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**\*\*Crosby Kemper:\*\*** Good afternoon, everybody or good morning, depending on where you are. This is Crosby Kemper, the director of The Institute of Museum and Library Services, the IMLS. Welcome. We've had an overwhelming response to today's webinar.

0:22

So I want to get right into it, but I'll mention now and I mean mention later, we are recording this if colleagues, friends, the members of your communities didn't have a chance to get in or if you need to leave at some point, this will be available on our website. LogMeIn is doing this for us and we'll be linking to them from IMLS.gov. I think the Department of Education may also link to it. And eventually we will actually have this up on our website as well.

The IMLS is an independent Federal agency located in Washington, D.C. We're best known for our grants to museums and libraries, but part of our mission is to support innovation and ideas to do research and policy development.

1:15

This of course fits in all of that, as well as the Institute has been requested by the White House and Congress to be a part of the all-hands-on-deck emergency response to our national crisis. We know that information is a key to what all of you do and it's a key to what we do and we're pleased today, in association with our partners in presenting this webinar, the Department of Education represented by Phil Rosenthal, the National Archives represented by Gary Stern, the Smithsonian Institution by Judith Leonard and the Library of Congress by Elizabeth Pew, so I want to shout out to our own general counsel Nancy Weis at the end of the call.

I'm going to introduce in one second David Berendes and Catherine Rasberry. Dr. David Berendes and Dr. Catherine Rasberry from the CDC. But first of all before we do that, I want to thank all of you for what you're doing. The virtual world that you inhabit now, that we're all inhabiting now, is still providing education, enlightenment and entertainment to a world desperately in need of it, and a lifeline to the rest of the world. And so what you're doing is enormously important, and if we can help you with information today about your collections, about your materials, about your future activities, we want to continue to do that. So look for us to develop not only the link to this webinar and to further information, but the CDC has promised us that they'll continue to let us mediate for them to the library, museum and archive worlds.

So today we've got Dr. David Berendes who is an epidemiologist in the waterborne disease prevention branch of the CDC who focuses on global sanitation and hygiene issues, and Dr. Catherine Rasberry who is a health scientist in the CDC's division of Adolescent and School Health.

I'm going to turn it over to Dr. Rasberry to start and then Dr. Berendes. And as I say, we'll be taking questions and we have a list of questions that I'll refer to after their presentations, but we're taking your questions online.

3:55

If you look at the question box, you can send your question that way and we'll try and get to as many as we can. So Dr. Rasberry, take it away.

**\*\*Dr. Rasberry:\*\*** All right. Thank you so much. So as he mentioned, my name is Catherine Rasberry and my usual job is in CDC's division of Adolescent and School Health. But right now I'm helping with our community guidance development team, which is part of a community interventions task force in our response efforts, and I've been really focused on some of the guidance for a variety of settings across the community, and certainly our museums and our libraries are critical setting.

So I want to first mention where you can find guidance that I think you will find most relevant for your organizations.

Right now we have guidance documents. I think three specific ones that will be of interest to you. So if you have a pen in your hand, you may want to jot these down. We have some guidance that's developed for community and faith-based organizations.

5:03

We have some guidance around large community events and mass gatherings. And we have some guidance around business and employers. I think you're sort of crossing all those different areas in the work that you do, most likely. And so those are key places where you'll find information from CDC on recommendations for addressing COVID-19 in your facility and in your work. So that's a sort of a starting point for you.

5:33

I want you know where you can find the information that I'm about to talk about. So everything we're discussing is sitting in those documents on our website. So you'll be able to look there for more information. So today, I want to really focus on a few key things.

5:48

We're going to start by talking about the importance of looking at any existing Emergency Operations plans. Then we're going to move into talking about preventive actions and how you can help promote those in your facility with your staff and with your guests. And we'll talk about social distancing as well. So we'll get into some specifics around social distancing and what you can do to help with that. We'll also talk briefly about the importance of thinking about groups at high risk for complications from COVID-19 across all those different pieces.

6:21

And then my colleague David is going to be able to speak to you more about some of the cleaning and disinfection related guidance. I know folks had a lot of specific questions in that area, so it'll be super helpful to hear from him. All right, so let me start at the beginning of things. I think one of the most important things for you to do at this stage, if you haven't already, and you may have, is to think about looking at your Emergency Operations plans. If you have these plans pull them out, dust them off.

6:52

I'm guessing many of you have done that already and keep in mind that your primary point of contact and your first stop always is going to be the local Health officials in your own community. We really think it's critical that you make sure you have ways to communicate effectively with the health department in your area. So that's local Health Department, potentially State Health Department as well. You may be doing that through a library system leadership team or through your local government or other folks within your structure organization. They're going to be critical for you to help you understand what types of strategies are most appropriate given the level of community transmission where you are.

