

## COVID-19 & Libraries: Your Questions Answered

**Disclaimer:** This article is for educational purposes only. Information on COVID-19 is changing rapidly, and you should refer to the rules and recommendations of your local authorities and the Centers for Disease Control and Prevention for the most up-to-date information.

With all the uncertainties surrounding the COVID-19 pandemic, it's no wonder you have questions about how to reopen your library and expand your services safely.

To help you plan, we asked pediatrician and librarian Dr. Dipesh Navsaria to address your biggest concerns, including how to quarantine books, what protective measures are effective, how to serve vulnerable populations, and more.

Read his responses to your questions below to learn what you need to think about to keep staff, students, and patrons safe, and watch his full presentation on-demand at "COVID-19: Safety Tips for Reopening Your Library."



### Schools and Libraries

**Q: How long does the virus live on materials (paperbacks, books with Mylar covers, DVD cases, etc.)? There are conflicting sources on the matter.**

**A:** We don't know for sure since there is really a very limited number of studies on this. However, we have more information about respiratory viruses in general. Here's a really good discussion (that also links to the one key study on this particular virus) on the subject that I think will provide important context. I talk about this in the webinar at 29:29.

**Q: Should books be quarantined when they come back from homes? If so, what is the best way to quarantine books that come back from patrons' or students' homes?**

**A:** See above. You could quarantine for a long period of time ("long" meaning 7–14 days) if that's feasible, but a better idea might be to do a combination of brief quarantine (72 hours, perhaps?) with a wipe-down of the covers. Until we have better data on longevity of the virus, the quarantine will reduce the risk that a contaminated book will pose a threat to staff or other patrons.

Quarantine is pretty simple. Just leave it somewhere untouched by human beings.

**Q: If we quarantine books when they come back from users' homes, do they still need to be disinfected? If so, what are the best products to clean them?**

**A:** See above. If the outsides are Mylar or some other non-paper substance, "quat cloths" (Sani-Cloth® or other disposable disinfectant wipe brands) can be used to wipe down the outsides. You might also be able to lightly spray them with an alcohol solution, but you'll want to test that to make sure it doesn't cause inks to bleed. Check CDC guidance to see what they suggest and to find a list of EPA-approved disinfectants.

**Q: Does it matter what we quarantine books in (i.e., in bags, in bins, or on booktrucks)?**

**A:** No. Just leave it all alone! In fact, if your libraries have been completely closed down for more than one to two weeks, they're probably essentially virus-free because any virus that might have been there has died on all surfaces. I'd still wipe returned items down at least once, but that's out of an abundance of caution.

**Q: What is the value of masks, gloves, sneeze guards, hand sanitizer, and other protective measures throughout the library?**

**A:** It's not straightforward, because it also depends on how people do (or don't) use them properly. Washing your hands with hand soap or hand sanitizer is the best defense (aside from self-isolation and social distancing, of course). Face masks keep your droplets from spreading to others, or if there are droplets in the air from others, it reduces the risk that the virus gets into your respiratory tract. However, you still need to focus on washing hands and social distancing and not think wearing a mask completely protects you. When people wear gloves, they think they are somehow protected, but the virus does not get through your skin. You need to touch your face in order to give yourself an infection. If you have gloves on, you're going to move the virus around the same way you would on your hands, and people often do because they think they're protected. See the beginning of the webinar for a full discussion of each of these things.

**Q: Should we require patrons to wear masks to enter the library?**

**A:** Look to your local authorities and their recommendations. Right now, nationally we're being told that when you have to be in public places, you should wear a face covering of some sort. I think it's a good thing for your staff to do and to model for the public. Don't bother insisting on gloves, for all the reasons I mentioned above.

**Q: What is the best way to sanitize shared items such as computers or shelf markers?**

**A:** See above. Just like the outside of books, many computer keyboards and mice can be cleaned with disposable disinfectant wipes, as can shelves. Check CDC guidance to see what they suggest and to find a list of EPA-approved disinfectants.

