To: Local Housing Authority (LHA) Executive Directors  
From: Ben Stone, Associate Director for Public Housing  
Re: Recommendations for Safe Reopening in Phase 3 & 4  
Date: July 29, 2020

WHAT YOU NEED TO KNOW NOW – KEY POINTS:

DHCD recommends the following procedures and protocols for LHAs:
1. Continue Phased Reopening Process, maintaining all mask wearing, social distancing, and hygiene protocols.
2. Cautiously resume most deferred activities in Phase 3.
3. Resume in-unit routine maintenance and inspections, with safety protocols.
4. Resume in-unit capital projects and provides updated relocation protocols.
5. No current change to lease-policy; reevaluate COVID-19 related waivers once in Phase IV.
6. Updated Office occupancy limits, and reopen offices to public once safety measures implemented.
7. Lift most visitor restriction policies while encouraging outdoor visitation and safety protocols.
8. Resume most in-person resident services in Phase III.
9. Continue holding remote public meetings; if necessary to have in-person, hold outside or in well-ventilated room that can accommodate social distancing.

Massachusetts continues to move through the phased reopening process as the Commonwealth makes progress in reducing the spread of COVID-19. Governor Baker issued an executive order on July 2 announcing that the Commonwealth would move into Phase III “Vigilant” on July 6. Phase III allows for resumption of more activities, including many businesses such as indoor gyms, indoor recreation, and museums, and somewhat loosened restrictions on activities allowed in Phases I or II. The reopening plan defers riskiest activities including bars, nightclubs, and large concert venues until Phase IV “New Normal”. Phase III will likely last substantially longer than Phases I & II, which lasted a total of 6 weeks.

This guidance is meant to clarify how the Governor’s Phase III guidance applies to Local Housing Authorities, and offer recommendations for ways to safely resume normal activities in Phases III and IV.

LHAs should start moving toward resuming most activities in a safe and vigilant manner. These activities include in-person resident services, in-unit maintenance, and in-unit capital projects. LHAs should continue, nevertheless, to maintain all face mask\(^1\) wearing, social distancing and hygiene practices

\(^1\) “Face masks” used throughout this document, but cloth face coverings are also acceptable.
while opening up their developments, and have contingency plans for returning to more restrictive measures should the public health situation deteriorate. The guidance below offers recommendations for how to resume these in-person activities in as safe a manner as possible while maintaining vigilance until we have a widely distributed vaccine. In most cases, LHAs may move more cautiously than the recommendations if they so choose.

Please be mindful of Local Board of Health (LBOH) advisories, which may be more restrictive than state-issued guidance.

DHCD may amend this guidance as the Commonwealth issues updated guidelines for specific industries and activities. Please refer to the Reopening Massachusetts website for more details; the state frequently updates the website with sector-specific guidance.

Phase Summary

**Phase I “Start”: May 18-June 7**
- Construction, Manufacturing, Places of Worship, and non-emergency Hospital and Health Care services allowed to operate with restrictions.
- Offices allowed to operate at up to 25% capacity.
- Public advised to stay home as much as possible, limited gatherings to fewer than ten persons.
- People over age 65 or with underlying health conditions advised to only leave home for essential errands.

**Phase II “Cautious” Step 1: June 8-June 21**
- Additional sectors allowed to reopen with restrictions, including in-person retail, outdoor restaurant seating, lodgings, and personal care.
- More outdoor recreation including athletic courts allowed, with restrictions.

**Phase II “Cautious Step 2: June 22-July 5**
- New, looser restrictions on previously permitted activities, including allowing indoor restaurant seating with restrictions.
- Offices allowed to operate at up to 50% capacity.

**Phase III “Vigilant” Step 1: July 6 (July 13 in Boston) – End date to be determined**
- Additional industries and activities resume operations with guidance, including gyms, indoor sports, movie theaters, museums, and indoor instructional activities.
- Indoor gatherings of up to 25 and outdoor gatherings of up to 100 allowed

**Phase III “Vigilant” Step 2: Dates to be determined**
- More indoor recreation activities allowed

**Phase IV “New Normal”: Dates to be determined**
- Development of vaccines and/or treatments enable resumption of “new normal”, including opening bars, large concert venues, and allowing large gatherings.

