

Approved: 7 June 2021



Post-COVID-19 Remobilization of the Membership Plan

Phase III: Resuming Overnight Activities (Bivouacs, Conferences, Encampments, etc)

AZWG
Completed 22 MAR 2021

Template Updated 10 February 2021

COVID-19 Remobilization of the Membership Plan – Phase III

This plan has been developed for ARIZONA Wing, using the template provided by the Civil Air Patrol National Headquarters to enter Phase III, Resuming Overnight Activities.

Additional staffing and resources have been coordinated with N/A, to cover gaps in this wing's available resources.

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 Arizona Wing:

Since AZWG's approval to move to Phase I, wing command guidance has left the decision to pursue remobilization to unit commanders. This decision was based on local demographics of squadron membership as well as variety of health metrics throughout AZWG's diversified AOR. While most units are engaged with the mobilization process, our more at-risk units (based on membership or geographical statistic outliers) have chosen to remain at Phase 0. Most units have executed the planning required to move to Phase I, with a few having recently phased-up to Phase II. Group commanders are actively involved in assuring each unit in his assigned area is aware of other units' remob status.

[The following data is per the covidactnow website.] Arizona's infection rate has been at or below 0.90 since 16 JAN 2021, with a consistent downward trend since 1 MAR 2021; as of 21 MAR 2021 rate recorded as 0.73. Positive test rate (PTR) indications have seen anticipated spikes above 20% during the peak summer and winter holiday seasons. However, decline in PTR below 10% has been steady since 9 FEB 2021; 21 MAR 2021 data is currently charted at 4.0%. ICU capacity has been "in the green" since 4 FEB 2021, with the 21 MAR 2021 data point at 52% capacity used (with a ratio of 10 non-COVID patients to each 1, or 91% non-COVID).

Stable positive metric trends coupled with continued member diligence and responsibility makes confidence high that AZWG is ready to enter Phase III of CAP Remobilization.

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NOTE: Resuming overnight activities will not be done until Phase III, when most public health restrictions have been lifted, schools & businesses have reopened, and the forecasted risk is minimal.

Item#	Task	OPR/Assigned Personnel	Date Tasked	Suspense	Date Completed	Notes
3.1.	Verify current state-level guidance allows overnight events to resume	Lt Col Rehman	22 MAR 2021	26 MAR 2021		
3.2.	Consult with staff officers to prepare for overnight activities	Maj Hoff	22 MAR 2021	26 MAR 2021		
3.2.1.	Coordinate with Health Services	Lt Col Rehman	22 MAR 2021	26 MAR 2021	22 MAR 2021	AZWG/HS is POC for this task set.
3.2.1.1.	Check state and local health guidance regarding gatherings	Lt Col Rehman	25 MAR 2020	3 JUN 2020	3 JUN 2020	On-going. Has continued uninterrupted throughout mobilization process.
3.2.1.2.	Prepare to communicate with subordinate units on Health Services-related matters to continue selected public health measures	Lt Col Rehman	25 MAR 2020	3 JUN 2020		On-going. Has continued uninterrupted throughout mobilization process.
3.2.2.	Consult with Legal Officer about resuming overnight activities	Lt Col Szokol	22 MAR 2021	26 MAR 2021		
3.2.3.	Coordinate with Director of Safety	Lt Col Stohlquist	22 MAR 2021	26 MAR 2021	22 MAR 2021	AZWG/SE is POC for this task set.
3.2.3.1.	Verify proper planning and mitigation tools are available to staff and units	Lt Col Stohlquist	31 JUL 2020	14 AUG 2020	14 AUG 2020	On-going. Has continued uninterrupted throughout mobilization process.
3.2.3.2.	Prepare to communicate with subordinate units on Safety-related matters	Lt Col Stohlquist	31 JUL 2020	14 AUG 2020	14 AUG 2020	On-going. Has continued uninterrupted throughout mobilization process.
3.2.4.	Coordinate with Director of Cadet Programs	Maj Moseley	22 MAR 2021	26 MAR 2021	22 MAR 2021	AZWG/CP is POC for this task set.
3.2.4.1.	Prepare recommendations for units regarding overnight activities	Maj Moseley	22 MAR 2021	26 MAR 2021		
3.2.4.2.	Prepare bullets for units to incorporate when sending messages to parents about the resumption of overnight activities	Maj Moseley	22 MAR 2021	26 MAR 2021		
3.3.	Query commanders of subordinate units to verify that local governments do not have more restrictive social-distancing guidelines than those at the state level	Lt Col Rehman	2 JUN 2020	2 JUN 2020	2 JUN 2020	On-going. Has continued uninterrupted throughout mobilization process. [State Order does not allow for individual jurisdictions to set own standards other than state orders.]