**Q: Should we take temperatures before students or patrons come in the door?**

**A:** You could, but it's of limited value. Fever is probably a reason to keep someone out (because they are probably sick from something), but a lack of a fever doesn't mean they're not infected. Not everyone with COVID-19 exhibits a fever. Consider displaying a large sign that says something to the effect of, "If you have any signs or symptoms of illness, please do not enter." View the webinar at 22:26 for more on this topic.

**Q: Should we allow patrons or students to browse books? Then they are touching more than one book at time.**

**A:** A good question, and that will depend on what your local health authorities are recommending. In some ways, you might think of it as how your supermarkets are operating. There's no guarantee that a box of breakfast cereal you pick up off a shelf hasn't been touched by someone else, for instance. If you and your patrons are okay with that, books in a library are probably no different. If you're not okay with that, you might need to consider "closed stacks" and having books retrieved for patrons.

Having said that, use signage to encourage hand hygiene and remind people to not touch their faces.

**Q: Should we change our furniture layout to accommodate social distancing?**

**A:** Yes, until we're being told we do not need to social distance as much. Remove chairs or put an X on them with tape with signage saying they are off-limits. That should help keep your staff from having to constantly enforce social distancing rules.

**Q: How do we handle students or patrons who don't follow social distancing rules?**

**A:** The same way you would handle any other infraction of the rules you have set up. Be kind, be compassionate, and try to de-escalate whenever possible — and make sure you're backed up by your local authorities.

**Q: What extra precautions do we need to take with staff who are older, have pre-existing conditions, or are pregnant?**

**A:** If they're high risk, yes, use extra precaution. But this depends on their condition and risk and really should be discussed between the staff member and their health care provider, just like any other health concern. Guidance for whatever accommodations are necessary should then be provided by said health care provider. Work with your HR department to do so.

**Q: What is the best way to stop the spread of the virus in public restrooms? Do they need to be disinfected between every visit? Are hand dryers better than paper towels? This could become costly; should we keep them closed?**

**A:** You do not need to sanitize a bathroom after every use; it's just not practical. Place hand sanitizer outside the door, and display some signage guiding people to sanitize their hands before entering the bathroom. There's no reason to replace paper towel dispensers with hand dryers for this virus (plus, there is conflicting evidence on which is more hygienic). People should have just washed their hands, after all. See the webinar at 37:30 for more discussion about bathrooms.

**Q: How safe are water fountains? Should we discontinue their use?**

**A:** We have no evidence that this virus is spread by water fountains, but if someone spits into the water fountain spout I suppose there could be some spread. The flow of water probably keeps those self-cleaning. Some children seem to have difficulty with water fountains, and will put their mouth on the spigot, but I would also hope their parents would be discouraging them from using public water fountains at this time. I don't think it's a must unless you think it's an issue of how patrons perceive your library.

**Q: How can we deal with changing CDC and state guidelines? We are talking about creating a game plan, but what would be the best way to build in shifting recommendations?**

**A:** Welcome to our lives in health care. 😊 Write your plans, and then assign someone to monitor said guidelines, and plan to re-meet if they change. You might do well to work with other libraries so that there's only one or two people who are keeping tabs and then alerting other libraries.

**Q: If a person has the virus and a doctor says they can go back to work after the quarantine, is this person still a risk to people they come in contact with?**

**A:** The best evidence we have is that after 14 days, they are no longer infected and spreading virus in the overwhelming majority of cases.

**Q: Do we need to be concerned about ventilation systems at home or work? How frequently do we need to change HVAC filters?**

**A:** We have no evidence the virus lives in ventilation systems. Don't change filters any more often than you typically would.

## **Public Libraries**

**Q: How can we do curbside pickup at our library safely?**

**A:** Think through what you can handle. It could take many forms, but for instance, you could have patrons show their library card through their car window and pop their trunks. The library worker would then place the items in the trunk and close it. If you need to roll down the window to take the card, then you work that out and wear a mask. There are a lot of different ways to do no-touch service. If you have a lot of people wanting to use the service, consider an appointment system. Whatever you do, ensure good hand hygiene. I talk about this in the webinar at 34:37.

