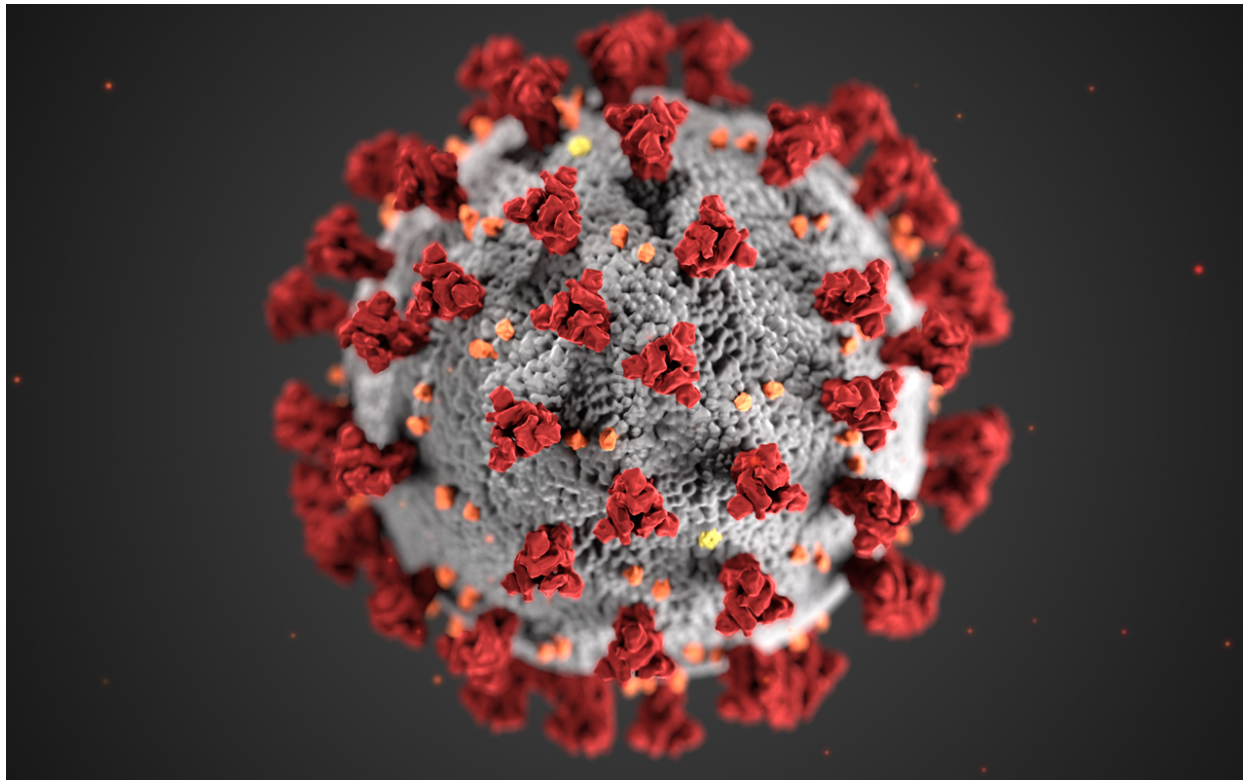


The *Northeast Polk* Gazette

Community News That Matters!

COVID-19 EDITION

Special Edition



Covid-19 Pandemic: We Will Get Through This Together

By: M.C. Reyes, Editor-in-Chief.

Polk County - As a county, we are facing one of the most difficult challenges we can face, but the truth is that we can beat this. We can recover from this... and we will, but we need each other to be able to do it.

Many states have issued "stay at home" orders to try to flatten the curve, Florida being one of them, however issuing the order will not help if we don't follow it. In order for this to work, we need to join forces and do what is asked from us... and most importantly, do what we know is right, so that we can become part of the solution and not part of the problem.

I know that, as a county, we are not built to stay inside for too long, or to be told what to do at every second of the day. However, the problem is that if we don't follow these instructions, we are not only putting ourselves at risk, but also putting those around us at risk as well.

Today, I want to respectfully ask all of you to follow the instructions that are being given to us by the experts and our leaders, so that we can help our country recover from this pandemic.

We all want the best for ourselves, for our families, for our neighbors, for our businesses, but again, unless we unite forces and work towards that goal, we will not achieve it.

The truth is that we need each other. We need everyone around us to work towards that goal... and once we all get on the same page, I promise you, we will beat this. We will help our country get through this and we will come out of it stronger than ever. But, before we can get back to normal, we need to do what is asked from us. It's just that simple.

Again, we will get through this together, but we need to put a little bit more of an effort so we can make this thing go away.

We can do this... Let's help take our country back from the hands of this awful pandemic.

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The *Northeast Polk* Gazette

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#StayHomeSaveLives



The Northeast Polk Gazette

Community News that Matters

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Founder / Editor's Message

By: M.C. Reyes

Hi Guys!

Welcome to The Northeast Polk Gazette. In case you are reading this newspaper for the first time, let me share with you our story.

On May 11 of 2019, my oldest daughter graduated from college. On that day, during the commencement acts, I was not only watching her become an adult, but I was also listening to one of the most motivational speeches I have heard in my life.

You see, the guest speaker was a prior student who, after graduating, went ahead and created her own community magazine. She had no idea what she was doing. All she knew was that she wanted to run her own magazine and that nothing was going to stop her... not even her inexperience.

Fast forward two months (this was back in July 2019), there I was, running my own community newspaper. A dream that started many years ago when I got my first rejection letter for an opinion article that I had written for the Orlando Sentinel. That rejection letter did a number on me and made me stop writing for a while... until one day, I tried again and, this time, the piece was published by them and, with that, came my new desire to become a journalist and to finally create my community newspaper.

My dream of starting the newspaper came with a lot of challenges, and one of them was being stationed overseas for three years due to my husband's active-duty military status. At that time, we were sent to Zimbabwe, Africa and my dreams of starting my beloved newspaper were put, once again, on the back burner.

In May 2016, we came back to the United States after my husband retired from the military and, after dealing with many health issues, I finally decided that it was time for me to make my dream of becoming a freelance writer for major publications come true... that was until one day, I received another rejection letter... this time from The New York Times. On that day, I again stopped writing and became involved in a program called Vet Voices to try to fill the void I had in my life.

Believe me when I say that Vet Voices was a gift sent from heaven. They not only gave my life a different meaning but also made me realize that there was a light at the end of the tunnel.

During my daughter's commencement ceremony, I had another gift sent from heaven... and this time it came in the form of a fellow journalist who, like me, had a dream. But, the difference between her and I was that she made hers become a reality, even when she had all the odds against her, and I was still wondering how to make mine come true. But, her speech made me realize that it was time to do it... that it was time for me to stop procrastinating... that it was time for me to stop allowing my fears to control my dreams.

On that day, I snapped out of my self-pity and decided that it was time... that the time for making my dream come true had arrived and that I needed to put my big girl pants on and do it. And I did. Oh boy, I did. The next day after that commencement ceremony, I took the first step and created the first page of my nonprofit community newspaper, which I tentatively called The Haines City Herald, but later on that night, I changed it to The Northeast Polk Gazette after my husband asked me to think bigger, which I did.

Now, here I am, writing this piece to present to you my biggest dream, my new baby, and the result of my hard work.

