



Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

August 3, 2021

SENT VIA EMAIL

Austin Evers
American Oversight
1030 15th Street NW
Suite B255
Washington, District of Columbia 20005
foia@americanoversight.org

Dear Mr. Evers:

This letter is regarding your Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry (CDC/ATSDR) Freedom of Information Act (FOIA) request of April 9, 2020, assigned #20-01215-FOIA.

We located 119 pages of responsive records (28 pages released in full or part; 91 pages withheld in full). After a careful review of these pages, some information was withheld from release pursuant to 5 U.S.C. §552 Exemptions 5 and 6.

Exemption 5 protects inter-agency or intra-agency memorandums or letters which would not be available by law to a party other than an agency in litigation with the agency. Exemption 5 therefore incorporates the privileges that protect materials from discovery in litigation, including the deliberative process, attorney work-product, and attorney-client privileges. Information withheld under this exemption was protected under the deliberative process and presidential communications privileges. The deliberative process privilege protects the decision-making process of government agencies. The deliberative process privilege protects materials that are both predecisional and deliberative. The information that have been withheld under the deliberative process privilege of Exemption 5 are both predecisional and deliberative, and do not represent formal or informal agency policies or decisions. Examples of information withheld include recommendations, comments, opinions. The presidential communications privilege protects documents solicited and received by the President or his immediate White House advisers who have broad and significant responsibility for investigating and formulating the advice to be given to the President.

Exemption 6 protects information in personnel and medical files and similar files when disclosure would constitute a clearly unwarranted invasion of personal privacy. The information that has been withheld under Exemption 6 consists of personal information, such as cell phone numbers, and email addresses. We have determined that the individuals to whom this information pertains has a substantial privacy interest in withholding it.

In addition, the search of CDC files produced records (45 pages) that originated with the Department of Health and Human Services (HHS). Those documents were referred to HHS for review and direct response to you. Please refer to CDC referral request #20-01215-FOIA when seeking records status from HHS for this request. The agencies contact information is provided below:

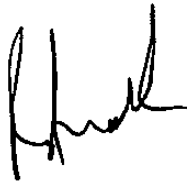
Mr. Brandon Gaylord
Department of Health and Human Services (HHS)
Freedom of Information Officer
Hubert H. Humphrey Building, Room 729H
200 Independence Avenue, SW
Washington, D.C. 20201
Phone: 202-690-7453
Fax: 202-690-8320
Email: FOIARequest@hhs.gov

In accordance with the Department's implementing regulations, 45 CFR Part 5, no FOIA processing fees are due for your request.

You may contact our FOIA Public Liaison at 770-488-6277 for any further assistance and to discuss any aspect of your request. Additionally, you may contact the Office of Government Information Services (OGIS) at the National Archives and Records Administration to inquire about the FOIA mediation services they offer. The contact information for OGIS is as follows: Office of Government Information Services, National Archives and Records Administration, 8601 Adelphi Road-OGIS, College Park, Maryland 20740-6001, e-mail at ogis@nara.gov; telephone at 202-741-5770; toll free at 1-877-684-6448; or facsimile at 202-741-5769.

If you are not satisfied with the response to this request, you may administratively appeal by writing to the Deputy Agency Chief FOIA Officer, Office of the Assistant Secretary for Public Affairs, U.S. Department of Health and Human Services, Hubert H. Humphrey Building, 200 Independence Avenue, Suite 729H, Washington, D.C. 20201. You may also transmit your appeal via email to FOIARequest@psc.hhs.gov. Please mark both your appeal letter and envelope "FOIA Appeal." Your appeal must be postmarked or electronically transmitted by Monday, November 1, 2021.

Sincerely,



Roger Andoh
CDC/ATSDR FOIA Officer
Office of the Chief Operating Officer
Phone: (770) 488-6399
Fax: (404) 235-1852

2 Enclosures:

1. CDC Responsive Records
2. FOIA Request

#20-01215-FOIA

cc: Brandon Gaylord, HHS

From: Patel, Anita (CDC/DDID/NCIRD/OD)
Sent: Fri, 21 Feb 2020 02:58:20 +0000
To: Messonnier, Nancy (CDC/DDID/NCIRD/OD); Butler, Jay C. (CDC/DDID/OD)
Subject: Crimson Contagion AAR - FEMA/ESF8 (b)(5)
Attachments: (FOUO) 20191101- Coordinating Draft Crimson Contagion FE 2019
AAR_21October2019_AP-GEC-MH2.docx

Hi Nancy and Jay,

Please see attached ASPR Crimson Contagion AAR.

(b)(5)

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I don't have the final version of the ASPR document.

(b)(5)

Best,
Anita

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(b)(5)

From: Patel, Anita (CDC/DDID/NCIRD/OD)
Sent: Thursday, February 20, 2020 7:40 PM
To: Messonnier, Nancy (CDC/DDID/NCIRD/OD) <nar5@cdc.gov>
Cc: Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>
Subject: Stafford Act Summary
Importance: High

As requested.

We also have the AAR that ASPR wrote — (b)(5)

(b)(5) Will scan it tonight and send you a summary of the findings.

