or fabric items that may come into client contact and would therefore need to be cleaned and disinfected with nonpermeable barriers.
5. Remove all product testers and samples. This does not include products that are for sale to clients.
6. No physical contact with clients that is not necessary to provide services (e.g. no shaking hands or hugging) is allowed.
7. Create client signage informing clients about policies and procedures.
8. Clients must receive pre-visit telephone consultations within 24 hours prior to their appointments to screen for symptoms of COVID-19, recent travel, or close contact with any person with suspected or confirmed COVID-19 in the prior 14 days. Standard screening questions are outlined above and in the Universal Guidelines. The screening must be documented in the client’s chart notes.
9. At the time of the client’s arrival at the facility, the client should sign an informed consent (which can be added to the Health Intake form) about the risks of infection. The client should also re-attest that no new symptoms have developed and that no new travel or close contact with a person with COVID-19 has occurred in the interim since the pre-visit telephone screening.
10. Develop and implement a safety and cleaning/disinfection checklist, per CDC guidelines, to be performed daily and in between clients.

**Business Process Adaptations:**
1. Mobile massage and on-site business massage is not permitted.
2. Home-based massage businesses are allowed only if there is a separate entrance and a designated restroom and massage area separate from the rest of the home.
3. Online or by phone credit/debit card methods of payment are preferred.
4. For facilities that can treat multiple clients at once (by different staff), clients must be managed in separate areas with treatment tables set up in different rooms or at a least 6 feet or more apart so that each staff/client pair is always at least 6 feet from another staff/client pair.
5. Treatment table setup linens/bedding should be changed completely for each client. Use products with nonpermeable barriers to cover tables, table warmers, etc. (i.e. before placing linens on the table to facilitate cleaning and disinfection of the table when linens are removed and laundered). Put similar nonpermeable coverings on bolsters and pillows. Apply a ready-made face cradle cover to your face cradle, and top it with a pillowcase, leaving a large hammock-type pocket underneath that could catch clients’ aerosols when they are prone. Each client will receive a completely new table setup.
6. Consider opening treatment room windows, if feasible and weather permits, to increase ventilation.
7. Hands, forearms, elbows, and any other body part used in the treatment of clients MUST be cleaned and sanitized before and after bodywork for each client.
8. Practitioners must have a fresh top or apron to change into for each separate massage/bodywork session.
9. Clean and disinfect treatment room, treatment table, other used equipment, and common areas between each client. Cleaning and disinfection should follow CDC guidance for cleaning and disinfecting your facility, including the following:
   a. Use disposable gloves to clean and disinfect. Cleaning reduces the number of germs, dirt and impurities on a surface. Disinfecting kills germs on surfaces.
b. Use a hospital grade, **EPA-approved disinfectant** to disinfect anything the client came in contact with, including treatment table, face cradle, stool, bolsters, door knobs, side tables, chairs, etc.

c. **Hard (Non-Porous) Surfaces**: If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. For disinfection, use **EPA approved disinfectants** for use against the virus that causes COVID-19.

d. Linens, Clothing, Towels, and Other Items That Go in the Laundry: Clean and dirty linens must be stored in separate closed containers. Do not shake dirty laundry. Remove all linens, blankets, and table setups. Launder items using the warmest appropriate water setting for the items and dry items completely so they are “hot to touch” and all moisture is removed from the items.

10. Repeat hand and arm washing protocol and re-set the table and treatment space for each client after cleaning and disinfection.

**R. Places of Worship**

This guidance applies to indoor and outdoor religious services, including weddings and funeral services.

The guidance below is intended to help protect the staff, attendees/congregation, and the surrounding community. This guidance can help mitigate, but not entirely eliminate, risks of COVID-19 transmission in a place of worship and its surrounding community.

Review and follow the New Hampshire **Universal Guidelines**.
Review CDC’s **Interim Guidance for Communities of Faith**

**Additional Guidance:**

1. Places of worship are encouraged to continue conducting services online or through means that allow participants to remain in their homes. This is particularly important for **people at higher risk of severe illness** from COVID-19 who are still advised to avoid group gatherings for the protection of their own health and safety.
2. If possible, services should be held outdoors to avoid the increased risks of transmission in an enclosed building.
3. All places of worship shall limit building occupancy to 50 percent of the building’s maximum permitted occupancy level as documented in its occupancy permit on record with the municipal building department or other municipal record holder. However actual occupancy might need to be lower than 50% occupancy in order to comply with social distancing and other guidance contained in these Guidelines. For outdoor services, the maximum number of attendees shall be the highest number of attendees for which the social distancing requirements contained in this guidance can be met using the space available for the service.
4. The occupant count shall include all persons inside the place of worship, including attendees and staff.
5. To meet demand, leaders should consider hosting multiple services that are staggered and spaced apart to avoid one group leaving while another is arriving.

6. Staff should be actively screened each day according to the NH Universal Guidelines.

7. All attendees should be informed of the symptoms of COVID-19 before entering the worship facility (using signage and other forms of messaging). Symptoms and risks include:
   a. Person has any of the following symptoms of COVID-19:
      i. Fever (feeling feverish or a documented temperature of 100.4 degrees Fahrenheit or higher);
      ii. Respiratory symptoms such as runny nose, nasal congestion, sore throat, cough, or shortness of breath;
      iii. Whole body symptoms such as new muscle aches, chills, and severe fatigue;
      iv. Changes in a person’s sense of taste or smell?
   b. Person has been in close contact with someone who is suspected or confirmed to have had COVID-19 in the past 14 days? (Note: healthcare workers who care for COVID-19 patients while wearing appropriate personal protective equipment can attend).
   c. Person has traveled in the past 14 days either:
      i. Internationally (outside the U.S.);
      ii. By cruise ship; or
      iii. Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g., bus, train, plane, etc.)?

8. Assign a dedicated staff member (i.e., a safety officer) who is tasked to monitor and improve compliance with social distancing and other protective policies, including education, hand hygiene, and cloth face covering use.

9. To avoid having to turn people away at the entrances, it is recommended that places of worship develop a schedule of worship services, specifying days and times that members and attendees can sign up for in advance of the service (online or by phone).

10. Places of worship should develop a system and process that builds in social distancing at all times so that participants are separated by at least 6 feet of space when entering, kneeling/sitting/standing and participating in worship, and leaving the service.

11. Attendees who are not part of the same immediate household must be seated/positioned at least 6 feet apart.

12. Places of worship should develop a one-way flow of traffic utilizing a different entrance and exit for the facility. As people enter and arrive at their seat, there should be a process and space for people to get to their seat without coming in close contact with others.

13. When possible, places of worship shall allow enough spacing between people for them to move from their seats as needed (for participation in worship activities or to move to and from the restroom) without coming into close contact with others.

14. Where lines of people may form (e.g., entry, exit, receiving sacraments, veneration of religious objects, processions) the floor should be clearly marked to delineate 6 feet distances between participants.

15. Shared cups, serving utensils, books of worship, or passing of plates must be avoided:
a. Donations, for example, should utilize a single drop-off receptacle for any collection of donations that might occur.
b. Communion and Eucharist, for example, should not involve a shared cup or passing of a plate between people. Having individual elements that are picked up by attendees upon entry to a facility is recommended.
c. Veneration of communal religious objects should occur without physical contact.

16. When possible, alcohol-based hand sanitizer should be made available at entrances and exits of the facility, in addition to within the place or worship for staff and attendees to use. Leaders of a religious ceremony, ritual or service must sanitize hands before and after the event.

17. Cleaning and disinfection of frequently touched surfaces, restrooms, objects and utensils should occur at the end of each service following guidance outlined by the CDC and highlighted in the NH Universal Guidelines.

18. The following activities are discouraged:
   a. Close or physical contact with other attendees, staff, including handshakes, embraces, and kissing.
   b. Nursery, childcare, and in-person youth education programs must remain closed.
   c. Pre- or post-service communal gatherings (e.g., coffee hours or other food services) are not allowed. Places of worship running food pantries or other prepackaged food distribution may continue to do so.

S. Driver’s Education

Effective immediately, behind the wheel Driver’s Education instruction may resume in accordance with the following guidance.

Review and follow the Universal Guidelines.

Additional Guidance:
1. Classroom instruction may continue to use remote learning platforms or be held in-person. In-person class sizes should be limited to the number of people where social distancing is able to be safely maintained with at least 6 feet of separation between students at all times
2. Instructors should maintain an instruction record for each student documenting that the instructors have conducted a competency assessment for each student demonstrating knowledge of skills necessary to begin behind-the-wheel instruction
3. For students enrolled in classes that started prior to June 5, 2020, the provisions of Saf-C 3110.06 (b) – (d) are hereby waived until October 21, 2020. In order to address a backlog of behind-the-wheel instruction for students whose driver education classes were interrupted and/or continued through remote classroom instruction, those students will be permitted to participate in behind-the-wheel instruction of no more than three 60-minute sessions per week. All other requirements under Saf-C 3110.06 remain in full force in effect.
4. Observation drive time will continue to be completed and certified by parents.
5. Instructors and students will each wear cloth face coverings or masks over their noses and mouths at all times while conducting behind the wheel training.
6. Students will not congregate while waiting to begin a driving lesson. They should stay in their cars until the instructor is ready for them and the previous student has left.
7. Only one student driver and instructor will be allowed in a car, unless the students are of the same household.
8. Both student driver and instructor must be screened for symptoms and risk factors for COVID-19 right before driving instruction as outlined in the NH Universal Guidelines.
9. Before each drive, while outside of the vehicle and with both instructor and student wearing a mask and maintaining social distance, instructors must provide each student with an overview of the lesson and general instructions.
10. In-car time will be limited to a maximum of 60 minutes. Shorter in-car times are preferred.
11. Fresh outdoor air should be coming into the car consistently during the drive using open windows if possible and as weather permits.
12. Use of air recirculation should be limited. If using heating or air conditioning systems, the best practice is to utilize only the defroster vents on high (hot, mild, or cold) to force air away from the driver and passenger towards the windows.
13. Instructors must allow cleaning time between student drives.
14. Before and after each drive, car surfaces will be disinfected following the NH Universal Guidelines to include:
   a. Door handles,
   b. All switches and instruments,
   c. Steering wheel and steering column adjustments,
   d. Gear shift, emergency brake and its button/lever,
   e. Rear view mirror and adjustment,
   f. Seatbelt straps, buckles and release latches,
   g. Seat controls, head restraints, fuel door release lever,
   h. Keys and key fob, and
   i. Center console and arm rest areas.
15. When possible, instructors will clean the car as the students watch so they are comfortable that they are entering a safe environment.
16. Instructors and students will wash their hands before entering the car or use hand sanitizer.

T. Day Camps

This guidance applies to summer day camps/playground programs offered by municipalities, private day camp providers and youth serving organizations. Effective June 22, 2020, summer day camps/playground programs may resume operation in accordance with the following guidance.

1. Review and comply with the NH Universal Guidelines
2. Review and follow CDC considerations for youth and summer camps.
3. Day camp staff must be recruited from and be residents of New Hampshire or out of state staff who have met a 14 day quarantine requirement.

4. Day camp attendees are restricted to children who are New Hampshire residents or out of state campers who have met a 14 day quarantine requirement.

**General Guidance:**

1. All day camp staff must wear reusable/washable cloth face coverings over their noses and mouths as much as possible to help prevent the spread of COVID-19 when social distancing is not possible. A cloth face covering is encouraged to be worn when in close contact with other staff or campers when feasible, and are most essential when social distancing is difficult.
   b. Review the NH DHHS information about [using cloth face coverings](https://www.nh.gov/health/coronavirus/clothfacemasks.asp).
   c. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching their faces or adjusting face coverings, their hands must be sanitized.

2. All adults dropping children off at day camp should be asked to wear cloth face covering over their noses and mouths when at the day camp facility or public spaces where other individuals are present when social distancing is not easily maintained.

3. The NH Department of Health and Human Services does **not** recommend that children routinely wear face masks or face coverings for the reasons outlined below:
   a. CDC guidance states, “Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.”
   b. There are safety issues with young children having cloth, ties, elastics, etc. around their mouths and necks which can pose choking or strangulation hazards.
   c. The effectiveness of masks and other face coverings is impacted by proper handling and use, and children are more likely to play with the masks, adjust them, or remove them without washing their hands before or after touching the masks, touching their faces, etc. Touching the face and then touching other objects (e.g. toys) can potentially put other children in a group at risk.
   d. Staff would need to increasingly be in close contact with children to provide assistance with face coverings, which can be counter-productive to maintaining distance as much as possible.