The truth is that this newspaper is not a typical newspaper. With this nonprofit community newspaper, I not only want to bring news that matters into our communities, but I also want to use it as a way to give back to our community since a portion of our ad sales will be used to support other nonprofit organizations.

I hope you guys give this newspaper a chance.. give me a chance to show you what hard work and dedication looks like. I promise you, I will not disappoint you.

Thank you in advance for your support.

With Love, Marielys Camacho-Reyes (M.C. Reyes)

Interested in making a donation to our nonprofit? Visit our website at www.thenepolkgazette.com to find out about the ways you can support our organization.

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Contributors:

In effort to provide you the most accurate information about the COVID-19, in this edition, we are joining forces with the following organizations who are at the front lines against the Coronavirus spread.

* CDC *ProPublica * Florida Department of Health * Minnesota Department of Health * AdventHealth

Efforts to Flatten the Curve: Governor DeSantis Issues Statewide, 30-day Stay-at-Home Order



By: Staff Writer.

Florida - Florida Gov. Ron DeSantis issued an executive order last week instructing the state of Florida to “take a pause” for 30 days and stay home amid the coronavirus pandemic.

The statewide stay-at-home order went into effect at 12:01 a.m. Friday. Residents will still be allowed to go out to get essential supplies, including food and groceries.

“I’m issuing an executive order directing all Floridians to limit movements and personal interactions outside the home to only those necessary and essential activities,” the governor said.

He did not order the closure of any beaches, but Volusia County officials on Thursday closed its beaches. Brevard County, however, has taken a different stance, allowing beachgoers to exercise but not sunbathe.

“The order doesn’t specifically say any of that is shut down,” said Brevard County Sheriff Wayne Ivey. “We’re going to find out just how far the order extends.”

The governor has resisted issuing a statewide order of this kind up until this point more than 30 days after the first case of the virus was reported in Florida, but on Wednesday, as Florida’s coronavirus cases neared 7,000, including more than 80 dead, he said it was time.

As of Friday morning, confirmed cases surged past 9,000, with 144 dead. The order drew praise from Orange County Mayor Jerry Demings and Orlando Mayor Buddy Dyer.

“I think the governor came under a lot of pressure to act in the manner that we did 10 days ago,” Dyer said.

More than 30 other states had already issued such orders, including other large states like California, New York and Illinois, all acting more than a week ago.

DeSantis said he spoke to President Donald Trump and members of the coronavirus White House task force prior to making the decision. This week, the Centers for Disease Control and Prevention recommended extending its coronavirus guidelines for an additional 30 days.

“We’re going to be in this for another 30 days and that’s just the reality that we find ourselves in,” DeSantis said.

More than half of Florida’s cases have been in Miami-Dade and Broward counties. DeSantis said that is due to the region’s large number of international travelers.

DeSantis had issued a stay-at-home order Monday for Miami-Dade, Broward and Palm Beach counties and the Florida Keys.

Orange, Osceola and Hillsborough counties issued their own lockdown orders last week and Jacksonville announced Wednesday that it would join them beginning Friday.

The order also comes as a new University of Washington model released this week projects that the worst is yet to come for Florida. According to the models, Florida will see a rapid increase in the number of deaths and hospitalizations in April, with 100 people dying daily by mid-month and over 175 by May 1, when the number nears its peak.

DeSantis said the economic fallout is likely to worsen. In an attempt to mitigate some of that fallout, he plans to accelerate some roadway construction projects across the state while there are fewer drivers on the road. He instructed the Department of Transportation to put their foot on the gas of more than \$2.1 billion in transportation projects.

Some of those projects will include the Howard Frankland Bridge near Tampa and the Sand Lake Road and International Drive extension in the Orlando tourism district.

Meanwhile, hundreds of thousands of people unable to work due to the virus are trying to file for unemployment through the Florida Department of Economic Opportunity and unable to do so because of an ill-equipped website and staffing issues.

The DEO hired an outside vendor to help answer calls and is seeking a bid to create a mobile application process.

Last week, Florida received 222,054 applications for assistance. On Sunday alone, more than 21,100 people applied, according to the DEO.

A \$2.2 trillion federal stimulus bill, known as the CARES Act, signed by Trump last week will provide an additional \$600 a week in unemployment benefits and expanded the benefits to contractors and gig workers who didn’t qualify under Florida’s benefits but those workers still need to apply through the state system.

The governor’s office and DEO officials said they are awaiting direction from the U.S. Department of Labor to implement the CARES Act benefits.

The stimulus bill will also mean U.S. residents receive checks from the federal government. Anyone earning up to \$75,000 in adjusted gross income and who has a Social Security number will receive a \$1,200 payment.

This article first appeared in <https://www.clickorlando.com>. The Associated Press contributed to this story.

Prevent the Spread of COVID-19

Take the same precautions you would to avoid colds and flu.



**Wash your
hands.**



**Stay home
when sick.**



**Cover your
cough.**

For more information, visit health.mn.gov
HOTLINE: 651-201-3920 or 1-800-657-3903

What To Do If You Experience Symptoms During the Quaraintaine

By: AdventHealth.

Davenport - Hearing and reading about the novel coronavirus is nerve-wracking. But what if the virus comes to your community and you (or a family member) show symptoms, such as fever, cough and difficulty breathing?

Whether you're caring for someone with COVID-19 symptoms or you feel them coming on yourself, knowing what to do can give you peace of mind and help prevent spreading disease. This coronavirus disease action plan can help you take the right steps.

Know the Symptoms to Watch For

According to the most recent recommendations from the Centers for Disease Control and Prevention (CDC), you should seek medical advice if you develop symptoms and you have been in close contact with someone known to have COVID-19 or you live in or have recently been in an area with the ongoing spread of the novel coronavirus.

According to the CDC, the most common symptoms of coronavirus include:

- * Cough
- * Fever
- * Shortness of breath

1. Know What to Do First

If symptoms of COVID-19 develop during an outbreak, you may be tempted to go to the hospital emergency department. To help prevent the spread of coronavirus, you should avoid the emergency department at your local hospital except in the event of an emergency.

If you have mild symptoms or are not in a high-risk group, you may be treated at home. If you become sicker, the best thing to do first is to contact your primary care physician from home. Call your doctor's office or make an appointment for a video visit using the secure AdventHealth App.

You can access the AdventHealth App via a computer or mobile device, such as a tablet or smartphone. Simply download the app from the Google Play Store or the Apple App Store.

Why Call Your Doctor First?

One of the major reasons to call your doctor first is because coronavirus is highly contagious. According to the CDC, the virus spreads mainly from person-to-person. If an infected person coughs or sneezes, droplets in the air can travel to others who are within about 6 feet.

If you're feeling sick and leave your house, even for medical care, you could infect others who may have compromised immune systems in the hospital emergency department or doctor's office waiting room.

Calling or scheduling a virtual visit with your doctor first helps protect yourself and others, including medical staff. Also, a phone call or virtual visit with your doctor can help prevent you from contracting novel coronavirus if you're not infected. You may have a cold or the flu instead; COVID-19 symptoms are similar to those illnesses.

What to Discuss With Your Doctor?