7:38

Another thing that's important and maybe covered in your Emergency Operations plans is thinking about your sick leave policies. Not only do you serve a community; you also serve as an employer in many cases, and you want to look at your sick leave policies so that you can be in encouraging telework when it's possible. I certainly understand that not every staff member has a job that's appropriate for teleworking, but some may. Encourage that when you can.

Think about special considerations for your staff at high risk. So we know that some individuals, specifically older adults and individuals with underlying conditions, are at higher risk for severe complications of COVID-19, and so it's particularly important that you think about these staff and you think about ways you may be able to accommodate them to help protect them. And finally in your sick leave policies, one of the things you want to look for is to make sure that you have some flexibility to allow your staff to stay home when they're sick or if they're caring for sick family members.

One of the most important things that we want all people doing right now is to **\*\*stay home when they're sick.\*\*** That includes your guests, that includes your employees, right? We don't want people coming out into the community when they're sick. As you're looking at your Emergency Operations plans, I would also encourage you to make any updates that you need to. So make sure that you have contact information for all your employees.

9:09

Make sure you have plans in place to think about how you're going to communicate both with your employees as well as your community members at large. So if you decide to implement changes to your services or to your hours, or if you're closing your facility -- all those things you need to be able to communicate effectively and efficiently with the people that you serve.

9:29

We also want you to think about multiple ways to disseminate information. You likely do this already and you can likely use systems that you currently have in place for communicating with your community. So you may use website information, you might have phone trees or call numbers that you can use, or mailings that you can use as well. And one of the other really important pieces in your Emergency Operations plan is going to be some of the pieces that you have around cleaning and disinfection. Now, I'm going to pause and not talk about that here, because David's going to be telling us more about that in just a few minutes.

10:07

So those are some kind of overarching principles to think about in your Emergency Operations plan. Make sure you have a contact with your health department, you know who you'll reach out to and how. Make sure you have appropriate sick leave policies that really allow your employees to not be at work when they're sick or if they have to care for people who are sick, and make sure that you have updated ways to communicate effectively with both your employees and the people you serve.

10:35

Now another really important thing that you can do is to help promote preventive actions. So this can happen in a couple of ways. I think one broad way is that you can share information with people about important preventive actions. So when we say that, in general we're talking about things like hand hygiene.

10:54

So for example, we want everyone to be washing their hands with soap and water for at least 20 seconds, especially at these key times like after going to the bathroom or before they eat or after they blow their nose or cough or sneeze. We want people to know that if they can't access soap and water and as long as their hands are not visibly dirty, they should be using an alcohol-based hand sanitizer with at least 60 percent alcohol. So you can help communicate some of this just basic information to help people take care of themselves. You can promote that through your communication channels. You can also display it in your facility.

11:33

So in your restrooms, maybe you put up signs to remind people to wash their hands and to do it for 20 seconds, right? CDC has a variety of resources that you can use for this. We have some printable signs and posters, and we have the links to those sitting in the guidance that I mentioned a few minutes ago. We also want people to be using cough etiquette. So covering their coughs or sneezes with the tissue and then immediately throwing that into the trash. We want to remind people not to touch their eyes, nose and mouth.

12:04

Generally speaking, again, we want them, as I mentioned a minute ago, staying home when they're sick, keeping physical distance from people -- we'll talk more about that in just a minute. But again, reminding your staff, reminding your visitors, through both written communications that you provide as well as prompts and signs things like that in your facility to help people remember in the moment to participate in those preventive actions. It's also critical that you think about what they're going to need to be able to do that.

So for example, they can't wash their hands if there's not soap in the bathrooms, right? So you may want to more clearly point people to the restroom facilities and certainly make sure that you're stocked up on the supplies that you need to support these preventive actions. Soap, drying materials, tissues where guests can find them, trash cans nearby, that sort of thing.

13:00

Alright, let's talk a little bit briefly here about social distancing. So that's certainly one of the things that we're recommending people do to protect themselves and others. As a museum or a library, you'll find yourself needing to think about the types of activities that you typically offer and really thinking critically about which of those activities or services put people in close proximity to one another.

13:26

As you think about that, you'll then think about how to alter or reduce or suspend services or activities so that you can help ensure that everyone in your facility has appropriate physical distance between each other. And what we're going for here is six feet: the goal is to put **\*\*six feet between all people\*\***, in particular people from different households, right? So, for example, we've seen some folks in library communities as an example do this already.

13:56

I know that some of my local libraries have had virtual storytimes for children, particularly since so many of them are out of school right now -- well, learning from home right now. It may be that you typically have classes or speakers in your facility and some of those activities could be potentially transitioned to online settings. Remember that at times when your facility is open, you may want to think about what you can do in your physical space to help encourage that distancing. So for example, you might think about moving out some of the chairs at reading tables so that chairs are six feet apart, or move tables so that they're six feet apart.