4. Older children who are able to be compliant with cloth face coverings should be asked to wear them over their noses and mouths when in close proximity to other staff and children when social distancing is not possible.

5. Staff and children should practice frequent hand hygiene:

6. Wash hands often with soap and water for at least 20 seconds. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol.

7. Alcohol-based hand sanitizer should be made readily available to staff and older children and should be carried by staff at all times.

8. Always wash hands with soap and water if hands are visibly dirty.
9. Supervise and help young children to ensure they are washing/sanitizing hands correctly, and to prevent swallowing of alcohol-based hand sanitizer. When soap and water are not readily available and hand sanitizer is used with children, it should be used under the direct supervision of staff. When not in use, hand sanitizer should be kept out of reach of children (on a high shelf, cabinet, or in a backpack worn by staff outside).

10. At a minimum, require hand hygiene when arriving at the day camp; when entering a facility; before and after meals or snacks; before and during meal preparation or handling food; after outside time; before and after going to the bathroom; before and after medication administration; after cleaning up and handling any garbage; before and after coming into contact with any child or staff member; after sneezing, coughing, or nose blowing; after using shared equipment; and prior to leaving for home.

11. Advise children and staff to avoid touching their eyes, noses, and mouths with unwashed hands.

12. Cover coughs or sneezes with a tissue, then throw the tissue in the trash and clean hands with soap and water or hand sanitizer (if soap and water are not readily available). Alternatively, cough or sneeze into elbows.

13. Children and staff should be reminded to maintain a distance of at least 6 feet from others whenever possible.

**Employee Guidance:**

1. Staff must be provided with education and training around safe practices as they relate to hand hygiene, sanitation (cleaning and disinfection policies), and illness policies outlined in the NH Universal Guidelines.

2. Day camp staff must be screened for symptoms or risk factors of COVID-19 before the start of each day as outlined below in Business Process Guidance and in the NH Universal Guidelines.

3. Staff must be screened (asked questions) before each shift. Identify a location and assign a person(s) who will screen each employee every day before he/she enters the workplace. Such processes must be clearly communicated to employees. The person performing the screening must wear a cloth face covering/mask. Employees being screened must also wear a cloth face coverings/masks while being screened. The screener must ask the following questions:

   i. Do you have any of the following symptoms of COVID-19:
      a. Fever (feeling feverish or a documented temperature of 100.4 degrees Fahrenheit or higher);
      b. Respiratory symptoms such as a runny nose, nasal congestion, sore throat, cough, or shortness of breath;
      c. Whole body symptoms such as muscle aches, chills, and severe fatigue;
      d. Changes in your sense of taste or smell?

   ii. Have you been in close contact with someone who is suspected or confirmed to have had COVID-19 in the past 14 days? (Note: healthcare workers caring for
COVID-19 patients while wearing appropriate personal protective equipment should answer “No” to this question).

iii Have you traveled in the past 14 days either:
   a Internationally (outside the U.S.);
   b By cruise ship; or
   c Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g. bus, train, plane, etc)?

iv Document the temperatures of all employees daily before their shifts:
   a Employers should take the temperatures of their employees on-site with a non-touch thermometer each day upon each employee’s arrival at work.
   b If this is not possible, each employee can take his/her temperature before arriving at work as long as it can be sufficiently authenticated by the employee.
   c Normal temperature should not exceed 100.4 degrees Fahrenheit.

v Person(s) with any COVID-19 symptoms, those who answer “yes” to any of the questions, report close contact with someone suspected or confirmed with COVID-19, or those reporting travel risk factors must not be allowed into the facility:
   a Symptomatic persons should be instructed to contact their healthcare providers to seek medical advice and to be tested for COVID-19. An employee who is symptomatic should also be told to self-isolate at home for 14 days or until otherwise directed by a healthcare provider.
   b Asymptomatic persons reporting close contact with someone suspected or confirmed with COVID-19, or who report one of the traveled-related risk factors should be instructed to contact their healthcare providers to seek medical advice and to be tested for COVID-19. An employee who is symptomatic should also be told to self-isolate for 14 days from his or her last exposure or return from travel or until otherwise directed by a healthcare provider.
   c Employees who develop symptoms of COVID-19, even mild symptoms, should consult their healthcare providers about COVID-19 testing, or seek testing through one of the public testing options, such as through a State-run testing center, local health department, or their healthcare provider.
   d Employees who do not have a healthcare provider should seek out COVID-19 testing through one of the many local COVID-19 testing options including a State-run testing facility, local health department, or their healthcare provider.
Employees with suspected or confirmed COVID-19 must stay home until symptom-based criteria are met for discontinuation of isolation which are:

A. At least 10 days have passed since symptoms first appeared; AND
B. At least 3 days (72 hours) have passed since recovery (“recovery” is defined as resolution of fever without the use of any fever reducing medications, plus improvement in other symptoms).

Per the Equal Employment Opportunity Commissioner (EEOC), the Health insurance Portability and Accountability Act (HIPAA), other federal and state pertinent guidelines and guidance, and state and federal laws, employers are required to maintain the confidentiality of employee health information. Prevent stigma and discrimination in the workplace by not making any determinations of health risk or health status based on age, race, gender, disability, or country of origin.

Business Process Guidance:
1. All day camps should have a communication plan to educate staff, families, and children about COVID-19 health and safety practices at the day camp.
2. Restrict non-essential visitors, volunteers, and activities involving other groups.
3. Children should be screened daily on arrival to the day camp by asking parents/guardians if the individual:
   a. Has any symptoms of COVID-19?
      a. Fever (feeling feverish or a documented temperature of 100.4 degrees Fahrenheit or higher);
      b. Respiratory symptoms such as a runny nose, nasal congestion, sore throat, cough, or shortness of breath;
      c. Whole body symptoms such as muscle aches, chills, and severe fatigue;
      d. Changes in your sense of taste or smell?
   b. Has had any close contact with someone who is suspected or confirmed to have COVID-19 in the past 14 days.
   c. Traveled in the past 14 days either:
      i. Internationally (outside the U.S.),
      ii. By cruise ship, or
      iii. Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g., bus, train, plane, etc.).
4. Person(s) with any COVID-19 symptoms, those who report close contact with someone suspected or confirmed with COVID-19, or those reporting travel risk factors should **not** be allowed into the day camp:
   a. Symptomatic persons should be instructed to contact their healthcare providers to be tested for COVID-19 and **self-isolate** at home following the instructions below or until otherwise advised by their healthcare providers.
   b. Asymptomatic persons reporting close contact with someone suspected or confirmed with COVID-19, or who report one of the traveled-related risk factors should be instructed to contact their healthcare providers to be tested for COVID-19 and **self-isolate** for 14 days from their last exposure or return from travel or until otherwise advised by their healthcare providers.

5. Person(s) with suspect or confirmed COVID-19 must stay out of day camp until symptom-based criteria are met for **discontinuation of isolation which are**:
   a. At least 10 days have passed since symptoms first appeared, **i. AND**
   b. At least 3 days (72 hours) have passed since recovery (“recovery” is defined as resolution of fever without the use of any fever reducing medications, plus improvement in other symptoms).

6. Any person who develops symptoms of COVID-19 while at the day camp must be masked if they are over 2 years of age, removed from contact with others, and be immediately sent home.

7. If there is a confirmed case of COVID-19 at a camp, the facility must contact:
   The Bureau of Infection Disease Control (BIDC) at 603-271-4496.

**Pick-up and Drop-off:**

1. Develop drop-off and pick-up processes which stagger arrivals/departures of children and parents/guardians so that children and parents/guardians from different groups do not interact. Attempt to also stagger drop-off and pick-up times to avoid congregating of parents and children inside and outside of the facility.
2. Wash hands or use hand sanitizer before and after signing in and out. No pen should be shared. Parents/guardians should use their own pens when signing in. If check-in is electronic, provide alcohol wipes and frequently clean the screens, styluses, or keyboards.
3. Limit direct contact with parents as much as possible and have day camp staff greet children outside as they arrive.
4. Keep each child’s personal items separated and in individually labeled storage containers, cubbies, or areas. Children should take personal items home each day.

**Social Distancing Strategies:**

1. Day camps should attempt to divide staff and children into small groups of ideally no more than 10 people total, including children and staff. Small group sizes will help to limit COVID-19 transmission if someone is found to be infected.
2. Safe and recommended staff/child ratios must be maintained. Allow for proper coverage to comply with Federal and NH Labor and Child Labor Laws (i.e., breaks, hours worked, and for staff calling out), and licensing requirements.
3. Consistently keep the same groups of staff and campers together throughout the camp session. Do not move children between groups. Staff should not float between groups (unless necessary for activity instruction where one person teaches multiple camp groups).

4. Avoid overlapping groups in any one particular area or activity. Detailed schedules should be created to allow enough time for groups to move between activities without interacting with other groups.

5. Different groups may use the same outdoor or indoor space if space is large enough, but groups should be kept separate and not allowed to interact.

6. Keep campers outside as much as possible. Close communal use spaces, such as game rooms or dining halls, if possible. Indoor activities should be limited and groups will need to be separated and not interact.

7. Space seating and activities so that children are at least 6 feet apart, whenever possible.

Activities:
1. Each group will get its own supply of sports equipment to run its own activities.
2. Each group will get its own supply of arts and craft supplies. Each child could also receive his or her own set of basic arts and crafts supplies which he or she could bring back to camp everyday.
3. Games and activities should be designed to allow for social distancing. Modifications may need to be made to traditional games and activities to ensure camper safety.
4. Any used equipment/supplies will need to be cleaned and disinfected after usage.
5. Avoid field trips and special performances per CDC guidelines.

Meal and Snack Time:
1. Stagger lunch times.
2. Meal and snack times should occur outside whenever possible under tents/shelters or pavilions. Avoid congregating in large groups to eat lunch and snacks.
3. Staff and campers should eat with their own group and maintain at least 6 feet of distance between children and staff when seated and eating. Sharing of food, drinks, cups, plates, or utensils is not allowed.
4. If meals must be provided in a lunch room, stagger meal times, arrange tables to ensure that there is at least six feet of space between groups in the lunchroom, and clean tables between lunch shifts.
5. Campers are encouraged to bring their own snacks and lunches when feasible.
6. If food is offered, serve it in pre-packaged boxes or bags with disposable utensils to ensure safety.
7. Campers and staff need to bring their own water bottles. No shared water jugs are allowed.

Transportation:
1. Transportation should be limited to parents/guardian transport or that provided by the daycare.
2 Transportation drivers must wear cloth face coverings/masks while in the vehicle and during boarding/exiting processes.

3 Children must practice hand hygiene before boarding the transport vehicle and after transport. Drivers must also practice frequent hand hygiene. Disposable gloves should be available to vehicle drivers in case they are needed, but focus should be on frequent hand hygiene.

4 Those providing transportation to childcare facilities should maximize space between riders (e.g. one rider per seat in every other row). Close seating on buses makes person-to-person transmission of respiratory viruses more likely. 6 feet of space, both side-to-side and front to back, should be maintained.

5 Windows should be open, weather permitting, as this action might reduce virus transmission.

6 Vehicles should be thoroughly cleaned and disinfected after each transport.

Cleaning and Disinfection Procedures:
1. Review and follow CDC guidance on cleaning and disinfecting.
2. Review and follow CDC guidance on creating a plan if staff or children become sick:
   a. Plan to have an isolation room or area that can be used to isolate a sick child.
   b. Be ready to follow CDC guidance on how to disinfect your building or facility if someone is sick.
   c. If a sick child has been isolated in your facility, clean and disinfect surfaces in your isolation room or area after the sick child has gone home.
   d. If COVID-19 is confirmed in a child or staff member:
      i. Close off areas used by the person who is sick.
      ii. Open outside doors and windows to increase air circulation in the areas.
      iii. Wait up to 24 hours or as long as possible before you clean or disinfect to allow respiratory droplets to settle to reduce the risk to individuals cleaning.
      iv. Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas.
      v. If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.
   e. Continue routine cleaning and disinfection.
3. All cleaning materials must be kept secure and out of reach of children.
4. Develop a schedule for cleaning and disinfecting. Perform frequent cleaning and disinfection of frequently touched surfaces, including door handles, equipment, surfaces, outdoor playground equipment, etc. Areas must be cleaned and disinfected throughout the day, including anytime a group exits an area (indoors or outdoors) where they have used tables, chairs etc.
5. Increase the frequency with which toys, equipment, and surfaces, especially doorknobs, check-in counters, and restrooms are cleaned and disinfected. All equipment and supplies will be cleaned and disinfected after each use
6. Use alcohol wipes to clean keyboards and electronics and wash hands after use.
7. Minimize the potential for the spread of COVID-19 by temporarily removing items that are not easily cleanable (such as stuffed animals and pillows). Personal comfort items from home need to be sent home daily and not shared.

