

Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission

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Background

This document describes the goals, guiding principles, and strategies for community mitigation to reduce or prevent local COVID-19 transmission. Community mitigation activities are actions that people and communities can take to slow the spread of a new virus with pandemic potential. COVID-19 is an infectious disease caused by a new coronavirus. Community mitigation actions are especially important before a vaccine or therapeutic drug becomes widely available.

Because COVID-19 is highly transmissible and can be spread by people who do not know they have the disease, risk of transmission within a community can be difficult to determine. Until broad-scale testing is widely implemented or we have a more comprehensive and precise measure of disease burden, states and communities should assume some community transmission or spread is occurring.

Individuals need to follow [healthy hygiene](#) practices, [stay at home when sick](#), practice [physical distancing](#) to lower the risk of disease spread, and use a [cloth face covering \(with some exceptions\)](#) in community settings when physical distancing cannot be maintained. These universal precautions are appropriate regardless of the extent of mitigation needed.

Protecting the public's health is paramount. As communities work to reduce the spread of COVID-19, they are also addressing the economic, social, and secondary health consequences of the disease. State, local, tribal, and territorial officials are best positioned to determine the level of mitigation required. Mitigation strategies should be feasible, practical, and acceptable; they should be tailored to the needs of each community and implemented in a manner that minimizes both morbidity and mortality from COVID-19 and does not create or exacerbate any health disparities.

The information that follows provides a framework for states and localities as they consider which actions to take to mitigate community transmission of COVID-19 in the United States. Selection and implementation of these actions should be guided by the extent of disease transmission (Table 1). Demographic and other community characteristics, as well public health and healthcare system capacity, will also drive decisionmaking on mitigation (Table 2). Finally, a set of possible cross-cutting mitigation strategies for communities to consider is outlined (Table 3). More detailed and updated setting or sector specific mitigation strategies can be found [here](#).

Goals

The goal of community mitigation in areas with local COVID-19 transmission is to slow its spread and to protect all individuals, especially those at [increased risk for severe illness](#), while minimizing the negative impacts of these strategies. These strategies are used to minimize morbidity and mortality of COVID-19 in societal sectors such as schools, workplaces, and healthcare organizations.

Implementation is based on:

- Emphasizing individual responsibility for implementing recommended personal-level actions
- Empowering [businesses](#), [schools](#), and [other settings](#) to implement appropriate actions
- Prioritizing settings that provide [critical infrastructure services](#)
- Minimizing disruptions to daily life to the extent possible and ensuring access to health care and other essential services.

Guiding principles

- Community mitigation efforts aim to reduce the rate at which someone infected comes in contact with someone not infected, or reduce the probability of infection if there is contact. The more a person interacts with different people, and the longer and closer the interaction, the higher the risk of COVID-19 spread.
- Each community is unique. Appropriate mitigation strategies should be based on the best available data. Decision making will vary based on the level of community transmission and local circumstances. Refer to [Table 1](#).
- The characteristics of the community and its population, health system and public health capacity, and the local capacity to implement strategies are important when determining community mitigation strategies. Refer to [Table 2](#).
- As communities adjust mitigation strategies, they should ensure that the healthcare system capacity will not be exceeded. Precautions should be taken to protect [health care professionals](#) and other [critical infrastructure workers](#). Communities need to assure [healthcare systems](#) have adequate staffing, a surplus of [inpatient and ICU beds](#), and critical medical equipment and supplies such as [PPE](#).
- As communities adjust mitigation strategies, they should ensure public health capacity will not be exceeded. Public health system capacity relies on detecting, [testing](#), [contact tracing](#), and [isolating](#) those who are or might be sick, or have been exposed to known or suspected COVID-19 cases; it is important to stop broader community transmission and prevent communities from having to implement or strengthen further community mitigation efforts.
- Attention should be given to [people who are at higher risk for severe illness](#) when determining and adjusting community mitigation strategies.
- Certain settings and vulnerable populations in a community are at particularly high risk for transmission. This includes but is not limited to [congregate settings such as nursing homes and other long-term care facilities](#), [correctional facilities](#), and the [homeless population](#).
- