

Approved: 6 June 2020



Post-COVID-19 Remobilization of the Membership Plan

Phase I: Resuming Regularly Scheduled Meetings

AKWG
Completed 04 JUNE 2020

Template Updated 12 May 2020

COVID-19 Remobilization of the Membership Plan – Phase I

This plan has been developed for Alaska Wing, using the template provided by the Civil Air Patrol National Headquarters to enter Phase I, Resuming Regularly Scheduled Meetings.

NOTE: Deviations from the template are authorized, but should be coordinated by contacting the COVID-19 Planning Team at COVID-19Plans@capnhq.gov.

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Narrative Summary of Coordination and Events To-Date in Alaska Wing:

Alaska Wing has monitored the situation both as a ES partner in the SEOC and as citizens living and working in the communities spread across the expanse of the state of Alaska. Alaska is in a unique situation; we have a total population of 731,500 spread over 63,300 square miles, and have lots of room for social distancing. To date we have had a total of 513 Alaskans tested positive for COVID19 and, sadly, ten have died. Anchorage, our largest city, has 291,500 people and four deaths, our capital city has had two deaths. Due to rapid restrictions placed on travel and public bans on gatherings early on, counts have been low and community transmission held at very low levels (Alaska has the lowest number of COVID-19 cases in the United States). As a result, our governor has lifted mandates as a part of Alaska COVID Response Phase 3/4 and reopened businesses including dining establishments state-wide on 22 May 2020. Being that AKWG headquarters is on a military base, we have DOD guidelines as well as CAP guidelines to adhere to – and the installation has reduced its posture from HPCON C to HPCON B as of 29 May 2020. AKWG will monitor at the local level by borough. Any changes in status will be reported and risk mitigation measures put in place. Upon approval from NHQ, the AKWG/CC will provide guidance to the unit commanders and staff to reopen unit meetings and activities in accordance with the attached ops plan and informational memos. The AKWG will continuously monitor the evolving situation and will take appropriate action to pause or withdraw approval to reopen units on both a systemic and case-by-case basis.

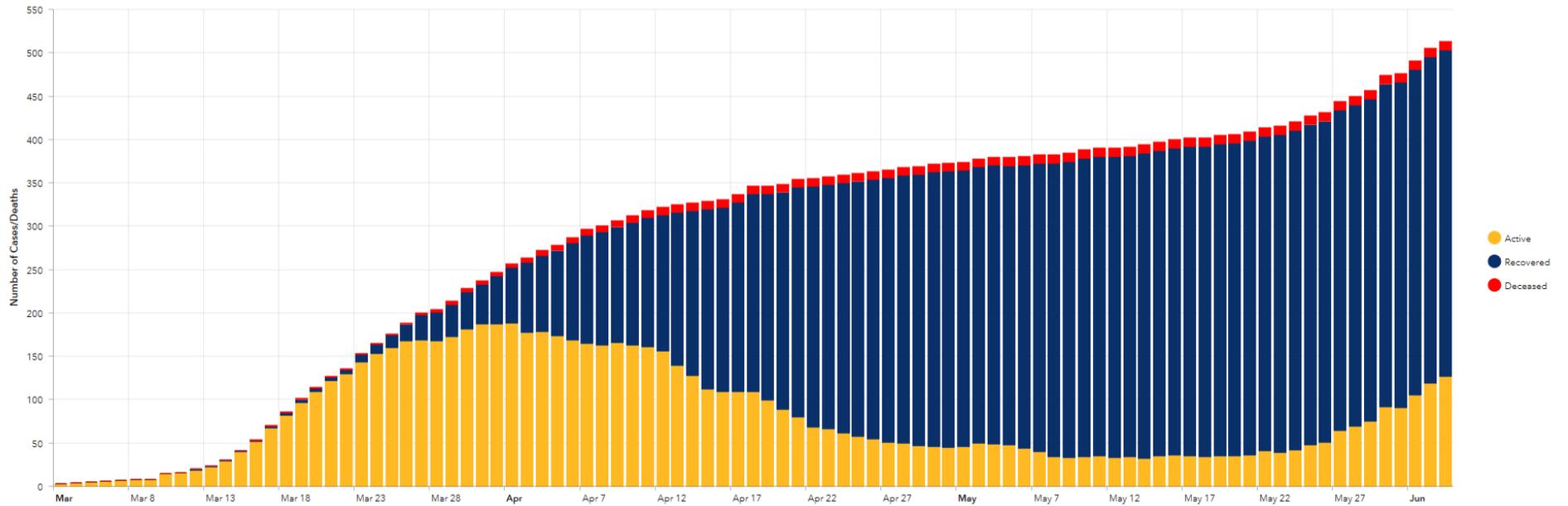
Alaska Wing proposes to enter Phase 1 NLT 10 June 2020 and Phase 2, assuming conditions remain on this positive track on/about 24 June 2020.

Plan Completed By: SMSgt Goedert
Last Updated: 4 June 2020
Template Updated 12 May 2020

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AK COVID-19 Cumulative Cases by Death, Recovered, and Active Status

Cumulative Cases by Death, Recovered, and Active Status



COVID-19 Remobilization of the Membership Plan – Phase I

Phase I: Resuming Regularly Scheduled Meetings

Item#	Task	OPR/Assigned Personnel	Date Tasked	Suspense	Date Completed	Notes
1.1.	Verify state government guidance currently allows or will allow gatherings on the date proposed for resuming meetings (Review of overall directives in impacted state)	Maj Sammons	18 May	20 May	20 May	Proposed meeting/training resumption 10 June 2020. State guidance allows gatherings and is less restrictive than CAP Phase 1 guidance.
1.2.	Hold meeting with between Plan Coordinator and Health Services Officer	Maj Sammons	18 May	20 May	20 May	Leadership and HSO confer bi-weekly.
1.2.1.	Wing priorities for training events should be coordinated	Lt Col MacPherson	18 May	20 May	20 May	Refer to Ops Plan (POC: AKWG/DO)
1.2.1.1.	Check state and local health guidance regarding gatherings (Review of each jurisdiction impacted by this plan)	Maj Sammons	18 May	20 May	20 May	State guidance allows gatherings and is less restrictive than CAP Phase 1 guidance.
1.2.1.2.	Prepare information for subordinate units on temperature screening, health education, and sanitation	Maj Sammons	18 May	25 May	24 May	See AKWG/CC Memo, includes screening.
1.2.2	Consult with Wing Legal Officer about resuming meetings	Lt Col Goering	21 May	open		AKWG/JA Concurr with Ops Plan
1.2.3	Coordinate with Wing Director of Safety	Maj Siebe	20 May	20 May	20 May	AKWG/SE Concurr with Ops Plan
1.2.3.1	Verify proper risk planning tools are available to units	Maj Siebe	20 May	23 May	23 May	See AKWG/SE Information Memo
1.2.3.2	Prepare to communicate with subordinate units on Safety-related matters (see 1.7. below)	Maj Siebe	20 May	23 May	23 May	See AKWG/SE Information Memo
1.2.4	Coordinate with Wing Director of Cadet Programs	Capt Bratton	18 May	2 Jun 20	2 Jun 20	See AKWG/CP Information Memo
1.2.4.1	Prepare recommendations for units regarding meeting activities and alternatives to maintain optimal distance while at meetings	Maj Sammons	20 May	27 May	25 May	See AKWG/CP Information Memo
1.2.4.2	Prepare bullets for units to incorporate when sending messages to parents about the resumption of meetings	Capt Bratton	20 May	27 May	25 May	See AKWG/CC & AKWG/CP Information Memos

COVID-19 Remobilization of the Membership Plan – Phase I

Phase I: Resuming Regularly Scheduled Meetings (Continued)

Item#	Task	OPR/Assigned Personnel	Date Tasked	Suspense	Date Completed	Notes
1.3.	Have subordinate unit commanders verify that local governments do not have more restrictive social-distancing guidelines than those at the state level	Maj Sammons	20 May	22 May	22 May	No Boroughs have more restrictive guidance than AK State, will continue to monitor.
1.4.	Send copy of planning documents to the CAP COVID-19 Planning Team at COVID-19Plans@capnhq.gov , and copy the Region CC to reinstate meetings.	SMSgt Goedert	20 May	4 Jun 20	4 Jun 20	Accomplished 4 Jun 20
1.4.1.	Briefly describe/ summarize previous coordination accomplished	SMSgt Goedert	20 May	4 Jun 20	4 Jun 20	AKWG staff coordination across directorates to research CAP, Federal, DoD and SOA guidance.
1.4.2.	Verify no jurisdictional restrictions are in place from State or Local Governments	Maj Sammons	18 May	22 May	22 May	None in place.
1.4.3.	Set date to resume meetings; this is also the start of Phase II.	SMSgt Goedert	18 May		25 May	10 Jun 20 Phase 1 Meeting Start Date; 24 Jun 20 Phase 2 Meeting Start Date IAW State and CAP guidance
1.5.	Receive approval from the CAP COVID-19 Planning Team to reinstate meetings. Plan for one-week lead time.	SMSgt Goedert	418 May 20	10 Jun 20	TBD	Anticipating 10 Jun 20
1.6.	Publish the date that meetings may resume to subordinate units	Colonel McClure	18 May	10 Jun 20	TBD	Anticipating 10 Jun 20
1.7.	Task Wing Director of Safety to communicate the following to subordinate units	Maj Siebe	18 May	10 Jun 20	TBD	Refer to AKWH\G\CC Info memo & SE Plan
1.7.1.	Units will review CAPFs 160, 160S, and 160HL to be sure COVID-19 risks are considered and mitigated	Unit Commnaders Maj Siebe	20 May	10 Jun 20	TBD	Refer to AKWH\G\CC Info memo
1.7.2.	Unit Safety Officers s will emphasize continued use of face coverings, gloves, and hand sanitizer, as well as social distancing, hand washing and surface cleaning/disinfection	Unit Safety Officers Maj Siebe	18 May	25 May	25 May	Reviewed as a part of 4 Jun 10 AKWG Command & Staff Meeting; refer to AKWG\CC Info memo
1.8.	Task Wing Health Service Officer to communicate the following to subordinate units:	Maj Sammons	18 May	25 May	25 May	Ref to AKWG\CC & CP memos and attached guidance.