8. If groups are moving from one area to another, cleaning measures must be completed prior to the new group entering this area.

9. Staff cleaning must follow the disinfectant manufacturer’s instructions:
   a. Use the proper concentration of disinfectant.
   b. Maintain the disinfectant for the required wet contact time.
   c. Follow the product’s label, hazard warnings, and instructions for personal protective equipment (PPE) such as gloves, eye protection, and adequate ventilation.
   d. Disinfectant use indoors should occur in a well ventilated space. Extensive use of disinfectant products should be done when children are not present. The facility or area should be thoroughly aired out before children return.
   e. Day camps must have a Safety Data Sheet (SDS) for each chemical used in the facility.

10. Disinfectants and other cleaning supplies are the responsibility of the day camp to have available. These items must be stored out of the reach of children.

U. Lodging

This guidance applies to hotels, motels, bed and breakfast facilities, inns, cabin communities, private cottages/condominiums/homes, and similar accommodations open to the public, including short-term rentals that were restricted under Emergency Order 27.

Lodging Industry

Effective immediately, lodgings are open to the public, including short-term rentals, and may accept overnight reservations from New Hampshire residents, or out of state visitors who have met the 14 day quarantine requirement. Reservations may be accepted by phone, online, or in person.

Operators should require a copy of a NH driver’s license or a signed document from the guest(s) attesting that all the person(s) staying at the lodging facility remained at a home for at least 14 days before arriving in New Hampshire, only going out for essential errands and, when outside of the home, maintained social distancing and wore cloth face coverings/masks when within less than 6 feet of another person during this 14 day “quarantine”. Out-of-state guests should be made aware at the time of the reservation of the need for this requirement and signature.

Safeguarding Guidance:

In addition to strict adherence to CDC guidelines, the State of New Hampshire recommends putting into place measures to protect consumers and employees, including:

Employee Protection:
1. Review and comply with the Universal Guidelines.
2. Follow the Food Service Guidance if applicable.
3. Follow the Retail Guidance if applicable.
4. Follow sanitation frequency guidance contained in this document at all times.
5. If serving food, Provide ServSafe COVID-19 or equivalent training as soon as possible.
6. Employees should wear cloth face coverings when inside the facility, interacting with customers, in common administrative areas (i.e. offices or break rooms) where social distancing of 6 feet cannot be maintained.
7. Staff should be screened for symptoms or risk factors for COVID-19 using the guidance found in the NH Universal Guidelines.
8. Employees with confirmed cases of COVID-19 must stay home until symptom-based criteria are met for discontinuation of isolation which are:
   a. At least 10 days have passed since symptoms first appeared, AND
   b. At least three days (72 hours) have passed since recovery (“recovery” is defined as resolution of fever without the use of reducing medications, plus improvement in other symptoms).

Consumer Protection:

1. Enhanced housekeeping sanitation strategies must be used after every room use. Cleaning and disinfection must be conducted for every room after a guest leaves. Follow cleaning and disinfection guidance as outlined in the New Hampshire Universal Guidelines and the CDC guidance on cleaning and disinfection.
2. In Common Areas, sanitizing of frequently touched areas such as door handles and faucet handles must occur. All other customer touchpoints in common areas, and other areas of hand contact throughout public areas should be cleaned at least every two hours, at a minimum.
3. Common areas must be closed. No congregating of guests, visitors, or staff is allowed in the lobby or other common areas.
4. Provide Room service or grab and go items as an alternative to hotel restaurants. Hotel restaurants should align with the Food Services Guidance complying with the applicable phased schedule.
5. All congregate amenities (e.g hot tubs, sauna and exercise facilities) will follow the Health and Fitness Guidelines. Pools must follow the Swimming Pools Guidance.
6. Guests should be asked the following questions at check-in and a copy of their responses should be kept with their records. Signage must be prominently posted at the entrance asking customers regarding COVID-19 symptoms:
   a. Have you been in close contact with a confirmed case of COVID-19?
   b. Are you experiencing a cough, shortness of breath or sore throat?
   c. Have you had a fever in the last 48 hours (feeling feverish or a documented temperature of 100.4 degrees Fahrenheit or higher)?
   d. Do you have whole body symptoms such as new muscle aches, chills, and severe fatigue?
   e. Have you had changes in your sense of taste or smell?
f. If you answered “yes” to any of these questions, please do not put our employees and other guests at risk and come back another day when you feel better. Any deposit will be returned.

    g. A version of this checklist should be included in reservation confirmations.

    7. Social distancing at check-in must occur. Sneeze guard barriers are recommended between employees and guests. All digital check-in should be implemented where possible.

    8. If Staff or guests will be coming inside the social distance range of each other, cloth face coverings must be worn by staff, and are recommended for guests.

**Business Process Adaptations:**

1. Place hand sanitizer stations in hotel lobby and restrooms and throughout the establishment, where appropriate.

2. Cloth face coverings must be used by employees and should be used by guests when working or moving within the facility when social distancing is not possible. For guests, this includes at check-in and check-out, and when transiting to/from a guest room through the facility when social distancing is not possible.

3. Guest rooms that are assigned (assuming the facility is not operating at full capacity) should be spaced out between floors and avoid placing people in adjacent rooms when possible.

4. Use a clearly designated entrance and a separate clearly designated exit to maintain social distancing, if possible.

5. Elevators, if present in the facility, should be limited to one person or associated reservation group at a time. Lines for elevator use should be clearly marked with demarcations on the floor spaced at least 6 feet apart for where people should stand to wait for an elevator.

6. Similarly, waiting lines for check-in or check-out should be avoided and any lines should have clear demarcations on the floor spacing people or groups at least 6 feet apart. Electronic or automated check-in and check-out processes are preferred.

7. Sanitize all front-of-house surfaces including door handles, screens, phones, pens, keyboards, styluses, and other areas of hand contact every two hours, at a minimum.

8. Use a clearly designated entrance and a separate clearly designated exit to maintain social distancing, if reasonable.

9. Assign a dedicated staff member (i.e., a safety officer) who is empowered to monitor and improve compliance with social distancing and other protective policies, including education, hand hygiene, and cloth face covering use amongst employees and guests.

10. Businesses should continue to remind all patrons that those with an elevated/high risk should continue to shelter at home.

11. A list of instructions should be included in reservation confirmations.

---

**V. Overnight Camps**
Effective June 28, 2020, overnight camps may open if they operate according to the following guidance.

Safeguarding Guidance:

In addition to this required guidance, the State of New Hampshire recommends the Resident/Overnight Camp industry establish measures to protect consumers and employees. The following guidance is built upon recommendations from the Universal Guidelines for All New Hampshire Employers and Employees, the CDC, and additional resources created by Environmental Health & Engineering, an independent multidisciplinary consulting company in public health, workplace safety, research and data analytics which has been retained by ACA and YMCA-USA to provide educational resources and guidance for camps to function as effective public health partners in the current COVID-19 environment. This guidance was developed through the formation of an independent expert panel, which included members of the American Academy of Pediatrics, the Association of Camp Nursing, and the Harvard School of Public Health, in dialogue with the CDC.

1. Review and comply with the NH Universal Guideline updates.
2. Review and follow the NH Day Camp Guidance.
3. Review and follow CDC guidance for youth and summer camps.

Considerations:

1. Many Residential Camps, with acceptable modifications, can quarantine, functioning as a ‘single family home’ and ‘shelter-in-place’ together for the duration of the camp session regardless of camp size.
2. Camp age children and staff represent the lowest-risk segment of the population for COVID-19 complications and health care utilization.
3. Travel and group gathering restrictions should be considered in the context of residential summer camps ability to self-isolate.
   a. Camps are committed to transportation options that limit exposure of out-of-state campers and staff to their local NH communities including:
      i. Direct-to-camp/direct-to-home parental/guardian transportation
      ii. Only staff and campers that are able to drive to the camp and be picked-up by car or other privately chartered ground transportation.
4. Overnight camp programs will quarantine campers for the duration of camp program, with direct-to-camp/direct-to-home transportation.
5. Visitors (see also Visitors, Parents and Field Trips) will not be allowed on camp property during periods of group quarantine. Visitors will be limited to essential service providers for the duration of the camp session. Essential visitors must don facial coverings when in camp.

Preparation Requirements:
1. Work with medical directors and other medical staff (e.g., camp nurses) to develop a COVID-19 Camp Plan (i.e., a COVID-19 specific Communicable Disease Plan) which specifies a plan and process for:

2. Plan for systematically performing temperature and symptom screening on all staff, adults, teenagers, and children on the camp.

3. Plan for testing all staff, volunteers, and campers for COVID-19 as discussed below.

4. Develop training, secure supplies and capacity to collecting, handle and shipping nasopharyngeal swabs for COVID-19 testing.

5. Train and perform routine and frequent cleaning and disinfection.

6. Plan for isolation of symptomatic people and quarantine of anybody exposed to a person who is undergoing COVID-19 testing or has confirmed COVID-19 (see below for more information on developing an isolation and quarantine plan).

7. Review all guidance outlined in this document, the NH Universal Guidelines, and CDC considerations for youth and summer camps.

8. Strongly encourage camps to identify a local New Hampshire medical director for the camp who is an M.D., D.O., or APRN (note: a medical “consultant” is not adequate to meet this requirement). The medical director should be involved in developing, reviewing, and approving the COVID-19 Camp Plan, and be able to help manage any staff or campers who either develop symptoms consistent with COVID-19 (i.e., suspected to have COVID-19), or are confirmed to have COVID-19. This individual should also, under their medical or nursing license, order testing for COVID-19 (discussed below in section on testing requirements).

9. Train camp medical staff on use of appropriate COVID-19 personal protective equipment (PPE), which involves at a minimum wearing a medical gown, gloves, surgical face mask, and eye protection (face shield or goggles) when evaluating a person with COVID19 symptoms. If there is an aerosol generating procedure (e.g., nebulizer treatment), then an N95 mask or higher level respirator is needed when evaluating and treating a patient.

10. All out of state arriving staff and volunteers must arrive at the camp at least 14 days before the official start of camp. They must not leave the camp’s grounds during this time or go into the surrounding community for recreation, groceries, laundry, etc. Laundry facilities must be supplied on the camp’s grounds. During this 14-day pre-camp session, staff and volunteers should be undergoing temperature and symptom monitoring as outlined above in addition to the COVID-19 testing requirements below.

11. Any campers coming from out-of-state must quarantine in NH for at least 14 days before camp, or attest to home quarantine in their home state in the 14 days before start of camp session and not go out in public places or interact with others outside of their household during their home quarantine or in the period of time between home quarantine and arriving at camp (e.g., en-route to the camp).

12. Staff, volunteers, and campers must receive pre-arrival screening by being asked about symptoms of COVID-19 or risk factors for exposure outlined in the NH Universal Guidelines. Pre-arrival screening must be conducted in the 7 days before arrival and ideally should utilize a self-screening tool that is answered and available to the camp BEFORE arrival at the camp.
13. Camps will not allow any person with symptoms of COVID-19 or an identified risk for COVID-19 exposure into the camp.
14. Health screening will be also conducted upon arrival at the camp.
15. Camps must identify “safety officers” from their staff whose job it is to monitor and improve compliance with these guidelines, and social distancing, hand hygiene, cloth face covering use, and cleaning and disinfection policies.
16. Develop drop-off and pick-up processes which stagger arrivals/departures of children and parents/guardians so that children and parents/guardians from different groups do not interact. Attempt to also stagger drop-off and pick-up times to avoid congregating of parents and children within a facility or on the camp’s grounds.
17. Alter all camp processes to incorporate social distancing and avoid close contact between staff, volunteers, and campers.