During the phone call or virtual visit, tell your provider if you think you have COVID-19 symptoms. Your doctor will have access to your electronic medical record during the appointment. Calling your doctor or scheduling a virtual visit soon after you experience coronavirus symptoms is especially important if you're pregnant, you're age 65 or older or you have an underlying health condition at any age, such as:

- * Diabetes
- * Diseases that cause a weakened immune system

- * Heart disease
- * HIV
- * Kidney failure or liver disease
- * Lung disease, including asthma
- * Prolonged use of corticosteroids, like prednisone
- * Severe obesity (BMI>40)
- * Undergoing treatment for cancer

According to the CDC, people older than 65 and those of any age with an underlying medical condition are at highest risk for serious complications from coronavirus. The CDC is still learning how COVID-19 may affect women who are pregnant or breastfeeding.

If you or another family member is advised to come in to the doctor's office, you'll be directed to the most appropriate place for care.

2. Keep Tabs on Your Symptoms

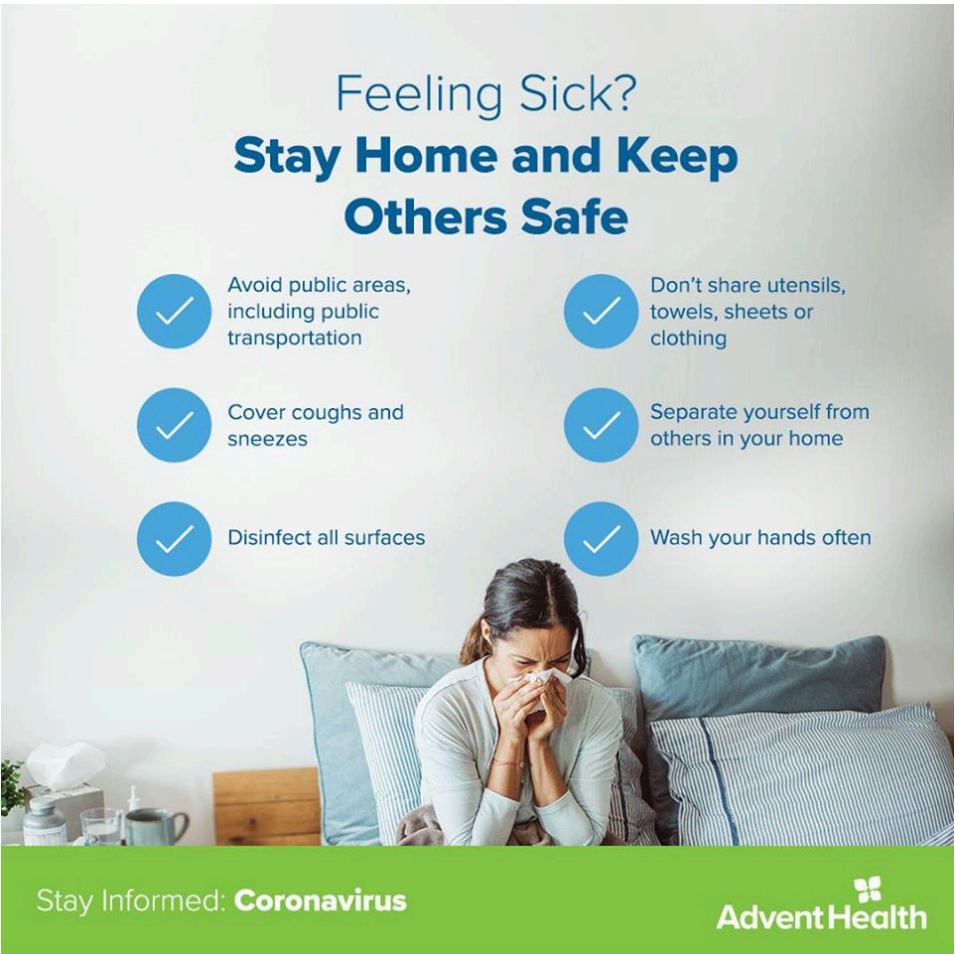
Most people with coronavirus can recover safely at home. If you feel you're in an emergency situation because your coronavirus symptoms are severe, however, call your doctor or 911. Tell the dispatcher you may have coronavirus so that emergency responders can protect themselves and other people they may come in contact with.

Severe coronavirus disease symptoms include:

- * Bluish lips or face
- * Difficulty breathing or shortness of breath
- * New confusion
- * Persistent pain or pressure in the chest

Otherwise, follow your doctor's advice on how to care for yourself at home and monitor your symptoms. Call or have a virtual visit with your doctor again if you think your symptoms are getting worse.

Continues on page 13.



Recommendation Regarding the Use of Cloth Face Coverings



By: CDC.

United States - CDC continues to study the spread and effects of the novel coronavirus across the United States. We now know from recent studies that a significant portion of individuals with coronavirus lack symptoms (“asymptomatic”) and that even those who eventually develop symptoms (“pre-symptomatic”) can transmit the virus to others before showing symptoms. This means that the virus can spread between people interacting in close proximity—for example, speaking, coughing, or sneezing—even if those people are not exhibiting symptoms. In light of this new evidence, CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies) especially in areas of significant community-based transmission.

It is critical to emphasize that maintaining 6-foot social distancing remains important to slowing the spread of the virus. CDC is additionally advising the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others. Cloth face coverings fashioned from household items or made at home from common materials at low cost can be used as an additional, voluntary public health measure.

The cloth face coverings recommended are not surgical masks or N-95 respirators. Those are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance.

This recommendation complements and does not replace the President’s Coronavirus Guidelines for America, 30 Days to Slow the Spread, which remains the cornerstone of our national effort to slow the spread of the coronavirus.

CDC will make additional recommendations as the evidence regarding appropriate public health measures continues to develop.

