



THE NATIONAL APARTMENT ASSOCIATION'S POSITION ON EBOLA

Updated 10/16/14 5:00 P.M. EDT

The outbreak of the Ebola virus is an unprecedented health situation for the United States due to the severity of the disease, even though officials have said there is an extremely low likelihood of contracting Ebola unless there is direct and unprotected contact with the bodily fluids of a person who is sick with Ebola.

The National Apartment Association recognizes that both members and residents have concerns over how apartment communities are dealing with it and in an effort to provide you with some guidance and information you should know to be prepared, we have compiled the following material from official sources.

It is important to recognize that NAA, its affiliates and individual members are not health care professionals. The CDC and other qualified health officials should continue to be the main source of the most-current information and guidance. However, we are comfortable sharing some general precautionary guidance from officials, and also adding some common-sense guidelines for our industry in the interest of promoting a proper amount of caution at this time.

We are staying on top of this developing situation. We are continuing to try to obtain very specific guidance unique to our industry from health officials and will also continue to monitor and update our website www.naahq.org with new information, as it becomes available.

CHECKLIST OF ACTION ITEMS:

1. When you learn a resident has been diagnosed with Ebola (or any infectious disease), do not direct janitorial or maintenance staff to the apartment. Immediately notify the local health department for guidance regarding appropriate measures to be taken by maintenance staff.
2. If you find you are involved in an Ebola case with a resident, please contact NAA's Vice President of Communications and Marketing Becky Sullivan at becky@naahq.org for further guidance.
3. Remain mindful that health concerns are not a reason to violate fair housing laws. If you have any concerns, contact your local health officials.
4. If you receive media calls, we recommend referring them to local health officials and the CDC, who are better qualified to answer their questions at this time.
 - Make sure your office has the proper contact information of the local health authority and/or the best CDC resources, to direct inquiries from local stakeholders.
 - We recommend a statement such as:

"We appreciate your call. It is wise for everyone to stay safe and to remain current with the most-recent guidance provided by health officials. That is why we ask that you direct your question to [LOCAL HEALTH OFFICIAL] or the CDC, who are on top of this situation."

- In an effort to better service our members, NAA would like to monitor media coverage. Please contact NAA's Vice President of Communications and Marketing Becky Sullivan at becky@naahq.org if you get any inquiries.

For any other issues notify your local health officials and contact NAA.

CURRENT CDC GUIDANCE ON COMMON QUESTIONS:

Note that this is the latest information from health officials as of 5:00 P.M. EDT, October 16th, 2014

1. Q. If someone in an apartment building is diagnosed with Ebola, will other residents become infected as well? What are the real risks?

At the present time, the risk appears to be contained to people with direct contact with a symptomatic patient, or that person's bodily fluids including saliva, mucus, vomit, feces, sweat, tears, breast milk, urine, and semen. We encourage you to visit the CDC website for updated information and safety precaution tips and we will update our website with any new information as it becomes available to us.

2. Q. Is Ebola transmissible through contact with contaminated surfaces like elevator buttons, stair railings and door knobs?

According to the latest information from the CDC, Ebola on dry surfaces such as doorknobs and countertops can survive for several hours. If you have any belief that your apartment has symptomatic people, try to avoid "common touch" areas by using a tissue or handkerchief. Also, wash your hands frequently and have bleach-based hand wipes available.

3. Q. What guidance should I offer custodial, janitorial and maintenance staff, who sometimes have to clean up vomit or urine?

We echo the public health officials by recommending an abundance of caution on these tasks. Ebola is most commonly transmitted through bodily fluids including saliva, mucus, vomit, feces, sweat, tears, breast milk, urine, and semen. Out of caution they should wear gloves, booties, protective glasses and surgical masks, but please note these are not official CDC guidelines. We encourage you to visit the CDC website for updated information and safety precaution tips and we will provide you with any new information, as it becomes available to us. If you suspect a resident has Ebola, contact your local health officials and the CDC for further guidance before advising staff on clean-up procedures.

4. Q. Is the Ebola virus spread through the air? Can Ebola spread by coughing? By sneezing?

Unlike respiratory illnesses like measles or chickenpox, which can be transmitted by virus particles that remain suspended in the air after an infected person coughs or sneezes, Ebola is transmitted by direct contact with body fluids of a person who has symptoms of Ebola disease. Although coughing and sneezing are not common symptoms of Ebola, if a symptomatic patient with Ebola coughs or sneezes on someone, and saliva or mucus come into contact with that person's eyes, nose or mouth, these fluids may transmit the disease.

5. Q. What does "direct contact" mean?

Direct contact means that body fluids (saliva, mucus, vomit, feces, sweat, tears, breast milk, urine, and semen) from an infected person (alive or dead) have touched someone's eyes, nose, or mouth or an open cut, wound, or abrasion.

6. Q. Does bleach kill the virus?

Ebola is killed with hospital-grade disinfectants (such as household bleach). Ebola on dry surfaces such as doorknobs and countertops can survive for several hours; however, virus in body fluids (such as blood) can survive up to several days at room temperature.

7. Q. How long does the Ebola virus remain contagious when in contact with an inanimate surface? How long does Ebola live outside the body?

Ebola is killed with hospital-grade disinfectants (such as household bleach). Ebola on dry surfaces such as doorknobs and countertops can survive for several hours; however, virus in body fluids (such as blood) can survive up to several days at room temperature.

8. Q. Is sweat contagious? What about other bodily fluids?

Ebola has been detected in blood and many body fluids. Body fluids include saliva, mucus, vomit, feces, sweat, tears, breast milk, urine, and semen.

9. Should gyms and fitness centers be closed?

(Dallas health officials answered this question directly) No, regular cleaning that all gyms and fitness centers undergo to prevent other infections and transmissions is more than sufficient.

We will regularly update our website www.naahq.org as new information becomes available.

For the latest guidance from national health officials, please visit:
CDC [World Health Organization](http://www.cdc.gov)

Please also contact your local health department. If your community is in the Dallas area please visit:

[Dallas County Health and Human Services](http://www.dallascounty.org/health)