Thanks,
Anita

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From: LaPorte, Kathleen (CDC/DDID/NCIRD/ID)
Sent: Tue, 31 Mar 2020 15:08:05 +0000
To: Berger, Sherri (CDC/OCOO/OD); Bonds, Michelle E. (CDC/OD/OADC); Butler, Jay C. (CDC/DDID/OD); Campbell, Amanda (CDC/OD/OCS); CDC IMS JIC Lead -2; CDC IMS JIC OADC LNO -2; CDC IMS OD LNO -2; Dennehy, Heather (CDC/OD/OCS); Galatas, Kate (CDC/OD/OADC); Green, Hugh (CDC/OD/OCS); Hoo, Elizabeth (CDC/OD/OCS); Knotts, Ashley (CDC/OD/OCS); Lepore, Loretta (CDC/OD/OCS); McGowan, Robert (Kyle) (CDC/OD/OCS); OConnor, John (CDC/DDID/NCEZID/OD); Romanik, Nikki Jo (CDC/OD/OCS); Schuchat, Anne MD (CDC/OD); Warner, Agnes (CDC/OD/OCS); Stephen.c.redd@nsc.eop.gov
Cc: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO); Burton, Tessa (CDC/DDNID/NCIPC/OD)
Subject: RE: Content updates 3/30 PM
Attachments: Additional Considerations for Childcare Programs_v3B__3_30_20_FINAL-FOR POSTING.docx

Updates 11:00 AM

- **New** Supplemental Guidance for Child Care Programs that Remain Open
- **CDC COVID-19 homepage redesign launched last night** <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

From: LaPorte, Kathleen (CDC/DDID/NCIRD/ID)
Sent: Monday, March 30, 2020 4:43 PM
To: Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>; Stephen.c.redd@nsc.eop.gov
Cc: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>; Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>
Subject: Content updates 3/30 PM

Updates 4:45PM

- **New** People with Disabilities
- **New** Screening clients for respiratory infection symptoms at entry to homeless shelters
- **New** Prepare your Small Business and Employees for the Effects of COVID-19
- **Updated** Interim Clinical Guidance for Management of Patients with Confirmed Coronavirus Disease (COVID-19)
Summary of Updates
 - New information about asymptomatic and pre-symptomatic infections

- Non-steroidal anti-inflammatory drugs, angiotensin-converting enzyme inhibitors, and angiotensin receptor blockers and risk of infection or infection severity
- Information about COVID-19 and potential for SARS-CoV-2 reinfection
- Possibility of infection with both SARS-CoV-2 and other respiratory viruses
- Additional laboratory and imaging findings in COVID-19
- Updated guidelines from the World Health Organization and the Surviving Sepsis Campaign
- Inclusion of new resource: [Information for Clinicians on Therapeutic Options for COVID-19 Patients](#)
- The [COVID-19 homepage](#) will be launching a redesign tonight at 8pm

From: LaPorte, Kathleen (CDC/DDID/NCIRD/ID)

Sent: Friday, March 27, 2020 7:13 PM

To: Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>; Stephen.c.redd@nsc.eop.gov

Cc: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>; Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>

Subject: RE: Content updates 3/27 PM

Updates 7:00PM

- **New** Public Health Recommendations for People in U.S. Communities Exposed to a Person with Known or Suspected COVID-19, other than Health Workers or other Critical Infrastructure Workers
- **New** Strategic priority infection prevention and control (IPC) activities for containment and prevention of COVID-19 cases at healthcare facilities in non-US settings
- **New** Guidance for the Identification of Healthcare Workers and Inpatients with Suspected COVID-19
- **New** Standard Operating Procedure (SOP) for Triage of Suspected COVID-19 Patients: Early Identification and Prevention of Transmission during Triage

From: Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>

Sent: Thursday, March 26, 2020 4:44 PM

To: Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert

(Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>; Stephen.c.redd@nsc.eop.gov
Cc: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>; LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>

Subject: RE: Content updates 3/26 PM

Updates 430PM

- **New PDF resource:** Coronavirus Disease 2019 (COVID-19) Outpatient Dialysis Facility Preparedness Assessment Tool (linked from [Interim Guidance](#))

From: Burton, Tessa (CDC/DDNID/NCIPC/OD)

Sent: Thursday, March 26, 2020 11:25 AM

To: Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>; 'Stephen.c.redd@nsc.eop.gov' <Stephen.c.redd@nsc.eop.gov>

Cc: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>; LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>

Subject: Content updates 3/26 AM

Updates 11AM

- **New PDF resource:** How our facility is keeping patients safe from COVID-19 – Dialysis Outpatient Facility (linked from [Interim Guidance](#))

From: Burton, Tessa (CDC/DDNID/NCIPC/OD)

Sent: Wednesday, March 25, 2020 10:06 AM

To: LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>; Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>; Stephen.c.redd@nsc.eop.gov

Cc: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>

Subject: Content updates 3/25 PM

Updates 10AM

- (b)(5) – expect to post this within the hour

From: Burton, Tessa (CDC/DDNID/NCIPC/OD)

Sent: Tuesday, March 24, 2020 5:04 PM

To: LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>; Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>; Stephen.c.redd@nsc.eop.gov

Cc: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>

Subject: RE: Content updates 3/24 PM

Updated 5PM

- Interim Guidance for Public Health Professionals Managing People With COVID-19 in Home Care and Isolation Who Have Pets or Other Animals
- Coronavirus Disease 2019 (COVID-19) Outpatient Dialysis Facility Preparedness Assessment Tool

From: Burton, Tessa (CDC/DDNID/NCIPC/OD)

Sent: Tuesday, March 24, 2020 10:49 AM

To: LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>; Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>; Stephen.c.redd@nsc.eop.gov

Cc: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>

Subject: Content updates 3/24 AM

Updates 1030AM

- New: Priorities for testing patients with suspected COVID-19 infection (Joe Bresee is POC)
- Updated: Healthcare Infection Prevention and Control FAQs for COVID-19

From: Burton, Tessa (CDC/DDNID/NCIPC/OD)

Sent: Monday, March 23, 2020 8:13 AM

To: LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>; Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>; Stephen.c.redd@nsc.eop.gov