LHA Operations in Phase III

LHAs should continue to implement all of the [COVID-19 Specific Standards for Sectors Not Otherwise Addressed](https://www.mass.gov/dhcd).
LHAs, along with all other active businesses, must meet mandatory safety standards including:

- Maximum of 50% occupancy or 10 people per 1,000 feet of accessible space
- Ensure six feet of separation between workers/residents wherever possible;
- Limit any gatherings to 25 or fewer participants;
- Strongly encourage residents to wear masks when in common areas or otherwise likely to encounter other residents or staff;
- Require face mask for workers, including staff, service providers, and contractors: Wear masks while in occupied units, common areas, or otherwise likely to encounter residents or other staff;
- Frequent cleaning of common touch points;
- Post visible signage reminding workers and residents of safety protocols;
- Train workers on social distancing, hygiene, and self-screening;
- Provide access to handwashing facilities and cleaning products.

See below for specific guidance for LHA operations:

1. **Maintenance: Resume in-unit work and inspections with safety protocols**

   - As stated in [PHN 2020-11](#) and [PHN 2020-23](#), LHAs **MUST** continue to service emergency work orders using proper precautions.

   - DHCD recommends that LHAs **continue to** regularly clean and sanitize frequently touched points in common areas. (e.g., doors, handrails, bathroom surfaces and handles, counters, elevator buttons, etc.), at least two times per day, if possible. This cleaning should continue indefinitely, at least until there is a vaccine or Commonwealth otherwise signals a very low risk of COVID-19 transmission.

   - DHCD recommends that LHAs **resume** in-unit routine work orders in all developments.

   - DHCD recommends that LHAs **resume** annual unit inspections in all developments.
     - LHAs may **defer** inspections skipped from March 20 through July 31, 2020 until they are scheduled again in 2021. LHAs, however, must contact the occupant(s) of these units to establish there are no complaints of conditions that may endanger the health or safety of the occupants.

   - Maintenance should **continue** all COVID-19 related safety protocols and should proceed cautiously when going back into occupied units for maintenance work orders or inspections. Measures include:
     - Wearing face masks while in occupied units, common areas, or otherwise likely to encounter residents or other staff;
     - Opening windows to improve airflow;
     - Requesting residents wait outside unit or in separate room with door closed during work;
     - Sanitizing surfaces touched;
     - Asking (voluntary) health-screening questions of residents;
     - Washing hands before entering another occupied unit;
     - Ensuring any outside contractors adhere to above precautions.
DHCD recognizes that resuming inspections, continuing to quickly service emergency work orders and addressing a backlog of deferred work orders while adhering to the above safety precautions and continuing frequent cleaning of common areas may strain maintenance department resources. DHCD suggests the following measures to help maintenance prioritize work:

- **Through at least Phase III, LHAs may institute limited “health and safety inspections”** rather than full inspections to help address the backlog of maintenance work caused by COVID-19. These should include, at a minimum, the condition alleged to be in violation and all standards found in 105 CMR 410.750(A) through (O), including checks to make sure egresses are clear and compliant, tests of fire protection devices, and documentation of any other notable health and safety deficiencies. (See Attachments A&B) DHCD will accept these more limited inspections until further notice.

- DHCD expects that LHAs will perform at minimum a Health and Safety Inspection for **scheduled inspections going forward**, beginning one week from publication of this notice. LHAs have the choice of performing full inspections or the more limited health and safety inspection, depending on staff capacity.

- **DHCD will not require** LHAs to perform inspections during 2020 on units with inspections **deferred due to COVID between March 20 through July 31**. LHAs, however, must contact the occupant(s) of these units to establish there are no critical complaints. LHAs should catch up with these units on their scheduled inspection date in 2021. DHCD strongly recommends that maintenance staff perform a limited health and safety inspection if entering these deferred units for a routine or emergency work order.