Plan Completed By: SMSgt Goedert

Last Updated: 4 June 2020

Template Updated 12 May 2020

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COVID-19 Remobilization of the Membership Plan – Phase I

Phase I: Resuming Regularly Scheduled Meetings (Continued)

Item#	Task	OPR/Assigned Personnel	Date Tasked	Suspense	Date Completed	Notes
1.8.1.	Units will ensure no members or guests with a temperature of 100.4 or greater are admitted (a temperature at or above 100.4°F is the CDC recognized point where there is a fever). Units will require members to take their temperature at home or may screen with no-touch thermometers prior to entry.	Unit Commanders Maj Sammons	20 May	10 Jun 20	4 Jun 20	Ref to AKWG/CC & CP memos and attached guidance. Information reviewed at 4 Jun 20 AKWG Command & Staff meeting and will be reiterated at subsequent command and staff meetings.
1.8.2.	Educate members on their stratified level of risk (i.e., Low-risk vs. High-risk)	Unit Commanders Maj Sammons	20 May	10 Jun 20	4 Jun 20	Ref to AKWG/CC & CP memos and attached guidance. Information reviewed at 4 Jun 20 AKWG Command & Staff meeting and will be reiterated at subsequent command and staff meetings.
1.8.3.	Units perform all appropriate public health measures (e.g., social distancing, surface cleaning/disinfection, face coverings, hand sanitizer, at-home temperature check or no-touch temperature check prior to entry and routine symptom checks)	Unit Commanders Maj Sammons	20 May	4 Jun 20	TBD	Ref to AKWG/CC & CP memos and attached guidance. Information reviewed at 4 Jun 20 AKWG Command & Staff meeting and will be reiterated at subsequent command and staff meetings.
1.9.	Task Wing Director of Cadet Programs to communicate the following to subordinate units:	Capt Bratton	22 May	27 May	4 Jun 20	Ref to AKWG/CP memos and attached guidance.
1.9.1.	Units identify ways to meaningfully engage and fully participate in meetings without formations, drill, or other close-distance activities	Capt Bratton Unit Commanders	22 May	27 May	26 May	Ref to AKWG/CP memos and attached guidance.
1.9.2.	Units draft a local message to parents to inform them about what CAP is doing to keep Cadets safe while they participate	Capt Bratton Unit Commanders	22 May	27 May	25 May	Ref to AKWG/CP memos and attached guidance.



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4 Jun 20

MEMORANDUM FOR RECORD

FROM: AKWG/CC

SUBJECT: COVID-19 Remobilization Operations Plan (Phase 1)

1. Participants: All AKWG units for the period directed by the AKWG/CC.
2. Situation: Pandemic Threat
 - a. COVID-19 is a novel coronavirus that has caused a global outbreak and associated public health declarations including social distancing, protective equipment, and an increased focus on hygiene. Because of the variation in impacts and legal restrictions across the various states, there is no one-size-fits-all response for the Civil Air Patrol to use in this situation. The Centers for Disease Control and Prevention has published a general FAQ about this disease on their website: <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>.
 - b. Federal, state and local governments will continue to enact proactive steps that slow the spread of the disease, while carefully balancing other considerations for easing restrictions. The potential for disease resurgence and breakouts will likely necessitate the need to implement further restrictions or retrograde to earlier phases.
3. CAP Organizations and Government Partners
 - a. HQ CAP Mission: Civil Air Patrol Wing Commanders will proactively make their Wings ready to resume operations in accordance with CAP, local, state, and federal guidance. A phased-approach, based on the White House "Opening Up America Plan" will help align efforts across Wings and Regions, and communicate where personnel are in the process to returning to a post-COVID-19 "normal" operations tempo.
 - b. State and local governments: On 22 May 2020, the State of Alaska lifted restrictions on businesses and moved into Phase 3/4 of recovery.
4. Mission - On order, Alaska Wing will transition to "Phase 1" operations at the local level in order to deliberately and incrementally increase operating capacity on the way to resuming normal operations and fulfilling our three congressionally-chartered missions. Alaska Wing squadrons are the main effort and wing staff are in support.

5. Execution

a. Commander's Intent - Execute disciplined initiative at the squadron level, in alignment with federal, state, and local orders, to resume Phase 1 meetings, training, and activities for low-risk personnel while mitigating the risk of COVID-19 transmission to the maximum practical extent.

b. Commander's Critical Incident Reports (CCIRs):

i. Any Alaska Wing CAP member tests positive for COVID-19.

ii. Any Alaska Wing CAP members are exposed to COVID-19 while performing CAP duties or attending a CAP activity.

iii. The hospitalization of an Alaska Wing CAP member as a result of COVID-19.

iv. Death of any Alaska Wing CAP member of known or suspected COVID-19 infection.

c. End State: Phase 1 activities are on-going with minimal COVID-19 transmission risk to CAP members and the wing is postured for Phase 2 transition once CAP orders allow.

6. Concept of Operation

a. Implementation of Phase 1: Select low-risk staff, activities involving less than 10 personnel

i. In accordance with HQ CAP "Remobilization of the Membership" planning tools, Alaska Wing units and staff are authorized to conduct meetings and training activities (< 4 hours in duration) for select low-risk personnel. Self-identified low-risk category members may return to meetings as long as groups are less than 10, social distancing and wearing cloth face coverings are in effect, hygiene/health status checks through questions and temperature checks are performed, and public health reminders are in place. Larger, single-day activities will only be allowed in Phase II, and overnight activities will not be permitted until Phase III. Meanwhile, wing members can begin their planning in anticipation of future entry into those Phases.

ii. Mission-essential aircrew procedures are published in the attached AKWG/CC COVID19 Operations memo dated 27 Mar 20. All single-pilot and two-person crew training and proficiency flights may resume for self-identified low-risk individuals. Crew members will wear face coverings if unable to maintain social distancing guidelines and disinfect the aircraft between sorties. Allowed flight activities include: all single pilot proficiency flights, flight evaluations, 2-person crew training and proficiency, dual instruction (assuming all members are low-risk and all flight operations are in low-risk areas), and cadet flight training. The following flight activities are not allowed at this time: cadet orientation flights and all non-essential flights with a crew of 3 or more.

b. Support agencies: Wing staff will provide support to squadrons as appropriate. State and local COVID-19 restrictions will be continuously monitored for status changes affecting local operations.