Employee & Consumer (camper) Protection

1. Health Screening/Surveillance
   a. Pre-Arrival & Arrival: Camp administrators may use examples of screening methods in CDC’s supplemental Guidance for Child Care Programs that Remain Open as a guide for screening children and CDC’s General Business FAQs for screening staff.
      1. Pre-arrival Screening of Campers and Staff- Recommend use of a pre-arrival screening by having campers and staff complete a self-screening tool during a 7-10 day period prior to their arrival at camp and provide it to the camp during check-in procedures. In addition, staff must meet Universal Guidelines for All New Hampshire Employers and Employees for arrival screening.
      2. Camps will not admit staff who are symptomatic for COVID-19. Implement health screenings in accordance with any applicable privacy laws or regulations. Confidentiality should be maintained.
      3. Consider including specific questions regarding COVID-19 symptoms and temperature monitoring in the health screening process.
      4. Health screening will be done upon arrival of staff and campers and throughout the camp experience at the discretion of the camp medical staff and in accordance with camp’s Communicable Disease Plan.
   b. Daily- Screen campers and staff daily for symptoms of COVID-19 throughout the camp program. Staff must meet Universal Guidelines for All New Hampshire Employers and Employees for daily health screening.
   c. Worker Health- Upon arrival, screen staff for symptoms of COVID-19 and exposures to positive COVID-19. Staff will arrive at camp and remain at camp for the duration of their quarantine. Consider minimizing or eliminating staff travel to off camp facilities for the duration of the summer. Local NH staff may need to travel back and forth to camp each day but will wear PPE appropriate to their job functions while at camp.
when social distancing cannot be maintained. Local staff will follow safety protocols to minimize the potential for COVID spread within the camp community.

d. End of Program- Daily surveillance will continue through the end of camp.

2. Temperature and Symptom Screening, and Testing Requirements:

a) All staff, volunteers, campers, and anybody else on camp premise must have their temperature taken and be screened/questioned for the presence of any COVID-19 symptoms on arrival to camp and daily thereafter during their stay at camp. All persons should be questioned about the presence of the following symptoms:
   - Fever (including subjective fever) or chills
   - Cough
   - Shortness of breath or difficulty breathing
   - Severe Fatigue
   - Muscle or body aches
   - New loss of taste or smell
   - Sore throat
   - Congestion or runny nose
   - Nausea or vomiting
   - Diarrhea

b) Log and keep a record of all people that have their temperature taken (record temperatures) and are screened for symptoms daily.

c) Any person (staff, volunteer, or camper) who develops any of the above symptoms must be tested for COVID-19 using an appropriately collected nasopharyngeal swab.

d) Camp medical directors should be the ordering clinician for all COVID-19 specimen collection and testing conducted through the camp.

e) All staff and volunteers at the camp must be tested for COVID-19 as follows:

   1.) Nasopharyngeal swabs should be collected to test directly for the presence of the SARS-CoV-2 novel coronavirus that causes COVID-19 using a polymerase chain reaction (PCR) based test within 7 days before arrival at the camp. This specimen collection and testing should occur through a person’s normal healthcare provider or health system. Results must be back before a person can arrive at the camp. Nobody will be allowed on the camp’s property who tests positive.

   2.) Upon arrival to the camp, and during the first day of the person’s 14 day pre-camp quarantine period at the camp (before campers arrive),
all staff must be tested a second time using a nasopharyngeal swab to test directly for the presence of the SARS-CoV-2 novel coronavirus that causes COVID-19 using a polymerase chain reaction (PCR) based test. This specimen collection must occur at the camp and utilize the camp’s medical staff and process developed and outlined in the COVID-19 Camp Plan. Specimens must be appropriately collected, handled, and shipped to the contracting laboratory performing the expedited testing. Medical staff performing the testing must utilize appropriate PPE, and change necessary PPE and perform hand hygiene between persons per existing CDC and NH DHHS guidance, and as outlined in the COVID19 Camp Plan developed with camp’s medical director.

3.) All staff should be tested a third time at day 7 during their 14-day on camp quarantine period using the same process outlined above. These test results must be back before the official beginning of camp and arrival of campers.

• Records must be kept of all testing and test results. Results must be kept confidential in compliance with state and federal HIPAA regulations.

• Anybody testing positive should be immediately isolated.

• If there is a confirmed case of COVID-19, the camp must contact the Bureau of Infection Disease Control (BIDC) immediately at 603-271-4496 (available 24/7).

f) All campers must be tested for COVID-19 as follows:

1) Nasopharyngeal swabs should be collected to test directly for the presence of the SARS-CoV-2 novel coronavirus that causes COVID-19 using a polymerase chain reaction (PCR) based test within 7 days before arrival at the camp. This specimen collection and testing should occur through a person’s normal healthcare provider or health system. Results must be back before a person can arrive at the camp. Nobody may arrive to the camp who tests positive.

2) Upon arrival to the camp, and during the first day of the camper’s arrival, all campers must be tested a second time using a nasopharyngeal swab to test directly for the presence of the SARS-CoV-2 novel coronavirus that causes COVID-19 using a polymerase chain reaction (PCR) based test. This specimen collection must occur at the camp and utilize the camp’s medical staff and process developed and outlined in the COVID-19 Camp Plan. Ideally this testing would be incorporated into the camp check-in process. Specimens must be appropriately collected, handled, and shipped to the contracting laboratory performing the
expedited testing. Medical staff performing the testing must utilize appropriate PPE, and change necessary PPE and perform hand hygiene between persons per existing CDC and NH DHHS guidance, and as outlined in the COVID-19 Camp Plan developed with camp’s medical director.

3) All campers that are staying for longer than 2 weeks should also have a third PCR-based test during their second week of camp (ideally day 7 similar to staff process above).

- Records must be kept of all testing and test results. Results must be kept confidential in compliance with state and federal HIPAA regulations.

- Camper’s will not be allowed on camp if parents/guardians do not give consent for testing as outlined in this document, including testing on an ad hoc basis if camper becomes symptomatic (see below).

- In addition to the routine testing required above, any person on the camp who develops symptoms of COVID-19 (even mild singular symptoms outlined above) identified on daily temperature and symptom screening must be tested for COVID-19 utilizing the same process, type of swab, and test outlined above.

- Anybody who is symptomatic and undergoing testing should be removed from other people and group interaction (isolated) until test results return as discussed below.

- Anybody who tests positive must be immediately isolated.

- **If there is a confirmed case of COVID-19, the camp must contact the Bureau of Infection Disease Control (BIDC) immediately at 603-2714496 (available 24/7).**


   a. Health Centers:

   1. Monitor Health Center logs to identify illness patterns.
   2. Consider adjusting medication administration processes in the Health Center to promote social distancing.
   3. Consider implementing a strategy for triaging individuals in the Health Center that promotes social distancing.
   4. Train Health Center staff to follow camp communicable disease strategies: donning/doffing of PPE, steps in Communicable Disease Plan (CDP), health screening activities, etc.
5. Create a system for camps to communicate with public health officials, nearby healthcare facilities, families, and other stakeholders.

6. Create a communication system for staff and families to self-report symptoms and notification of exposures.

b. When a camper or staff is identified with potential COVID-19 symptoms, this person will be isolated and quarantined from camp activities until COVID-19 status can be determined.

1. Camps must develop locations for isolation and quarantine of staff, volunteers, or campers if needed.

2. Isolation is for people who have tested positive for COVID-19, or who have symptoms of COVID-19. Isolation refers to the act of staying away from other people and out of public spaces to avoid spreading infection.

3. Quarantine is for people who have been in close contact to someone diagnosed with COVID-19. Quarantine refers to the act of staying away from other people and out of public spaces to avoid spreading infection in the event the exposed person develops infection (could be either symptomatic or asymptomatic infection).

4. Isolation locations should include a separate room with a separate bathroom in a location separate from others, ideally with a private entrance.

5. Any staff, volunteer, or camper who develops symptoms of COVID-19 should be isolated pending test results and may not participate in any camp activities, go to the dining hall, or be present in other public places.

6. If a person is confirmed to have COVID-19, they must leave camp immediately and be picked up by family and brought back home by private transportation. The family and close household contacts will then need to quarantine due to exposure to a person with COVID-19. People with confirmed COVID-19 shall not, under any circumstances, be allowed on public transportation. If a person is unable to drive themselves home (for staff and volunteers), or be picked up by family, they must continue to be kept in isolation on camp premise.

7. Symptomatic persons or those with confirmed COVID-19 should undergo enhanced medical monitor to ensure stability in health. Camps should have a detailed plan for how to transport a symptomatic person to the local hospital in the event the person needs medical attention. Transportation should involve a mechanism for avoiding exposing individuals to COVID-19 (e.g., consider utilizing local emergency medical services).

8. Any person requiring quarantine due to COVID-19 exposure should leave the camp and can either drive themselves home (for staff and volunteers), or be picked up by family. People under quarantine shall not be allowed on public transportation. If a person is unable to leave the camp or be picked up immediately, they should undergo quarantine on the camp premise.
9. Quarantine locations should ideally involve a private room with a private bathroom in a location separate from others, ideally with a private entrance. Whole groups/cabins who have all been exposed to a person with COVID-19 could theoretically quarantine together (with their own private bathroom), but if additional cases are identified the group would be under a rolling quarantine extending the need to quarantine for longer than 14 days (quarantine is for 14 days after last known exposure).

10. Any staff, volunteer, or camper who is exposed to COVID-19 and must be quarantined may not participate in any camp activities, go to the dining hall, or be present in other public places.

11. People under quarantine should undergo enhanced monitoring as outlined in the NH DHHS self-quarantine guide.

12. Food, laundry, and other essential services and needs must continue to be provided to people under isolation and quarantine, but the person(s) must not come into close or direct contact with other people.


14. In the event of a confirmed case by viral PCR testing, notify State and local health officials as required, staff, and families in accord with the CDP while maintaining confidentiality as required by the Americans with Disabilities Act (ADA). Perform contact tracing to ascertain information and identification of close contacts.

15. Clear and close off recent areas used by an ill camper/staff and do not use before cleaning and disinfection. Ensure safe and correct application of disinfectants by staff and keep disinfectant products away from children. Arrange for a deep cleaning of the camper’s residential area and/or the staff’s workspace.

16. Adjust camper and staff policies to reflect the need for a COVID-19 suspected or COVID-19-positive individual to be immediately isolated from the larger camp community.

17. If camper or staff are confirmed positive for COVID-19, continue isolation according to your CDP, test when possible. Advise staff members to not return to camp until they have met CDC criteria to discontinue home isolation.

4. Prevention

a. Physical Distancing, Group Size and Cohorting: Residential camps will comply with physical distancing and group size guidelines as described below. Additionally, campers may be divided into small cohorts with the same counselors. Cohorts should ideally remain together throughout the program and limit interaction with other groups as much as possible.
1. Camp administrators should ensure campers and staff are separated into groups that remain consistent over the camp program. Consider programs that function by bunk and dining/activity cohorts that are groups of bunks. CDC guidance in Phase 2 states that “Social settings of more than 50 people, where appropriate distancing may not be practical, should be avoided unless precautionary measures are observed.” Mixing between cohort groups of 50 should be discouraged.

2. Space seating indoors and outdoors at least 6 feet apart between camper groups (for example, separate bunks/cabins groups by 6 feet apart in a recreational hall).

3. Consider limiting large gatherings, events, and extracurricular activities to those that can maintain social distancing and support proper hand hygiene. Outdoor fields can be used for large gatherings with at least 6 feet maintained between camp groups of up to 50 persons. Manage communal use spaces, shared facilities, and playgrounds to avoid large gatherings and stagger times of use and disinfect in between use.

4. When staff are within their cohorts, they are not required to wear cloth face coverings.

b. Sleeping Arrangements:

1. Campers must be divided into small cohorts with the same counselors for the duration of the camp session. These counselor/camper groups must not exceed 10 total people (e.g., 2 counselors and 8 campers). Cohorts must remain together throughout the camp session and limit interaction with other groups.