**Q: What is the safest way to handle pickup and delivery of library items to homebound patrons?**

**A:** This is similar to my answer above for curbside pickup. You can drop books at the front door and then text or call to let the patron know. They can leave them at the door for you to pick up when they're done. And, follow good hand hygiene procedures. I talk about this in the webinar at 35:48.

**Q: How do I provide outreach services to vulnerable populations, such as daycares or senior centers?**

**A:** You may choose to have your staff do health screenings before doing outreach. Make sure you have a humane sick leave policy to ensure staff is not penalized for staying home when ill. If you're sending them where there are vulnerable populations, make sure staff has masks and hand sanitizer. Tell the location in advance that you will be practicing social distancing, and outline what you'll be doing and how you'll be doing it.

**Q: How many people should be allowed in the library at once? Should there be a limit on how long they can stay?**

**A:** We have no data on how many people should be allowed in a public place or for how long. You will have to base your decision on your local authorities and how much circulating virus there is in your area, along with what maximum capacity will still allow proper social distancing. Just because your area says you can have, say, 50 people in a place at a time does not mean you have to go up to 50. If you think you need to set a lower limit to accommodate social distancing, that should be your decision.

**Q: What is the best way to serve patrons at the reference and circulation desks safely (i.e., Is there a safe way to handle library cards and money)?**

**A:** Plexiglass shields can make a difference to prevent droplets from reaching you. Gloves aren't really necessary if you're practicing good hand hygiene between transfer of library cards and materials. In healthcare we use surgical masks and face shields. Plexiglass can be more welcoming and easier on your staff. You'll also want to put hand sanitizer prominently in all sorts of locations. Place Xs or other markers on the floor to show people where to stand. I talk about safety at the circulation desk in the webinar at 26:39.

**Q: We loan out toddler kits containing hand puppets, toys, puzzles, books, and music. Can you suggest the best way to circulate these safely?**

**A:** That's a trickier one — I'd suggest that they be carefully cleaned (see above) and quarantined (the kits, not the toddlers 😊) once returned. Honestly, you might find most parents don't even want these for a good long time to come.

**Q: What is the best way to manage our children's area? Should we put away all the toys and just leave books out? What about wall-mounted manipulatives or headphones on the children's computers?**

**A:** Children will touch things, their faces, and each other. The fewer objects you have for touching, the fewer chances that they become fomites (inanimate objects allowing disease transmission). Maybe the children's areas are the last areas to open because social distancing is almost impossible to enforce in a meaningful way. See discussion about children in the webinar at 39:19.

**Q: When will it be safe to do in-person storytimes with children and caregivers all in the same room? Should we host summer programs? If so what are the best practices/safety criteria?**

**A:** We don't know, and it will depend on your local conditions and local authorities and also on how well you can accommodate social distancing. It also depends on how you run your program and the accommodations you can make.

**Q: Should mobile library services and bookmobiles, which are smaller, contained spaces, be suspended for now?**

**A:** Those can be really confined spaces, so you might not be able to have more than one or two people in there at once. At the same time, these services can be lifelines for so many communities. Maybe you do something that is more open air or you have people place holds and you bring materials to them; maybe you bring small, portable carts outside with some good spacing. Think creatively.

**Q: Can you give insight into whether we should be filling little free libraries? Are we just encouraging multiple people to touch items in a short time frame?**

**A:** Good question. You are encouraging people to touch items, but it depends on how heavily LFLs are used (some don't get touched more than a couple of times a day). Also, I do think people need to exercise some judgment — taking responsibility for their own hand hygiene when using an LFL and cleaning or quarantining a book is something they could do themselves.

**Q: Does it make sense to do a phased approach to opening the library back up (i.e., start with curbside pickup, then limited patrons, then open the children's area back up?).**

**A:** I think this approach makes a lot of sense. Start with something that is the most remote, such as virtual services, and then move to something like curbside pickup. Maybe later you open certain small areas of your library. Exactly what that will look like will depend on the size, layout, and so on of your library. See where I talk about this at 25:33 in the webinar.