This article first appeared in www.cdc.gov



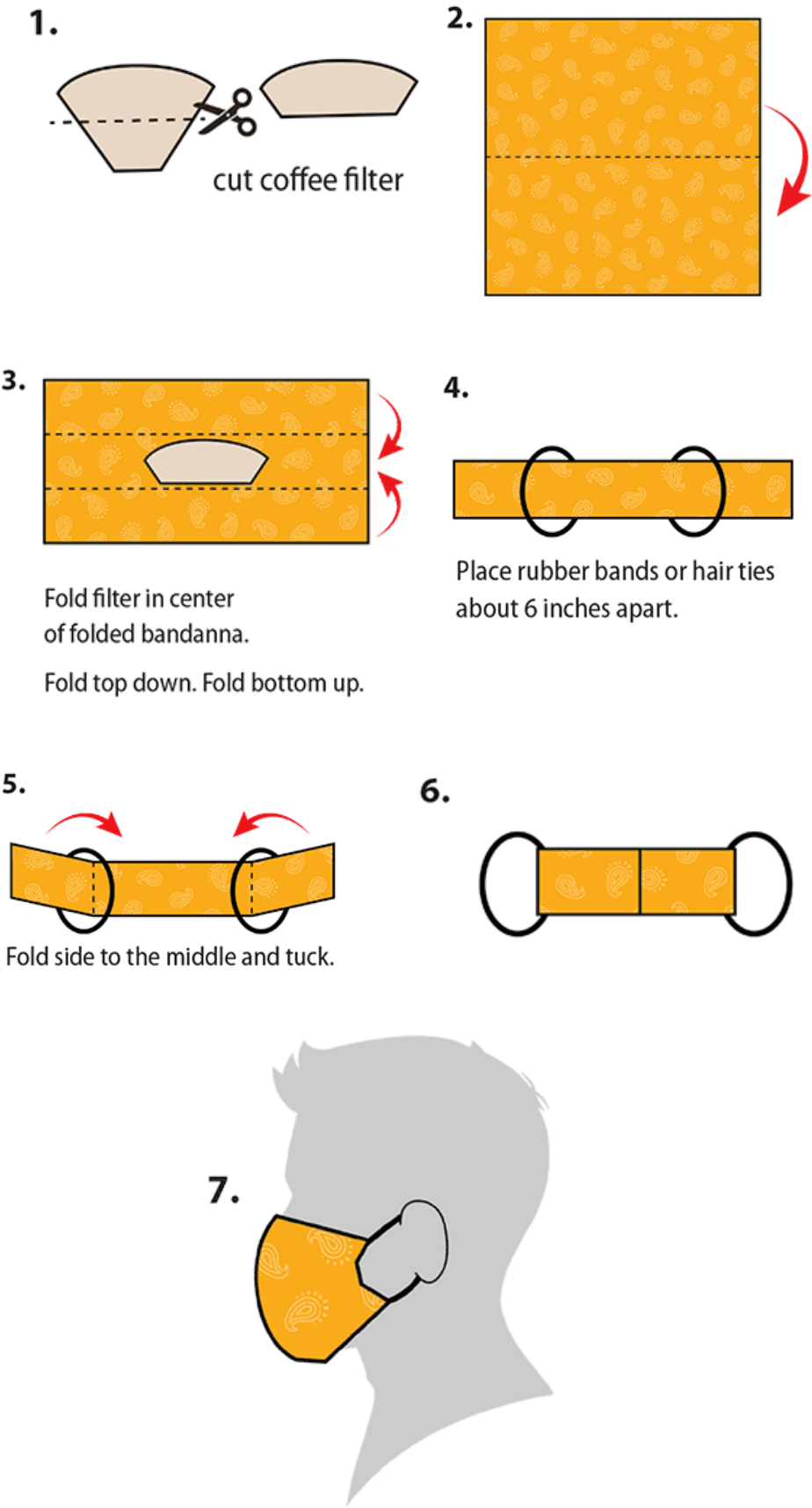
How To Make a Bandanna Face Covering

By: CDC.

Here are some simple instructions on how to make a bandanna face covering.

Materials:

- * Bandana (or square cotton cloth approximately 20”x20”)
- * Coffee filter
- * Rubber bands (or hair ties)
- * Scissors (if you are cutting your own cloth)



As Doctors and Nurses Grow Desperate for Protective Gear, They Fear They're Infecting Patients



By: ProPublica.

Louisiana - Emergency room physician John Gavin can't identify the exact patient from whom he contracted the coronavirus, but he's confident he picked up the illness working one of his 12-hour shifts in Amite, Louisiana's small, rural emergency room.

"There were just so many people who had so many vague symptoms that any of them could have been that person," he said. "We see a lot of viral-type illnesses."

But Gavin, 69, is certain that before his coronavirus diagnosis on March 12, officials at Hood Memorial Hospital, where he works, hadn't made any specific changes to protocols or procedures to protect doctors and nurses from contracting the disease.

"Not at that point they hadn't," said Gavin, who is recovering from the disease caused by the virus. "I don't know if they've done anything since then. But during that time there was nothing other than advice to wash your hands frequently and 'we'll try to keep the water on,'" a reference to a water cutoff that had taken place in early March.

Gavin also said the ER at the time didn't have gowns or N95 respirator masks designed to protect medical providers from airborne particles and liquids.

"No, no, we didn't have any of that," he said. "They offered us paper face masks, that's it."

Gavin later joked that wearing a paper mask was like "putting up chicken wire on your windows to keep the mosquitos out."

Amid the response to the coronavirus, officials are particularly concerned about doctors and nurses getting sick themselves and being unable to care for others. There is no official data accounting for the number of health care workers who have been exposed or infected so far, but providers worry about what will happen as supplies runs out. On Tuesday, The Washington Post reported that at least 60 providers had tested positive for COVID-19. In Italy, data published in JAMA shows that 9% of those infected are health care workers.

Officials with Hood Memorial Hospital declined interview requests but said in a statement that the facility has protective gear available for staff. The statement also said there was no evidence Gavin contracted the disease at the hospital. The statement quotes the hospital's CEO, Mike Whittington, saying that "no patient or employee that Hood is monitoring has developed any symptoms of COVID-19 in the eight days since their interaction with the provider."

Confusion and concerns around supplies extend well beyond Amite. Given the nationwide supply shortages, the U.S. Centers for Disease Control and Prevention recently downgraded its guidelines for how health workers should protect themselves, allowing them to use surgical masks instead of N95 respirator masks in many cases. And this week, the CDC went further, publishing directions that providers "might use homemade masks" like a bandanna or scarf if no masks are available.

Gavin said he was unable to call in sick in the days before his diagnosis because of a shortage of doctors in the area. The small hospital Gavin works at is about 60 miles northeast from Baton Rouge and serves a wide area that stretches to neighboring Mississippi.

"So I went in and worked that shift," he said. "I'm sure I exposed everybody I saw."

And on one of the days immediately prior to Gavin having symptoms, there was a period of time where the water in Amite was shut off and he and his colleagues were unable to wash their hands for hours. They relied on hand sanitizer during the outage.

Sick doctors and nurses cause a ripple effect.

Beth Oller, a family physician in rural Rooks County, Kansas, said the five doctors who treat patients in her area are working together to minimize the risk of any of them getting sick with the coronavirus.

"We are terrified of this taking out providers or our nurses," she said.

The ripple effect of one or two health care workers in the county being sidelined by the virus would be devastating. Oller said she is one of two doctors in the area who delivers babies. Her husband, one of the four other doctors in the county, also cares for patients at the area nursing homes and heads up the local EMS service. There are only a handful of X-ray technicians at the hospital and a small number of nurses.

Oller said the local hospital has a limited supply of masks and gowns. The burden on the local doctors is already beginning to increase because of the virus. The county hospital depends on out-of-area emergency room providers to help cover weekend shifts. One of those, a nurse practitioner based three hours away in Topeka, informed the hospital this week that her travel was being limited by her own hospital because of the virus and she might not be available to cover shifts in Rooks County, Oller said.

Reduced standards due to gear shortages are putting front-line health workers at additional risk.

Medical providers in Washington, Ohio, New York, Connecticut, Oregon, Illinois, Texas and California told ProPublica that in the past week, hospitals have changed recommendations around protective equipment. The moves come after the CDC modified its guidance March 10 on the kinds of precautions health care workers should take in light of supply shortages.

Doctors and nurses in these states said their hospitals initially told them to use sealed face masks like N95s when treating patients presenting COVID-19 symptoms. Providers are now being told to use surgical masks when interacting with a symptomatic patient. In the past week, their hospitals have placed N95s in locked cabinets to make sure they are available for cases requiring intubation.

Continues on page 11.



For Americans With Bills to Pay, Help Is on the Way. Sort Of.