7. Tasks

- a. Squadron commanders will approve all unit activities and meetings involving more than 2 CAP members at least 48 hours in advance.
- b. Units will maintain attendance records for all approved activities for a minimum of 6 months to facilitate contact tracing, if required.
- c. One-on-one activities (both ground and flight) and single pilot flight operations are allowed without explicit squadron commander approval.
- d. Members will follow the HQ CAP guidelines for PPE wear, social distancing, cleaning, temperature and hygiene monitoring, etc., at all times.
- e. Any CAP member will immediately notify AKWG/CC of any CCIR within 2 hours.

8. Administration and Logistics - None

9. Command and Signal

a. Signal

- i. The Alaska Wing command and key staff will meet weekly via GoToMeeting (normally Mondays at 0900) to assess wing operations and changes to state and local restrictions.
- ii. Squadron Commanders are welcome to listen in on the weekly calls, and are expected to attend the regularly scheduled Command & Staff meeting each month.
- iii. CCIRs will be reported via phone call to Col John Rhoades at 719-358-0998.

b. Command

- i. The normal chain of command and reporting procedures are in effect.
- ii. To facilitate the planning and execution of remobilization, the AKWG Remobilization Planning Team (RPT) has been established to continually assess the situation and recommend phase changes to the command staff. In addition, the RPT is responsible for developing and publishing OPLANS, procedures, and briefing materials to assist squadrons and staff in messaging the remobilization. The members of the RPT are:

AKWG/CCA (Team Lead): SMSgt Paul Goedert

AKWG/DO: Lt Col Derk MacPherson

AKWG/CP: Capt Liz Bratton

AKWG/SE: Maj Carl Siebe

AKWG/JA: Lt Col Stuart Goering

AKWG/ Health Services Officer: Maj Stephen Sammons

//signed//4 Jun 20//

KEVIN A. McCLURE, Colonel, CAP
Commander

1 Attachment: AKWG/CC COVID19 Operations memo dated 27 Mar 20

Distribution:

AKWG/CC

AKWG/CCC

AKWG/CV

AKWG/CS

AKWG/DO

AKWG/ES

AKWG/JA

AKWG/SE

AKWG/CP

AKWG/AO

CAP-USAF PLR/ADO



Alaska's Plan Forward



Alaska has done an excellent job of managing COVID-19. We responded quickly to an unknown threat to keep our cases low and to ensure our healthcare systems have the increased capacity to deal with COVID-19 cases in the future. The base actions that led to our success will continue to be our playbook for the future:

- **Stay six feet or more away from non-family members.**
- **Wash your hands frequently.**
- **Wipe down surfaces frequently.**
- **Wear a face covering when in a public setting in close contact with others.**
- **Stay home if you are sick and get tested for COVID-19 if you have symptoms.**
- **Be mindful and respectful to those Alaskans that are most vulnerable to this virus. Those being our seniors and those with existing health issues.**

Under Phases I and II, businesses and organizations found new and creative ways to minimize the risk of COVID-19, and each day we are seeing new national and industry guidelines being released that provide guidance on safely operating.

It is with the listed guidelines and safety advisories that we can empower businesses, organizations and Alaskans to protect themselves and each other while continuing to open responsibly.

Now is the time for the next phase of our response. To move ahead, we are combining our future phases, while encouraging personal and organizational responsibility to safely operate while mitigating the spread of this disease.

Make no mistake. The virus is with us. We must function with it and manage it. There will be folks who contract the virus and fall ill, but if we follow these guidelines, we can help lower potential risks and keep our way of life intact with a few exceptions.

The state, local communities, tribal partners, and healthcare providers have come together to do tremendous work. We built up our health care capacity to handle a potential increase in cases. We have increased screening and testing and continued to have robust contact tracing. We have trained our healthcare workers to safely work with, and treat, the virus. We have stockpiled and distributed PPE around the state.

We will monitor the situation daily, as we have since this virus arrived in Alaska, and we will adjust, if necessary, to handle a growth in case clusters to prevent cases spiking.

Effective Friday May 22, 2020 Alaska is open for business:

- All businesses can open
- All houses of worship can open
- Libraries and museums can open
- All recreational activities can open
- All sports activities can open

It's the responsibility of individuals, businesses, and organizations to minimize the spread of COVID-19. We encourage all to follow local, state, national, and industry guidelines on ways to conduct business and activities safely.

Exceptions/restrictions/closures:

- 14-day quarantine for interstate and international travel to Alaska remains in place. This will be reevaluated by June 2, 2020, but will be reviewed weekly.
- All senior centers, prisons, and institutions will continue to have restricted access.
- Any proposed large public gatherings such as festivals and concerts need to consult first with public health before scheduling.
- The State will continue to work with large industries to protect their workforce and the communities in which they operate.
- Communities may still elect to keep in place travel restrictions.
 - o Some Alaskan communities may wish to extend restrictions on non-essential travel into their communities for health reasons. Check with your local community.
- Health Mandates 15 (Elective Medical/Dental), 17 (Commercial Fishing), and 18 (Intrastate Travel) remain in effect.

