

Approved: 10 June 2020



Post-COVID-19 Remobilization of the Membership Plan

Phase I: Resuming Regularly Scheduled Meetings

IOWA WING

Completed 10 JUNE 2020

Draft #2

Template Updated 12 May 2020

COVID-19 Remobilization of the Membership Plan – Phase I

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

Additional staffing and resources have been coordinated with **North Central Region**, 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.*

Plan Coordinator and Point of Contact: **Col Jonathan W. Lartigue**

Primary Phone:

Primary Email:

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

The Iowa Wing commander has appointed a remobilization team comprised of the wing commander, vice commander, director of cadet programs, director of aerospace education, and director of safety. Additionally, the North Central Region legal and health officers provided additional input.

The state of Iowa's status, according to the covidactnow.org website has varied between red and orange, but the metrics reported on the website do not match those being reported by the state of Iowa. The Iowa Wing is relying on the official statistics released by the governor's office in guiding its remobilization efforts.

EXECUTIVE SUMMARY

The State of Iowa has an effective *cumulative* positive test rate of less than 3.5% (see detailed explanation below). On 1 June, the percentage of positive test cases was 5.4% (excluding those eliminated prior to testing through Test Iowa assessments, see detailed explanation below). All but one Iowa County in which CAP units are located have an active COVID-19 case count of less than 200. One county has a single active case and another has no active cases. In the county with the highest number of active cases, that number of active cases still amounts to only 0.49% of the population. Compared to most other states, COVID-19 risk is at an extremely low level in Iowa. The Iowa Wing is prepared to transition to Phase One as defined in the national remobilization plan. Individual unit commanders will be provided with detailed guidance on how to resume regularly scheduled meetings safely and effectively (see attached documents). Commanders will, of course, have the discretion to continue holding virtual or hybrid meetings as they feel necessary and in the best interest of their members.

CURRENT STATE OF COVID-19 RESTRICTIONS IN IOWA

Announced on 26 May and effective on 1 June, the Governor of Iowa has relaxed most restrictions on social gatherings and similar events to allow events to take place up to 50% of the maximum occupancy limit of the building or facility in which they are held. These revised restrictions allow, among others, restaurants, bars, wineries, fitness centers, malls, beauty, nail and tanning salons, social and fraternal clubs, outdoor venues, casinos, bowling alleys, amusement parks, skating rinks, playgrounds, movie theaters, etc., to reopen. The proclamation permits “social, community, recreational, leisure, and sporting gatherings and events of more than 10 people if public health measures are implemented, including limiting attendance to 50% of the venue capacity and maintaining six feet of distance between those attending” and also the resumption of sporting practices, games, and competitions. Restaurants and bars are permitted to operate at 50% capacity.

For the duration of Phase 1, Iowa wing units will observe meeting size limits of 10 persons or 50% of the occupancy limit (whichever is less).

Most current State of Iowa Governor’s declaration (26 May 2020):

[https://governor.iowa.gov/sites/default/files/documents/Public%20Health%20Proclamation%20-%202020.05.26%20\(1\).pdf](https://governor.iowa.gov/sites/default/files/documents/Public%20Health%20Proclamation%20-%202020.05.26%20(1).pdf)

CURRENT STATE OF ASSESSMENT AND TESTING IN IOWA

Important note regarding State of Iowa Testing Statistics:

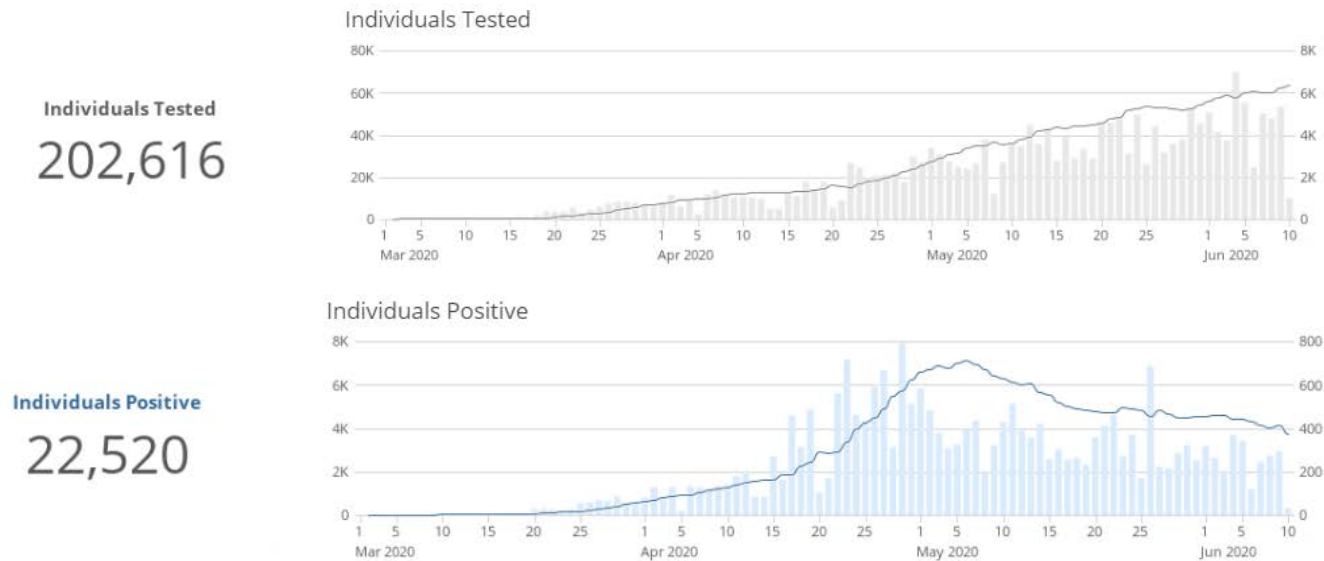
The State of Iowa has not made widespread, at will, testing available to the general public. Instead, the state of Iowa has implemented a “Test Iowa” approach that prioritizes testing for those individuals who exhibit symptoms of, or have been in contact with someone exhibiting symptoms of, COVID-19. The “Test Iowa” initiative is comprised of three steps: assessment, testing, and monitoring. Individuals who are not exhibiting symptoms or who have come into contact with suspected cases are generally deferred testing. After screening, those who have symptoms or have been in contact with suspected cases are offered testing only by advance appointment. Positive individuals are monitored and retested regularly. At this time, there are only eight public testing sites in the state of Iowa. As of 20 May, Iowa has performed testing on 111,003 individuals. However, 472,576 individuals have been screened through the Test Iowa program, representing a 400% increase in the number of individuals at elevated risk who administered tests. The number of individuals screened who are then determined to need testing is approximately 1 in 4. Therefore, the use of tests administered and positive test cases as a metric does not reflect the full scope of COVID-19 screening in Iowa. More information is at www.testiowa.com and coronavirus.iowa.gov.