By: ProPublica.

United States - April has arrived. Americans, hunkered down while a pandemic rages, face what to do about their mortgage, their rent payment, their credit card bill and their other debts.

Local, state and federal governments have announced a variety of aid programs to help debtors through this dark period. But like the response to the coronavirus itself, the varying initiatives have been scattered and confused. Some governors acted to stop renters from being evicted weeks ago, while in other states the courts are still open, and meanwhile the federal government says it depends what kind of mortgage your landlord has. The answer to what kind of help can I get is a resounding, “It depends” — on what type of debt you’re talking about, who owns your debt and where you live. And on how long this societywide lockdown carries on. In short, it’s a mess.

Despite politicians’ pledges to help people out, most are still at the mercy of their bank, their landlord and debt collectors. This is why ProPublica is seeking to hear from readers, so we can report on what’s happening.

When it comes to housing, the clearest thing that can be said is that most people are legally protected from being forcibly removed from their homes in the very near term. When it comes to other sorts of debts (with the major exception of most student loans, as we explain below), the federal government has provided no help.

The recently passed \$2 trillion relief bill does involve both cash payments and larger unemployment insurance payments. That will keep some people afloat. We’ll be watching to see how many.

Below, we’ve given a quick overview of the three major types of financial obligations: mortgage, rent and other consumer debts. If you’re having trouble with a lender or landlord, take a look and please tell us how you’re faring.

Mortgage Payments

The government has halted foreclosure filings or evictions until at least May 18, 2020.

For those seeking relief from mortgage payments, the main option initially is a forbearance, which would allow people to suspend their payments. To obtain a forbearance, borrowers will need to contact their mortgage servicer (the company that collects their payments) and simply say they are unable to make their payments because of the coronavirus crisis. No documentation should be necessary. The forbearance should also not result in a negative report to the credit bureaus. Federal guidelines (which cover the two-thirds of mortgages that are government-backed) generally allow a forbearance of up to six months, which can be renewed.

“The critical issue is that ‘up to,’” said Julia Gordon, president of the nonprofit National Community Stabilization Trust. Many servicers are choosing to start with a three-month period, she said, which seems short, given the ongoing spread of the virus and depth of the economic damage. To get a further forbearance, borrowers will need to call again.

Wells Fargo is the largest mortgage servicer by far, processing payments for about \$1.4 trillion in loans, according to Inside Mortgage Finance. Tom Goyda, a Wells spokesman, told us that the bank is granting an immediate 90-day payment suspension to affected mortgage borrowers who request it.

We asked what people should do if, as seems likely, Wells is overwhelmed with calls. Goyda told us that people could “send a message through online banking and request a payment suspension” and that confirmation should come in three to five days.

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The payments missed during a forbearance will still be owed, and borrowers will have to contact their servicers towards the end of the forbearance to learn what’s next. One standard solution for government-backed loans is to extend the term of the loan to repay the missed payments. People whose income does not return to its prior level will need a more extensive loan modification to get affordable payments. That’s a much more complicated process, involving documentation.

Twelve years ago, when the last financial crisis hit, mortgage servicers, particularly the largest banks, made a bad problem worse. As ProPublically reported in story after story, servicers were inadequately staffed, frequently lost paperwork and made countless mistakes that cost people their homes. That was a crisis triggered by unscrupulous mortgage lending, and housing experts said that this time around there are important differences. The loans out there are pretty standard (without traps like sudden interest rate spikes), and borrowers generally have plenty of equity in their homes. Also, thanks to post-crisis reforms, there are now clearer rules about what servicers are supposed to do.

But we will be watching to make sure that servicers are following those rules, whether they are offering homeowners fair terms, and to see how they are treating their customers. So, homeowners, please let us know.

Other Consumer Debts

Here, the story is, unfortunately, simple. There is no federal program to specifically help with non-mortgage debts. The main exception is a provision in the recent \$2 trillion coronavirus relief bill that will suspend payments for six months on federally backed student loans. Everyone else — those with payments for credit cards, auto loans, payday loans or anything else coming due — is on their own.

We hope readers will contact us to tell us whether lenders and collectors are working with them.

Continues on Page 12.



Stress Coping in Times of Uncertainty



By: CDC.

United States - The outbreak of coronavirus disease 2019 (COVID-19) may be stressful for people. Fear and anxiety about a disease can be overwhelming and cause strong emotions in adults and children. Coping with stress will make you, the people you care about, and your community stronger.

Everyone reacts differently to stressful situations. How you respond to the outbreak can depend on your background, the things that make you different from other people, and the community you live in.

People who may respond more strongly to the stress of a crisis include:

- * Older people and people with chronic diseases who are at higher risk for the virus.
- * Children and teens
- * People who are helping with the response to COVID-19, like doctors and other health care providers, or first responders.
- * People who have mental health conditions including problems with substance use

Stress during an infectious disease outbreak can include:

- * Fear and worry about your own health and the health of your loved ones
- * Changes in sleep or eating patterns
- * Difficulty sleeping or concentrating
- * Worsening of chronic health problems
- * Increased use of alcohol, tobacco, or other drugs

People with preexisting mental health conditions should continue with their treatment and be aware of new or worsening symptoms. Additional information can be found at the Substance Abuse and Mental Health Services Administration website.

Taking care of yourself, your friends, and your family can help you cope with stress. Helping others cope with their stress can also make your community stronger.

Things you can do to support yourself:

- * Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.
- * Take care of your body. Take deep breaths, stretch, or meditate. Try to eat healthy, well-balanced meals, exercise regularly, get plenty of sleep, and avoid alcohol and drugs.
- * Make time to unwind. Try to do some other activities you enjoy.
- * Connect with others. Talk with people you trust about your concerns and how you are feeling.

For Parents

Children and teens react, in part, on what they see from the adults around them. When parents and caregivers deal with the COVID-19 calmly and confidently, they can provide the best support for their children. Parents can be more reassuring to others around them, especially children, if they are better prepared.

Not all children and teens respond to stress in the same way. Some common changes to watch for include:

- * Excessive crying or irritation in younger children.
- * Returning to behaviors they have outgrown (for example, toileting accidents or bedwetting).
- * Excessive worry or sadness.
- * Unhealthy eating or sleeping habits.
- * Irritability and “acting out” behaviors in teens.
- * Poor school performance or avoiding school.
- * Difficulty with attention and concentration.
- * Avoidance of activities enjoyed in the past.
- * Unexplained headaches or body pain.
- * Use of alcohol, tobacco, or other drugs.

There are many things you can do to support your child:

- * Take time to talk with your child or teen about the COVID-19 outbreak. Answer questions and share facts about COVID-19 in a way that your child or teen can understand.
- * Reassure your child or teen that they are safe. Let them know it is ok if they feel upset. Share with them how you deal with your own stress so that they can learn how to cope from you.
- * Limit your family’s exposure to news coverage of the event, including social media. Children may misinterpret what they hear and can be frightened about something they do not understand.
- * Try to keep up with regular routines. If schools are closed, create a schedule for learning activities and relaxing or fun activities.
- * Be a role model. Take breaks, get plenty of sleep, exercise, and eat well. Connect with your friends and family members.