Cc: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>

Subject: Content updated 3/23 AM

Updates 8AM

- **Updated:** Interim Guidance for Administrators and Leaders of Community- and Faith-Based Organizations
 - Revisions were made on March 21, 2020 to reflect the following:
 - Clarification of appropriate mitigation strategies based on level of community transmission of COVID-19 and when a person with confirmed COVID-19 has been in the facility.
 - Consistency with guidance for other community settings (e.g., schools).
- **NEW:** Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities

From: LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>

Sent: Sunday, March 22, 2020 4:54 PM

To: Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>; Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>

Cc: Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>; Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>

Subject: RE: Content updated 3/22 (afternoon PM)

Updates 4:30PM

- **New:** Consumer page People who are at higher risk for severe illness (list of higher risk conditions)

- **New:** Information for Healthcare Professionals: COVID-19 and Underlying Conditions

From: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO) <dvp2@cdc.gov>
Sent: Sunday, March 22, 2020 2:20 PM
To: Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>; Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>
Cc: LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>; Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>
Subject: RE: Content updated 3/22 (early PM)

Additional update posting today in red and attached

From: Olivares, Dagny (CDC/DDPHSIS/CPR/DEO)
Sent: Sunday, March 22, 2020 2:18 PM
To: Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>; Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>
Cc: LaPorte, Kathleen (CDC/DDID/NCIRD/ID) <wng2@cdc.gov>; Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>
Subject: Content updated 3/22 (early PM)

Updates 2:00 pm

Posting today

- Interim Guidance for Responding to Coronavirus Disease 2019 (COVID-19) among People Experiencing Unsheltered Homelessness
- **Updates to Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19),**

Posted since our last update (our sincere apologies for not sending these earlier)

- [Information for Clinicians on Therapeutic Options for COVID-19 Patients](#)
- [Children and Coronavirus Disease 2019 \(COVID-19\)](#)

From: Burton, Tessa (CDC/DDNID/NCIPC/OD) <hrg6@cdc.gov>

Sent: Saturday, March 21, 2020 2:55 PM

To: Berger, Sherri (CDC/OCOD/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meh0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>

Subject: Content updated 3/21 PM

There was a slight delay in web postings yesterday (b)(5)

Here is what we expect to post today:

(b)(5)

From: Burton, Tessa (CDC/DDNID/NCIPC/OD)

Sent: Thursday, March 19, 2020 7:05 PM

To: Berger, Sherri (CDC/OCOD/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meh0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>

Subject: Additional Content updates 3/19 PM

Update 7PM

- New guidance for **Preventing the Spread of COVID-19 in Retirement Communities and Independent Living Facilities (Interim Guidance)**
 - Associated new content:

- Retirement Communities and Independent Living Facilities: FAQs for Administrators
- Coronavirus disease 2019 (COVID-19) Checklist: Older Persons

From: Burton, Tessa (CDC/DDNID/NCIPC/OD)

Sent: Thursday, March 19, 2020 4:32 PM

To: Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>

Subject: RE: Content updates 3/19 PM

Update 430PM

- New CITF content to amplify WH 15-day Message “Taking Advantage of the 15-Day Pause to Slow the Spread of COVID-19: Considerations for state and local community leaders” (expected to post today)
- Updated Hospital Preparedness Checklist (will replace the one [here](#)) – the content in this checklist reflects updated guidance

From: Burton, Tessa (CDC/DDNID/NCIPC/OD)

Sent: Thursday, March 19, 2020 1:41 PM

To: Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>

Subject: RE: Content updates 3/19 PM

Updates 1PM:

- New PDF (based on cleared guidance) “Protect Your Patients and Staff from COVID-19: CDC’s Recommended Infection Control Procedures”
- Cleared Global Level 3 Travel Notice

From: Burton, Tessa (CDC/DDNID/NCIPC/OD)