**Q: What is the best way to serve the homeless population, who might not have access to masks and sanitizing facilities?**

**A:** Collaborate with your local authorities, who should have other options for services for homeless individuals and families — everyone's going to have a different solution. See discussion in webinar at 42:29.

**Q: How do we handle patrons who either can't or won't comply with standard practices that are put in place for staff safety, such as wearing masks when they enter our library?**

**A:** See above — the same way you handle any other infraction of rules.

## **School Libraries**

**Q: How many students should be allowed in the library at once? Is there a way to keep students from gathering too closely?**

**A:** The number depends on your local guidance. And as for how to keep them apart — to a certain extent, you have to decide whether it's even feasible to try, depending on the age of the children. It may cause more frustration to try to keep them apart or remind them. I'm sure there are creative ways to think about this, but this may be a futile hope. Look at what your school is doing in their classrooms. Maybe smaller groups come at a time. Reminders for good hand hygiene and no face touching can help, but kids are kids. Give kind, polite, gentle reminders.

**Q: How do we help children as young as 5 understand social distancing and actually practice it?**

**A:** See above.

**Q: What is the best way to sanitize makerspace materials (robots, Legos, etc.)?**

**A:** Follow CDC Guidelines for disinfecting a variety of items.

**Q: Should checked out books be limited to use in school to avoid contact with family members who might unknowingly be infected with the virus?**

**A:** Given that the students themselves could be asymptotically infected, I don't know that limiting the books to in-school use only would offer a major benefit over taking the books home. You probably should be considering quarantining or cleaning in either case.

**Q: What is the safest way for students to have snacks and eat lunch in school?**

**A:** This depends on what's happening in your community. Many places are doing a minimum of 6-foot spacing. Lunches may need to be done in classrooms. How long you need to do it will depend on your local authorities.

**Q: If students browse the shelves, touch the books, or use shelf markers, how can I assure students that there won't be transfer of coronavirus?**

**A:** You don't. Nothing is 100% guaranteed. Taking it upon yourself to ensure that no student is asymptotically infected, touching their face without thinking about it, and transferring the virus to shelves where someone might touch it, and that no other students are then touching their face and infecting themselves, is a vast responsibility. If the students are of an age where you think this is more than a minimal risk, then you may need to not allow free browsing until this pandemic is completely over. You may need to think of other ways to serve them, such as having kids log on from their classrooms and place holds, and then deliver the items to them.

**Q: Children have traditionally browsed through library shelves freely to select books for checkout during their library time, using shelf markers. Should librarians instead select a limited number of books to display for children to choose for checkout to prevent students from mingling in the stacks?**

**A:** See above. That might be what you need to do. Trust your judgment on what you decide to do on this.

**Q: If feasible, should schools utilize reading on digital devices using subscriptions such as myON or Epic, rather than checking out hard copies of books weekly during this time?**

**A:** That all depends. If you can easily get books to students safely and can clean and quarantine them when they're returned, I don't think you need to go to digital devices 100%. Not everyone finds reading on devices pleasant or meaningful.



#### **About The Author**

##### **Dr. Dipesh Navsaria**

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Dr. Navsaria is a pediatrician working in the public interest. He blends the roles of physician, occasional children's librarian, educator, public health professional and child health advocate. With graduate degrees in public health, children's librarianship, physician assistant studies, and medicine, he brings a unique combination of interests and experience together. An associate professor of pediatrics at the University of Wisconsin School of Medicine and Public Health and is director of the MD-MPH program there as well as the medical director of the physician assistant program. Clinically, he has practiced primary care pediatrics, with special interest in underserved populations. He is the founding medical director of Reach Out and Read Wisconsin. Dr Navsaria is heavily involved in both training and in the practice of child health advocacy — writing and speaking publicly locally, regionally and nationally on early brain and child development, early literacy, and advocacy to a broad variety of audiences. He also has extensive involvement with the American Academy of Pediatrics at the state and national levels. You can find Dr. Navsaria on Facebook and on Twitter.