COVID-19 Remobilization of the Membership Plan – Phase I

As of 10 June 2020 the state of Iowa had administered 202,616 tests with 180,096 negative results and 22,520 positive results for a positive rate of 11.2%. On 10 June 2020 only 31 new cases were discovered statewide (5.8% of those tested or retested). More than one out of every 16 Iowans has been tested. Additionally, Iowa has screened a total of 673,856 individuals (**21.4% of the population**) through its Test Iowa initiative, for a cumulative, net positive rate, including both screening and testing, of 3.4%.

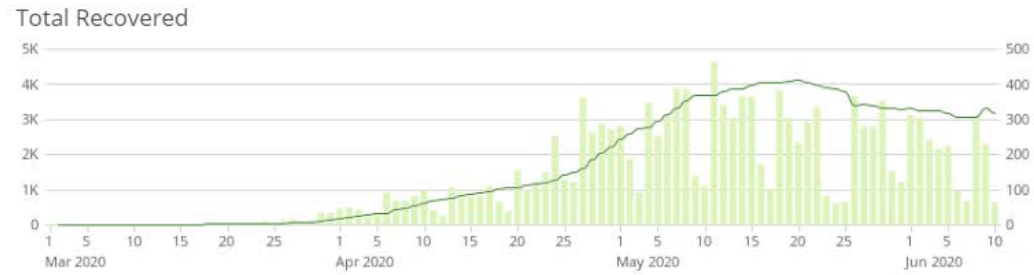
State of Iowa Screening and Testing Data by County (as of 8 June 2020):

County	Individuals Screened	Individuals Tested	Total Cases (% of pop.)	Active Cases	Recovered Cases
Polk	132,536	32,520	4,900 (1.01%)	2,682	2,272
Linn	41,525	12,788	1,005 (0.45%)	185	820
Scott	22,666	8,777	396 (0.23%)	50	346
Dubuque	16,805	6,435	372 (0.38%)	159	213
Muscatine	7,399	3,437	569 (1.33%)	87	482
Cass	315	520	13 (0.10%)	1	12
Mitchell	797	655	5 (0.05%)	1	4
Statewide	673,856	202,616 (6.4%)	22,520 (0.71%)	8,922	13,598

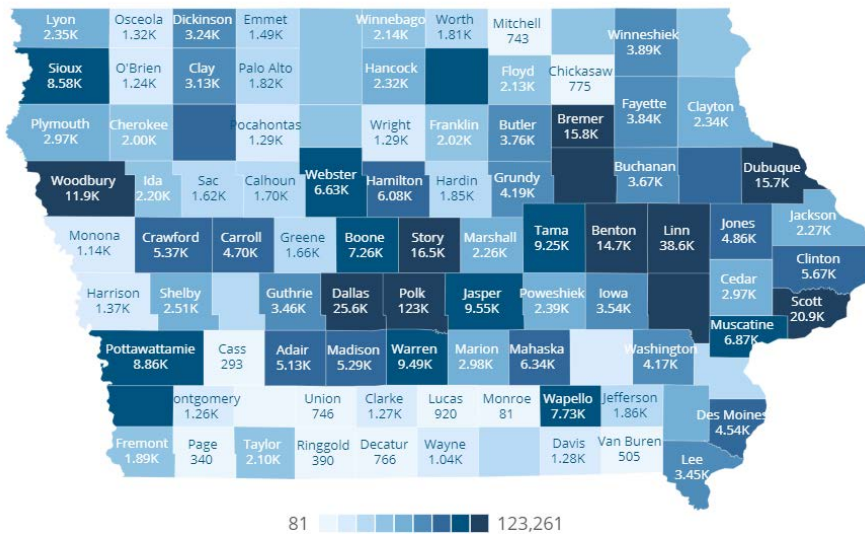


COVID-19 Remobilization of the Membership Plan – Phase I

Total Recovered
13,598

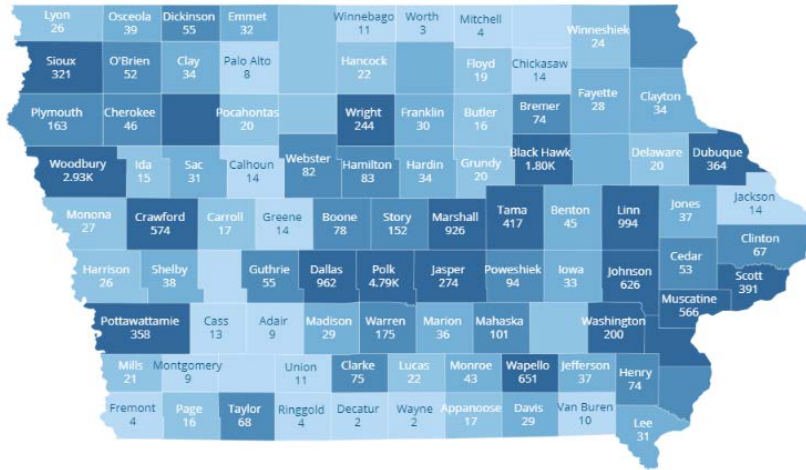


Assessments by County



COVID-19 Remobilization of the Membership Plan – Phase I

Positive Cases by County



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)	IAWG/CC	20 May	N/A	1 June	<p>Per governor's proclamation of May 26, effective June 1 gatherings can resume up to 10 persons or 50% capacity of the facility (whichever is less) while maintaining 6-foot distancing.</p> <p>Propose transitioning to Phase 1 upon approval of this plan.</p> <p>https://governor.iowa.gov/sites/default/files/documents/Public%20Health%20Proclamation%20-%202020.05.26%20(1).pdf</p>
1.2.	Hold meeting with between Plan Coordinator and Health Services Officer	IAWG/CC NCR Health Officer	20 May	N/A	2 June	Wing has no HSO. Region HSO is available to advise as necessary
1.2.1.	Wing priorities for training events should be coordinated	IAWG/CC IAWG/AE IAWG/CP IAWG/SE	5/28/20 DH 5/29/20 DC			<p>This is an ongoing meeting and reevaluation, every Friday until Phase 3. Scheduling of Phase 2 events is suspended until the wing has a clearer idea of when the next transition might take place.</p> <p>Local training/hands-on activity normally held at regularly scheduled activities may take place during Phase 1, provided that these are individual activities to be done separately by each cadet. Sanitized materials, tools, and supplies would be required. Reusable items would be collected at the end and cleaned before returning to storage.</p>
1.2.1.1	Check state and local health guidance regarding gatherings (Review of each	IAWG/CC	5/22/20 5/28/20		5/22/20	Updated info Here - https://coronavirus.iowa.gov/