It's because of you, Alaska, that our statewide numbers remain low. We will keep our numbers low because of your actions.



HEADQUARTERS

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27 Mar 20

MEMORANDUM FOR AKWG MEMBERS

FROM: AKWG/CC

SUBJECT: COVID19 Operations

1. For the health and safety of mission essential personnel representing CAP during missions that have an increased risk of COVID-19 exposure beyond that of at home quarantine, the following best practices will be observed:

a. Members returning to state of Alaska will self-quarantine for a period of 14 days upon arrival before assuming any official duties that would require activity beyond the residence (i.e. flying CAP aircraft or driving CAP vehicles). Work from home is encouraged.

b. Operations members to include Pilots, Observers, Scanners, Aerial Photographers, Vehicle Drivers, Ground team personnel, Incident Base Staff are encouraged to record daily temperatures and be able to refer to them.

c. When requested for a mission, members will need to attest if they are currently experiencing, or in the last 72 hours have experienced, any of the following:

- i. Fever greater than 100.4F, they will need to provide their daily temperature.
- ii. Sore Throat
- iii. Shortness of Breath
- iv. Cough

d. Members must be 72 hours symptom-free before operating with partner agencies.

2. WMIRS recording.

a. For air sorties, at the bottom of the sortie briefing in the special instructions box Pilot temp, crew 1 temp, crew 2 temp will be recorded. Instead of last names, the crew position may be used (ex. MP 97.9, MO 98.3, Pax1 98.5, Pax2 99.1).

b. For ground sorties, at the bottom of the sortie briefing in the text box "Other", Record pax temps using crew positions (ex DR 98.6, TL 98.5, etc).

c. IC's will make an entry in the unit log that they have verified crew temps, and symptoms.

3. On Mission.

a. Daily sanitation of high contact surfaces will occur. The following video link from California Wing is by a HSO from Group 1 that is an Internist and Oncologist and provides easy to follow steps: https://youtu.be/NOEs_jip-nU

b. Crew that are on RON will monitor their temps daily and provide incident staff with their temps and the temps of their passengers every morning.

4. Arctic Shield 2020 with USCG

a. For crews participating in Arctic Shield 20, if any person in the team, CAP or USCG, has a temperature >100.4F, that team will stop operations and RTB to Anchorage immediately.

b. When interacting with other members and agencies, crews will exercise distancing techniques to avoid being within 6 feet of others. This includes when going to villages. Crews and passengers will sanitize their hands prior to entering the aircraft and interacting with high contact surfaces.

c. Crews are encouraged to use PPE when interacting with communities they are not normally apart of. This PPE includes a mask (n95 preferred), disposable fluid impervious gloves (nitrile or latex exam gloves), eye wear, and wipes (Lysol or Clorox). Wipes will be used for disinfecting items removed from the aircraft while in the community prior to them being re-introduced to the aircraft.

5. Your situational awareness, compliance to this and established CAP and CDC guidance, along with the exercise of caution and sound judgement during these operations is paramount. My POC for this matter is Maj Stephen Sammons, who can be reached at 907.250.3931 or Stephen.sammons@akwg.cap.gov

Kevin
McClure
KEVIN A. McCLURE, Colonel, CAP
Commander

Digitally signed by
Kevin McClure
Date: 2020.03.27
14:26:57 -08'00'

Symptoms of Coronavirus (COVID-19)

Your symptoms can include the following:

Fever



If you have COVID-19, you may have mild (or no symptoms) to severe illness.

Symptoms can appear 2-14 days after you are exposed to the virus that causes COVID-19.

Cough



Seek medical attention immediately if you or someone you love has **emergency warning signs**, including:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or not able to be woken
- Bluish lips or face

Shortness of breath



This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning.



cdc.gov/coronavirus

Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.

Avoid close contact with people who are sick.



Cover your cough or sneeze with a tissue, then throw the tissue in the trash.



Avoid touching your eyes, nose, and mouth.



When in public, wear a cloth face covering over your nose and mouth.

Clean and disinfect frequently touched objects and surfaces.



Stay home when you are sick, except to get medical care.



Wash your hands often with soap and water for at least 20 seconds.



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

Important Information About Your Cloth Face Coverings

As COVID-19 continues to spread within the United States, CDC has recommended additional measures to prevent the spread of SARS-CoV-2, the virus that causes COVID-19. In the context of community transmission, CDC recommends that you:



Stay at home as much as possible



Practice social distancing (remaining at least 6 feet away from others)



Clean your hands often



In addition, CDC also recommends that everyone wear cloth face coverings when leaving their homes, regardless of whether they have fever or symptoms of COVID-19. This is because of evidence that people with COVID-19 can spread the disease, even when they don't have any symptoms. Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

How cloth face coverings work

Cloth face coverings prevent the person wearing the mask from spreading respiratory droplets when talking, sneezing, or coughing. If everyone wears a cloth face covering when out in public, such as going to the grocery store, the risk of exposure to SARS-CoV-2 can be reduced for the community. Since people can spread the virus before symptoms start, or even if people never have symptoms, wearing a cloth face covering can protect others around you. Face coverings worn by others protect you from getting the virus from people carrying the virus.