14:36

So really what we want you to do is think about the guidance that we have right now about these key principles such as social distancing, and then think critically and creatively about how you can make those things work in your own facility and how you can make it easier for your staff and your guests to be implementing those key principles. We also know that as part of social distancing, it may be that you see additional interest in some of your online services. So for example, electronic lending or some of these virtual storytimes or virtual book clubs or speakers, and so you'll also want to plan for that potential increase in that online traffic and the interest in some of these online support services.

15:23

In terms of gatherings, I think most of you are probably aware that the president recently issued some guidance to help slow the spread. It was originally 15 days to slow the spread; that has now been extended through April 30th. In that guidance, they're recommending avoiding all social gatherings of less than 10 people. \*(Ed. note: probably meant "more than".)\* I think that's a good thing to keep in mind as you think about activities within your own facility. Always remember that your local health officials are going to be the people who are best positioned to offer guidance on what you should do in terms of gatherings. So when to postpone, when to restart, when to cancel or again when to resume that if you've had those canceled for a while. Your local health officials are really going to be key partners in all of your decision-making.

16:14

I think another thing to keep in mind is particularly as people are in your facility, you will want to think about having a plan for what to do if someone is symptomatic or becomes symptomatic. We have some more specific guidance about this that you'll find on our website, our guidance materials, but you will want to have a way to isolate them.

16:39

You may need a designated space to make sure that they can be separate from other individuals in your facility until they can go home. And ideally you don't want them going home using public transportation, right? So you have to think about that as well. That should be an important part of your planning process and thinking about how you may be able to physically remove someone who may have -- well that sounded a little harsh -- but separate someone who may have symptoms or become symptomatic when they're in your facility.

17:11

I think the other piece I want to mention related to social distancing is that a lot of what I've mentioned so far is about your guests, right? The people that you serve in your community. But you can also think about this from the perspective of being an employer.

17:26

So for example, think about how offices are set up and is there a way to increase the space between employees if they are having to come into the facility -- again, certainly encouraging telework where that's possible. Even if folks are in your facility, you may think about having meetings via phone or video conferences. Just because they're all in the same building does not mean they need to gather in the same room. So there are a lot of things, smaller things like this, that you can do to help make sure that even if your employees are at work that they are able to keep appropriate physical distance between each other. You may even think about the physical configuration of different locations within your facility.

18:07

I'm thinking like a check in or check out center, and think about if there are ways to put not only more space between your employees but more physical space between your employees and your visitors. All right. So those are really some key principles there. I think the idea of looking at your Emergency Operations plans, promoting preventive actions and thinking about social distancing across all the settings and across all three of those things. We want you to always be thinking about any extra accommodations you might need to make for people who are in that high risk group. Again, that's older adults and individuals who may have some other underlying medical conditions. Across everything you're doing think about those folks and what you could do to further protect them if appropriate.

18:58

All right. So I think that sums up what I wanted to cover in some of the key principles in our guidance and I want to turn it over now to my colleague David who is going to speak more about some of the cleaning and disinfection questions that I know folks have had.

19:20

**\*\*Dr. Berendes:\*\*** Thanks Catherine. So my name is David Berendes. In my home office, I work in the waterborne disease prevention branch as an epidemiologist in global low-income settings, as well as I serve as both domestically and globally as the hand hygiene reference point for community settings within the agency. Within the response, I'm actually working as the team lead of the Water Sanitation hygiene team within the same task force as Catherine -- that's the community interventions task force.

And so a lot of the work that we have been doing is around both hand hygiene as well as environmental cleaning and disinfection. I really want to touch on the main points of the environmental cleaning and disinfection work that we've been doing. If I give you any point today, the main point is: **\*\*clean and disinfect your high touch surfaces\*\***. That's the main takeaway I want everyone to get. That's the main focus that a lot of our guidance is built around and that's the principle you'll hear me come back to a lot as I talk you through some of the guidance.

Now similar to Catherine, our guidance is on the website in a few places and primarily you're going to want to look for guidance that we've developed for community Non-Health Care Organizations. We've basically separated out our guidance for environmental cleaning and disinfection into households, and then community non-healthcare organizations. The community non-healthcare organizations are divided into those that house and those that don't house people overnight, but a lot of that guidance still applies and so I will be able to send out those links as well, but I'll walk you through some of that guidance.

Certainly just to get a couple definitions down: when I'm talking about "cleaning", I'm talking about cleaning with a detergent or soap or something that's going to remove visible dirt, soil, things like that. "Disinfecting" is going to be me talking about use of an actual disinfectant: something that will kill the residual virus or germs that are present. So just to be clear on those definitions as well.

21:38

In terms of your routine day-to-day activities we're suggesting continuing to and in some cases, if you feel necessary, increasing the frequency of routine cleaning of hard non-porous surfaces that are frequently touched. So the hard surfaces like your railings, your doorknobs, faucets, light switches -- things like that. Those are going to be the surfaces that people touch the most, and they're also the surfaces that the virus could survive on longest.