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	jurisdiction impacted by this plan)					
1.2.1.2	Prepare information for subordinate units on temperature screening, health education, and sanitation	IAWG/SE	5/24/20		1 June	In Squadron Packet folder. Used CAP NHQ provided documents and other official sources.
1.2.2	Consult with Wing Legal Officer about resuming meetings	IAWG/CC	5/22/20		2 June	Region Legal Officer consulted.
1.2.3	Coordinate with Wing Director of Safety	IAWG/CC IAWG/SE	5/15/20		5/22/20	This is an ongoing meeting and reevaluation, every Friday until Phase 3.
1.2.3.1	Verify proper risk planning tools are available to units	IAWG/SE	5/28/20			Operational Risk Management Worksheet Conditions Assessment of Activity
1.2.3.2	Prepare to communicate with subordinate units on Safety-related matters (see 1.7. below)	IAWG/SE	5/30/20 DC	N/A	Ongoing	Safety related materials in File Folder - Safety Docs. DC
1.2.4	Coordinate with Wing Director of Cadet Programs	IAWG/CC IAWG/CP	5/15/20		5/22/20	This is an ongoing meeting and reevaluation, every Friday until Phase 3.
1.2.4.1	Prepare recommendations for units	IAWG/CC	5/28/20		1 June	Will follow documents Provided by CAP NHQ and other official sources.

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	regarding meeting activities and alternatives to maintain optimal distance while at meetings					
1.2.4.2	Prepare bullets for units to incorporate when sending messages to parents about the resumption of meetings	IAWG/CP	5/22/20		2 June	Created guideline email for squadrons to send to parents and cadets. Will update as situation changes.

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.	IAWG/CC	5/22/20	Ongoing	1 June	Will begin to contact local commanders last week of May. This is an ongoing task.
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.	IAWG/CC	5/22/20	N/A	3 June (est.)	Will Send when Complete.
1.4.1.	Briefly describe/ summarize previous coordination accomplished	N/A	N/A	N/A	N/A	N/A
1.4.2.	Verify no jurisdictional restrictions are in place from State or Local Governments	IAWG/CC	5/24/20		5/28/20	Nothing that is more restrictive than the Governor's proclamation effective 1 June. Updated info Here - https://coronavirus.iowa.gov/
1.4.3.	Set date to resume meetings; this is also the start of Phase II.	IAWG/CC	5/22/20		Pending	Phase 1 Target date is 3 June Phase 2 target date is 17 June
1.5.	Receive approval from the CAP COVID-19 Planning Team to reinstate meetings. Plan for one-week lead time.	IAWG/CC			Pending	Pending

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1.6.	Publish the date that meetings may resume to subordinate units	IAWG/CC	20 May		Pending	Pending
1.7.	Task Wing Director of Safety to communicate the following to subordinate units	IAWG/CC IAWG/SE	5/30/20		29 May	Safety related materials in File Folder - Safety Docs. DC
1.7.1.	Units will review CAPFs 160, 160S, and 160HL to be sure COVID-19 risks are considered and mitigated	IAWG/SE	5/28/20 DH		Pending approval for Phase 1	Operational Risk Management Worksheet Conditions Assessment of Activity. File with Squadron Safety Officer
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	IAWG/SE	5/30/20		V	Safety related materials in File Folder - Safety Docs. DC
1.8.	Task Wing Health Service Officer to communicate the following to subordinate units:	IAWG/SE is delegate	5/30/20		T.B.D.	Region HSO available for consulting. Safety related materials in File Folder - Safety Docs. DC

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/CC	5/28/20		Ongoing	Maintain a written roster of attendees. Follow the screening guidelines published by national headquarters. Use of the Iowa Wing Health Assessment Form is encouraged.
1.8.2.	Educate members on their stratified level of risk (i.e., Low-risk vs. High-risk)	UNIT/CC	5/28/20		Ongoing	Unit commanders will be briefed by the wing COVID-19 response team at the 10 June commander's call. Unit leaders will communicate as necessary with Parents/Cadets/Senior Members.
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	UNIT/CC	5/28/20		Ongoing	Size of most units will limit the number of members who can participate. Squadron will need infrared thermometer to test and document each cadet. Hand sanitizer available and wash facilities will be required.

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	temperature check prior to entry and routine symptom checks)					
1.9.	Task Wing Director of Cadet Programs to communicate the following to subordinate units:	IAWG/CP	1 June		3 June	Contacting units at this time. Ongoing mentoring happening daily.
1.9.1.	Units identify ways to meaningfully engage and fully participate in meetings without formations, drill, or other close-distance activities	IAWG/CP	5/28/20 DH			Concerned that Governor Proclamation of May 26 limits ability of some squadrons to meet in existing facilities. Option is to go with a hybrid format. PT can be conducted in accordance with guidelines. Can continue to use virtual meetings for classroom topics. No vehicles will be used to host the meeting. Individual squadrons will determine if safe/appropriate for key staff to meet.
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	IAWG/CC IAWG/CP	T.B.D.		T.B.D.	Squadron CC will draft message and solicit support for any meeting we elect to gather socially.