For Responders

Responding to COVID-19 can take an emotional toll on you. There are things you can do to reduce secondary traumatic stress (STS) reactions:

- * Acknowledge that STS can impact anyone helping families after a traumatic event.
- * Learn the symptoms including physical (fatigue, illness) and mental (fear, withdrawal, guilt).
- * Allow time for you and your family to recover from responding to the pandemic.
- * Create a menu of personal self-care activities that you enjoy, such as spending time with friends and family, exercising, or reading a book.
- * Take a break from media coverage of COVID-19.
- * Ask for help if you feel overwhelmed or concerned that COVID-19 is affecting your ability to care for your family and patients as you did before.

For People Who Have Been Released From Quarantine

Being separated from others can be stressful, even if you do not get sick. Everyone feels differently after coming out of quarantine. Some feelings include :

- * Mixed emotions, including relief after quarantine.
- * Fear and worry about your own health and the health of your loved ones.
- * Stress from the experience of monitoring yourself or being monitored by others for signs and symptoms of COVID-19.
- * Sadness, anger, or frustration because friends or loved ones have unfounded fears of contracting the disease from contact with you, even though you have been determined not to be contagious.
- * Guilt about not being able to perform normal work or parenting duties during quarantine.
- * Other emotional or mental health changes.

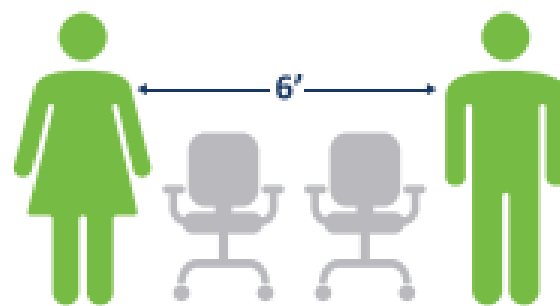
Call your health care provider if stress gets in the way of your daily activities for several days in a row. This article first appeared in www.cdc.gov

Social distancing at work

Slow the spread of COVID-19



Attend meetings virtually when possible.



Allow for 6 feet of space per person.



Maintain sufficient spacing in meetings.

For more information, visit health.mn.gov.
HOTLINE: 651-201-3920 or 1-800-657-3902

Continuation from Page 7

As Doctors and Nurses Grow Desperate
for Protective Gear,
They Fear They’re Infecting Patients

Some hospitals have gone further in loosening restrictions, recommending staff reuse disposable masks. Medical providers on the front lines are concerned by this move, saying masks are only intended to be used once because the risk of contamination increases as they are reused.

“It’s like doing surgery with gloves on one patient and using the same gloves for another surgery,” said John Pearson, an emergency room nurse at Highland Hospital, a public hospital in Oakland, California. The hospital has told staff to reuse surgical masks and place them in paper bags between patients. He said a few of his colleagues have already gotten sick. “It goes against all our training and all the standards and practices we’ve been drilled in year over year.”

Reusing disposable masks is bad practice, but it is understandable in the current situation, experts said. Hospital administrators see reusing masks as a necessary move given the current shortages and the fact that the virus has not hit its peak. The CDC has not issued guidance around mask reuse.

Of the 65 medical providers who wrote into ProPublica this week, 31 said they felt as though they were being asked to take measures that made them uncomfortable, such as reusing protective masks. All but two respondents cited supply shortages as a factor.

A number of hospitals and clinics have advised staff they have less than two weeks of supplies and don’t know when additional orders will be fulfilled, according to emails reviewed by ProPublica. In a private Facebook group, doctors and medical staff are sharing tips for building their own masks from materials they have at home or are ordering from Amazon. After reading through the posts, someone in the group explained they sent a note to a state ACLU chapter to outline conditions and ask if doctors have any recourse to keep themselves safe.

“There is a massive shortage and a dramatic lowering of the quality of care,” Pearson said. “We’ve seen our health care system fall, and we’re paying a huge price.”

Alameda Health Systems, which oversees the hospital, did not respond to questions about supplies and requests for comment.

Protective gear shortages are a national problem.

“This is all driven by shortages of protective gear,” said Dr. Robert Harrison, the director of the University of California San Francisco’s Occupational Health Services. In the United States, surges in demand, lackluster preparation and some overseas suppliers shutting down as their countries grapple with the virus have contributed to the shortages.

Vice President Mike Pence, who is leading the U.S. response to COVID-19, has said a handful of manufacturers are ramping up their production efforts for masks, gloves and gowns. The CDC also has begun fulfilling orders by states requesting masks from the country’s Strategic National Stockpile, which has less than 5% of the 300 million masks public officials estimate the country will need.

Representatives of hospitals and nursing homes shared concerns about a shortage of supplies on a call Monday hosted by the U.S. Centers for Medicare and Medicaid Services. On the call, a high-level official from the U.S. Department of Health and Human Services gave an update on the supply shortage and the hope for replenishment.

The strategic national stockpile “has a significant but, quite frankly, very small percentage of what is needed in today’s crisis,” the HHS official said. Federal officials are coordinating their capabilities with those in the private sector, including group purchasing organizations, distributors and manufacturers, “to basically pull all this together,” he said. Proposals include purchasing a large number of N95 masks, for example, and working with the CDC “to extend the reuse” of what have traditionally been single-use products, he said.

On Wednesday, President Donald Trump invoked the Defense Production Act, which allows for the large-scale diversion of materials and facilities “when national defense needs cannot otherwise be satisfied in a timely fashion.” In recent days, senators and local officials had urged the administration to invoke the legislation that Congress first passed in 1950, during the Korean War.

Front-line health care workers are being pushed to the brink of quitting. Several health care workers told ProPublica they are already weighing the possibility of quitting if their workplace runs out of protective gear.

A nurse practitioner working in northeast Connecticut says her office has already canceled nonessential surgeries and procedures. Staff are now relying on telehealth, in which they communicate with patients largely over the phone or online, to keep people from coming to the facility.

She has five N95 masks stowed away for patients still coming in. She says she’ll reuse them until they’re “soiled or ruined,” but if her office ultimately runs out of protective gear, she will not come in.


“Zero PPE means zero providers,” she said, referring to personal protective equipment. “And I know that my other colleagues feel the same way.”

One intensive care nurse in Columbus, Ohio, says she has an underlying lung disease that puts her especially at risk for COVID-19. During her latest shift this week, she was told her hospital was on its last few boxes of N95 masks. Nurses were hiding the remaining gear and putting their initials on the masks they reused throughout the day.

She says if she is asked to care for potential COVID-19 patients without the proper protection, she will request a different assignment. Still, the mere risk of possible exposure given her condition scares her husband.

“It’s something that’s on the table that we are going to keep discussing, which worries me because I don’t know if people are going to hire nurses that quit at the time they’re needed,” she said.

About ProPublica: ProPublica is a nonprofit newsroom that investigates abuses of power. For more information about the organization, or to read more investigative news, visit them at <https://www.propublica.org/>



If you have been in close contact with Someone Who Has COVID-19

Stay Home	Stay home for 14 days as isolated as possible (starting the day you were exposed)
Isolate	Keep 6 feet or more from others at all times (including people and pets in your home)
Monitor	Monitor your health for symptoms of COVID-19 (fever, cough, shortness of breath)
Sick?	If you think you are sick, follow guidance from the CDC website (https://tinyurl.com/preventspread)

floridahealthcovid19.govcdc.gov/coronavirus

Risk of Animals Spreading COVID-19 to People

By: CDC.