How cloth face coverings are different from other types of masks

Cloth face coverings are NOT the same as the medical facemasks, surgical masks, or respirators (such as N95 respirators) worn by healthcare personnel, first responders, and workers in other industries. These masks and respirators are personal protective equipment (PPE). Medical PPE should be used by healthcare personnel and first responders for their protection. Healthcare personnel and first responders should not wear cloth face coverings instead of PPE when respirators or facemasks are indicated.



N95 respirator



Cloth covering

General considerations for the use of cloth face coverings

When using a cloth face covering, make sure:

- The mouth and nose are fully covered
- The covering fits snugly against the sides of the face so there are no gaps
- You do not have any difficulty breathing while wearing the cloth face covering
- The cloth face covering can be tied or otherwise secured to prevent slipping



Avoid touching your face as much as possible. Keep the covering clean. Clean hands with soap and water or alcohol-based hand sanitizer immediately, before putting on, after touching or adjusting, and after removing the cloth face covering. Don't share it with anyone else unless it's washed and dried first. You should be the only person handling your covering. Laundry instructions will depend on the cloth used to make the face covering. In general, cloth face coverings should be washed regularly (e.g., daily and whenever soiled) using water and a mild detergent, dried completely in a hot dryer, and stored in a clean container or bag.

For more information, go to: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-faq.html>



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)



Coronavirus Disease 2019

When to wear gloves

For the general public, CDC recommends wearing gloves when you are cleaning or caring for someone who is sick.

In most other situations, like running errands, wearing gloves is not necessary. Instead, practice [everyday preventive actions](#) like keeping [social distance](#) (at least 6 feet) from others, washing your hands with soap and water for 20 seconds (or using a hand sanitizer with at least 60% alcohol), and wearing a [cloth face covering](#) when you have to go out in public.



When cleaning

When you are routinely [cleaning and disinfecting your home](#).

- Follow precautions listed on the disinfectant product label, which may include-
 - wearing gloves (reusable or disposable) and
 - having good ventilation by turning on a fan or opening a window to get fresh air into the room you're cleaning.
- [Wash your hands](#) after you have removed the gloves.



When caring for someone who is sick

If you are providing care to someone who is [sick at home or in another non-healthcare setting](#)

- Use disposable gloves when cleaning and disinfecting the area around the person who is sick or other surfaces that may be frequently touched in the home.
- Use disposable gloves when touching or having contact with **blood, stool, or body fluids**, such as saliva, mucus, vomit, and urine.
- After using disposable gloves, throw them out in a lined trash can. Do not disinfect or reuse the gloves.
- [Wash your hands](#) after you have removed the gloves.



When gloves aren't needed

Wearing gloves outside of these instances (for example, when using a shopping cart or using an ATM) will not necessarily protect you from getting COVID-19 and may still lead to the spread of germs. The best way to protect yourself from germs when running errands and after going out is to regularly wash your hands with soap and water for 20 seconds or use hand sanitizer with at least 60% alcohol.



Other ways to protect yourself

COVID-19 is a respiratory virus and is mainly spread through droplets created when a person who is infected coughs, sneezes, or talks. You can protect yourself by keeping [social distance](#) (at least 6 feet) from others and washing your hands with soap and water for 20 seconds (or using a hand sanitizer with at least 60% alcohol) at [key times](#), and practicing [everyday preventive actions](#).



Gloves in the workplace

Guidelines and recommendations for glove use in [healthcare](#) and [work settings](#) will differ from recommendations for the general public.

Page last reviewed: May 9, 2020

1.2.1.2. Prepare information for subordinate units on temperature screening, health education, and sanitation

The CDC has several published guidelines outlining how homes and business should conduct testing along with the required equipment to conduct the testing safely. The CDC has also published guidelines on how to stay healthy along with how to clean/sanitizes surfaces/areas along with the recommended equipment and supplies.

A guideline outlining how to conduct symptom screening can be found at the following link: <https://covid19.colorado.gov/symptom-screening>

1.8.1. Units will ensure no members or guests with a temperature of 100.4 or greater are admitted (a temperature at or above 100.4°F is the CDC recognized point where there is a fever). Units will require members to take their temperature at home or may screen with no-touch thermometers prior to entry.

1.8.3. Units perform all appropriate public health measures (e.g., social distancing, surface cleaning/disinfection, face coverings, hand sanitizer, at-home temperature check or no-touch temperature check prior to entry and routine symptom checks)

The CDC has published several posters/handouts detailing symptom screen and disinfection procedures. These posters/handouts are provided attached to this document along with hyperlinks located at the end of this section.

The following is a summary of the CDC recommendations:

How to conduct a facility health screening

Equipment

- Temple thermometers.
- Alcohol swabs (to clean thermometer heads).
- Bleach wipes (to clean thermometer bodies) and work surfaces.
- Tyvek wristbands or stickers (multiple colors to have different color each day).
- Hand sanitizer.
- Disposable medical gloves (non-latex).
- Computer with the ability to log participants and their findings.
- Paper data entry forms (back-up).

- Room near the entrance with:
 - Adequate space to establish a line with people spaced 6-feet apart.
 - Two 5-6 foot tables for supplies and data entry

Personnel

- Line manager (optional)
- 1-2 temperature takers
- 1-2 people to enter data and apply wristbands.

Set-up

Set up equipment on the tables so that the temperature takers screen first. The data entry personnel will be at the opposite end of the tables. Clean all surfaces and equipment with bleach wipes or disinfectant wipes.