IOWA WING HEADQUARTERS
CIVIL AIR PATROL
UNITED STATES AIR FORCE AUXILIARY
P.O. Box 65191
WEST DES MOINES, IOWA 50265-0191



10 June 2020

MEMORANDUM FOR: ALL MEMBERS

FROM: IAWG/CC

SUBJECT: Iowa Wing Phase 1 Remobilization

1. The last several months have been a difficult time for the Iowa Wing. The safety of our members and communities is always our highest priority in CAP. National Headquarters has provided a three-phase plan for the reopening of CAP, and your wing leadership team has been working to return us to normal operations in Iowa Wing.
2. Effective 12 June 2020, Iowa Wing units may reopen for regularly scheduled squadron meetings and/or meetings of critical staff, subject to the restrictions below.
3. Resumption of meetings is subject to the following limitations and safety requirements:
 - a. In accordance with the Governor of Iowa's declaration of 26 May, meetings in person must be limited to a maximum 10 persons or 50% of the occupancy limit of the room, building, hangar, or facility in which the meeting is taking place (whichever is less). The governor's proclamation is scheduled to expire on 17 June 2020. All members should monitor announcements from the governor's office for a potential extension or modification of the existing proclamation. In the event of a new proclamation, any updated restrictions set forth shall by the state shall supersede those listed here as of the effective date of the new proclamation. In such an event, Iowa Wing will communicate additional guidance to unit leadership.
 - b. Units that cannot accommodate all potential attendees due to occupancy limits may allow simultaneous meetings of separate groups (e.g. senior meeting, cadet meeting, staff meeting) provided that:
 - i. each group meets in a separate building, hangar, or facility; and
 - ii. each group is no larger than 10 persons or 50% of the occupancy limit of the building, hangar, or facility (whichever is less);
 - iii. each group remains completely separate for the duration of the meeting.
 - c. Members must employ social distancing and remain six feet away from other members at all times. If this distance cannot be maintained in their existing facility, units must make arrangements to meet elsewhere.
 - d. Members must wear facial masks at all times, with the exception of members actively engaging in physical fitness activities. Prior to and following the completion of PT activities, masks must be worn.
 - e. Touch-free thermometers must be used to check the temperature of each person prior to entering the meeting area. Members may take their own temperatures at home and self-report upon arrival. Members exhibiting a temperature higher than 100.4 degrees Fahrenheit shall not be permitted to enter meetings.
 - f. Units should utilize a health services officer, if available, to screen members prior to entering the meeting, including asking members about COVID-19 related symptoms. If a health services officer is not available, the unit safety officer or other suitably qualified senior member shall be used. Use of the attached Iowa Wing Health Screening Questionnaire is recommended. Members who have been screened will be identified by the use of color-coded stickers, name badges, or similar means consistent with guidance from National Headquarters.

- g. A written attendance log is mandatory and must be retained for future review. Health screening questionnaires will likewise be retained.
 - h. Availability of hand washing facilities, hand sanitizer, and sanitizing wipes is required. Sanitization of common surfaces with wipes or bleach/water cleaning solution is highly encouraged.
 - i. Non-members, with the exception of parents dropping off or picking up cadets, are not permitted at this time. Guests attending as potential new members may be permitted at the discretion of the unit commander, provided they are screened in the same manner as other attendees.
- 4. During Phase 1, flight activities may be conducted with the following limitations and safety requirements:
 - a. Essential mission flying, maintenance flights, and engine preservation flights shall continue according to previous direction from national headquarters.
 - b. Proficiency and check flights requiring more than one crew member (e.g. instrument currency, instructor proficiency, check flights) may be conducted with the advance approval of the wing commander and the wing director of safety. Face mask wear is required for all flights with more than one crew member. Commonly touched surfaces will continue to be disinfected before and after flight as described in previous guidance.
 - c. Proficiency flights conducted under Profile #16 Introductory Proficiency Profile for onboarding new CAP pilots with an instructor on board may be conducted with the same restrictions as above.
 - d. Proficiency flying by AFROTC and CAP cadets who possess at least a private pilot license may be conducted subject to the same restrictions as above.
 - e. Mission aircrew training flights are not permitted at this time.
- 5. This authorization does not permit weekend activities, overnight activities, field trips, community service activities, fund raising activities, emergency services training, unnecessary travel in corporate vehicles or aircraft, or any similar type of activity.
- 6. Squadron and Flight commanders shall have the discretion to determine when and if it is in the best interests of their members to resume meetings. Nothing in this authorization shall be construed to require units to hold in-person meetings. Members with medical conditions that place them in a high-risk category are encouraged to not attend in-person meetings at this time.
- 7. Wing leadership is already working on a timetable to transition to Phase 2 of the remobilization plan, which will allow for additional activities. We will communicate further information to the wing as it becomes available.

//SIGNED//
JONATHAN W. LARTIGUE
Colonel, CAP
Commander

cc:
Wing Administrator
file

IOWA WING HEALTH SCREENING QUESTIONNAIRE

Health Screening Questions for Members Upon Entry to CAP Meeting Space (To be completed each meeting or activity)

1. Do you now or have you had within the last two weeks any symptoms associated with COVID-19?

No _____ Yes _____

If yes, circle letter(s) associated with symptom(s):

- a. Cough
- b. Fever over 100.4 degrees Fahrenheit
- c. Shortness of breath/difficulty breathing
- d. Sore throat
- e. Chills
- f. Loss of taste or smell
- g. Muscle pain

2. Are you experiencing any flu-like symptoms?

No _____ Yes _____

3. Have you had any contact with a known positive COVID-19 patient within the last two weeks?

No _____ Yes _____

4. Have you traveled outside the U.S. or Iowa in the last two weeks?

No _____ Yes _____

By answering “yes” to questions 1-3, access to the CAP Meeting will be declined until symptoms resolve. If you answered “yes” to question 4, please request a determination by the squadron safety officer or squadron commander before access is granted.

Name: _____ (please print)

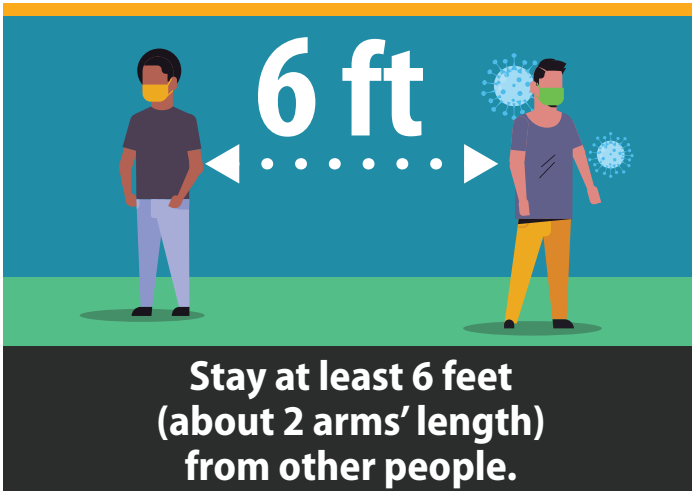
Date: _____

**Stay home if you are sick.
You must wear a mask.
Your temperature must be recorded.
Cover your coughs and sneezes.
Wash your hands frequently.
Do not touch other people.
You must practice social distancing (6 feet).**

**Avoid sharing anything.
Parents must drop off and pick up cadets outside the meeting area.
Only members are permitted in meetings.
Meeting areas should be disinfected in accordance with CDC guidelines.**