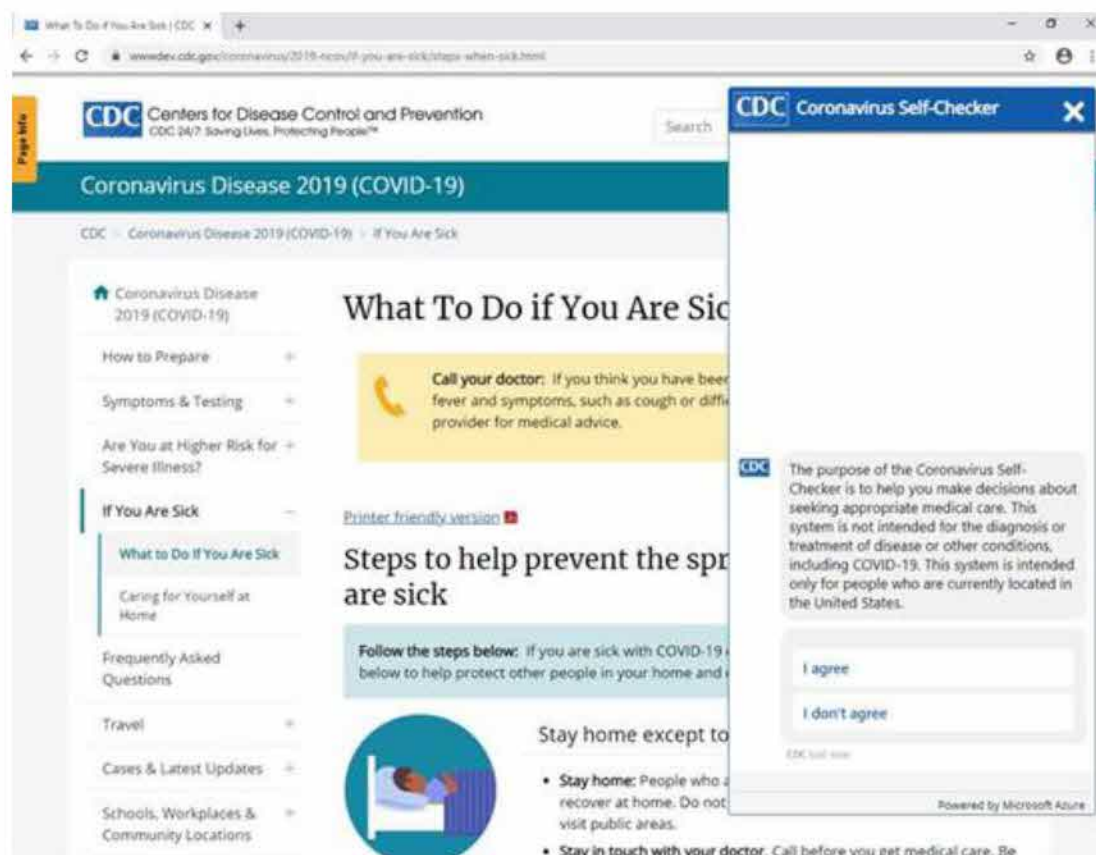
Sent: Thursday, March 19, 2020 10:30 AM

To: Berger, Sherri (CDC/OCOO/OD) <sob8@cdc.gov>; Bonds, Michelle E. (CDC/OD/OADC) <meb0@cdc.gov>; Butler, Jay C. (CDC/DDID/OD) <jcb3@cdc.gov>; Campbell, Amanda (CDC/OD/OCS) <ons3@cdc.gov>; CDC IMS JIC Lead -2 <eocjiclead2@cdc.gov>; CDC IMS JIC OADC LNO -2 <eocevent202@cdc.gov>; CDC IMS OD LNO -2 <eocevent98@cdc.gov>; Dennehy, Heather (CDC/OD/OCS) <kvz6@cdc.gov>; Galatas, Kate (CDC/OD/OADC) <kkg2@cdc.gov>; Green, Hugh (CDC/OD/OCS) <yke8@cdc.gov>; Hoo, Elizabeth (CDC/OD/OCS) <irp5@cdc.gov>; Knotts, Ashley (CDC/OD/OCS) <vqf0@cdc.gov>; Lepore, Loretta (CDC/OD/OCS) <phf7@cdc.gov>; McGowan, Robert (Kyle) (CDC/OD/OCS) <omc2@cdc.gov>; OConnor, John (CDC/DDID/NCEZID/OD) <jpo2@cdc.gov>; Romanik, Nikki Jo (CDC/OD/OCS) <kon6@cdc.gov>; Schuchat, Anne MD (CDC/OD) <acs1@cdc.gov>; Warner, Agnes (CDC/OD/OCS) <bli8@cdc.gov>
Subject: Content updates 3/19AM

Good morning,
A few priority items for you to be aware of:

The self-checker bot is expected to go live today on the following pages:

- <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/caring-for-yourself-at-home.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>



In clearance now:

(b)(5)

Update to web:

- **New:** statement on blood donation
 - In healthcare settings all across the United States, donated blood is a lifesaving, essential part of caring for patients. The need for donated blood is constant, and blood centers are open and in urgent need of donations. CDC encourages people who are well to continue to donate blood if they are able, even if they are practicing social distancing because of COVID-19. CDC is supporting blood centers by providing recommendations that will keep donors and staff safe. Examples of these recommendations include spacing donor chairs 6 feet apart, thoroughly adhering to environmental cleaning practices, and encouraging donors to make donation appointments ahead of time.

Supplemental Guidance for Child Care Programs that Remain Open

These additional considerations are intended to provide guidance for a range of child care programs, including:

- Family child care programs, also known as home-based child care
- Pre-K (Pre-Kindergarten) programs at private and public schools
- Head Start and Early Head Start programs
- Private child care centers
- Temporary child care centers operated by municipalities for the children of essential service providers, such as first responders, healthcare workers, transit workers, and/or other industries where a parent cannot stay home
- Child care centers that partner with healthcare facilities to support healthcare workers who need child care

This information is intended for child care programs that remain open, and should be used in conjunction with CDC's guidance for administrators of [child care programs and K-12 schools](#). This guidance does not supersede state and local laws and policies for child care programs.

GENERAL PREPAREDNESS AND PLANNING

As you think about how your facility will deal with the impact of COVID-19, it is important to work with your local health officials, school districts, childcare licensing boards/bodies, childcare accreditation bodies, health consultants, and other community partners to determine the most appropriate plan and action. This document is meant to help administrators create emergency operations plans and tailor them to your community's level of transmission.

No matter the level of transmission in a community, every child care program should have a plan in place to protect staff, children, and their families from the spread of COVID-19.

See [CDC's guidance](#) for more details.

Prevent the spread of COVID-19

- Encourage staff to take [everyday preventive actions](#) to prevent the spread of respiratory illness.
 - [Wash hands](#) often with soap and water. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty. Remember to supervise young children when they use hand sanitizer to prevent swallowing alcohol.
 - [Cover cough and sneezes](#)
 - Plan ahead to ensure adequate supplies to support hand hygiene behaviors and routine cleaning of objects and surfaces. If you have difficulty in obtaining these supplies, please contact your local Child Care Resource and Referral (CCR&R) Agency which can be found under "[Resources](#)" at Child Care Aware of America.
 - [Clean and disinfect](#) frequently touched surfaces.