United States - Coronaviruses are a large family of viruses. Some coronaviruses cause cold-like illnesses in people, while others cause illness in certain types of animals, such as cattle, camels, and bats. Some coronaviruses, such as canine and feline coronaviruses, infect only animals and do not infect humans.

Risk of Animals Spreading COVID-19 to People

Some coronaviruses that infect animals can sometimes be spread to humans and then spread between people, but this is rare. Severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS) are examples of diseases caused by coronaviruses that originated in animals and spread to people. This is what is suspected to have happened with the virus that caused the current outbreak of COVID-19. However, we do not know the exact source of this virus. Public health officials and partners are working hard to identify the source of COVID-19. The first infections were linked to a live animal market, but the virus is now spreading from person to person. The coronavirus most similar to the virus causing COVID-19 is the one that causes SARS.

The virus that causes COVID-19 spreads mostly from person to person through respiratory droplets from coughing and sneezing. At this time, there is no evidence that companion animals, including pets, can spread COVID-19 to people or that they might be a source of infection in the United States.

Risk from Imported Animals and Animal Products

CDC does not have any evidence to suggest that imported animals or animal products pose a risk for spreading COVID-19 in the United States. This is a rapidly evolving situation and information will be updated as it becomes available.

Regulation of Imported Animals and Animal Products

The U.S. Centers for Disease Control and Prevention (CDC), the U. S. Department of Agriculture (USDA), and the U.S. Fish and Wildlife Service (FWS) play distinct but complementary roles in regulating the importation of live animals and animal products into the United States. CDC regulates animals and animal products that pose a threat to human health; USDA regulates animals and animal products that pose a threat to agriculture; and FWS regulates importation of endangered species and wildlife that can harm the health and welfare of humans, the interests of agriculture, horticulture, or forestry, and the welfare and survival of wildlife resources.

Stay Healthy Around Animals

In the United States, there is no evidence to suggest that any animals, including pets, livestock, or wildlife, might be a source of COVID-19 infection at this time. However, because all animals can carry germs that can make people sick, it's always a good idea to practice healthy habits around pets and other animals.

- * Wash your hands after handling animals, their food, waste, or supplies.
- * Practice good pet hygiene and clean up after pets properly.
- * Talk to your veterinarian if you have questions about your pet's health.

Risk of People Spreading COVID-19 to Pets

CDC has not received any reports of pets or other animals becoming sick with COVID-19 in the United States.

CDC is aware of a very small number of pets outside the United States reported to be infected with the virus that causes COVID-19 after close contact with people with COVID-19. To date, there is no evidence that pets can spread the virus to other animals or people.

CDC is working with human and animal health partners to monitor this situation and will continue to provide updates as information becomes available. Further studies are needed to understand if and how different animals could be affected by COVID-19.

Protect Pets if You are Sick

If you are sick with COVID-19 (either suspected or confirmed), you should restrict contact with pets and other animals, just like you would around other people. Although there have been no reports of pets or other animals becoming sick with COVID-19, it is still recommended that people sick with COVID-19 limit contact with animals until more information is known about the virus. This can help ensure both you and your animals stay healthy.

- * When possible, have another member of your household care for your animals while you are sick.
- * Avoid contact with your pet including, petting, snuggling, being kissed or licked, and sharing food.
- * If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with them.

This article first appeared in www.cdc.gov

Continuation from Page 8

For Americans With Bills to Pay, Help Is on the Way. Sort Of.

Rent Payments

For the nation's 44 million renters, the situation is more complicated. First, for most tenants, some good news: Formal evictions have been halted for the next few months, thanks to a patchwork of protections on both the federal and local level.

On the federal level, the recent relief bill included a four-month moratorium on filing evictions and charging late fees to renters living in federally backed properties.

Meanwhile, on the state and local level, some governors and mayors have prohibited evictions for a period of time. So far, these orders are generally shorter in duration than the federal moratorium. However, in the near term, they could help out tenants who entered the eviction process before the federal ban went into effect on March 27, who aren't covered by it. And in much of the country, the shutdown buys tenants some time. Since the courts in many places are closed through at least Easter, eviction cases are in limbo until they reopen.

But there are important caveats. The federal moratorium, for instance, doesn't include millions of tenants whose landlords don't participate in government programs or have federally sponsored loans. And the courts aren't closed everywhere.

Tenant advocates also worry that landlords might still try informal ways of putting pressure on tenants, trying to force them out without having to go to court. In Texas, for instance, landlords are allowed to change the lock on delinquent tenants, although they are supposed to provide a key when asked, regardless of whether the tenant can pay. Newton Tamayo, an attorney with Lone Star Legal Aid, said that it used to be extremely rare for clients to contact him because they'd been locked out, but that he'd received several such calls in the past week.

Finally, pausing evictions only provides temporary help. Tenants who have fallen behind still face eventual crisis.

"We're bracing ourselves for a deluge after this stay is up," said Erica Taylor, who handles eviction cases for the Atlanta Volunteer Lawyers Foundation.

This article first appeared in www.propublica.gov

Continuation from Page 5

What To Do If You Experience Symptoms During the Quarantine

3. Rest and Stay Hydrated

Follow your doctor's advice on how to best take care of yourself. Unfortunately, there's no medication to treat coronavirus yet. Generally, the CDC recommends supportive care: resting and staying hydrated as the virus runs its course.

4. Keep Up the Good Work of Managing Your Chronic Health Condition

If you have an underlying medical condition, try not to let coronavirus distract you. Be sure to follow your regular management plan.

If you have asthma, for example, you'll want to continue taking your asthma medication exactly as prescribed and avoid your asthma triggers, such as dust mites and tobacco smoke.

It's also a good idea to get an extra supply of your medications, if possible. Make sure you have an abundant supply of your routine prescription medications for high blood pressure, diabetes or other conditions you have, and any over-the-counter medications you may need for fever and other symptoms in case you do come down with COVID-19.

If you can't get an extra supply of medications at once, sign up for a mail-order service to have your medication delivered to your door.

5. Stay at Home

To avoid infecting others, don't leave your house. If you live alone and need to buy groceries, pet food or other essentials, ask someone to help you get what you need, such as a family member or neighbor, or sign up for a grocery delivery service.

If these ideas aren't options for you, the CDC recommends contacting a community organization to help you get staples while you're housebound. Organizations could include a nearby religious organization or even your local health department.

6. If You Think You Have COVID-19, Stay Away From Family Members

To help prevent the coronavirus disease from spreading to other members of your family, quarantine yourself in a designated room in your house, such as your bedroom, and stay there as much as possible. To avoid spreading the virus, use a separate bathroom, too, if possible.

To protect family members and other caregivers you live with from getting sick, stay about 6 feet away from others, especially if you're coughing or sneezing. Consider communicating by texting or talking with family members from across the room.

7. Use Your Own Dishes and Items

Use your own designated dishes, drinking glasses, cups, eating utensils, towels and bedding, as you cope with COVID-19. After using your kitchen items, wash them in soap and water or the dishwasher.