Phase III: Resuming Overnight Activities (Bivouacs, Conferences, Encampments, etc; continued)

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Item#	Task	OPR/Assigned Personnel	Date Tasked	Suspense	Date Completed	Notes
3.4.	Email the CAP COVID-19 Planning Team at COVID-19Plans@capnhq.gov , and copy the Region Commander for permission to reinstate overnight activities	Col Pinckard	22 MAR 2021	TBD	Pending	
3.4.1.	Describe previous coordination accomplished	Col Pinckard	22 MAR 2021	26 MAR 2021		
3.4.2.	Verify no jurisdictional restrictions are in place from State or Local Governments	Lt Col Rehman	30 MAY 2020	1 JUN 2020	1 JUN 2020	On-going. Has continued uninterrupted throughout mobilization process. [State Order does not allow for individual jurisdictions to set own standards other than state orders.]
3.4.3.	Set date to resume overnight activities, this is the start of Phase III	Col Pinckard	TBD	TBD		
3.4.4.	Receive approval from the CAP COVID-19 Planning Team to resume overnight activities. Plan for one-week lead time.	Col Pinckard	TBD	TBD		
3.5.	Publish the date that Phase III will begin to subordinate units	Lt Col Szokol	TBD	TBD		
3.6.	Task Wing Director of Safety to communicate the following to subordinate units:	Lt Col Stohlquist	Ref subordinate tasks 3.6.1-3.6.2			
3.6.1.	Units may use steady-state RM forms to mitigate local risks		22 MAR 2021	26 MAR 2021		
3.6.2.	Units continue to consider face coverings, hand sanitizer, and an emphasis on hygiene during meetings and activities		22 MAR 2021	26 MAR 2021		On-going. Has continued uninterrupted throughout mobilization process.
3.7.	Task Wing Health Service Officer to communicate the following to subordinate units:	Lt Col Rehman	Ref subordinate tasks 3.7.1-3.7.2			
3.7.1.	Health Services will continue to consider screening with no-touch thermometers prior to entry to the meeting or will require members to take their temperature at home prior to attending the activity		22 MAR 2021	26 MAR 2021		On-going. Has continued uninterrupted throughout mobilization process.
3.7.2.	Health Services will educate members on the importance of monitoring their health and avoiding participation in activities if sick		23 AUG 2020	23 AUG 2020	On-going	On-going. Has continued uninterrupted throughout mobilization process.

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Item#	Task	OPR/Assigned Personnel	Date Tasked	Suspense	Date Completed	Notes
3.7.3.	Health Services will continue to educate members on public health practices such as emphasizing hygiene, having face coverings, social distancing for those at high-risk, and common surface cleaning	Lt Col Rehman	31 JUL 2020	14 AUG 2020	On-going	On-going. Has continued uninterrupted throughout mobilization process.
3.8.	Task Wing Director of Cadet Programs to communicate the following to subordinate units:	Maj Moseley	Ref subordinate tasks 3.8.1 – 3.8.2			
3.8.1.	Units plan to resume formations, drill, and other close-distance activities as appropriate		22 MAR 2021	26 MAR 2021		
3.8.2.	Units draft a local message to parents to inform them about what CAP is doing to keep Cadets safe while they participate in the resumption of all manner of activities in Phase III (a return to normal post-COVID-19 operations)		22 MAR 2021	26 MAR 2021		
3.9.	Task Wing Director of Operations to communicate the following to subordinate units	Lt Col Schadt	Ref subordinate tasks 3.9.1 – 3.9.2			
3.9.1.	Identify flight operations permitted during Remobilization Phase III		22 MAR 2021	26 MAR 2021		
3.9.2.	Identify requirements for Senior and Cadet members to return to flying as required		22 MAR 2021	26 MAR 2021		