- Require sick children and staff to stay home.
 - Communicate to parents the importance of keeping children home when they are sick.
 - Establish procedures to ensure children and staff who come to the child care center sick or become sick while at your facility are sent home as soon as possible.
 - Keep sick children and staff separate from well children and staff until they can be sent home.
 - Plan to have an isolation room or area (such as a cot in a corner of the classroom) that can be used to isolate a sick child.
 - Follow CDC's guidance on how to [disinfect your building or facility](#) if someone is sick.

Monitor and plan for absenteeism among your staff.

- Develop plans to cover classes in the event of increased staff absences. Coordinate with other local child care programs and reach out to substitutes to determine their anticipated availability if regular staff members need to stay home if they or their family members are sick.
- Recommend that individuals at [high risk of serious disease](#) from COVID-19 consult with their medical provider to assess their risk and to determine if they should stay home if there is an outbreak in their community.

Review plans for implementing social distancing strategies. Social distancing focuses on remaining out of congregate settings, avoiding mass gatherings, and maintaining distance from others when possible. Detailed guidance for implementing social distancing strategies in child care centers and schools is found [here](#).

Assess group gatherings and events.

- Follow [current guidance](#) about gatherings and events.
- Plan to limit nonessential visitors and postpone or cancel use of classroom volunteers.

IF YOUR CHILD CARE PROGRAM REMAINS OPEN

Child care programs that remain open during the COVID-19 pandemic should address these additional considerations:

- Implement [social distancing strategies](#)
- Intensify [cleaning and disinfection efforts](#)
- Modify [drop off and pick up procedures](#)
- Maintain an adequate ratio of staff to children to ensure safety.
 - Plan ahead and recruit those with child care experience to ensure you have a roster of substitute caregivers who can fill in if your staff members are sick or stay home to care for sick family members.

Note: Some schools, child care programs, and service organizations are supporting their communities by providing temporary or emergency child care services for the children of essential service providers such as first responders, healthcare workers, transit or food retail workers, and/or persons who do not have paid leave, cannot work from home, or do not have a family caregiver at home.

If you re-purpose your school or service facility as an emergency or temporary child care center, please follow [CDC guidance for administrators of child care programs and K-12 schools](#). Be sure to follow state and local childcare [licensing policies and regulations](#). Specifically, all facilities should continue to adhere to their state and local licensing policies unless otherwise notified by their local health department. Guidance may also be provided by the department of education and/or department of health in your state, city, or locality.

Social Distancing Strategies

Work with your local health officials to determine a set of strategies appropriate for your community's situation. Continue using preparedness strategies and consider the following social distancing strategies:

- If possible, child care classes should include the same group each day, and the same child care providers should remain with the same group each day. If your child care program remains open, consider creating a separate classroom or group for the children of healthcare workers and other first responders. If your program is unable to create a separate classroom, consider serving only the children of health care workers and first responders.
- Cancel or postpone special events such as festivals, holiday events, and special performances.
- Consider whether to alter or halt daily group activities that may promote transmission.
 - Keep each group of children in a separate room.
 - Limit the mixing of children, such as staggering playground times and keeping groups separate for special activities such as art, music, and exercising.
 - If possible, at nap time, ensure that children's naptime mats (or cribs) are spaced out as much as possible, ideally 6 feet apart. Consider placing children head to toe in order to further reduce the potential for viral spread.
- Consider staggering arrival and drop off times and/or have child care providers come outside the facility to pick up the children as they arrive. Your plan for curb side drop off and pick up should limit direct contact between parents and staff members and adhere to social distancing recommendation.
- If possible, arrange for administrative staff to telework from their homes.

Clean and Disinfect

[Caring for Our Children \(CFOC\)](#) sets national policy for cleaning, sanitizing and disinfection of educational facilities for children. Toys that can be put in the mouth should be cleaned and sanitized (see below). Other hard surfaces, including diaper changing stations, door knobs, and floors can be disinfected.

- Intensify cleaning and disinfection efforts:

- Facilities should develop a schedule for cleaning and disinfecting. An example can be found [here](#).
- Routinely clean, sanitize, and disinfect surfaces and objects that are frequently touched, especially toys and games. This may also include cleaning objects/surfaces not ordinarily cleaned daily such as doorknobs, light switches, classroom sink handles, countertops, nap pads, toilet training potties, desks, chairs, cubbies, and playground structures. Use the cleaners typically used at your facility. Guidance is available for the selection of appropriate [sanitizers or disinfectants](#) for childcare settings.
- Use all cleaning products according to the directions on the label. For disinfection, most common EPA-registered, fragrance-free household disinfectants should be effective. A list of products that are EPA-approved for use against the virus that causes COVID-19 is available [here](#). If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. Follow the manufacturer's instructions for concentration, application method, and contact time for all cleaning and disinfection products.
- If possible, provide EPA-registered disposable wipes to child care providers and other staff members so that commonly used surfaces such as keyboards, desks, and remote controls can be wiped down before use. If wipes are not available, please refer to CDC's guidance on [disinfection for community settings](#). .
- All cleaning materials should be kept secure and out of reach of children.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children from inhaling toxic fumes.

Clean and Sanitize Toys

- Toys that cannot be cleaned and sanitized should not be used.
- Toys that children have placed in their mouths or that are otherwise contaminated by body secretion or excretion should be set aside until they are cleaned by hand by a person wearing gloves. Clean with water and detergent, rinse, sanitize with an EPA-registered disinfectant, and air-dry or clean in a mechanical dishwasher. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.
- Machine washable cloth toys should be used by one individual at a time or should not be used at all. These toys should be [laundered](#) before being used by another child.
- Do not share toys with other groups of infants or toddlers, unless they are washed and sanitized before being moved from one group to the other.
- Set aside toys that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for "soiled toys." Keep dish pan and water out of reach from children to prevent risk of drowning. Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings.
- Children's books, like other paper-based materials such as mail or envelopes, are not considered as a high risk for transmission and do not need additional cleaning or disinfection procedures.