22:11

So we'd like you to clean and disinfect those regularly. Again, the good news is that this virus is extremely susceptible to many of the typical disinfectants that your staff are already probably using. So while I'm going to give you a reference for a list as well of products that are approved by the EPA for use against coronaviruses, you'll find that that list is essentially many of the common household and commercial disinfectants you're already using. This is not a super-virus that survives for extremely long periods and is very resistant disinfectants. Quite the opposite. It's actually quite susceptible to most of our common disinfectants like bleach and alcohols and other things that you're used to using in your own household. So I want to put everyone at ease there as well.

23:01

In preparatory settings we're suggesting that you know, do this sort of routine cleaning and disinfection at least once a day if you can, and perhaps more often if you're able to based on the feasibility. We're then also dividing out our guidance and saying if you have a case, what should you do? So if someone shows up and is symptomatic or if you're concerned and you find out you have a case of COVID-19 in your facility, what should you do at that point? We suggest closing off the area the individual was most using. So if it was one of your staff, perhaps, and they have an office, the area where they were mainly working that day, close that off for as long as is practical. Ideally up to 24 hours, if you can. That 24 hours is not to scare anyone at all.

23:58

It's primarily to allow for any respiratory droplets that would be in the air to settle out. The reason why it's so long -- and that may seem very long -- is because when we were developing this guidance, we were developing it for very generally all community settings. We had to be sort of overly cautious.

In most library settings your air exchanges and the rate at which you have ventilation is going to be much quicker than, say, a stagnant car, which is kind of our worst case example where the air is just sitting there. And so, you know, it will

be much probably be much shorter than 24 hours. But if possible close off the area where that individual was for up to 24 hours.

You can open doors and windows to help ventilation, just to help the air move throughout and get air exchange going. Then after that period your janitorial staff can go in and clean and disinfect the frequently touch surfaces especially, but if you can, all surfaces. In terms of the surfaces or hard non-porous surfaces clean them with any bit of detergent or soap and water, then use a EPA-registered household disinfectant that are available on the EPA website under List N. Those are their disinfectants that are effective against the virus that causes COVID-19.

25:29

However, again, this is a virus that is very susceptible to typical EPA-registered household disinfectants, so we also include guidance on our website and as to how to make diluted bleach solutions, as well as guidance on use of other solutions like at least 70 percent alcohol solutions for electronics.

25:53

For soft or porous surfaces, like carpeted floors or rugs or drapes, if there's any visible contamination there you can clean those off and then you can launder them if possible, or try to find an appropriate product for that particular surface. For softer porous surfaces, we are not as concerned about those in terms of their transmission, just because the virus doesn't survive for as long and it's really hard to get the virus out of that surface. Once it's in a fabric, It's probably going to die off there. It's not going to re-aerosolize and get into individual's lungs at that point.

26:36

So we're really not concerned about that. For similar reasons -- I know a question many of you are concerned about -- we are not concerned at all about paper based materials like books being a transmission route. In fact in our conversations with election officials we encourage mail-in voting, and we're not concerned about mail or letters at all as a source of transmission at this point. So again for paper based products, we're really not concerned and you don't have to really worry about finding ways to disinfect those materials. The virus, if it's present, would be present in very low quantities and would die off pretty quickly. For electronics, we are suggesting definitely to think about disinfecting those because they tend to be high touch.

27:23

Those should be disinfected with either a product approved by the manufacturer or if there is no product available, no manufacturer's guidance, consider the use of alcohol-based wipes or sprays that contain at least 70% alcohol.

27:39

In terms of my final point will be around personal protective equipment that your janitorial staff would need: because of the fact that we're asking people to sort of wait in some of these in these areas before they enter a facility, that means that the only personal protective equipment that's required for janitorial staff is going to be that which is required by the disinfectant itself.

28:03

So your normal cover-all or other sort of gowns or Abram, whatever else you use; your daily cleaning equipment, as well as gloves. Disposable gloves if possible, but reusable gloves otherwise. We're not suggesting any COVID-specific PPE cleaners because of the fact that with our guidance we're allowing for this time period for the virus to get out of the air so the janitorial staff do not need to be worried about coming into the virus through their nose or mouth.

28:38

Again, after all of this cleaning, as Catherine mentioned, please emphasize also hand hygiene throughout this, especially after finishing cleaning. Then after that cleaning process, we feel like the area should be safe to reopen to everyone. That's the main guidance we want to communicate and across to you as staff and managers of these libraries and of these community facilities in terms of cleaning and disinfection.