2. For camps that have sleeping areas that accommodate larger groups, camps should divide the sleeping area so that no more than 10 total people are sleeping in the same shared space.

3. These groups should maintain a consistent sleeping arrangement (i.e., no moving between cabins or bunks). Beds must be arranged so that campers and staff sleep head-to-toe and are at least 6 feet apart. Ideally beds should be spaced at least 6 feet apart. If beds are unable to be spaced 6 feet apart due to limited space, beds should be spaced so that one camper’s/staff’s head is more than 6 feet from an adjacent camper’s/staff’s head space.

4. Windows in sleeping areas/cabins must remain open as much as possible to increase ventilation.

5. Appropriate counselor/camper ratios should be maintained.

c. Meals:

1. Stagger meal times.

2. Meal and snack time should occur outside whenever possible under tents, shelters or pavilions, if necessary. No congregating in large groups to eat meals and snacks.
3. Staff and campers should eat with their own group and maintain at least 6 feet of distance between camper groups when seated and eating; no sharing of food, drink, or utensils.
4. If meals must be provided in a dining hall/room, stagger meal times, arrange tables to ensure that there is at least six feet of space between groups, and clean tables between lunch shifts.
5. Serve individually plated or boxed meals.
6. Avoid buffet lines.
7. Avoid family style meals. If meals must be served family-style, campers should be served by camp counsellors. Campers may not touch serving utensils or serve themselves.
8. Hand hygiene must be performed by everybody before and after meal times, and also immediately before serving food.
9. Develop a process for clearing and cleaning & disinfecting tables one group at a time that avoids interaction between staff and campers.
10. Campers and staff need to bring their own water bottles. No shared water jugs.

d. Limit Sharing
   1. Attempt to keep each camper’s belongings separated from others’ and in individually labeled containers, cubbies, or areas. Avoid sharing clothing, personal care products, and belongings between campers and between staff.
   2. Ensure adequate supplies to minimize sharing of high-touch materials assigned to a single camper (art supplies, sports equipment, etc.) or limit use of supplies and equipment by one group of children at a time and clean and disinfect between use.
   3. Have pre-packaged boxes or individual bags of snacks to avoid sharing by campers and staff.

e. Programmatic Considerations
   1. Train all staff
      • Train all staff in the above safety actions. Consider conducting the training to ensure that social distancing and healthy hygiene practices are maintained.
      • Training of staff in infection prevention measures for this summer is essential. Camp administrators should train staff on the Communicable Disease Plan (CDP) and clarify staff’s essential role in the plan.
   2. Activity Considerations: Camps will alter programmatic activities to reflect current recommendations for physical distancing and group size. When physical distancing is not possible outside of their camp cohort, face coverings should be used.
3. Wilderness Activities: Camps with overnight wilderness trips will ensure that trip groups are consistent with their camp cohort. Trips will be in small groups of no more than 10. Travel trips will be done with the cohort and face coverings will be encouraged in the vehicle. Trips will minimize the number of campers in each tent.

4. Camp administrators should restrict arrival to camp and departure from camp to the greatest extent possible. Camps should consider having campers and staff with direct camper contact (for example, bunk counselors, activity and program leaders) remain on campgrounds for the duration of the camp session with exceptions to outside medical or other essential visits. Campers leaving camp and returning should wear cloth masks when social distancing is not possible and should avoid visiting public areas such as restaurants and retail settings. Upon return to camp, all campers and staff must go through pre-arrival screening and conduct hygiene practices as described within this document.

5. Arrangements should be made for retaining staff with direct camper contact on premises on days off.

6. Visitors & Parents & Field Trips:
   • Restrict nonessential visitors, entertainers, volunteers, and activities involving outside groups.
   • Field trips, socials and intercamp games to public gathering and recreational places should be avoided. It may be possible to permit small groups to day travel to nearby recreational areas where interfacing with the external community is not expected. For example, taking campers for equestrian sessions, transporting cyclists to go mountain biking or campers traveling offsite for a canoe trip.

7. Dining schedules should be altered or staggered to adhere to the maximum group gathering guidelines. Alternative to buffet style serving, camps could consider serving meals “family style” to minimize movement and exposures in the dining facility. Counselors will serve their bunk campers.

8. Parent Visiting Weekend: Visitors, including parents, will be minimized to every extent possible, including the elimination of parent visiting days. If a visit by a parent or other visitor becomes essential to camp, face coverings will be used when social distancing is not possible and interactions with the larger camp community will be minimized.

9. Inter-camp Games & Socials: Inter-camp athletics and social activities between camps will not be allowed.

f. Hygiene
   a. Promotion of Health Practices:
      • Teach and reinforce washing hands and covering coughs and sneezes among children and staff.
• Teach use of cloth face coverings among staff working outside their cabin or programming cohorts when physical distancing is not possible. Staff should be frequently reminded not to touch the face covering and to wash their hands frequently. Information should be provided to all staff on proper use, removal, and disposal or washing of cloth face coverings.

• Staff that travel off-camp every day and at the end of their shift should wear cloth face coverings in camp when unable to maintain a 6-foot distance from others.

• Have adequate supplies to support healthy hygiene behaviors, including soap and water, hand sanitizer with at least 60 percent alcohol for staff and older children who can safely use hand sanitizer, tissues, and no-touch trash cans.

• Post signs on how to stop the spread of COVID-19, properly wash hands, promote everyday protective measures, and properly wear a face covering (staff).

• Provide educational materials in advance to parents and guardians for sharing with children prior to camp and reinforce awareness at staff and camper orientation and periodically thereafter for all throughout the camp experience.

b. Face Coverings: When physical distancing is not possible outside of the cabin and program cohorts, use of face coverings are encouraged. Additionally, dining staff should wear face coverings when serving food. It is not advisable for campers to sleep with face coverings.

c. Health Center: Health staff will wear face coverings when physical distancing cannot be maintained. PPE for health staff will be consistent with CDC guidelines for its use in suspected communicable disease including the consideration of N-95 respirators, procedural masks, gowns, and eye coverings.

d. Facilities & Vendor Deliveries: Facilities staff and vendors will wear face coverings when physical distancing cannot be maintained and for the former when in camper living areas.

5. Face Coverings:

a. All camp staff and volunteers are encouraged to wear reusable/washable cloth face coverings over their noses and mouths as much as possible when social distancing is not possible to help prevent the spread of COVID-19.

b. Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.

c. Review the NH DHHS information about using cloth face coverings.

d. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching their faces or adjusting their face coverings, their hands must be sanitized.
e. All adults dropping children off at day camp should be asked to wear cloth face coverings over their noses and mouths when at the camp facility or public spaces where other individuals are present.

f. Any staff or volunteers who need to leave the camp premise for essential purposes must wear a cloth face covering when with other people or out in public settings when social distancing is not possible.

g. The NH Department of Health and Human Services does not recommend young children routinely wear face masks or face coverings.

6. **High Risk Populations:** Vulnerable or high-risk populations require special consideration at day and residential camps.
   a. Camp directors should advise staff members and campers’ parents/guardians to consult with their primary care providers to determine if camp is a reasonably safe option for their children and them.
   b. Families of campers with high risk individuals residing in their homes must consider COVID-19 exposure risks if they send their child to camp and determine if it is safe.
   c. Camp directors should follow CDC and White House *Opening Up America Again* plan that specifically state that special high-risk and vulnerable populations should continue to shelter-in-place through Phases 1 and 2. Specifically, camp directors should consider if the following populations should seek employment at summer camp facilities with consult from their primary care provider:
     h. People 65 or older
     i. People who live in a nursing home or long-term care facility
     j. People of all ages with underlying medical conditions, particularly if not well controlled including:
        1. People with chronic lung disease or moderate to severe asthma
        2. People who have serious heart conditions
        3. People who are immunocompromised: Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications
        4. People with severe obesity (body mass index [BMI] of 40 or higher)
        5. People with diabetes
        6. People with chronic kidney disease undergoing dialysis
        7. People with liver disease

7. **Facilities Cleaning and Disinfection:** Summer camps have strong infection protocols in place and these protocols should be updated with EHE/CDC summer camp guidance when available to include:
   a. **Clean and disinfect** frequently touched surfaces at least daily (for example playground equipment, door handles, sink handles, etc.) and shared objects (for example, toys, games, art supplies) between uses.
b. Clean and disinfect vans and buses; refer to guidance for bus transit operators. Camp vehicles should be cleaned and sanitized/disinfected between uses.

c. Ensure safe and correct application of disinfectants per the manufacturers’ instructions for use (IFU) by trained staff. Keep products away from children.

d. Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening screened windows and doors, using fans, or other methods. Do not open windows and doors if they pose a safety or health risk (e.g., temperature, inclement weather, insects, and allowing pollens in or exacerbating asthma symptoms) to children at the facility.

e. Take steps to ensure that all potable water systems and terminal fixtures (for example, sinks and bottle filling stations) are sanitized daily. Provide disposable cups for water fountains and refillable water jugs. Avoid use of water bubblers without disposable cups.

f. Ensure potable and process water plumbing systems are appropriately readied prior to camp in accord with CDC and local health department guidance to minimize the risk of diseases associated with waterborne pathogens.

8. Transportation: Camp directors are encouraged to arrange for camper and staff travel that minimizes exposures outside the camp community. This could include: charter buses, direct-to-camp/direct-to-home transportation. These guidelines are based upon the assumption that Camps are conducting pre-arrival screening prior to boarding buses to overnight camp. Air travel to camps from campers or staff are not permitted.

a. Create social distance between children on transport vans and buses where possible. Use face masks, if unable to maintain social distancing.

b. Camp administrators should be aware of the infection potential of campers and staff traveling from high infection transmission areas and are advised to consider limits to participants from these areas and/or in accord with the State and local agency requirements for regional, interstate, and international travel. If allowed, staff from these areas must quarantine in small groups (<10) for at least 14-days prior to arrival of campers or before introduction to camp and participate in pre-arrival screening.

c. Stagger arrival and drop-off/departure times or locations or put in place other protocols to limit direct contact with parents as much as possible.

d. Implement a one-parent, one-child drop off and pick up procedure. Parents should be ready to separate from child immediately after check-in and passed medical screening. Parents will not be allowed to enter housing areas prior to or during drop off.

9. Communication with State and Local Public Health Authorities: Residential camps will ensure timely and accurate reporting to the NH public health authorities for all notifiable diseases and conditions, including COVID. Camp directors should ensure a single point of contact for communication and familiarize themselves with NH public health reporting protocols and contact methods.
Business Process Adaptations

1. Please see extensive adaptation above in addition to applicable NH guidance for youth camp operation.

2. Some camps or programs may need to shorten or otherwise alter camp sessions or total operating season in order to accommodate this guidance.

W. Bowling and Entertainment Centers

Effective June 15, 2020

General Guidance:

1. Review and comply with the Universal Guidelines for All New Hampshire Employers and Employees.
2. Review and follow CDC guidance for businesses and employers.
3. Review and follow CDC guidance for cleaning and disinfection.
4. Review and follow Restaurant and Food Service Guidance if applicable.
5. All customers should wear reusable/washable cloth face coverings over their noses and mouths when around others and in settings where social distancing may be difficult to maintain.
6. All staff must wear reusable/washable cloth face coverings over their noses and mouths when around others and in settings where social distancing may be difficult to maintain.
   a. Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.
   b. Review the NH DHHS information about using cloth face coverings.
   c. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing hands. After touching faces or adjusting face coverings, hands must be sanitized.
7. Alcohol-based hand sanitizer with at least 60% alcohol must be readily made available to staff and customers. Frequent hand hygiene should be required including, but not limited to, hand hygiene upon arrival, before and after meals or snacks, before and after going to the bathroom, before and after touching a person’s face or face covering, when moving between attraction areas, and prior to leaving the facility.
8. Commonly touched surfaces and areas should be frequently cleaned and disinfected according to CDC guidance at the end of each activity. Shared equipment must be cleaned and disinfected between uses.
9. Staff and customers should be reminded to maintain a distance of at least 6 feet from others.
10. A dedicated staff member (i.e., a safety officer) should be assigned to be monitor social distancing and compliance with protective actions, and to prompt other staff and customers about social distancing, hand hygiene, and use of cloth face coverings.

Employee Guidance:
1. Staff must be provided education and training around safe practices as it relates to hygiene, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines and in this document.