Stop the Spread of Germs

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



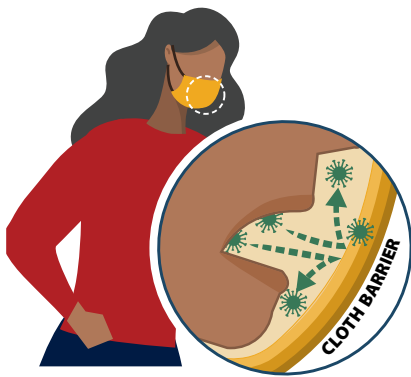
cdc.gov/coronavirus

How to Safely Wear and Take Off a Cloth Face Covering

Accessible: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

WEAR YOUR FACE COVERING CORRECTLY

- Wash your hands before putting on your face covering
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily
- Do not place a mask on a child younger than 2



USE THE FACE COVERING TO PROTECT OTHERS

- Wear a face covering to protect others in case you're infected but don't have symptoms
- Keep the covering on your face the entire time you're in public
- Don't put the covering around your neck or up on your forehead
- Don't touch the face covering, and, if you do, clean your hands

FOLLOW EVERYDAY HEALTH HABITS

- Stay at least 6 feet away from others
- Avoid contact with people who are sick
- Wash your hands often, with soap and water, for at least 20 seconds each time
- Use hand sanitizer if soap and water are not available



TAKE OFF YOUR CLOTH FACE COVERING CAREFULLY, WHEN YOU'RE HOME

- Untie the strings behind your head or stretch the ear loops
- Handle only by the ear loops or ties
- Fold outside corners together
- Place covering in the washing machine
- Wash your hands with soap and water

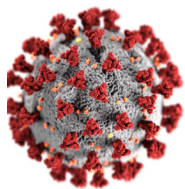


Cloth face coverings are not surgical masks or N-95 respirators, both of which should be saved for health care workers and other medical first responders.

For instructions on making a cloth face covering, see:

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

What you should know about COVID-19 to protect yourself and others



Know about COVID-19

- Coronavirus (COVID-19) is an illness caused by a virus that can spread from person to person.
- The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.
- COVID-19 symptoms can range from mild (or no symptoms) to severe illness.



Know how COVID-19 is spread

- You can become infected by coming into close contact (about 6 feet or two arm lengths) with a person who has COVID-19. COVID-19 is primarily spread from person to person.
- You can become infected from respiratory droplets when an infected person coughs, sneezes, or talks.
- You may also be able to get it by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes.



Protect yourself and others from COVID-19

- There is currently no vaccine to protect against COVID-19. The best way to protect yourself is to avoid being exposed to the virus that causes COVID-19.
- Stay home as much as possible and avoid close contact with others.
- Wear a cloth face covering that covers your nose and mouth in public settings.
- Clean and disinfect frequently touched surfaces.
- Wash your hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.



Practice social distancing

- Buy groceries and medicine, go to the doctor, and complete banking activities online when possible.
- If you must go in person, stay at least 6 feet away from others and disinfect items you must touch.
- Get deliveries and takeout, and limit in-person contact as much as possible.



Prevent the spread of COVID-19 if you are sick

- Stay home if you are sick, except to get medical care.
- Avoid public transportation, ride-sharing, or taxis.
- Separate yourself from other people and pets in your home.
- There is no specific treatment for COVID-19, but you can seek medical care to help relieve your symptoms.
- If you need medical attention, call ahead.



Know your risk for severe illness

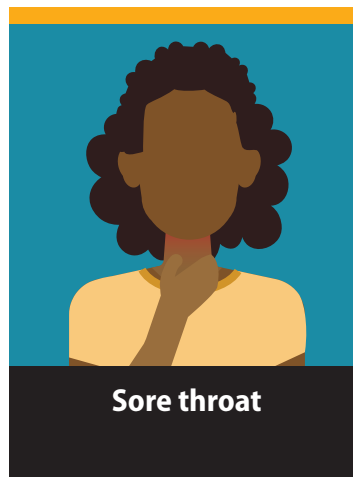
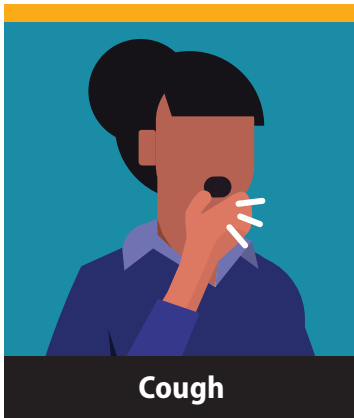
- Everyone is at risk of getting COVID-19.
- Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more severe illness.



cdc.gov/coronavirus

Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:



Symptoms can range from mild to severe illness, and appear 2-14 days after you are exposed to the virus that causes COVID-19.

***Seek medical care immediately if someone has emergency warning signs of COVID-19.**

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.



Coronavirus Disease 2019 (COVID-19)

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

Content source: [National Center for Immunization and Respiratory Diseases \(NCIRD\)](#), [Division of Viral Diseases](#)



CIVIL AIR PATROL
COVID-19 Temperature Screening Guideline

30APR2020

Purpose: Provide a template for CAP Health Services Officers (or their designee) to conduct temperature screening operations for the protection of the force to identify individuals who are potentially ill and should not be allowed into a CAP activity. **Note:** this is a voluntary screening, but failure to conduct a screening may result in non-entry to the work site. Screeners may only be senior members.

- I. Authorities:** The U.S. Centers for Disease Control and Prevention (CDC) has recommended that temperature checks may be instituted in some areas where there have been acute COVID-19 outbreaks, per <https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html>.

II. Essential Equipment (see attachment A)

- A. Minimum of: (1) table and (1) chair and (1) place for a sign
- B. Two paper Stop signs (Attachment B)
- C. One paper "Instructions" sign (Attachment C)
- D. One paper "Look here" sign (Attachment D)
- E. No touch thermometer (2)
- F. Pass marker system (colored dots, tags, markers, wristbands, etc.)
- G. Hand sanitizer
- H. EPA approved sanitizing solution and wipes for equipment, chair, and table cleaning
- I. Instruction card for a person who does not meet the standard for the recheck (Attachment E).
- J. Clock or timer that can measure 5-minutes
- K. Appropriately sized examination gloves (wash hands after duty is completed).
- L. Face covering for temperature taker

III. Competency

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- A. Thermometer screener will review the manufacturer's instructions and a supervisor will review the protocol below with the temperature screener and be shown proficiency with the protocol.