**\*\*Crosby Kemper:\*\*** Craig, so shall we move to questions now?

29:22

**\*\*Craig\*\*** That sounds good Crosby.

**\*\*Crosby Kemper:\*\*** Okay, so, Dr. Berendes, one question that occurs to me and I imagine has occurred to a lot of librarians as you were speaking there towards the end is that you're not being worried about paper-based products. Some of us have read it's, been published in various locations, because I've seen it more than one, that the virus could exist for as long as 24 hours on paper on or in a book. I read you; I hear what you have to say as being counter to that. Can you talk a little bit more about how long the virus lasts or if it's just so weak on paper that we shouldn't be concerned about it?

30:16

**\*\*Dr. Berendes:\*\*** Sure. Yeah, so the survival is -- so there has been a study that was published that showed that survival of the virus on porous surfaces like cardboard lasted for up to 24 hours. However, that was under sort of ideal lab conditions is one point to emphasize, and also we don't know anything about then the virus's ability to then get back out of that surface and onto your hands or on to ... for you to come into contact with it in some way.

So we're much more concerned about the hard non-porous surfaces that are high touch, because the virus survives longer on them, but also because it's much easier for your hands to become contaminated with it after touching one of those surfaces.

31:05

So additionally, the only additional point I'll make also is that just in terms of the amount of virus that an infected person is shedding, we really believe that that would be ... that that shedding is going to be highest if an individual is symptomatic and coughing. So really for us to have been concerned about transmission from any paper-based material, the individual would have really had to cough or sneeze directly on the object, and, you know, really have contaminated it. The sort of regular use by individuals -- and hopefully no one is really sneezing into your books and things like that -- does not really concern us from that standpoint.

**\*\*Crosby Kemper:\*\*** So I think you know, I think I'm sure I speak for a Librarians and probably for Museum folks too, who have some paper based materials, we're pretty sure that with some regularity the people are sneezing on to our books. Of course the question would be how *\*recently\** they've sneezed on it. Do they sneeze on it right before they return it in the dropbox, or to the desk? If there is concern among librarians, which there is, about that particular circumstance, that an infected person can have discharged in one way or another onto a material, onto a book or a DVD or whatever it might be, what would you recommend if that is the concern? What is safe handling of that? If there is a 24-hour -- under ideal conditions -- possibility of the virus sustaining, should the books be quarantined for a day before they're brought into human contact?

**\*\*Dr. Berendes:\*\*** So I would say that one part of this would be on the front end educating your consumers, reminding them, as Catherine said, about good hand hygiene, about symptom monitoring, trying to make sure that people are not are not going out when they're sick and they're staying home. But also then if you are concerned you could -- if you're very concerned about books in particular, you could leave them for a 24-hour period. Again only if you're really concerned that someone was symptomatic with them during that during the period that they had the book.



33:47

I would also say that for DVDs or other materials that are more easily cleaned -- DVDs may have those sort of plastic covers, things like that -- those are pretty easily wipeable with alcohol wipes.

34:00

So if there is something appropriate for it, or I know in a previous conversation, we also had questions around books that had plastic or books that had Braille and had plastic sort of Coatings or so. Those types of services are going to be easy to disinfect and clean using for example an alcohol wipe of some sort. So that would be another way to deal with those other types of materials.

**\*\*Crosby Kemper:\*\*** Right, and then in terms of disinfectants, you've mainly been talking about alcohol-based disinfectants and there are a lot of materials, particularly some paper materials, that don't react well to alcohol base disinfectants. On the CDC website or in other places are there list of disinfectants that are not alcohol-based and that would be more appropriate for paper-based materials.

35:02

**\*\*Dr. Berendes:\*\*** So our website links to the EPA who it's really the EPA's purview to list out the cleaners and disinfectants that have met the criteria for effectiveness against this virus.

35:17

So that's the EPA List N that I was referring to.

**\*\*Crosby Kemper:\*\*** Okay, great.

**\*\*Dr. Berendes:\*\*** Cleaners and disinfectants are primarily -- and the majority of them are meant for hard non-porous surfaces again, so that's part of why ... that's also because that's what they're designed for. That's where most of the disinfection concerns are. There are some I believe that are appropriate for some porous soft materials, but it's more like fabrics and less like paper.

So again, you know, main principle being we're not very concerned about the virus getting out of the book or out of any sort of paper materials or things like that.

35:55

If you were really concerned you could wait for a 24-hour period in between lendings if you are particularly in an area of very high transmission, for example.

**\*\*Crosby Kemper:\*\*** Right. So the safest thing would simply be to wait for a day. So another question that has been asked, a lot of libraries have sensitive air handling, which you referred to before. Ozone systems -- does the CDC have a view of ozone systems?

36:32

Air purifying systems, on top of the normal HVAC kind of air handling systems, as to whether or not they offer some form of environmental protection?