Line management

Remind all people in line to stay 6 feet apart.

- Temperature screening
- Temperature takers ensure that they put non-latex medical gloves on.
- Using a temple thermometer, take the person's temperature.
- Ask the person to remember their temperature for the data entry person.
- A fever is defined as a temperature of 100.4 or above. Ask people who have a fever to return home and notify their supervisor.
- If no fever is present, have the person proceed to data entry.

Data entry screening

Data entry personnel will use the [Employee Screening Form](#) to capture information electronically. If the computer is not accessible, use the manual paper form and complete data entry at a later time.

Enter name and agency information, record temperature, and ask about symptoms.

- **If the person answers yes to any of the following, ask the person to return home and notify their supervisor.**
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Muscle aches
 - Sore throat

- New loss of taste or smell
- Complete data entry and place the “color of the day” sticker or wristband on person’s where it is visible, and allow the person to proceed.

Important

- Clean thermometers after each use.
- Maintain a clean workspace.
- Clean and disinfect all surface areas at the end of the day.
- Clean your hands frequently.

Here is a link to the recommended screening form: [colorado seoc wellness screening template.docx](#)

Use of Cloth Face Coverings to Help Slow the Spread of COVID-19

Cloth face coverings should—

- Fit snugly but comfortably against the side of the face
- Be secured with ties or ear loops
- Include multiple layers of fabric
- Allow for breathing without restriction
- Be able to be laundered and machine dried without damage or change to shape

A link from the CDC website detailing how to wear a facemask along with instructions how to make a facemask can be found at the following link: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/DIY-cloth-face-covering-instructions.pdf>

Social Distancing

Social distancing, also called “physical distancing,” means keeping space between yourself and other people outside of your home. To practice social or physical distancing:

- Stay at least 6 feet (about 2 arms’ length) from other people
- Do not gather in groups
- Stay out of crowded places and avoid mass gatherings

In addition to everyday steps to prevent COVID-19, keeping space between you and others is one of the best tools we have to avoid being exposed to this virus and slowing its spread locally and across the country and world.



ALASKA WING
United States Air Force Auxiliary
Bldg 16322, 37th St
Elmendorf AFB, AK 99506-3915



4 June 2020

LETTER OF INFORMATION FOR ALASKA WING MEMBERS AND FAMILIES

FROM: AKWG/CC

SUBJECT: COVID-19 Meeting Safety Plan

1. Civil Air Patrol National Headquarters has provided guidance to resume meetings. The safety of our members and our volunteers will always remain our top priority.
2. We have a three-phase process for resuming CAP in-person activities. State and local guidelines are being monitored daily. We will continue to monitor Federal, State and Department of Defense health guidelines, communicate recommendations, and prepare our wing for each phase.
3. Alaska Wing has been approved for "Phase 1" operations, including in-person meetings for mission critical personnel and command personnel, as well as self-identified low-risk members who may resume activities following the safety criteria below:
 1. Meeting in-person must be 10 or less members including supervising parent sponsor
 2. Guests are not allowed or must remain outside of the meeting area
 3. Touch-free temperatures must be taken prior to entering the meeting area. An alternate is for members to take their temperature at home and report the temperature upon sign in.
 4. Attendance log is mandatory and must be saved for future review.
 5. Frequent hand washing, use of sanitizer, and sanitizing wipes must be used during the meeting activity.
 6. Members must always wear face masks while performing CAP duties unless and underlying health condition as exempted from the requirement.
 7. Members may be asked about general symptom related to COVID-19 prior to a meeting. If members show or report any symptoms, they may be asked to not attend the meeting for the safety of themselves and others.
 8. If members are in a high-risk medical category, they are encouraged to not resume in-person activities during Phase 1 .
 9. Aviation activities are limited to mission-essential operations and; flight evaluation, crew proficiency flying and dual instruction, assuming all members are low risk and the flight is conducted in low-risk areas.
4. Phase 1 does not include weekend activities, overnight activities, or gathering in groups larger than 10 members, even if members can adequately distance themselves.

5. As we remobilization we will continues to monitor CAP, Federal, State of Alaska and local guidelines. We may progress to further phases of the plan, or regress to a more restrictive posture based on changing conditions.

6. It is important through these challenging times that we stay connected. Your safety is our top priority as we take on our emerging missions – and your health, safety and welfare will continue to drive our wing’s decision making.

7. I thank you for your patience and understanding.

//Signed//4 Jun 20//

KEVIN A McCLURE, Colonel, CAP
Commander



ALASKA WING
United States Air Force Auxiliary
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4 June 2020

MEMORANDUM FOR AKWG SQUADRON COMMANDERS AND SAFETY OFFICERS

FROM: AKWG/SE

SUBJECT: COVID-19 Required Safety Review

1. In preparation for Phase1 of the AKWG Remobilization Plan, and in accordance with the AKWG/CC's guidance published in his memo dated 4 Jun 20, all squadrons will review the following documents as identified in CAPR 160-1, Para 3.3 to ensure all COVID-19-related risks at future unit activities are considered and mitigated:

- a. CAPF 160-Deliberate Risk Assessment Worksheet
- b. CAPF 160S-Real Time Risk Assessment Worksheet
- c. CAPF 160HL-Hazard Listing Worksheet

2. Unit commanders and safety officers will also identify resources for use in conducting activities in this increased health and safety posture, and must be prepared for a potential return of increased risk. These resources include but are not restricted to the following: no-touch thermometers, face masks, gloves, hand sanitizer and surface disinfectant. Please contact me at carl.siebe@akwg.cap.gov if you have any questions or concerns, or if I can assist you in any way.