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Appendix A

Mask requirements for Activities

1. Currently Arizona does not have a more restrictive guidelines for mask wearing than the most recent CDC guidance as of May 16, 2021. As such, the Wing will be following the guidance released by the National Command on the wearing of facemask.
2. Arizona Wing of the Civil Air Patrol is changing its policy to align with the evolving CDC policy regarding members who have been fully vaccinated (which is, by CDC definition, at least two weeks after completing the full course of vaccination with one of the currently approved vaccines).
3. The new CAP guidelines concerning masking and other public health measures are as follows:
 - a. Fully vaccinated members will no longer be required to wear masks indoors or outdoors while at CAP activities.
 - b. Unvaccinated members, including all cadets who have not yet been fully vaccinated, will be required to wear masks, practice social distancing, and continue all other public health measures recommended by the CDC or state public health entity for the locality.
 - c. Health Service Officers, Safety Officers, or a Commander's/Director's designee will continue regular health screenings. If a member voluntarily discloses that they are not vaccinated the member will be expected to wear a face mask and continue to socially distance.
 - d. Members who arrive at CAP activities will continue to be screened for signs and symptoms of COVID-19. Members with elevated temperatures upon arrival will be asked to segregate themselves from others for a temperature recheck. During this time the member shall wear a disposable mask. Upon reassessment if the member's temperature is within normal limits, they will be allowed entry into the activity. If the member's temperature remains elevated the member will not be allowed to participate in the activity and will be encouraged to return home or seek medical attention.
4. Make sure that members have more than one mask on hand so that they can easily replace a dirty mask with a clean one.

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Appendix B

Sanitation Requirements

Cleaning vs Disinfection

The virus that causes COVID-19 can land on surfaces. It's possible for people to become infected if they touch those surfaces and then touch their nose, mouth, or eyes. In most situations, the risk of infection from touching a surface is low.

- Cleaning with products containing soap or detergent reduces germs on surfaces by removing contaminants and may also weaken or damage some of the virus particles, which decreases risk of infection from surfaces.
- Disinfecting (using U.S. Environmental Protection Agency (EPA)'s List N) kills most of the remaining germs on surfaces, which further reduces any risk of spreading infection.

Consider the type of surface and how often the surface is touched. Generally, the more people who touch a surface, the higher the risk. Prioritize cleaning high-touch surfaces.

High-touch surfaces should be cleaned at least once a day. This would include things like door knobs, sink counters and faucets, computer equipment like tablets and keyboards and other frequently handled equipment.

If the space is a high traffic area, or if certain conditions apply, you may choose to clean more frequently.

When no people with confirmed or suspected COVID-19 are known to have been in a space, cleaning once a day is usually enough to sufficiently remove virus that may be on surfaces and help maintain a healthy facility.

Ensure individuals who are doing the cleaning are trained on proper use of cleaning (and disinfecting, if applicable) products. **DO NOT** mix different cleaning products together. Doing so may create chemical reactions with unpleasant or dangerous outcomes.

Wear gloves for all tasks in the cleaning process.

Wash your hands with soap and water for 20 seconds after cleaning. Be sure to wash your hands immediately after removing gloves.

If hands are visibly dirty, always wash hands with soap and water.

If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 60% alcohol, and wash with soap and water as soon as you can.

Special considerations should be made for people with asthma. Some cleaning and disinfection products can trigger asthma.

The following are general guidelines for cleaning and disinfecting vehicles.