IV. Voluntary Screening Protocol

- A. Set-Up: Establish screening area using table and chairs at a set distance apart. Place a marker halfway between and perpendicular to the location where the person is being screened so they can look at the item when being screened and if they cough, the cough will not be in the screener's direction. When possible, remove cover/hat and have person being screened remain in room temperature environment for ten minutes before screening. Ensure people awaiting screening maintain 6- foot social distancing.
- B. Greeting: Upon approach of personnel, ask two initial statements to the individual:
- 1) "Hello, we are screening people for elevated temperatures and COVID symptoms."
 - 2) "How are you feeling today?"
 - a. If the person is feeling ill, inform them that they should not participate today and ask the person to leave the screening area.
 - b. If the person states that they are feeling well, proceed to temperature check and invite the person to voluntarily be screened for fever.
- C. Temperature Check: Take the person's temperature using the "no touch thermometer" with the table as a barrier between the temperature-taker and the person. A temperature at or above 100.4°F is the CDC recognized point where there is a fever.
1. If the temperature is less than 100.4°F, place a colored indicator on the persons ID Badge and welcome the person to enter.
 2. If the temperature is greater than or equal to 100.4°F, have the person wait in the secondary waiting area for five (5) minutes before rechecking the temperature.
- D. Temperature Recheck: After five (5) minutes, recheck the person's temperature reading.
1. If the temperature is now less than 100.4°F, place a colored indicator on the persons ID Badge and welcome the person to enter.
 2. If the temperature is still greater than or equal to 100.4°F, the temperature taker will explain that the person is being recommended for non-entry and provide them with the temperature at or above 100.4 °F Card (attachment E).

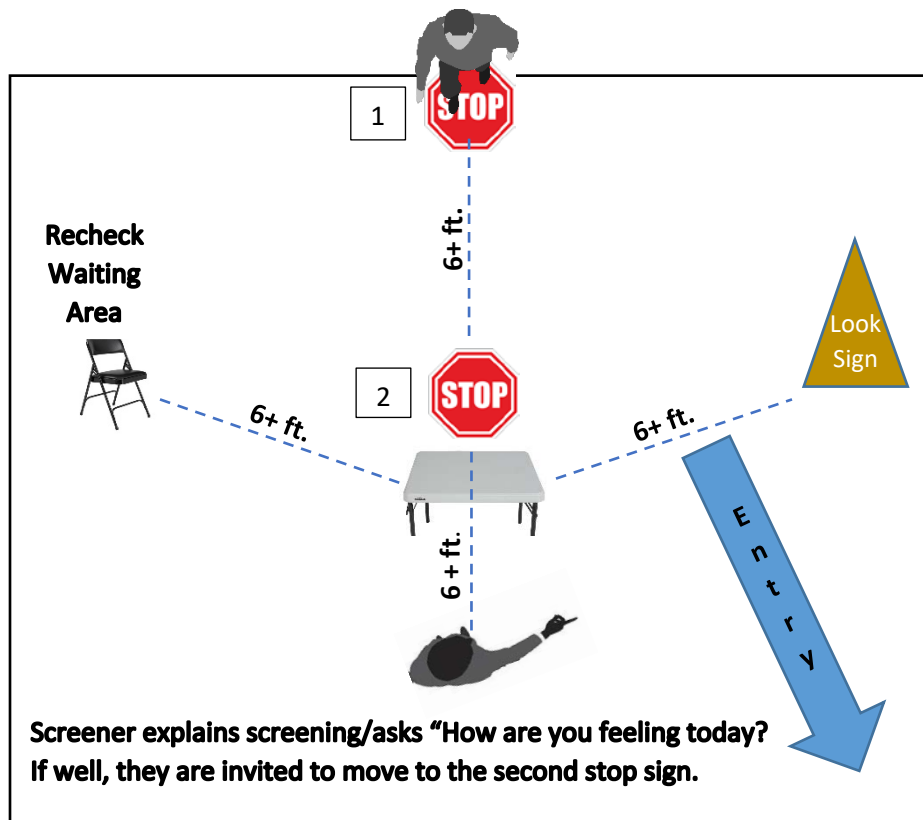
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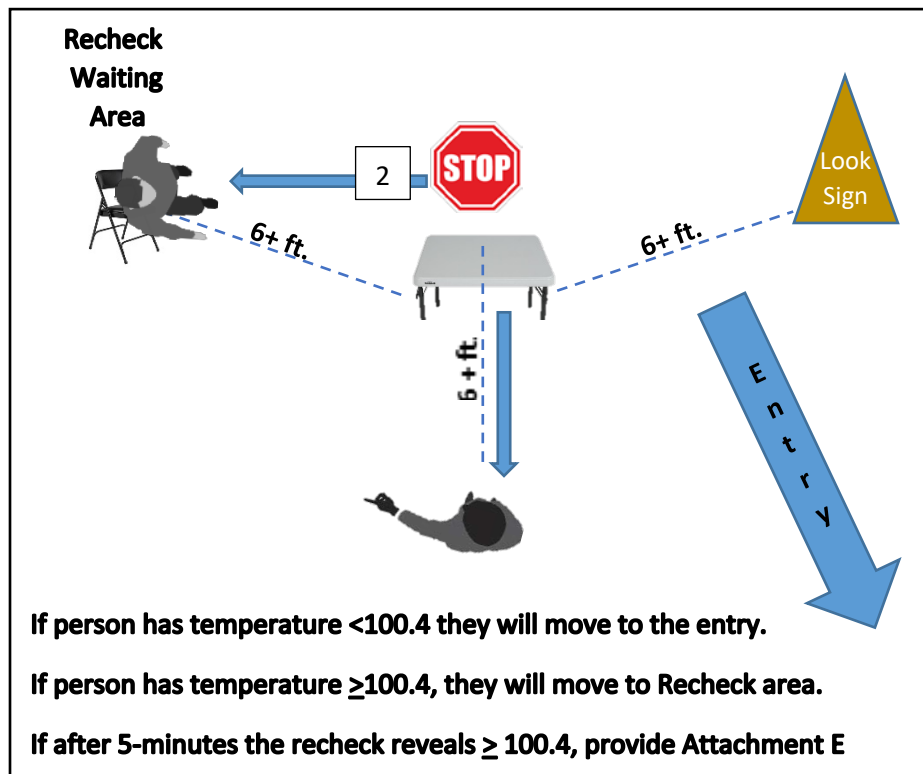
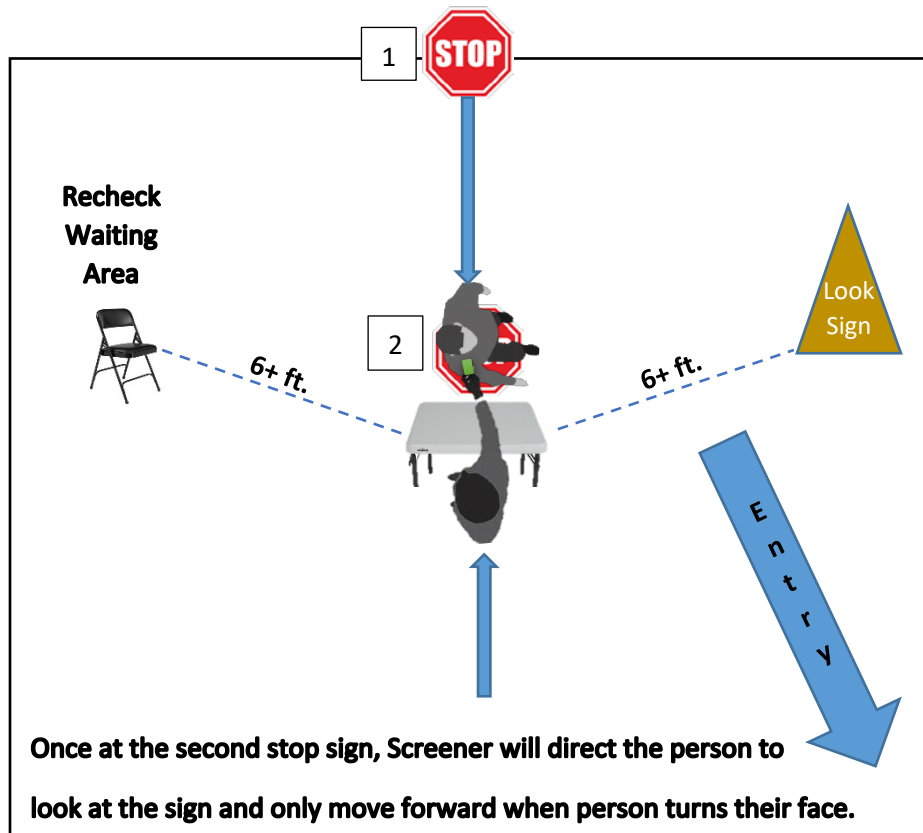
3. **Note:** Person may elect to speak with the local unit commander, activity director, incident command, or health service officer for an appeal or for more information.

