

Novel Coronavirus Disease 2019 (COVID-19)

(U) Bottom Line:

- Efficient and sustained human-to-human transmission of COVID-19 has been observed in multiple communities, per the U.S. Northern Command.
- The virus produces fever, cough, and difficulty breathing and can be spread from those who are infected through close contact (within 2-meters) from respiratory droplets that infect a person's mouth, nose, or possible eyes.
- Preliminary data suggests those with medical challenges and age are risk factors for poor outcomes.
- If ill, stay home and do not participate in-person at CAP meetings or activities until you are fever and cough / sneeze free without medications for at least 24-hours.
- Prevention is the cornerstone as the virus remains on surfaces for several days - wash hands frequently, don't touch your face, stay away from the ill, practice cough etiquette, and sanitize community areas frequently. Refrain from shaking hands.
- Commanders in areas with COVID-19 community transmission should follow the local public health guidance and weigh the risk-to-benefit assessment of an in-person meeting versus transitioning the meeting to virtual, telephone, or postponment.
- Commanders outside areas with COVID-19 should rehearse virtual or telephone meetings as a general preparedness measure and continue in-person meetings.
- Essential missions should involve a Health Services Officer to maintain the public health protection steps. (see next page).
- Visit www.ready.gov for preparedness tips.

(U) CAP Member Public Health Message: All CAP members (in the U.S. and Overseas units) should frequently wash their hands with soap and water for 20-seconds (or use hand sanitizer. when soap and water is unavailable), avoid close contact with the sick, cough into their elbows, use facial tissues, avoid commonly touched surfaces, clean commonly touched surfaces, maintain a distance of at least 2-meters from the ill, do not shake hands and call a healthcare provider if you develop a fever (temperature >100.4 Fahrenheit without anti-fever medications), cough or shortness of breath.

Commanders in areas with community transmission of COVID-19 should follow the local public health guidance and perform a risk-to-benefit assessment of an in-person versus transitioning meetings to virtual, telephone, or postponement. Commanders should encourage their members in areas with local transmission of COVID-19 to consider limiting travel to the local area, limit travelling in crowds, so CAP can maintain the workforce's health and be ready for essential missions. Commanders outside areas with community transmission should strongly consider REHEARSING virtual or telephone meetings as a preparedness measure.

(U) Members with Recent Overseas Travel: If a CAP Member is returning to the U.S. from a trip to a country with COVID-19, they will be screened at their port-of-entry. Those returning CAP Members should consider communicating with their Unit Commander and Health Services Officer about performing CAP meetings in a telework, virtual, or alternate work site until they are outside of the 14-day infectious period. All CAP Members who become ill, must not come to in-person meetings/activities. If an ill CAP Member comes to an activity or meeting please notify your chain of command who should reach out to their Health Services Officer for guidance.



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Commanders/Leaders Preparedness Steps

- i) Continue to Review, develop, REHEARSE, and train on the prioritization of the CAP plans for telework, alternate work sites, and alternate work schedules to minimize staffing.
- ii) Monitor your local public health, public school, and State notifications about the level of COVID-19 mitigation actions (e.g., school closing, public health notice).
 - Commanders in an area with community transmission, should perform a risk-to-benefit ratio for an in-person versus telephone, virtual, or postponement of the meeting and also follow the local public health guidance.
 - Commanders outside an area of community transmission, should REHEARSE meetings through telephone meetings, virtual meetings, postponed meetings, or in-person meetings with vigorous sanitation and limed human-to-human contact.
- iv) If in an area of active COVID-19 and the Commander, Activity Director, or Incident Commander decides to have an in-person meeting/mission consult a Health Services Officer to lead/guide the:
 - General public health measures (common area sanitation, hand washing/face touching reminders, cough etiquette, maintenance of a 2-meter distance between people, when possible). For span of control, one active health service officer educating and sanitizing common areas for every 10 members is a reasonable ratio.
 - Identification of potentially unwell members (subjective fever, cough, or difficulty breathing) to the leadership so the leadership can temporarily exclude member participation, if required.

Additional Suggestions:

 It's not too late to get your flu vaccine! While it won't prevent COVID-19, it can help protect you and your family from seasonal flu.



WWW.READY.GOV:

 Store a two-week supply of water and food, sufficient amounts of your regular prescription drugs, and any nonprescription drugs and other health supplies on hand, including pain relievers, stomach remedies, cough/cold medicines and fluids with electrolytes.

Refresher from the Physical Pillar of Strength and Resiliency:

 Practice those healthy lifestyle habits that strengthen immune systems: healthy diets that includes fruits and vegetables, regular exercise, drink recommended amounts of water, get good restorative sleep, reduce stress, limit or avoid alcohol, energy drinks and caffeine; don't use tobacco products.