- LHAs should track the inspection status and results of occupant outreach of each unit in their portfolio (e.g., either (a) performed before March 20; (b) deferred to 2021 due to COVID, or (c) performed after July 31, 2020).

- LHAs should perform an inspection on a deferred unit if the resident requests one.

- LHAs should **contact their DHCD Facility Management Specialist** for assistance in reviewing maintenance and inspection backlogs and developing custom work plans and modified inspection models that fit the needs of each LHA.

- As a reminder, DHCD is not issuing formal ratings for maintenance or any other area for the 2020 Performance Management Review (PMR) cycle.

2. **Construction: In-Unit Work may resume 4 weeks into Phase III; Maintain all Safety Protocols**

On May 18, 2020, as a part of the Phase 1 reopening, the State issued Workplace Safety Standards for Construction Sites. On June 22, 2020, DHCD issued PHN 2020-23, which contained additional guidance for how LHAs and contractors should implement these standards in state-funded public housing. The recommendations shown below modify the previously issued standards and guidance to account for greater leeway as we enter Phase III of reopening.

DHCD recommends moving forward with work in occupied units by design consultants and contractors with the following safety protocols.
Whenever possible, the resident(s) should be out of the unit while contractor or design consultant is working; at minimum resident(s) should remain in a different room of unit from workers with door closed.

Residents needing to be outside of their unit for the day must be provided with an alternate space that allows for proper social distancing and provided transportation if required.

All surfaces touched during measurement or work by LHA staff, designers, or contractors must be sanitized prior to resident returning to the unit.

The people that enter the unit must adhere to all workplace safety standards, including but not limited to, wearing face masks maintaining hand hygiene.

All contractors must wear masks in common spaces where they may encounter residents or staff.

Coordinate with contractors to minimize amount of time transiting through common areas.

The resident should wait at least 30 minutes after the worker has left the unit before returning to the unit.

Comprehensive modernization projects may proceed if relocation occurs. See below for relocation guidance.

Open windows to improve airflow if possible.

NOTE: This guidance applies to all contractors, design consultants, DHCD Architects and Engineers, DHCD Construction Advisers, LHA staff, and RCAT Project Managers.

Exterior work may continue as previously outlined in PHN 2020-23.

- **Relocation**: Large-scale relocations for comprehensive modernization projects may resume in Phase III, Step 1. The LHA should reach out to their local Board of Health office before any relocation occurs to discuss the relocation plan. All requirements of the standard tenant relocation guidelines are to be met, including reviewing plans with DHCD’s Relocation Coordinator, Maggie Schmitt. She can be reached at maggie.schmitt@mass.gov.

In all instances, DHCD will defer to the LHA as to the LHA’s comfort level before moving forward with any project type. For example, if the LHA wishes to continue holding off on all construction projects in occupied units for the time being, DHCD will support that decision. In addition, DHCD and LHA will comply with any local Board of Health requirements.

LHAs should note that while the state has allowed fiscal year 2020 funds to roll into fiscal year 2021, we do not anticipate that the Commonwealth will extend this flexibility past June 30, 2021, and delayed projects may displace future planned projects in fiscal year 2022.

### 3. **Tenant Selection/Move-ins: Proceed with lease ups, maintaining safety protocols**

DHCD recommends LHAs continue leasing up units to the extent possible, maintaining the social distancing and documentation practices recommended in PHN 2020-11 section 6 and safe move-in/move-out policies recommended in the memo to LHAs dated June 9. These suggested measures include:

- **Tenant Selection:**
  - Encouraging online applications;
  - Making paper applications and locked drop box available if office closed;
  - Verifying information by email or telephone;
• Using applicant document upload feature in CHAMP to reduce paper processing;
• Offering phone rather than in-person conferences and appeals;
• Showing units with social distancing protocols and requiring staff and applicants to wear masks.