Attachment A: Essential Equipment Recommended Set-up

1. Person stops at first stop sign and the screener states “Hello, we are screening people for elevated temperatures and respiratory symptoms” and then asks “How are you feeling today?” (Attachment B).
2. Person is invited to walk to the second stop sign (Attachment B).
3. Person is instructed that this is a voluntary temperature screening (Attachment C)
4. Person is asked to look at the “Look here” sign (Attachment D).
5. Only once the person looks to the side will the temperature taker advance to the table.
6. The person’s temperature will be taken, while they continue to look at the “Look here” sign.
7. If the person’s temperature is less than 100.4° F, they are invited to enter the building, while if the temperature is greater than or equal to 100.4° F, they are asked to have a seat at the waiting chair and have a recheck.
8. If the recheck is greater than 100.4° F, they will be given a card and informed that they are being recommended for non-entry into the building (Attachment E).



Attachment A: Essential Equipment Recommended Set-up (continued)



Attachment B: Stop Sign



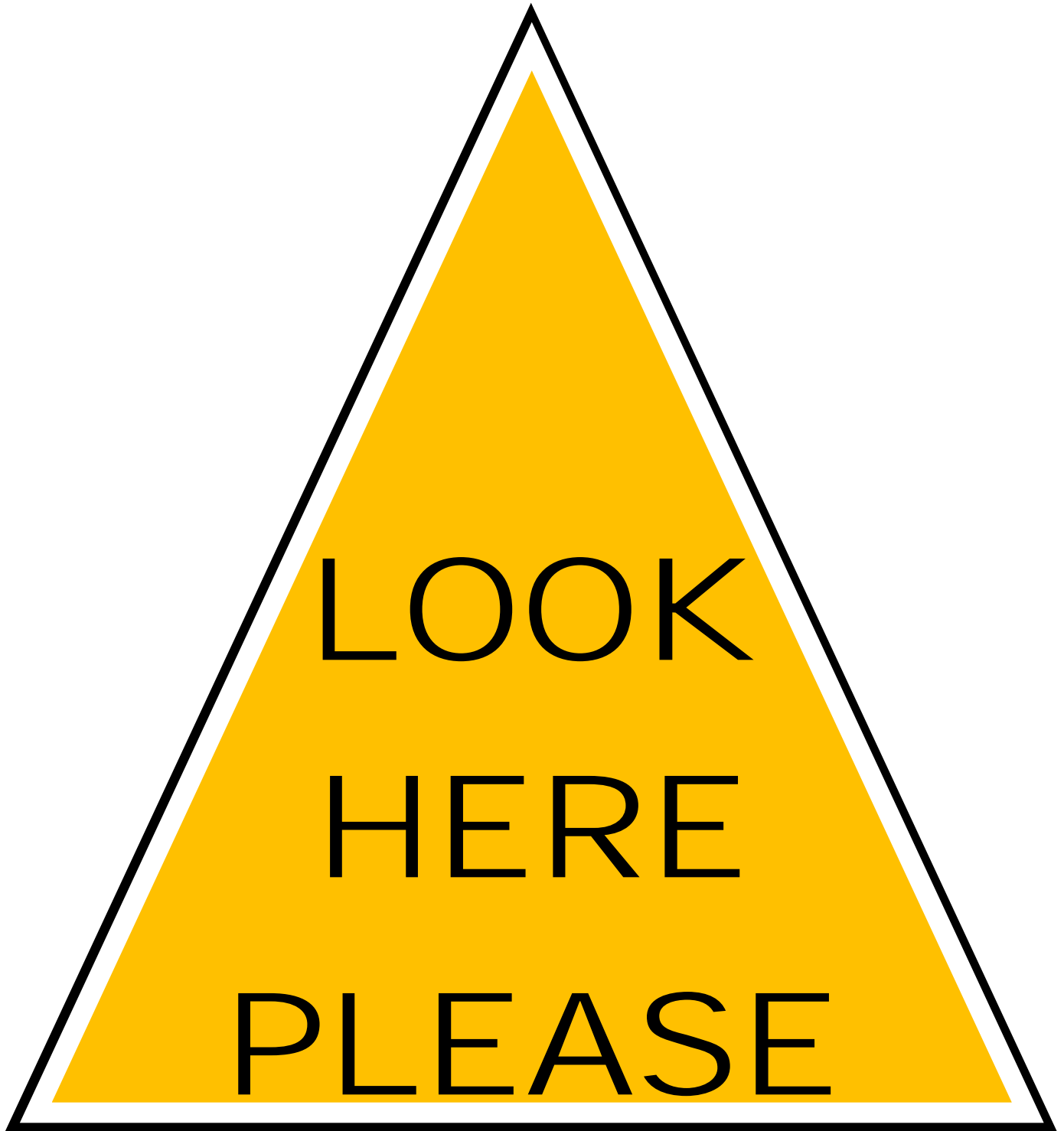
Attachment B: Stop Sign (continued)