//signed//4 Jun 20//
CARL F. SIEBE, Maj, CAP
Director of Safety



ALASKA WING
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4 Jun 20

MEMORANDUM FOR AKWG CADET PROGRAM OFFICERS

FROM: AKWG/CP

SUBJECT: COVID-19 Safety Plan for Cadets

1. The Wing Commander has released information to our members on the Phase 1 remobilization plan for Alaska Wing, and is committed to ensuring we take appropriate measures to keep our cadets safe while they participate in CAP activities.
2. "Phase 1" means for Alaska Wing: In-person meeting for mission critical personnel and command personnel may resume following safety criteria
 - a. Meeting in person must be 10 or less members including supervising parent sponsor
 - b. Guests Are not allowed or must remain outside of the meeting area
 - c. Touch free temperatures must be taken prior to entering the meeting area An alternate is for members to take their temperature at home and report the temperature upon sign in.
 - d. Attendance log is mandatory and must be saved for future review.
 - e. Frequent hand washing, use of sanitizer, and sanitizing wipes must be used during the meeting activity.
 - f. Members must always wear face masks while performing CAP duties unless and underlying health condition as exempted from the requirement.
 - g. Members may be asked about general symptom related to COVID19 prior to a meeting. If members show or report any symptoms, they may be asked to not attend the meeting for the safety of themselves and others.
 - h. Cadets in high-risk medical category, you are encouraged to not resume in person meeting at Phase 1
3. Phase 1 does not include resuming normal squadron meeting even if meeting would remain under 10 cadets. Phase 1 does not include weekend activities, overnight activities, or gathering in groups larger than 10 members, even if members can adequately distance themselves.
4. Your safety is our top priority and that will continue to drive Alaska Wing decision making.
5. As we progress to Phase 2 and allow larger in-person meetings, you can plan for various change in meeting formats which will include the item listed for Phase 1 and will add the following;
 - a. Drill to be held at double arm interval
 - b. Meeting to occur outdoors as much as possible



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- c. Group of ten to be separated by at least 150 feet.
 - d. O-rides to include the wearing of face maska and sanitizing internal aircraft sufaces after each flight. Preflight check and ground school to maintain social distancing whenever possible.
6. Your dedication and commitment to the cadt program and specifically the cadets is commendable thank you for your patience and understanding.

//signed//4 Jun 20//

ELIZABETH M. BRATTON, Capt, CAP
Director of Cadet Programs

Limit close contact with others outside your household in indoor and outdoor spaces. Since people can spread the virus before they know they are sick, it is important to stay away from others when possible, even if you—or they—have no symptoms. Social distancing is especially important for people who are at higher risk for severe illness from COVID-19.

Many people have personal circumstances or situations that present challenges with practicing social distancing to prevent the spread of COVID-19.

Cleaning and Disinfecting

The following section provides a general framework for cleaning and disinfection practices. The framework is based on doing the following:

- Normal routine cleaning with soap and water will decrease how much of the virus is on surfaces and objects, which reduces the risk of exposure.
- Disinfection using EPA-approved disinfectants against COVID-19 can also help reduce the risk. Frequent disinfection of surfaces and objects touched by multiple people is important.
- When EPA-approved disinfectants are not available, alternative disinfectants can be used (for example, 1/3 cup of bleach added to 1 gallon of water, or 70% alcohol solutions). Do not mix bleach or other cleaning and disinfection products together-- this can cause fumes that may be very dangerous to breathe in. Keep all disinfectants out of the reach of children.

Examples of frequently touched surfaces and objects that will need routine disinfection following reopening are:

- tables,
- desks,
- doorknobs,
- phones,
- light switches,
- keyboards,
- countertops,
- toilets and,
- handles,
- faucets and sinks

Each business or facility will have different surfaces and objects that are frequently touched by multiple people. Appropriately disinfect these surfaces and objects. For example, transit stations have specific guidance for application of cleaning and disinfection.

<https://www.cdc.gov/coronavirus/2019-ncov/community/clean-disinfect/index.html>

1.8.2. Educate members on their stratified level of risk (i.e., Low-risk vs. High-risk)

The CDC has outlined four (4) levels of Risk. They are detailed below:

<u>Risk Level</u>	<u>Description</u>
No Risk	Briefly walking by a person who tested positive for COVID-19 and was not experiencing symptoms
Low Risk	Being in the same room as a person who tested positive for COVID-19, had symptoms and you were within six feet.
Medium Risk	Sustained close contact (10 minutes or longer) within six feet of a person with COVID-19 while they had symptoms.
High Risk	Close household contact with a person who tested positive for COVID-19

According to the CDC, individuals that are at high-risk of becoming ill from COVID-19 include older adults and individuals with serious chronic or long-term medical conditions.

A copy of the one page handout/poster can be found at the following link:

[http://www.memorialhermann.org/uploadedFiles/ Library Images/Memorial Hermann/Risk-COVID-19.pdf](http://www.memorialhermann.org/uploadedFiles/Library Images/Memorial Hermann/Risk-COVID-19.pdf)

Printable Materials

[CDC/EPA guidance for cleaning and disinfecting pdf icon](#)[PDF – 9 pages]

[Cleaning and disinfecting decision tool pdf icon](#)[PDF – 2 pages]