2. Stagger shifts, breaks, and meals, in compliance with wage and hour laws and regulations to maintain social distancing. Weather permitting, breaks and lunches should be outdoors when possible.

3. Staff should be instructed to maintain a distance of at least 6 feet from others (staff and customers) at all times. Prohibit congregating in break rooms or common areas and limit capacity of such areas to allow for a safe social distancing of at least 6 feet whenever possible.

4. Employers should continue to encourage remote work whenever possible and feasible with facility operations (i.e. marketing, league and party planning, office work, etc.).

5. Require all staff to report any symptoms of COVID-19 or close contact with a person with COVID-19 to a supervisor.

6. Staff must be screened daily on arrival at the facility in accordance with Universal Guidance.

7. Person(s) with any COVID-19 symptoms, or those who within the past 14 days report close contact with someone suspected or confirmed with COVID-19 or report travel risk factors must not be allowed into the facility:
   a. Symptomatic persons should be instructed to contact their healthcare providers to be tested for COVID-19 and self-isolate at home following the instructions below or until advised otherwise by their healthcare providers.
   b. Asymptomatic persons reporting that within the past 14 days they have had close contact with someone suspected or confirmed with COVID-19 or who report one of the traveled-related risk factors should be instructed to contact their healthcare providers to be tested for COVID-29 and self-isolate for 14 days from their last exposure or return from travel or until advised otherwise by their healthcare provider.
   c. Employees who do not have a healthcare provider should seek out COVID-19 testing through one of the many local COVID-19 testing options including a State-run testing facility, local health department, or their healthcare provider.

8. Person(s) with suspected or confirmed COVID-19 must stay home until symptom-based criteria are met for discontinuation of isolation which are:
   a. At least 10 days have passed since symptoms first appeared, AND
   b. At least 3 days (72 hours) have passed since recovery (“recovery” is defined as resolution of fever without use of any fever reducing medications, plus improvement in other symptoms)

Customer Guidance:

1. Customers must be informed of policies and procedures and provided instructions on hand hygiene, cloth face covering use, social distancing, sanitation (cleaning and disinfection policies), and illness policies.
2. Customers should be encouraged to stay at least 6 feet apart from other customers and staff at all times.
3. Customers should be asked to bring and wear cloth face coverings for use when social distancing is difficult to maintain.
4. Signage must be prominently posted in all entry areas to the facility to inform customers that if any of the following apply, they should not enter the facility and put other members and staff at risk:
   a. Any symptoms of COVID-19?
      i. Fever (feeling feverish or a documented temperature of 100.4 degrees Fahrenheit or higher);
      ii. Respiratory symptoms such as a runny nose, nasal congestion, sore throat, cough, or shortness of breath;
      iii. Whole body symptoms such as muscle aches, chills, and severe fatigue;
      iv. Changes in your sense of taste or smell?
   b. Close contact with someone who is suspected or confirmed to have had COVID19 in the past 14 days.
   c. Traveled in the past 14 days either:
      i. Internationally (outside the U.S.),
      ii. By cruise ship, or
      iii. Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g., bus, train, plane, etc.).

**Business Process Guidance:**

1. Develop a process for limiting the number of customers inside the facility at a given time, excluding employees and representatives of third-party delivery companies, to 50 percent or less of building occupancy based on New Hampshire’s Building and Fire Code.
2. Assign transaction terminals to single employees when possible. Avoid sharing of terminals among employees when possible. Commonly touched surfaces and work areas should be frequently cleaned and disinfected according to CDC guidance at a minimum every 2 hours and at the end of each use.
3. Use plastic shields or barriers between customers and clerks at service counters when possible and clean them frequently.
4. Traffic flow should be modified so there is no congregating of staff or customers and waiting lines are eliminated or clearly demarcated with 6 feet of distance for people to stand if awaiting service.

**Bowling**

1. Limit the number of people per lane to 5 people or fewer.
2. Customers should maintain as much physical distance as possible between others while playing.
3. Businesses must maintain a minimum of one unoccupied lane between groups.
4. League play is permitted only if it complies with the above guidelines. Two teams from the same league may occupy adjacent lanes. There must be at least one lane unoccupied between different league matches.

5. All touch points must be cleaned and disinfected between groups according to CDC and BPAA guidance, including all bowling balls and holes (if applicable), reset buttons, seating, tables, and scoring consoles/tables.

6. Rental shoes must be sanitized with appropriate disinfectant between each use, inside AND out.

7. No bowling towels can be stored in any common area or on tables, ball racks, scoring consoles/tables, etc. Any towels are to be used by single person only.

Arcades, Laser Tag, Billiard Halls, Prize Redemption, Etc.

1. Laser tag should be limited to 50 percent of the capacity of the room.

2. Games should be scheduled to allow adequate time to clean and disinfect all equipment between each use.

3. People playing laser tag should be encouraged to wear cloth face coverings, especially if the games involve un-related individuals.

4. If arcade/amusement games are arranged within 6 feet of an adjacent game, then people must avoid playing on adjacent games simultaneously.

5. All touch points should be cleaned and disinfected according to CDC guidance every 30-60 minutes at a minimum. When possible, a staff member should be dedicated to roving the facility to continuously sanitize gaming touch surfaces.

6. Redemption prize centers may open with physical distancing built into their operations. No self-service of redemption prizes is allowed.

7. Any waiting lines should have clearly demarcated areas to maintain a safe distance of at least 6 feet between people.

X. Charitable Gaming

Effective June 15, 2020

General Business Guidance:

1. Review and comply with the Universal Guidelines for All New Hampshire Employers and Employees.

2. Review and follow CDC guidance for business and employers.

3. Review and follow the CDC guidance for cleaning and disinfection.

4. Provide ServSafe COVID-19 training or its equivalent to all employees.

5. If providing food services, follow Food Service Industry Guidance. In addition, no food service is allowed at gaming tables (other tables will be allowed food service).

6. Beverages are allowed at the gaming table. Where possible, venues should provide beverages that are sold in original containers.
8. Staff must be screened daily on arrival at the facility in accordance with Universal Guidance.
9. Staff and volunteers must be provided with education and training about safe practices as it relates to hand hygiene, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines and in this document.
10. Dedicated staff (i.e. a safety officer) should be assigned to monitor social distancing and compliance with protective actions, and to prompt customers and other staff about the importance of social distancing, hand hygiene, and use of cloth face coverings.
11. A customer who is visibly symptomatic (e.g., recurrent coughing, runny nose, etc.) must be asked to leave a gaming table and establishment.
12. All staff must wear reusable/washable cloth face coverings over their noses and mouths while at work. This includes wearing a cloth face covering when in common areas, outdoors when others are in close proximity, and in shared staff areas, when social distancing is difficult to maintain.
13. Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.
14. Review the NH DHHS information about using cloth face coverings.
15. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching faces or adjusting face coverings, their hands must be sanitized.
16. Guests should be asked to wear cloth face coverings while they are within the facility and around other staff and guests when social distancing is difficult to maintain.
17. Staff and patrons/consumers should practice frequent hand hygiene by either washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer with at least 60% alcohol. This includes, but is not limited to, hand hygiene upon arrive at the facility, before and after meals or snacks, before and after going to the bathroom, before and after touching a person’s face or face covering, and prior to leaving the facility.

Consumer Protections:
1. Signage must be prominently posted at the entrances of the facility, to inform customers that if any of the following apply, they should not enter the facility and put other customers or staff at risk and that any tickets purchased can be rescheduled for another day, or the person can receive a refund:
   a. Any symptoms of COVID-19?
      i. Fever (feeling feverish or a documented temperature of 100.4 degrees Fahrenheit or higher);
      ii. Respiratory symptoms such as a runny nose, nasal congestion, sore throat, cough, or shortness of breath;
      iii. Whole body symptoms such as muscle aches, chills, and severe fatigue;
      iv. Changes in your sense of taste or smell?

92
b. Close contact with someone who is suspected or confirmed to have had COVID-19 in the past 14 days.

c. Traveled in the past 14 days either:
   i. Internationally (outside the U.S.),
   ii. By cruise ship, or
   iii. Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g., bus, train, plane, etc.).

**Business Process Adaptations:**

1. All facilities should have a communication plan to educate staff and customers about COVID-19 health and safety practices at the facility.
2. Stagger staff shifts, breaks, and meals, in compliance with wage and hour laws and regulations to maintain social distancing. Prohibit congregating in break rooms or common areas and limit capacity of such areas to allow for a safe social distancing of at least 6 feet.
3. Gaming machines, tables, and other physical layouts should be arranged to ensure at least 6 feet of distance between customers and staff at adjacent tables.
4. Where social distancing cannot be maintained, facilities should install transparent plastic barriers between players/dealers at gaming tables for additional protection between each player and the dealer.
5. Use plastic shields or barriers between customers and clerks at service counters when possible and clean them frequently.
6. Venues should limit the number of seats or betting positions per table to maximize distance between players. E.g.:
   a. Blackjack: 4 players/table;
   b. Craps: 6 players/table;
   c. Roulette: 6 players/table;
   d. Poker: 6 players/table;
   e. Bingo: 6 players/table.
7. Facilities should reduce customer touchpoints, particularly on bingo paper, cards, chips, and cash. Customers will not be permitted to buy bingo paper, or chips at the gaming tables. All buy-in and cash outs will be conducted at point of sale locations.
8. For roving sales staff/volunteers, they must be masked and sanitize hands between sales.
9. Reservations or call ahead seating is recommended to promote social distancing and prevent groups of guest waiting for table. Consider using a text alert system to alert guests of available seating, or an intercom system for guests waiting in their vehicles. Prevent congregating in waiting areas.
10. Mark any areas where patrons queue, including restrooms, to indicate proper social distancing of at least 6 feet apart. Separate chairs in any waiting area by at least 6 feet.
11. Make hand washing stations or alcohol-based hand sanitizer readily available to both employees and patrons particularly by the cage, at each gaming tables, staff breakrooms and all entrances and exits to the facility.
12. Dealers at gaming tables should ask all customers (e.g., those sitting at a poker table) to use alcohol-based hand sanitizer on a periodic and frequent basis.
13. Venue must establish enhanced cleaning and disinfecting protocols. This includes cleaning and disinfecting shared resources and frequently touched surfaces at least every 2-hours, e.g:
   a. Cage counters, gaming machines, gaming tables, and gaming equipment;
   b. ATMs, redemption terminals, rewards club kiosks;
   c. Door handles, and stair handrails; and
   d. Public restrooms.
   e. Lucky 7 or other electronic machines
   f. Gaming/betting tables and equipment as able
14. Lucky 7 or other electronic machines: Venue should provide disinfection wipes, and place signage for patron asking to wipe down the machines before use.
15. Venue must frequently sanitize any tools and equipment shared by employees before, during, and after each shift, or anytime the equipment is transferred to a different employee. This includes phones, radios, computers, other communication devices, payment terminals, keys, time clocks, and all other direct contact items used by employees throughout the facility.
16. Customer playing areas and betting positions should be cleaned and disinfected after each patron leaves and before another person uses that location.
17. Food and Beverage services will follow Food Services guidelines, with the additional restriction that for ‘casino/card room’ no food service will happen at gaming tables (other tables will be allowed food service). Beverages are allowed at the gaming table. Where possible it is recommended that beverages be sold in original containers.
18. Indoor Smoking areas will be closed.
19. Evaluate building ventilation system to increase room and overall building ventilation, increase the number of air exchanges, increase outdoor air ventilation, limit internal air circulation, improve central air filtration, and routinely replace filters and perform other necessary maintenance.

X. Funeral Homes

Effective June 15, 2020, funeral homes may resume operations according to the following guidance.

Safeguarding Guidance:

1. Review and follow the Universal Guidelines for All New Hampshire Employers and Employees.
2. Review and follow CDC guidance for businesses and employers.
3. Review and follow CDC guidance for cleaning and disinfection.
4. Staff and must be provided with education and training about safe practices as it relates to hand hygiene, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines and in this document.
5. Build social distancing into operations to maintain a safe distance of at least 6 feet between employees and attendees whenever possible.
6. Alcohol-based hand sanitizer with at least 60% alcohol must be made readily available to employees and customers/attendees at entrances and exits to the facility, throughout employee work areas and break rooms, and other areas frequently visited by both employees and customers/clients.
   a. If possible, employers should make available individual bottles of hand sanitizer to each employee.
   b. Employers should monitor and encourage frequent employee and customer/attendee hand hygiene.
   c. Frequent hand hygiene should be performed including, but not limited to, upon arrival at the facility, before and after going to the bathroom, before and after touching a person’s face or face covering, and prior to leaving the facility.