Attachment C: Voluntary Instructions Sign

This is a Voluntary
Temperature
Check to protect
our members.
Failure to do so
may result in
non-entry.

Attachment D: Look Here Please Sign



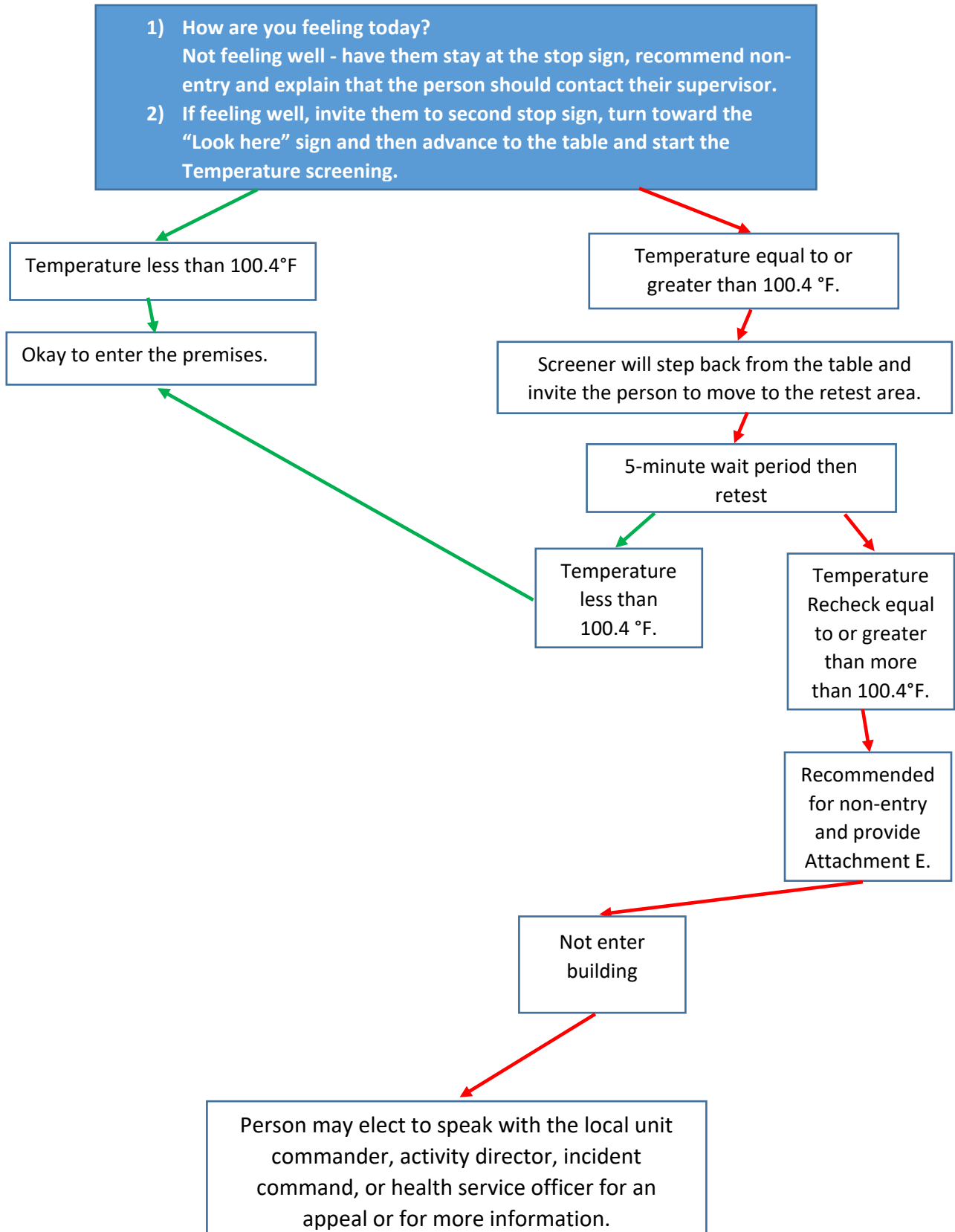
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Attachment E: Recheck Temperature equal to or above (\geq) 100.4°F card

<p>You have been found to have a temperature of at least 100.4° F or above and are being recommended for non-entry into this event/activity. Please contact your healthcare provider and notify them that you had a temperature or are feeling ill. If you have any questions, please contact your supervisor, health service officer, or commander.</p>	<p>You have been found to have a temperature of at least 100.4° F or above and are being recommended for non-entry into this event/activity. Please contact your healthcare provider and notify them that you had a temperature or are feeling ill. If you have any questions, please contact your supervisor, health service officer, or commander.</p>
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Attachment F: Overall Paradigm



Attachment G: Sanitization of Chair, Table, and/or Thermometer Process

- **Routinely during the Screening Process:**
 - Spray table surface with sanitizing solution and wipe/rub for 10 seconds.
 - Wipe thermometer with sanitizing solution or a disinfecting wipe, place on the clean area of the table and wait for it to dry.
 - Spray chair and table legs with sanitizing solution and wipe from top to bottom, then wait to dry.
 - Remove gloves and wash hands with hand sanitizer routinely.
- **After Someone Screens with a Temperature ($\geq 100.4^{\circ}\text{F}$):**
 - Spray your gloves with sanitizing solution.
 - Sanitize areas:
 - Spray table surface with sanitizing solution
 - Wipe thermometer with sanitizing solution or a disinfecting wipe, place on the clean area of the table and wait for it to dry.
 - Spray chair and table legs with sanitizing solution and wipe from top to bottom
 - Remove gloves, wash hands with hand sanitizer, reapply a new pair of gloves and then continue.