36:48

**\*\*Dr. Berendes:\*\*** We don't at this point. Again, the EPA are the folks who sort of it's their purview to regulate make a

decision on what's effective and what's not effective. I do know that some of the ozonators have been used, I believe, but I would have to check the EPA list to ensure that they're on that list. We have been asked about that a few times, and the main kind of caveat I would add is that we want to make sure that people are going to use those systems. They're using them properly and they know how to use them. So that's not what it also be a reason why you may not see it appear on our community page because we might not suggest something super complex for the general public.

37:34

**\*\*Crosby Kemper:\*\*** Right. Um, yeah generally speaking, the time period for the crisis -- I think this is probably a question you can't very specifically answer, but we're getting guidance over this is for the I guess the length of time people need to prepare for the emergency response, we're being told now that we've got another 30 days until the possible end of the crisis. From a material point of view from rural public health point of view, the guidance around six feet of distance, et cetera., does that extend to the this 30-day period or will it extend beyond?

38:34

**\*\*Dr. Raspberry:\*\*** So I think it's reasonable to expect that even as places open up and people get out into their community more, that there's going to be need for continued social distancing for some period of time. Now what that period of time is, is going to be a question that is probably best answered by some of the local health officials in your own community.

39:01

We know that different communities currently are in different stages or levels of community spread, and that will likely continue to be the case. So, it will be really important to work with your local health officials to think about the strategies that are best used in your own facility and community. I do think it's appropriate to plan for social distancing for a more extended period of time, just to make sure that we're protecting staff and employees as best as we can.

39:33

How extended it is -- that's going to be a question that your health officials can help you with.

**\*\*Crosby Kemper:\*\*** Okay, great. A very specific question that we've been asked is about electrostatic spray as opposed to the normal disinfectants. Is that another question where we should go to the EPA or do you have a view of that? Is that something that could be used by museums and libraries?

40:04

**\*\*Dr. Berendes:\*\*** I know that there are some sprayers on the EPA list done because we have had a few questions on that. So they were listed as effective disinfectants. I don't know if those particular brands or products are, but there certainly are some spray-based materials that are on that list and I want to say there are about 250 or maybe even three hundred products on that list by now.

40:24

**\*\*Crosby Kemper:\*\*** Okay great, but we'll certainly link to the EPA on our site once we get that up and running. This is a fairly specific question as well. I think I know the answer but it's been asked and it'd be great to get an answer from you. Are there anything any particular things we should be looking for from materials that might come from outside the United States -- either things we might pick up from vendors, or materials that through international lending?

41:03

**\*\*Dr. Berendes:\*\*** Again, in terms of any materials that are coming in, best practices are practicing good hand hygiene

if you're the person receiving the materials, and then if you're very concerned, you know, you could let it sit for 24 hour period or so, but that's again not in our concern. We haven't been concerned at all about people shipping packages internationally, things like that, just because the virus is going to be very unlikely to survive for that long of a period through shipment and everything else and get to you in an infectious state of being.

But if you're very concerned, again, practice good hand hygiene in those settings. Have alcohol-based hand sanitizers with at least 60 percent alcohol and hand washing with soap and water available to the employees that are doing the receiving so they can practice it while they're doing that receiving and also have them avoid touching their nose and mouth during that time.

**\*\*Crosby Kemper:\*\*** Great, thank you. And then one other fairly specific question: a lot of museums and libraries have restaurants or cafes inside. Is there any more specific guidance than the general guidance you have given us that one would need closing down or re-establishing the activities of any food service in a museum or Library?

42:38

**\*\*Dr. Berendes:\*\*** Yeah, no, there's nothing essentially COVID-19 specific but we would refer those food services to local food code and sort of best practices for management in terms of shutting down, normal shutdown procedures, flushing of water based systems and pipes, things like that and then following their proper procedures for coming online just to avoid any other potential, you know, risks that come from leaving your pipes and other materials unattended for you know a few weeks on end. It also wouldn't be a bad idea to you know, just do another cleaning and disinfection of surfaces before you start and reopen.

43:25

**\*\*Crosby Kemper:\*\*** Right, and then I've got one other question that you've probably in a way already answered but it's fairly specific, So I'll ask it and I'll ask it in to two parts. Wi-Fi is available outside of many libraries, and even to some extent museums. And also libraries and museums encounter various groups who hang out in the library or even hang out outside of the library -- sometimes homeless or shelter populations etc. Is there any specific guidance you might have if that is the case for a library or museum? I.e. groups that might have a higher level of encountering the infection?

**\*\*Dr. Raspberry:\*\*** So I would say in general you want to think about the same things for the outside of -- *\*some\** of the same things for the outside of your space as the inside. I mentioned earlier the idea of posting some reminders and sort of visual prompts to help people remember those preventive actions and things like keeping a six feet away from people who aren't in their same household. You could put stuff like that outside of your facility as well.

44:48

We've seen examples in other settings where if -- let's say there's an area where you have tables or benches or something like that, you could go ahead and space those out potentially so that they are more appropriate distance from each other. Have those visual reminders. All those things are appropriate to try. If there are specific populations, like you just mentioned specifically homeless individuals, you may find some more of our guidance documents helpful for thinking about those groups.