Clean and Disinfect Bedding

- Use bedding (sheets, pillows, blankets, sleeping bags) that can be washed. Keep each child's bedding separate, and consider storing in individually labeled bins, cubbies, or bags. Cots and mats should be labeled for each child. Bedding that touches a child's skin should be cleaned weekly or before use by another child.

Parent Drop-Off and Pick-Up

- Hand hygiene stations should be set up at the entrance of the facility, so that children can clean their hands before they enter. If a sink with soap and water is not available, provide hand sanitizer with at least 60% alcohol next to parent sign-in sheets. If possible, place sign-in stations outside. Keep hand sanitizer out of children's reach and supervise use. Consider staggering arrival and drop off times and/or plan to limit direct contact with parents as much as possible.
 - Have child care providers greet children outside as they arrive.
 - Designate a parent to be the drop off/pick up volunteer to walk all children to their classroom, and at the end of the day, walk all children back to their cars.
 - Infants could be transported in their car seats. Store car seat out of children's reach.
- Ideally, the same parent or designated person should drop off and pick up the child every day. If possible, older people such as grandparents should not pick up their children, because they are more at risk for [serious illness](#).
- Persons who have a fever or other signs of illness should not be admitted to the facility. Encourage parents to be on the alert for signs of illness in their children and to keep them home when they are sick. Screen children upon arrival, if possible:
 - ⊖ Conduct temperature screening, using the protocol provided below.
 - Make a visual inspection of the child for signs of infection, which could include flushed cheeks, fatigue, extreme fussiness, etc.
 - Record any symptoms in children's logs or daily health logs

The following is a protocol to safely check an individual's temperature:

- Perform hand hygiene
- Put on a face mask, eye protection (goggles or disposable face shield that fully covers the front and sides of the face), gown/coveralls, and a single pair of disposable gloves
- Check individual's temperature
- **If performing a temperature check on multiple individuals, ensure that a clean pair of gloves is used for each individual and that the thermometer has been thoroughly cleaned in between each check.** If disposable or non-contact thermometers are used and the screener did not have physical contact with an individual, gloves do not need to be changed before the next check. If non-contact thermometers are used, they should be [cleaned routinely as recommended by CDC for infection control](#).
- Remove and discard PPE

Caring for infants and toddlers

- Diapering

- When [diapering](#) a child, [wash your hands](#) and wash the child's hands before you begin, and wear gloves, if possible. Follow safe diaper changing procedures. Procedures should be posted in all diaper changing areas. Steps include:
 - Prepare (includes putting on gloves)
 - Clean child and remove gloves
 - Remove trash (including gloves)
 - Replace diaper
 - Wash child's hands
 - Clean up diapering station
 - Wash hands
- After diapering, wash your hands (even if you were wearing gloves) and disinfect the diapering area with a fragrance-free bleach that is EPA-registered as a sanitizing or disinfecting solution. If other products are used for sanitizing or disinfecting, they should also be fragrance-free and EPA registered. If the surface is dirty, it should be cleaned with detergent or soap and water prior to disinfection.
- If reusable cloth diapers are used, they should not be rinsed or cleaned in the facility. The soiled cloth diaper and its contents (without emptying or rinsing) should be placed in a plastic bag or into a plastic-lined, hands-free covered diaper pail to give to parents/guardians or laundry service.
- Posters with diaper changing procedures are available [here](#).
- It is important to comfort crying, sad, and/or anxious infants and toddlers, and they often need to be held. When washing, feeding, or holding very young children:
 - Child care providers can protect themselves by wearing an over-large button-down, long sleeved shirt and by wearing long hair up off the collar in a ponytail or other updo.
 - Child care providers should wash their hands, neck, and anywhere touched by a child's secretions.
 - Child care providers should change the child's clothes if secretions are on the child's clothes. They should change the button-down shirt, if there are secretions on it, and wash their hands again.
 - Contaminated clothes should be placed in a plastic bag or washed in a washing machine. Infants, toddlers, and their providers should have multiple changes of clothes on hand in the child care center or home-based child care.
- School nurses should use [Standard and Transmission-Based Precautions](#) when caring for patients with confirmed or possible COVID-19. See: [What Healthcare Personnel Should Know about Caring for Patients with Confirmed or Possible COVID-19 Infection](#).

Healthy Hand Hygiene Behavior

- All children, staff, and volunteers should engage in hand hygiene at the following times:
 - Arrival to the facility and after breaks
 - Before and after preparing food or drinks
 - Before and after eating or handling food, or feeding children
 - Before and after administering medication or medical ointment
 - After diapering

- After using the toilet or helping a child use the bathroom
- After coming in contact with bodily fluid
- After handling animals or cleaning up animal waste
- After playing outdoors or in sand
- After handling garbage
- Wash hands with soap and water for at least 20 seconds. If hands are not visibly dirty, alcohol-based hand sanitizers with at least 60% alcohol can be used if soap and water are not readily available.
- Supervise children when they use hand sanitizer to prevent ingestion.
- Assist children with handwashing, including infants who cannot wash hands alone.
 - After assisting children with handwashing, staff should also wash their hands.
- Place posters describing handwashing steps near sinks. Developmentally appropriate [posters](#) in multiple languages are available from CDC.