Employee Protection:

1. All staff must wear cloth face coverings when in the funeral establishment and in public locations or shared staff areas (e.g. break rooms) when social distancing is difficult to maintain.
   a. Employers must provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.
   b. Review the NH DHHS information about using cloth face coverings.
   c. Employees wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their cloth face coverings/masks without first sanitizing hands. After touching face or adjusting cloth face coverings/masks, hands must be sanitized.
2. Staff must be screened daily on arrival at the facility in accordance with Universal Guidance.
3. Train all employees on the importance of frequent hand washing and the use of hand sanitizers with at least 60% alcohol content.
4. Stagger shifts, breaks, and meals, in compliance with wage and hour laws and regulations to maintain social distancing.
5. Provide regular updates and training for employees about personal COVID-19 mitigation and funeral establishment safeguards based on CDC guidelines.
6. Staff must be instructed to maintain a distance of at least 6 feet from others (staff and funeral service attendees) at all times. Congregating in break rooms or common areas must be prohibited and the capacity of such areas must be limited to allow for a safe social distancing of at least 6 feet whenever possible.

Business Process Adaptations:

1. Attendees should be notified/informed that if they have symptoms of COVID-19, they should not attend the funeral services for the protection of other attendees and staff.
2. Post signage and messaging about COVID-19, the need for social distancing, and frequent hand hygiene.
3. Funeral service attendees should wear cloth face coverings at all times when inside the funeral establishment. Signage and staff should request this before funeral service attendees enter the funeral establishment.

4. Develop a process for limiting the number of funeral service attendees inside a funeral establishment at a given time to 50 percent or less of funeral establishment’s permitted occupancy based on New Hampshire’s Building and Fire Code.

5. Ensure any waiting lines or receiving lines inside or outside the funeral establishment have demarcations spacing funeral service attendees at least 6 feet apart. Seating must be arranged at least 6 feet apart with space to allow people to move through the facility without coming into close contact with others.

6. Consider dedicated calling hours or appointment times for everybody, especially for the elderly and medically vulnerable persons.

7. If feasible, establish one-way traffic patterns to promote social distancing.

8. Assign dedicated staff to monitor social distancing and compliance with protective actions, and to prompt funeral service attendees and other staff about the importance of social distancing, hand hygiene, and use of cloth face coverings.

9. Add social distancing reminder signage and floor stickers in key areas in the funeral establishment.

10. Tissues and no-touch trash cans should be made readily available for drying eyes and blowing noses with hand sanitizer readily available. These actions can increase risk of COVID-19 transmission and people should be reminded and instructed to practice hand hygiene immediately after drying eyes, blowing noses, or touching their faces.

11. Close contact with others (e.g. hugging or shaking hands) is discouraged. Condolences should be provided from a distance of at least 6 feet. Funeral homes should develop ways for attendees to be able to show condolences that do not require close contact within 6 feet of a person.

12. No food, snacks, or drinks are allowed in funeral homes or reception areas.

13. Clean and disinfect according to CDC guidelines frequently touched surfaces at a minimum of every two hours, as well as before and after services.

Y. Libraries

Employee Protection:

1. All staff must wear cloth face coverings over their noses and mouths at all times when at work in the library and in public locations or shared staff areas (e.g. break rooms) when social distancing is difficult to maintain.

2. Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.

3. People wearing face coverings must not touch their eyes, noses, mouths, or face, or adjust their face coverings without first sanitizing their hands. After touching their faces or adjusting their face coverings, their hands must be sanitized.

4. Alcohol-based hand sanitizer must be made readily available for both staff and consumers at entrances and exits to libraries, at checkout locations, and in staff breakrooms and other commonly used staff areas.
5. Stagger shifts, breaks, and meals, in compliance with wage and hour laws and regulations
   to maintain social distancing.
6. Provide regular updates and training for employees about personal COVID-19 mitigation
   and library safeguards based upon CDC guidelines.
7. Require all employees to report any symptoms of COVID-19 or close contact to a person
   with COVID-19 to supervisor.
8. Staff must be screened (questioned about) for symptoms of COVID-19 before each shift.
   Staff with any symptoms must not be allowed to work.
9. Staff must be screened daily on arrival at the library prior to their shift in accordance with
   Universal Guidance.
10. Staff should be instructed to maintain a distance of at least 6 feet from others (staff and
    customers) at all times. Prohibit congregating in break rooms or common areas and limit
    capacity of such areas to allow for a safe social distancing of at least 6 feet whenever
    possible.
11. Restrict interaction between employees and outside visitors or delivery drivers;
    implement touchless receiving practices if possible.

Consumer Protection:
1. Develop a process for limiting the number of customers inside a library at a given time,
   excluding employees and representatives of third-party delivery companies, to 50 percent
   or less of building occupancy based on New Hampshire’s Building and Fire Code.
2. Ensure any waiting line outside the library has demarcations spacing customers at least 6
   feet apart.
3. Customers should be asked to wear cloth face coverings at all times when inside the
   library. Signage and staff should request this before customers enter the library.
4. Consider dedicated hours for the elderly and medically vulnerable persons.
5. If feasible and reasonable, establish one-way traffic patterns for social distancing within
   aisles and between book stacks.
6. Where appropriate and possible, implement curbside pickup and/or delivery service
   options to minimize contact and maintain social distancing.
7. Assign dedicated staff (i.e. a safety officer) to monitor social distancing and compliance
   with protective actions, and to prompt customers and other staff about the importance of
   social distancing, hand hygiene, and use of cloth face coverings.
8. Add social distancing reminder signage, personal and floor stickers in key areas in the
   library (e.g. check-out counters)

Business Process Adaptations:
1. Services should preferably be paid for electronically, but libraries may accept cash or
   check.
2. Establish enhanced cleaning protocols that follow CDC guidance relating to cleaning and
   disinfection for COVID-19. This includes cleaning and disinfecting shared resources and
   frequently touched surfaces every two hours. Check-out counters should be wiped down
   and cleaned between each customer.
3. When possible, use a clearly designated entrance and a separate clearly designated exit to maintain social distancing.
4. Use plastic shields or barriers between customers and library employees and clean them frequently.
5. Adjust library hours to allow time for enhanced cleaning.
6. Suspend offerings of food and coffee, unless the services follow the Restaurant and Food Service Guidance.
7. Task management-level employees within a library (i.e. a safety officer) to monitor compliance.
8. Libraries are allowed to have requirements over and above these recommendations.
9. Consider offering employees whose responsibilities can be met remotely to continue to work from home.
10. Consider waiving fines and extending due dates to discourage customers from coming into the library in-person.
11. Customers are encouraged to utilize book drop off locations instead of returning books in-person.
12. Ensure social distancing at computer terminals. This may include closing computers stations off to facilitate 6 feet of distancing. It is recommended that disinfectant wipes be provided for computer terminal users.
13. Ensure employee areas are clearly separated from areas that are frequented by patrons.
14. Public areas shall be rearranged to maintain 6 feet of distancing between seats.
15. Minimize shared touch surfaces such as tables, pens, library cards, receipts, etc.
16. Consider offering library services and programs remotely to the greatest extent feasible.

Z. Museums and Art Galleries

General Guidance to Protect All Staff and Customers:

1. Review and follow the Universal Guidelines for All New Hampshire Employers and Employees.
2. Review and follow New Hampshire retail guidance.
3. Review and follow CDC guidance for businesses and employers.
4. Review and follow CDC guidance for cleaning and disinfection.
5. If providing food services, follow Food Service Industry guidance.
6. All staff must wear reusable/washable cloth face coverings over their noses and mouths while at work. This includes wearing cloth face coverings when in common areas, outdoors when other are in close proximity, and in shared staff areas (e.g. offices and break rooms) when social distancing is difficult to maintain.
   a. Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.
   b. Review the NH DHHS information about using cloth face coverings.
   c. People wearing face coverings must not touch their eyes, noses, mouths, or faces, or adjust their face coverings without first sanitizing their hands. After touching faces or adjusting face coverings, their hands must be sanitized.
7. Guests should be asked to wear cloth face coverings while they are within the facility and around other staff and guests when social distancing is difficult to maintain.

8. Staff and patrons/consumers should practice frequent hand hygiene by either washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer with at least 60% alcohol. This includes, but is not limited to, hand hygiene upon arrive at the facility, before and after meals or snacks, before and after going to the bathroom, before and after touching a person’s face or face covering, and prior to leaving the facility.

9. Commonly touched surfaces and work areas should be frequently cleaned and disinfected according to CDC guidance at a minimum every 2 hours and at the end of each use.

10. Staff and patrons should be reminded to maintain a distance of at least 6 feet from others whenever possible.

11. Dedicated staff (i.e. a safety officer) should be assigned to be monitor social distancing and compliance with protective actions, and to prompt customers and other staff about the importance of social distancing, hand hygiene, and use of cloth face coverings.

**Employee / Volunteer Protection:**

1. Staff and volunteers must be provided with education and training about safe practices as it relates to hand hygiene, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidelines and in this document.

2. Stagger shifts, breaks, and meals, in compliance with wage and hour laws and regulations to maintain social distancing. Weather permitting, breaks and lunches should be outdoors when possible.

3. Staff should be instructed to maintain a distance of at least 6 feet from others (staff and customers) at all times. Prohibit congregating in break rooms or common areas and limit capacity of such areas to allow for a safe social distancing of at least 6 feet whenever possible.

4. Require all staff to report any symptoms of COVID-19 or close contact to a person with COVID-19 to supervisor.

5. Staff should be screened daily on arrival to the facility by asking if the individual:

   a. Has any symptoms of COVID-19:
      i. Fever (feeling feverish or a documented temperature of 100.4 degrees Fahrenheit or higher);
      ii. Respiratory symptoms such as a runny nose, nasal congestion, sore throat, cough, or shortness of breath;
      iii. Whole body symptoms such as muscle aches, chills, and severe fatigue;
      iv. Changes in your sense of taste or smell?

   b. Has had any close contact with someone who is suspected or confirmed to have had COVID-19 in the past 14 days.

   c. Traveled in the past 14 days either:
      i. Internationally (outside the U.S.),
      ii. By cruise ship, or
iii. Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g., bus, train, plane, etc.).

6. Person(s) with any COVID-19 symptoms, or those who within the past 14 days report close contact with someone suspected or confirmed with COVID-19 or report travel risk factors must not be allowed into the facility:
   a. Symptomatic persons should be instructed to contact their healthcare providers to be tested for COVID-19 and self-isolate at home following the instructions below or until they are advised otherwise by their healthcare provider.
   b. Asymptomatic persons reporting that within the past 14 days they have had close contact with someone suspected or confirmed with COVID-19 or who report one of the traveled-related risk factors should be instructed to contact their healthcare providers to be tested for COVID-19 and self-isolate for 14 days from their last exposure or return from travel or until they are advised otherwise by their healthcare provider.

7. Person(s) with suspect or confirmed COVID-19 must stay home until symptom-based criteria are met for discontinuation of isolation which are:
   a. At least 10 days have passed since symptoms first appeared
   AND
   b. At least 3 days (72 hours) have passed since recovery (“recovery” is defined as resolution of fever without the use of any fever reducing medications, plus improvement in other symptoms)

8. Interaction between employees and outside visitors or delivery drivers should be restricted and practices of touchless receiving should be implemented if possible.