1. At a minimum, clean and disinfect commonly touched surfaces in the vehicle at the beginning and end of each shift and if necessary between transporting passengers who are visibly sick. Ensure that cleaning and disinfection procedures are followed consistently and correctly, including the provision of adequate ventilation when chemicals are in use. Doors and windows should remain open when cleaning the vehicle. When cleaning and disinfecting, individuals should wear disposable gloves compatible with the products being used as well as any other PPE required according to the product manufacturer's instructions.
2. For hard non-porous surfaces within the interior of the vehicle such as hard seats, arm rests, door handles, seat belt buckles, light and air controls, doors and windows, and grab handles, clean with detergent or soap and water if the surfaces are visibly dirty, prior to disinfectant application. For disinfection of hard, non-porous surfaces, appropriate disinfectants include:
 - a. EPA's Registered Antimicrobial Products for use against Novel Coronavirus SARS-CoV-2 the virus that causes COVID-19. Follow the manufacturer's instructions for concentration, application method, and contact time for all cleaning and disinfection products.
 - b. Diluted household bleach solutions prepared according to the manufacturer's label for disinfection, if appropriate can be used for the surface. Follow manufacturer's instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser.
 - c. Alcohol solutions with at least 70% alcohol would also work, but is not recommended due to the risk of fire due to the flammability of the product.
3. For soft or porous surfaces such as fabric seats, remove any visible contamination, if present, and clean with appropriate cleaners indicated for use on these surfaces. After cleaning, use products that are EPA-approved for use against the virus that causes COVID-19^{external icon} and that are suitable for porous surfaces.
4. For frequently touched electronic surfaces, such as tablets or touch screens used in the vehicle, remove visible dirt, then disinfect following the manufacturer's instructions for all cleaning and disinfection products. If no manufacturer guidance is available, consider the use of alcohol-based wipes or sprays containing at least 70% alcohol to disinfect. Be cautious with the use of chemical disinfectants as they may damage the screens, bleach containing products are especially prone to this sort of damage.

Gloves and any other disposable PPE used for cleaning and disinfecting the vehicle should be removed and disposed of after cleaning; wash hands immediately after removal of gloves and PPE with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer with at least 60% alcohol if soap and water are not available. If work uniforms/clothes are worn during cleaning and disinfecting they should be laundered afterwards using the warmest appropriate water setting and dry items completely. Wash hands after handling laundry.

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Appendix C

Lodging Requirements for Overnight Activities

1. Each activity should have an Emergency Operations Plan in place to protect members, families and the community from the spread of COVID-19. Members are strongly encouraged to become vaccinated, however it is not mandatory to attend Civil Air Patrol functions.
2. Members will required to be screened upon arrival at the activity. The Activity Director is responsible to assign a Health Services Officer or Safety Officer or other qualified member to oversee the screening process.
 - a. No documentation will be collected as part of the screening process.
 - b. Vaccinated members may attend and are not required to wear a facemask.
 - c. Members who have not been fully vaccinated prior to attending shall wear a facemask and maintain social distancing.
 - d. Members who choose not to provide information of their vaccination status, shall be required to wear a facemask during the activity and adhere to the social distancing guidelines.
3. Prior to arriving at an overnight activity members should be separated into cohorts (groups) of not more than 20. This limits the risk of any potential spread. This assigned cohort will remain together for the entire activity.
4. Cohorts should be housed together if possible. If the cohort consists of members who are both vaccinated and unvaccinated, the unvaccinated members must still wear a mask and social distance at least 3 feet physical distance between masked cohort members.
5. Increase ventilation in buildings, such as cabins and dining halls to increase air exchange and air filtration. If possible open windows (if safe to do so), use portable air cleaners, and improve building wide filtration.
6. Activities should provide spaces for symptomatic members to isolate members until other arrangements can be made for those individuals. This will include having procedures in place to help members return home safely.

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Appendix D

Handling of Symptomatic Members

1. The activity should arrange to have a Health Services Officer or other qualified individual on the staff of the activity. If there is no HSO, a Safety Officer or an individual designated by the Activity Director/Commander shall be appointed.
2. Conduct daily symptom checking to monitor the health and wellbeing of the staff and members.
3. If a member becomes sick and needs to be transported to an emergency room, urgent care center or other health facility, first try to call to alert them that the individual may have COVID-19
4. If transporting in a Corporate Owned Vehicle, refer to Appendix B for the procedures for cleaning and disinfection the vehicle post transfer.
5. Members dismissed from the activity due to illness should have arrangements made to have a family member or designated individual assist the ill person in returning home. The use of public transportation is not recommended.