Food Preparation and Meal Service

- If a cafeteria or group dining room is typically used, serve meals in classrooms instead. If meals are typically served family-style, plate each child's meal to serve it so that multiple children are not using the same serving utensils.
- Food preparation should not be done by the same staff who diaper children.
- Sinks used for food preparation should not be used for any other purposes.
- Caregivers should ensure children wash hands prior to eating.
- Caregivers should wash their hands before preparing food and after helping children to eat.
- Facilities should follow all other local regulations and [guidance](#) related to safe preparation of food.

Vulnerable/High Risk Groups

Children and adults with serious underlying medical conditions, as well as older adults, are believed to be at higher risk for more serious complications from COVID-19. To protect those at [higher risk](#), it's important that everyone practices [healthy hygiene behaviors](#).

- If you have staff members or teachers age 65 or older, or with underlying medical conditions, encourage them to talk to their medical provider to assess their risk and to determine if they should stay home.
- Information about [COVID-19 in children](#) is somewhat limited, but the information that is available suggests that children have mild symptoms. However, a small percentage of children have been reported to have more severe illness. If you have children with underlying health conditions, talk to their parents about their risk.
- If you have children with disabilities, talk to their parents about how their children can continue to receive the support they need.

OTHER RESOURCES

CDC's website contains a variety of [resources for childcare programs and K-12 schools](#), including detailed guidance, considerations for closures, and frequently asked questions for administrators, teachers, and parents. Together, these resources provide additional information on:

- What to do if a child or staff member at your facility becomes sick.
- Closures of child care programs.

The resources emphasize that any decision about temporary closures of child care programs or cancellation of related events should be made in coordination with your local health officials. Child care programs are not expected to make decisions about closures on their own. The resources also address steps to ensure continuity of meal programs and other essential services if your facility is closed however additional government resources related to meals and snacks can be found here:

<https://www.fns.usda.gov/cacfp>

Guidance is also available on these topics:

- [Children and COVID-19](#)
- [Talking with children about Coronavirus Disease 2019](#)
- Information about COVID-19 and:
 - [Pregnancy and breastfeeding](#)
 - [Stress and coping](#)

From: Lepore, Loretta (CDC/OD/OCS)
Sent: Thu, 9 Apr 2020 02:11:49 +0000
To: Redfield, Robert R. (CDC/OD)
Cc: Warner, Agnes (CDC/OD/OCS); Knotts, Ashley (CDC/OD/OCS); Dennehy, Heather (CDC/OD/OCS); Green, Hugh (CDC/OD/OCS)
Subject: FOR REVIEW: Materials for NPR & Bloomberg Interviews
Attachments: Bloomberg interview QA 4.8.20.docx, (b)(5)
(b)(5) Interview Schedule and Bios.docx

Dr. Redfield,

Please find attached materials for your interviews tomorrow with Bloomberg and NPR.

- Interview schedule and bios

(b)(5)

- Bloomberg Q and A

Loretta Lepore
Senior Advisor to the Director
Strategic Communication & Executive External Engagement
Office of the Chief of Staff | Office of the Director
Centers for Disease Control and Prevention
404.718.7814 Office | (b)(6) Cell
Phf77@cdc.gov

**Bloomberg Interview Questions
April 8, 2022**

Two topics –

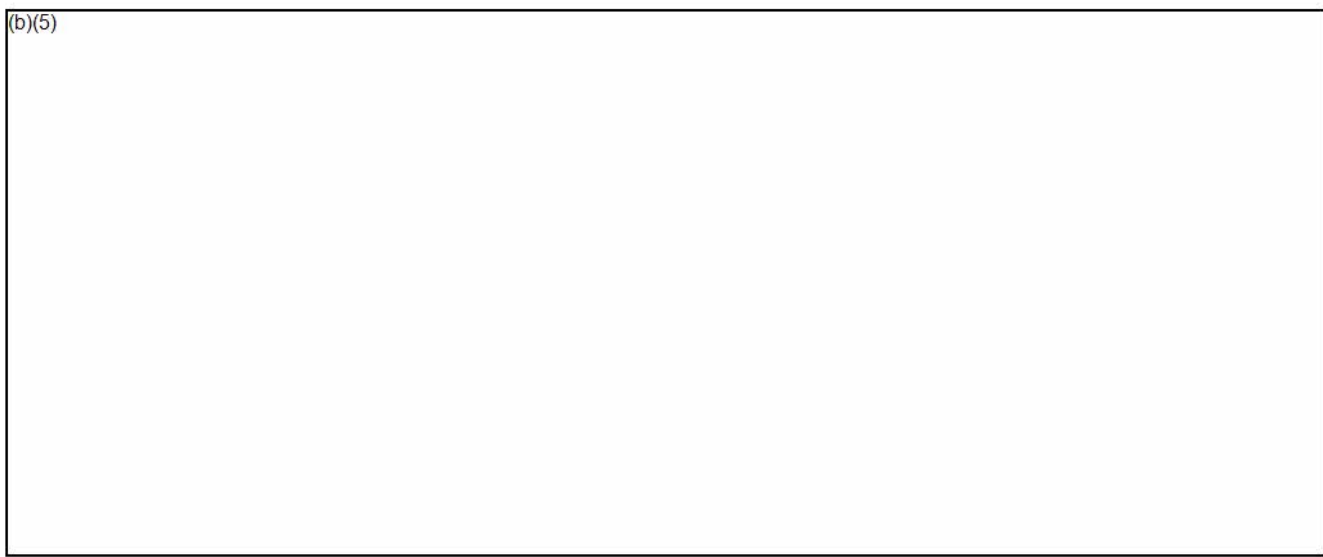
1. CDC being on the sidelines –

(b)(5)

2. What are some of the key functions and behind the scenes work of the CDC in the response?

(b)(5)

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Media Interview Schedule for Thursday, April 9

12:30 to 12:40 p.m.