Consumer Protection:

1. Signage must be prominently posted at the entrances of the facility, to inform customers that if any of the following apply, they should not enter the facility and put other customers or staff at risk and that any tickets purchased can be rescheduled for another day, or the person can receive a refund:
   a. Any symptoms of COVID-19
      i. Fever (feeling feverish or a documented temperature of 100.4 degrees Fahrenheit or higher);
      ii. Respiratory symptoms such as a runny nose, nasal congestion, sore throat, cough, or shortness of breath;
      iii. Whole body symptoms such as muscle aches, chills, and severe fatigue;
      iv. Changes in your sense of taste or smell?
   b. Close contact with someone who is suspected or confirmed to have had COVID19 in the past 14 days.
   c. Traveled in the past 14 days either:
      i. Internationally (outside the U.S.),
      ii. By cruise ship, or
Business Process Adaptations:

1. All facilities should have a communication plan to educate staff and customers about COVID-19 health and safety practices at the facility.
2. Admissions should be limited to 50% of overall capacity, or limited to the number of people where 6 feet of social distancing is able to be consistently maintained, whichever is less.
3. Seated or viewing areas will be arranged to maintain at least 6 feet of space between people.
4. Establish one-way flow through the museum and within galleries, when possible, to facilitate social distancing. It is recommended that staff or volunteers be positioned throughout the venue to address potential congestion points and ensure people adhere to social distance guidelines.
5. Guided tours or group activities should be limited to ensure appropriate social distancing. Offering guided tours will be at the discretion of the individual organization. Indoor guided tours are discouraged.
6. Where possible, facilities should move to cashless based transactions without paper receipts unless requested. Touch-free payment options should be emphasized.
7. Facilities should establish and promote a process for advanced reservations to minimize staff-customer contact and avoid congregating in lines or waiting areas. All digital check-in /check-out is recommended where possible.
8. Use plastic shields or barriers between customers and clerks at service counters when possible and clean them frequently.
9. Any waiting lines should have clearly demarcated areas to maintain a safe distance of at least 6 feet between people.
10. A clearly designated entrance and a separate clearly designated exit should be used to maintain social distancing, if possible.
11. Organizations should consider virtual or digital experiences where possible.
12. Interactive exhibits (i.e. touch and feel exhibits, play areas) should be closed or modified with frequent cleaning and disinfection and a readily available hand hygiene station (soap and water of alcohol-based hand sanitizer) to promote safe use.
13. Sanitization materials must be provided to staff, such as hand sanitizer and sanitizing wipes, and alcohol-based hand sanitizer should be made available throughout the facility, including at entrances, in common areas, exhibit halls, and at exits.
14. Clean and disinfect all common use surfaces including door handles, screens, phones, pens, keyboards, exhibits, and other areas of hand contact every two hours, at a minimum, and shared use items must be cleaned and disinfected after each use, per CDC guidance.

AA. Outdoor Attractions

Effective June 15, 2020
This guidance applies to outdoor activities situated in recreational or natural settings that occur individually or in small groups of 10 people or less. This includes centers for biking, canoe and kayak rentals, mini-golf, outdoor driving ranges, outdoor shooting ranges, small fishing charters, paint ball, outdoor guiding services (fishing, hunting, hiking), water skiing, motorcycle rides, and other small group outdoor activities that are able to follow the guidance below.

Additionally, this guidance shall apply to outdoor and nature-based experiential attractions and businesses, including but not limited to: agro-tourism, outdoor walking trails, tours and paths, batting cages, outdoor playground, zip lines, chairlifts, ropes courses/aerial parks, disk golf, open off-road vehicle tours (no enclosure), natural science centers, garden tours, diving tours and lessons, caves, petting zoos, balloon rides, helicopter and plane rides (groups fewer than 5) and white water rafting.

General Guidance to Protect Employees and Consumers:

1. Review and follow the Universal Guidelines for All New Hampshire Employers and Employees.
2. Review and follow the Retail guidance.
3. Review and follow the Golf guidance for driving ranges.
4. Review and follow the State Parks guidance.
5. Review and follow CDC guidance for businesses and employers.
6. Review and follow CDC guidance for cleaning and disinfection.
7. If providing Food Services, follow Food Service Industry guidance.
8. Staff must wear cloth face coverings at all times when in the retail facility, in public locations or shared staff areas (e.g. break rooms), even if other individuals are not immediately present, and when interacting with clients.
   a. Provide training on cloth face coverings based on CDC guidance for Use of Cloth Face Coverings.
   b. People wearing face coverings must not touch their eyes, nose, mouth, or face, or adjust their face mask without first sanitizing hands. After touching face or adjusting mask, hands must be sanitized.
9. All clients should be asked to wear a cloth face mask covering nose and mouth when within the facility or public spaces with other individuals present.
10. Alcohol-based hand sanitizer must be made readily available and must be placed throughout the facility, including on entry, in key walkways, in food and beverage locations, in shops, at checkout locations, and at exits. Hand sanitizer must also be provided in non-public settings such as maintenance areas, workshops, offices, and break areas.
11. Commonly touched surfaces, work areas, and public areas should be frequently cleaned and disinfected according to CDC guidance at a minimum every 2 hours and at the end of each shift.
12. Staff and clients should maintain a distance of at least 6 feet from others at all times.

Employee Protection:
1. Employees must be provided with education and training around safe practices as it relates to hand hygiene, sanitation (cleaning and disinfection policies), and illness policies outlined in the Universal Guidance and Retail Store Guidance.

2. Employees must be screened (questioned about) symptoms of COVID-19 before each shift as outlined in the Universal Guidelines for All New Hampshire Employers and Employees. Staff with any symptoms should not be allowed to work.

3. Require all employees to report any symptoms of COVID-19 or close contact to a person with COVID-19 to supervisor.

4. One person per company vehicles (including trucks, over-the-road, UTV/ATV). The vehicle or work carrier should be cleaned and disinfected after each staff use.

5. Employees must work at least 6 feet apart at all times (whether indoors or outdoors) and must maintain at least 6 feet of distance with clients. Weather permitting, breaks and lunches should be outdoors when possible.

6. Shared use tools and equipment will be cleaned and disinfected after each use.

**Consumer Protection:**

1. All facilities should have a communication plan to educate guests prior to their visit about the health and safety practices at the venue and what the guests need to be aware of when they arrive. Such communication plans shall include, but not be limited to, online methods (e.g., website, social media sites), email or other electronic communication, such as reservations or confirmations, and print mailings to the guest.

2. Facilities must build social distancing into the operation of restrooms.

3. Guests and visitors should be asked the following questions at check-in:
   a. Have you been in close contact with a confirmed case of COVID-19 in the last 14 days?
   b. Are you experiencing any respiratory symptoms, including a runny nose, sore throat, cough, or shortness of breath?
   c. Have you had a fever or felt feverish in the last 72 hours?
   d. Are you experiencing any new muscle aches or chills?
   e. Have you had any new changes in your sense of taste or smell?
   f. If you answered yes to any of these questions, please do not put our employees and other guests at risk and come back another day when you feel better. Any deposit will be returned.
   g. A version of this checklist should be included in reservation confirmations.

4. Signage must be prominently posted at the entrance informing customers about symptoms of COVID-19 and guests/visitors should be asked to:
   a. remain home if experiencing symptoms of COVID-19 (list common symptoms of COVID-19); and
   b. keep a safe distance of at least 6 feet from other people visiting the attractions and amusement parks at all times; and
   c. Practice frequent hand hygiene/washing; and
   d. wear a cloth face covering over mouth and nose to protect others when in public locations where other consumers might be present (e.g. bathroom facilities)

**Business Process Adaptations:**
1. Capacity is limited to the number of people where social distancing is able to be safely maintained with at least 6 feet of separation between individuals and between groups at all times. Close household contacts (e.g. a parent and child) are allowed closer than 6 feet to each other.

2. Admission limits will be determined for daily and hourly capacities to ensure appropriate social distancing pursuant to the Universal Guidelines at recreational facilities. Advance reservations will have priority and general admission will be permissible based on availability.

3. Where possible, clearly mark physical distancing spaces/guidelines with floor/ground markings, seat markings, or signs.

4. Visitors will enter and exit via separate areas and facilities will develop plans to make traffic flow one directional, wherever possible. One-directional flow will be mapped out at all facilities, including clearly marked ingress and egress points and easy-to-understand directional signage that will show the direction of traffic flow.

5. Utilize touch-free/contactless payment options when possible, reducing face-to-face purchase transactions. Guests should purchase tickets or schedule appointments online whenever possible.

6. Place Plexiglas or other types of barriers/hygiene screens between guests and staff who are in frequent close interaction areas wherever practical to reduce exposure to a person’s respiratory droplets. Clean the barriers/hygiene screens regularly.

7. Any seating will be spaced more than 6 feet apart to maintain social distancing.

8. Limit surfaces touched by visitors and employees, i.e. leave doors open where possible, no access to public water fountains and remove lids from trash cans.

9. All Camps and Organized Groups are not allowed to visit the facilities at this time

10. Amusement Parks are required to follow the Amusement Park Guidance

11. Retail settings must follow the guidelines outlined in the New Hampshire Retail Store Guidance.

**BB. Pools**

**Effective June 15, 2020**

**General Guidance for Public, Campground, or Commercial (where a fee is charged for use) Swimming Pools:**

1. Pools are allowed to be opened.

2. People must maintain a physical distance of at least 6 feet from others at all times even while in the pool.

3. Free swim, swim lessons, water fitness classes, and lap lane use are allowed.

4. All pool activities must be conducted in a controlled fashion with appropriate physical distancing built into swim activities. Also follow paragraph 18 below.

5. Individual swim lanes for swimming laps should be scheduled utilizing a reservation system prior to arrival at the pool.

6. Water fitness classes (i.e. water aerobics) can continue as long as the facility is able to comply with the Health and Fitness Centers Guidance on classes.
7. Swim lessons can be conducted with a limited number of students (i.e. one-on-one lessons, or several students at a time with clear space separation of at least 6 feet while in the pool). Students and swim instructors must be able to maintain at least 6 feet of physical distance separation at all times during the lessons.

Swim Competitions

1. Swim competitions, such as swim meets, are allowed with restrictions as explained below.
2. During swim events, parents/guardians and spectators are encouraged to remain in their cars in a designated parking area. However, when parents/guardians and spectators watch the swim event, they are not allowed in the pool area, including the pool deck, during the swim event and must maintain safe social distancing of 6 feet from others.
3. A limited number of spectators can be allowed at swim events but they must be limited to close/immediate family members of the athletes. Swim events will not be open to the public and should not be advertised publicly.
4. No athletes from states other than New Hampshire, Maine, and Vermont are allowed to compete at swim events.
5. Events must be staggered so that athletes can maintain at least 6 feet of distance between each other when waiting for their events, entering the pool, swimming, and exiting the pool.
6. Athletes shall bring and use their own equipment, including, but not limited to, towels, swim caps, goggles, nose plugs, ear plugs, and water bottles. Athletes shall not share their personal equipment with others.
7. Swim team staff and volunteers must have hand sanitizer with them and make it available to athletes. Athletes should carry their own hand sanitizer.
8. During the swim events, close-contact, non-athletic activities shall be avoided, including no shaking hands, high-fives, group cheers, hugs, or close contact huddles.
9. Equipment bags and backpacks of athletes, staff, and volunteers should be placed more than 6 feet apart. Athletes should not touch other athletes’ bags, equipment, or water bottles.
10. Centralized areas for congregating, such as benches, tables, chairs, or deck areas, should be avoided unless there is enough room to allow for at least 6 feet of space between staff, volunteers, and athletes.
11. All mouth-based activities that are often encountered during swim events, such as spitting in the pool or filling one’s mouth with water and then releasing the water back into the pool, shall not be allowed. These restrictions apply to all pool uses, not just during swim events.

Pool Decks

1. The use of pool deck areas is allowed.
2. The capacity of a pool deck is limited to the number of people who can sit in chairs or on towels around the pool deck and maintain at least 6 feet of distance from the pool edge and from other people. People who are members of the same household can sit together
closer than 6 feet but they must maintain a distance of at least 6 feet from other people or
groups.
3. Chairs that are generally available for use by people, either by a first-come, first-served
basis or rental, must be cleaned and disinfected between each use. Businesses are
responsible for ensuring that this cleaning occurs.
4. Tables and eating areas on pool decks or in pool areas are allowed to be open.
5. Tables must be placed with at least 6 feet of distance between each table. Chairs and
tables must be cleaned and disinfected between each use. Businesses are responsible for
ensuring that this cleaning occurs.
6. Businesses should provide touch-free garbage cans for disposal of refuse.
7. Businesses are ultimately responsible for clean-up of all eating areas in accordance with
applicable guidance.
8. Hand sanitizer or hand washing stations should be provided in the general pool area and
specifically in the area where tables are located.