45:18

So for example, we do have some guidance related specifically to homeless individuals. But again, I would encourage you to reach out to your local health officials and talk through any specific situation that you're dealing with at your facility or in your community so that you can plan together on how to best respond.

45:37

**\*\*Crosby Kemper:\*\*** Okay, great. I've run through the questions that we got before the webinar. Scott or Nancy, do you have some questions that have come in during?

**\*\*Scott:\*\*** Yes indeed, Crosby. Everyone is quite anxious to have some questions answered. One of them is how about a UV light as a disinfectant?

46:05

**\*\*Dr. Berendes:\*\*** Yeah, so that's a great question. I had again refer to EPA's list for guidance for disinfectants. And we do know that UV isn't -- the device may not be on there, but we have seen UV disinfection used in a couple different places and believe that it should be effective. But again EPA and others may have more guidance on that, but make sure that you're using it with the proper materials that it's appropriate for.

**\*\*Scott:\*\*** Okay, thank you. Another question comes regarding the volume of materials. The question is that "My library is unable to wipe down all DVDs and other mylar book covers it with hard services for these items. Would a 24-hour quarantine be enough time to make these materials safe or should we wait longer to make it safe for staff or patrons to touch it with their hands?"

47:12

**\*\*Dr. Berendes:\*\*** So again, I want to reiterate that, you know, under these ... even under sort of the current time period of transmission. unless you know someone was very visibly ill with a product or so paper is product we're not really concerned about that paper-based book or so being a transmission route.

47:35

However, if you were concerned about the book having something the virus on it, you could leave it aside for an up to 24 hour period which should be sufficient for that. For the DVDs or other products, if you're not wiping them down, again a 24 hour period should be fine. If you're a very concerned you can leave it for up to 48 hours, but 24 hours should be more than sufficient just based on the fact that, again, for a lot of these surfaces an incidental contact from someone is not going to be a very high transmission risk. It's going to be if someone was very sick on the material and had shed a lot of virus on it that would be of concern.

48:27

**\*\*Scott:\*\*** Thank you, David. Another question comes in asking about a disinfectant other than alcohol based, being benzalkonium chloride, or BAK. Is something like that except acceptable?

48:48

**\*\*Dr. Berendes:\*\*** Yeah, so the EPA ... so benzalkonium chloride as a surface disinfectant is one of the quaternary ammonium compounds, and there are several quaternary ammonium compounds that are listed on that EPA list. So you'd have to refer to that list in terms of the different formulations and what's effective there.

49:09

**\*\*Scott:\*\*** Okay, thank you. This one is a result is one of the practical matters for libraries. Quite often their book drops either are full or are locked, and so people end up leaving them sitting outside, and so in order to avoid an unsightly situation staff will bring them into the building. Is there a recommendation as to how staff may do that in a safe manner?

49:40

**\*\*Dr. Berendes\*\*** Again, I think we would just emphasize that the staff practice good hand hygiene after touching the books if they're concerned at all. So make sure they wash their hands with soap and water for at least 20 seconds or use an alcohol-based sanitizer with at least 60 percent alcohol.

**\*\*Scott:\*\*** Okay. Thank you ... scrolling through the large number of questions here ... bear with me one moment.

50:14

**\*\*Scott:\*\*** Validating that you did include cardboard with the paper-based products in your recommendation, correct?

50:24

**\*\*Dr. Berendes:\*\*** Yes.

50:26

**\*\*Scott:\*\*** Okay. It appears that the vast majority of the questions are similar. Let's see.

It says "If there is a shelter-in-place order in our state, would it be advisable to promote being outside to use Wi-Fi as long as we are posted at the 6-foot distance and other guidelines?" Similar question to what Crosby asked.

50:58

**\*\*Dr. Raspberry:\*\*** So I'm not totally sure about that. I've seen shelter in place guidance or orders I should say in different places that will often outline sort of what are essential services, and I don't know that that would fall under an essential service for every place.

So I think looking at your specific language in the order for your community, again talking with your local health officials would be pretty important. I would say that would supersede the 6-foot thing. I would *\*really\** talk with your local health officials to make sure that you have a clear understanding of what is and isn't allowed under a shelter in place order.

**\*\*Scott:\*\*** Thank you, Catherine.

**\*\*Dr. Berendes:\*\*** I'd also add that Catherine's point earlier about getting in touch with your local officials *\*early\** can help with getting on their radar. And if you feel like you're going to place where you want to be an essential service because there's so many people who rely on your Wi-Fi for things, or any other public services, then the earlier you can open those lines of communication the better off you're going to be.