8. Keep Tissues Handy

If you cough or sneeze, follow the proper hygiene steps, including covering your mouth and nose with a tissue, then tossing it in a lined trash can. Wash your hands immediately with soap and water for at least 20 seconds. Encourage family members to do the same.

9. Don't Touch Your Face

Avoid touching your face, nose and eyes, which provide access for germs to enter your body. Even though you're already sick, this is still a good practice.

Whether you have the novel coronavirus or not, avoiding touching your face in any of these areas can help prevent germs from making your condition worse.

10. Don't Touch Your Face

Avoid touching your face, nose and eyes, which provide access for germs to enter your body. Even though you're already sick, this is still a good practice. Whether you have the novel coronavirus or not, avoiding touching your face in any of these areas can help prevent germs from making your condition worse.

11. Clean High-Touch Surfaces Daily

In your room and bathroom, clean and disinfect all high-touch surfaces: areas you touch every day, such as your bedroom side table, doorknobs, sinks, faucets, toilet, desk, light switches, handles and trashcans.

Use household cleaners and EPA-registered disinfectants that are appropriate for the surface and following label instructions. Use the search box here to see if your favorite brand of household cleaner made the list.

Bleach can also get the job done. To make your own household cleaner, the CDC recommends mixing one-third cup bleach per gallon of water or four teaspoons of bleach per quart of water.

12. Limit Contact With Pets

Currently, there aren't any reports of COVID-19 spreading to household pets. But as a precaution, the CDC recommends limiting your contact with any pets you may have. If there's no one else to take care of your pet, wash your hands before and after interacting with them.

13. Stay Home Until the Coast Is Clear

As you begin to feel better, you may be tempted to leave your room and even venture out of the house. To avoid infecting others, however, the CDC recommends staying put, in your isolation room, until these three things happen:

- * You have three full days with no fever, without taking fever-reducing medication
- * Your symptoms, such as cough or shortness of breath, have improved
- * At least seven days have passed since your symptoms first appeared.

Your doctor can also advise you on when it's safe to take yourself out of quarantine and resume your regular activities.

We're Here to See You Through

At every stage of the pandemic, we're dedicated to giving you the news you need to take care of yourself and your family members. For more information about the coronavirus, visit our Coronavirus Resource Hub.

This article first appeared in <https://www.adventhealth.com/coronavirus-resource-hub/blogs>



30 DAYS TO SLOW THE SPREAD

Listen to and follow the directions of your **STATE AND LOCAL AUTHORITIES**.

IF YOU FEEL SICK, stay home. Do not go to work. Contact your medical provider.

IF YOUR CHILDREN ARE SICK, keep them at home. Do not send them to school. Contact your medical provider.

IF SOMEONE IN YOUR HOUSEHOLD HAS TESTED POSITIVE for the coronavirus, keep the entire household at home. Do not go to work. Do not go to school. Contact your medical provider.

IF YOU ARE AN OLDER PERSON, stay home and away from other people.

IF YOU ARE A PERSON WITH A SERIOUS UNDERLYING HEALTH CONDITION that can put you at increased risk (for example, a condition that impairs your lung or heart function or weakens your immune system), stay home and away from other people.



For more information, please visit
CORONAVIRUS.GOV

DO YOUR PART TO SLOW THE SPREAD OF THE CORONAVIRUS

Even if you are young, or otherwise healthy, you are at risk and your activities can increase the risk for others. It is critical that you do your part to slow the spread of the coronavirus.

Work or engage in schooling **FROM HOME** whenever possible.

IF YOU WORK IN A CRITICAL INFRASTRUCTURE INDUSTRY, as defined by the Department of Homeland Security, such as healthcare services and pharmaceutical and food supply, you have a special responsibility to maintain your normal work schedule. You and your employers should follow CDC guidance to protect your health at work.

AVOID SOCIAL GATHERINGS in groups of more than 10 people.

Avoid eating or drinking at bars, restaurants, and food courts — **USE DRIVE-THRU, PICKUP, OR DELIVERY OPTIONS.**

AVOID DISCRETIONARY TRAVEL, shopping trips, and social visits.

DO NOT VISIT nursing homes or retirement or long-term care facilities unless to provide critical assistance.

PRACTICE GOOD HYGIENE:

- Wash your hands, especially after touching any frequently used item or surface.
- Avoid touching your face.
- Sneeze or cough into a tissue, or the inside of your elbow.
- Disinfect frequently used items and surfaces as much as possible.

CORONAVIRUS.GOV

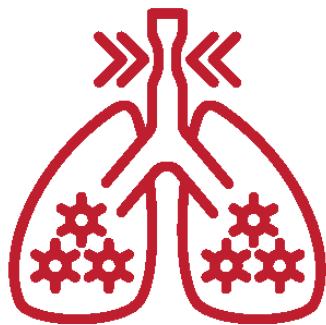
School operations can accelerate the spread of the coronavirus. Governors of states with evidence of community transmission should close schools in affected and surrounding areas. Governors should close schools in communities that are near areas of community transmission, even if those areas are in neighboring states. In addition, state and local officials should close schools where coronavirus has been identified in the population associated with the school. States and localities that close schools need to address childcare needs of critical responders, as well as the nutritional needs of children.

Older people are particularly at risk from the coronavirus. All states should follow Federal guidance and halt social visits to nursing homes and retirement and long-term care facilities.

In states with evidence of community transmission, bars, restaurants, food courts, gyms, and other indoor and outdoor venues where groups of people congregate should be closed.

WHEN TO CALL 911 FOR EMERGENCIES

CALL 911 IF YOU:



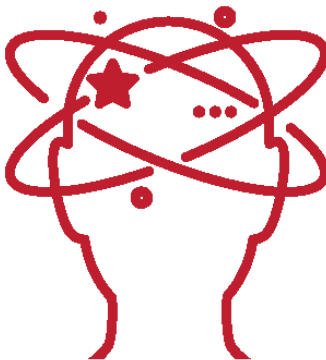
HAVE DIFFICULTY
BREATHING / CHOKING



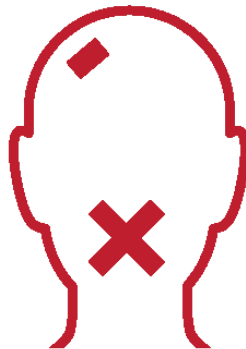
HAVE AN ALLERGIC
REACTION



HAVE SYMPTOMS OF
HEART ATTACK / STROKE



ARE CONFUSED,
DISORIENTED
OR DIZZY



HAVE DIFFICULTY
SPEAKING, WALKING
+ SEEING



HAVE SUDDEN,
SEVERE PAIN

DO NOT CALL 911 IF YOU:



WANT INFORMATION
ABOUT COVID-19



NEED A RIDE TO THE
DOCTOR'S OFFICE



WANT TO GET
TESTED



HAVE MILD
SYMPTOMS*

For more information about COVID-19:

health.pa.gov

*Call your doctor for mild symptoms like fever, shortness of breath, and cough.



pennsylvania
EMERGENCY MANAGEMENT AGENCY



Viruses don't discriminate.

And neither should we.

Stigma will NOT fight coronavirus.
Sharing accurate information will.
Learn more at **health.mn.gov**

If you believe you have been discriminated against because of COVID-19, contact the Minnesota Department of Human Rights by calling 651-539-1133 or 1-800-657-3704.