Prep

12:40 p.m.

National Public Radio (NPR)

- National
- Taped to broadcast same-day
- Timing: 20 minutes
- Contact: Shannon Rhoades, (b)(6) (cell), (b)(6)
- Reporters: Mary Louise Kelly of *All Things Considered* will lead; science reporter Rob Stein will also participate
- Topics: Broadly speaking – we are thinking data, testing, masks, role of CDC, taskforce guidelines.
- Dial-In: (b)(6)

1 p.m.

Bloomberg (print/online only)

- National
- Taped for print interview
- Timing: 30 minutes
- Contact / Reporter: Michelle Fay Cortez, (b)(6)
- Dial-In: (b)(6); Passcode: (b)(6)
- Topics: How the CDC has been responding to the Covid-19 outbreak. You guys have obviously taken a back seat to the Task Force when it come to the public piece, but I know you are working with state and local health departments extensively. Story is looking at the CDC's role in coordinating the response to the coronavirus and the federal response more broadly. We have emails from state officials expressing frustration about the speed of response and some testing issues, as well as information about the agency's public communications and criticism about the lack of clear, consistent messages. There is also the element of the work the agency continues to do behind the scenes, in terms of supporting state and local health departments. I'm seeing the story as a divide between front-end and back-end in terms of what the agency is doing and what it means for the future of how CDC operates.

National Public Radio

Mary Louise Kelly, Co-Host

Mary Louise Kelly is a co-host of *All Things Considered*, NPR's award-winning afternoon newsmagazine.

Previously, she spent a decade as national security correspondent for NPR News, and she's kept that focus in her role as anchor. That's meant taking *All Things Considered* to Russia, North Korea, and beyond (including live coverage from Helsinki, for the infamous Trump-Putin summit). Her past reporting has tracked the CIA and other spy agencies, terrorism, wars, and rising nuclear powers. Kelly's assignments have found her deep in interviews at the Khyber Pass, at mosques in Hamburg, and in grimy Belfast bars.



Kelly first launched NPR's intelligence beat in 2004. After one particularly tough trip to Baghdad — so tough she wrote an essay about it for *Newsweek* — she decided to try trading the spy beat for spy fiction. Her debut espionage novel, *Anonymous Sources*, was published by Simon and Schuster in 2013. It's a tale of journalists, spies, and Pakistan's nuclear security. Her second novel, *The Bullet*, followed in 2015.

Kelly's writing has appeared in the *Wall Street Journal*, *The New York Times*, *The Washington Post*, *Politico*, *Washingtonian*, *The Atlantic*, and other publications. She has lectured at Harvard and Stanford, and taught a course on national security and journalism at Georgetown University. In addition to her NPR work, Kelly serves as a contributing editor at *The Atlantic*, moderating newsmaker interviews at forums from Aspen to Abu Dhabi.

A Georgia native, Kelly's first job was pounding the streets as a political reporter at the *Atlanta Journal-Constitution*. In 1996, she made the leap to broadcasting, joining the team that launched BBC/Public Radio International's *The World*. The following year, Kelly moved to London to work as a producer for CNN and as a senior producer, host, and reporter for the BBC World Service.

Kelly graduated from Harvard University in 1993 with degrees in government, French language, and literature. Two years later, she completed a master's degree in European studies at Cambridge University in England.

National Public Radio

Rob Stein, Correspondent and Senior Editor, Science

Rob Stein is a correspondent and senior editor on NPR's science desk.

An award-winning science journalist with more than 30 years of experience, Stein mostly covers health and medicine. He tends to focus on stories that illustrate the intersection of science, health, politics, social trends, ethics, and federal science policy. He tracks genetics, stem cells, cancer research, women's health issues, and other science, medical, and health policy news.

Before NPR, Stein worked at *The Washington Post* for 16 years, first as the newspaper's science editor and then as a national health reporter. Earlier in his career, Stein spent about four years as an editor at NPR's science desk. Before that, he was a science reporter for United Press International (UPI) in Boston and the science editor of the international wire service in Washington.



Stein's work has been honored by many organizations, including the National Academy of Sciences, the American Association for the Advancement of Science, the American Association for Cancer Research, and the Association of Health Care Journalists. He was twice part of NPR teams that won Peabody Awards.

Stein frequently represents NPR, speaking at universities, international meetings and other venues, including the University of Cambridge in Britain, the World Conference of Science Journalists in South Korea, and the Aspen Institute in Washington, DC.

Stein is a graduate of the University of Massachusetts, Amherst. He completed a journalism fellowship at the Harvard School of Public Health, a program in science and religion at the University of Cambridge, and a summer science writer's workshop at the Marine Biological Laboratory in Woods Hole, Mass.

Michelle Fay Cortez, Medical Science & Tech, Bloomberg



Michelle Fay Cortez has covered science and medicine for Bloomberg News since 1992, tracking advances in health care for more than a quarter century. She hosts the Prognosis podcast about people living on the edge of medical innovation.

She writes about complex conditions that have stymied and invigorated scientists for decades, as well as the companies, regulators and researchers that ultimately come together to offer novel therapies. Her primary area of interest is medical technology and innovation, including how digital health is upending science and medicine, ushering in a new interconnected world, and offering unique challenges and opportunities.

After starting with Bloomberg in Washington, D.C., she has been based everywhere from an island in the Puget Sound to London. She currently lives in Minneapolis, Minnesota, with her husband and family.