Move-in/Move Out in Buildings with Common Entrances & Hallways
• Restricting move-in to specific times, and notifying residents to stay in their units while move-in is occurring;
• Utilizing LHA staff for coordination and oversight of move-in;
• Restricting number of people who can help the new resident move-in;
• Requiring and providing face masks and hand hygiene for those helping new resident move-in;
• Hiring professional moving companies if funding available.

LHAs may not require a negative COVID-19 test at move-in or discriminate based on health condition; however if an applicant volunteers such information LHA may accept it confidentially to inform services needed by that resident. If an applicant is unwilling to move due to COVID-19, LHAs may offer them a good cause refusal to maintain their waitlist priority and timestamp but should not hold the unit vacant for them.

DHCD will maintain for the remainder of Phase III the current policy allowing LHAs to request vacancy waivers if they have not set up a safe process for move-ins in a common entrance c.667 building. They may request this waiver as **Reason 8 – Staff Capacity**, noting specific reasons and development in comment. This waiver reason will no longer be available once the Commonwealth moves into Phase IV.

LHAs may also continue to request waivers for vacant units in Congregate settings, as these settings entail additional risks for COVID-19 transmission and vendors have been given permission to pause lease-up. LHAs may request these waivers as **Reason 4 – No c.667 wait list (inc. Congregate)**. This policy will remain in effect until further notice from DHCD.


**Reopening guidance as of Phase III Step 1** provides for a maximum occupancy of 50% in offices, with exceptions if the organization demonstrates a need for relief where strict compliance may interfere with the continued delivery of critical services. DHCD offered design recommendations in PHN 2020-24 for reconfiguring LHA offices to comply with these guidelines. Commonwealth guidelines also require that all staff and visitors wear face masks when social distancing of 6 feet is not possible in the office setting.

DHCD does not **require** LHAs to open office to the public until Phase IV, but **recommends** LHA open offices to residents and applicants by appointment (to discourage crowding) in Phase III once LHAs have reconfigured offices and adjusted operations to allow for social distancing. LHAs should post signage and require visitors and staff to wear face masks during all meetings.

LHAs should continue to encourage remote work and staggered schedules, especially for staff who do not need to interact with the public, where possible for the foreseeable future.

As previously stated, even if the office is not yet open to the public, LHA staff must remain available to residents by phone or email during normal business hours.
5. **Visitor Policies:** Work with Local Board of Health to lift Visitor Restrictions; Encourage Outdoor Visits

DHCD recommends that LHAs work with their LBOH to update and ease any current visitor restrictions for elderly/handicapped housing. In Phases III and IV LHAs may consider lifting the visitor restrictions put in place at the height of the pandemic, including those put into place following the guidance in PHN 2020-20. When lifting visitor restrictions, DHCD recommends continuing safe visiting policies including:

- Asking visitors and residents to wear face masks in all common areas;
- Encouraging handwashing, including offering hand sanitizer with alcohol content of over 60% at entrances if available;
- Facilitating socially distanced, outdoor visits, including adding temporary outdoor seating and shading if needed.

As always, LHAs should work with their Local Boards of Health on enforcing and updating these policies, and have a contingency plan to reinstate restrictions if the area’s COVID-19 caseload increases.

6. **Resident Services and Community Rooms:** LHAs may Resume In-Person Resident Services and Reopen Community Rooms, with Restrictions

In Phase III DHCD recommends resuming in-person resident services to the degree compatible with maintaining social distancing measures. These include wearing face masks, meeting in groups of less than ten, keeping six feet of distance, and providing services outside when possible and otherwise in well-ventilated rooms. This may mean that not all services/programs can be resumed as they were before COVID-19 and that some may not be feasible within the public health guidelines. Resident Service Coordinators and other providers should review guidance on indoor recreation and indoor events when restarting service programs.

DHCD recommends waiting until Phase III Step 2 to start in-person, indoor group services like indoor communal dining and even then, suggests limiting the number of people who are participating at once in order to comply with all social distancing guidelines.

For LHAs with small offices, consider offering community room space for one-on-one tenant meetings and/or setting up temporary outside space for office staff to meet with applicants/tenants. This could happen on a patio, side yard, private office parking space with a pop up canopy, table and chairs and wireless computer access. LHAs should take into consideration privacy concerns based on space constraints. If the development is a supportive housing site, consider working with your Elder Services provider to find alternative sites such as community rooms for their resident meetings that allow for social distancing.

LHAs should consider how to alter the outside spaces to encourage social distancing while outside. This can include marking off spaces that are six feet apart, removing seating that is too close together, and identifying places to hang signs reminding people to wear face masks while outside and unable to maintain social distance/remain at least 6 feet apart.

As per DHCD guidance for Phase I & II, Hair Salons were allowed to open with restrictions as of May 25. If your c.667 housing development has a hair salon on the premises, please read the reopening guidelines and call your housing management specialist to discuss if the salon will be able to safely operate in compliance with Commonwealth guidance.
Playgrounds and outdoor play spaces were also allowed to open with restrictions as of June 9, with guidance updated July 3.

LHAs may open community rooms in Phase III, but with the following guidelines in place:

- Post signage asking everyone in the room to wear a face mask. If property managers find visitors and residents do not adhere to face mask wearing, consider re-closing community room;
- Limit total number of people in the room such that they can maintain six feet between each person, with no more than 25 people in the room at one time;
- Limit occupancy to 8 people per 1,000 square feet or 25 people, whichever is less;
- Remove furniture/put up signage to encourage six feet of distance between people;
- Open windows/bring in outside air where possible, and consider temporarily using window fans to replace air conditioning in those rooms to improve airflow and reduce transmission risks.

If an LHA has used community rooms as cooling centers in the past, DHCD recommends working with the LBOH to assess how and if the room can safely be used by residents for cooling.

LHAs should continue to encourage social distancing, face mask wearing, and hand washing through signage and other communications to resident. In addition, Resident Service Coordinators should maintain the connections they created for virtual/online programming and services, so that the infrastructure built up these last three months is not lost and the LHA can again pivot to virtual programming and services should the need arise. This should include a plan to continue to call residents and offer support to them to meet immediate needs and try to address issues of social isolation.

7. **Board and Resident Meetings**: *Continue Remote Meetings or Hold Outside*

DHCD recommends that LHAs continue holding board meetings and other public meetings remotely through Phase III. See PHN 2020-16 for tips on how to hold remote public meetings that meet public access requirements.

Some LHAs have requested to resume in-person board meetings; DHCD recommends that if an LHA does feel need to hold in-person meetings that these meetings be held outside or in a well-ventilated room, and in all cases comply with face mask wearing, social distancing, and hand-washing guidelines.

8. **Contingency Planning**: *Have Contingency Plan to Reinstitute Measures in place at Height of Pandemic*

The above guidance assumes that the Commonwealth continues to make progress in reducing the spread of COVID-19. Unfortunately, as we have seen with the experiences in other states and countries COVID-19 will remain a threat at least until a vaccine is widely available.

LHAs should develop contingency planning for reversing the reopening phases if indicated by Governor Baker and the Department of Public Health. LHAs should plan for reinstituting measures described in PHNs 2020-23 (Phase I & II Reopening), PHN 2020-20 (Restricting Visitors), and PHN 2020-11 (Operational Guidance During COVID), including:

- Working with Local Boards of Health to re-issue visitor restriction orders
- Stopping in-unit construction and maintenance work with exception of emergencies
- Pausing in-person resident services, and resuming phone and video call check-ins.
• Closing community rooms
• Closing offices to public.
• Developing staffing contingency plans and mutual aid relationships with other LHAs in case of critical staff falling ill.
• Establish plans to address emergency repairs to ensure the health and safety of occupants.
• Identify means to provide temporary occupant relocation when necessary.

While we all hope that we never have to return to the measures implemented in March – May 2020, planning ahead for these measures will help LHAs quickly pivot towards a health and safety footing to protect residents and staff if necessary.

Please contact your Housing Management Specialist for any questions about this guidance.

Attachment A: **Health & Safety Inspection Instructions**
Attachment B: **Health & Safety Inspection Template**