**\*\*Dr. Raspberry:\*\*** Absolutely.

**\*\*Scott:\*\*** Okay. Thank you. I've got a question says "Some libraries have warming tents that deal with bed bugs. As a way to eliminate bed bugs, they heat things up pretty high. So would that potentially be good use for materials that have been exposed?"

52:39

**\*\*Dr. Berendes:\*\*** Without knowing the specifics -- I'm not familiar with those -- that sounds like an ingenious technique and I don't know that I could comment on the specifics of it. But we do know that the virus doesn't tend to like being a hotter environments. But again without looking the specifics I couldn't comment on that specific equipment.

53:04

**\*\*Scott:\*\*** Thank you. I think people are quite anxious about the 24-hour quarantine if it's enough for a safe circulation of Library materials. Is there a potential to perhaps restate that sir?

53:25

**\*\*Dr. Berendes:\*\*** Yes. So again, yeah the 24 hours -- and I want to emphasize -- is if you're very concerned about someone having gotten a lot of virus on a material. I'm talking about someone having coughed to physical mucus, large amounts of gross material on it. That would be of concern. We're more concerned about transmission through people being in close contact with each other, number one.

So being within six feet of each other, which is why we have the physical distancing. And then after that, contact with frequently touch surfaces, like doorknobs and railings and light switches and faucets and things like that. After all of those come other materials that people touch, but not as frequently, or the porous materials.

54:25

Again, the bad news is that those are harder to disinfect. So your only options, maybe if you're very concerned, is to leave them. But the good news is that those materials don't tend to retain as much virus, and if they do retain virus, it's very hard to get them out of out of there and so they're not really going to be a transmission risk. Again, we're not concerned about, you know, people doing mail-in ballots in States like Washington State when they were under high transmission orders or high transmission magnitude, and we aren't concerned about cardboard materials as well

So I want to just emphasize that you know, the 24 hours is only if you are exceedingly concerned under the most certain conditions, you can undertake that. I totally hear everyone's concern, but I do want to make sure that we reprioritize what we know is the most important transmission pathways, which is respiratory close contact with people, followed by touching frequently-touched surfaces. And then after that come the porous materials.

**\*\*Scott:\*\*** All right, thank you David. There's some general concern -- I guess in the media there's been a lot about the virus's ability to become airborne from clothes when shaken and moved around, and it may be a concern with Library materials as well. And so do you recommend personnel wearing masks during the disinfectant process?

55:55

**\*\*Dr. Berendes:\*\*** So if this is after contact or after you've had some sort of case in the area, that 24-hour period is going to get the virus out of the air so that you can walk around that space and clean it safely. Then of course when you're doing the laundry, we do recommend not to shake it so as not to have the potential to aerosolize the virus any more.

But no, there's no sort of recommendation around masks as PPE during laundry, we would only say that you make sure that you clean your hands well after handling any laundry that had contact with someone with COVID-19.

56:46

**\*\*Scott:\*\*** Okay, thank you. And then what about shoes? There's concern that the virus can be transported into a space on someone's shoes.

56:58

**\*\*Dr. Berendes:\*\*** Again, we're thinking about high-touch surfaces. And so we're not thinking about or concerned at this point about even if a virus was on shoes and got into an area. It wouldn't probably last very long in that area and there wouldn't be enough of it to get people sick, and there would be very few people who are coming into contact with the floor in that area. So that doesn't occur to us as a very high likelihood of transmission. And in other settings, for example in public spaces we're not suggesting disinfecting of sidewalks, things like that.

I know everyone's seen the pictures of everyone wearing all sorts of crazy PPE and spraying chlorine on sidewalks. We are not recommending that by any means we're just saying in public spaces clean your high-touch surfaces, your railings, your metal tables. Things like that.

57:57

But don't worry about the floor or the sidewalks themselves.

58:04

**\*\*Scott:\*\*** Well, thank you David. I appreciate that very much.

We're very close on to the end of time and I simply want to let everyone know that all of the questions that have come in we will be following up with our CDC panelists to provide answers on the [imls.gov](https://www.imls.gov) website. Crosby, do you have any parting thoughts?

**\*\*Crosby Kemper:\*\*** Yeah, I want to re-emphasize that this will be an ongoing interaction we've got with the CDC. Obviously we need to generate some information from the EPA on disinfectants for the special material needs in libraries and museums. So we'll keep that up. You can come to our website, I know we'll be sharing information with the Department of Education and others on their websites as well. So I'd urge you to continue to look for that information.

58:55

Also, I think one of the messages is good communication to and from your community and particularly with your local health officials is one of the most important takeaways from today's webinar. And I want to say a big thank you to Dr. David Berendes and to Dr. Catherine Rasberry for their participation today. We're really grateful that you would spend the time with us and give us this important information.

59:26

And thank you all out there for the work that you're doing.

59:33

And I think we're done.

**\*\*Nancy:\*\*** Thank you. That concludes our webinar. Thank you everybody.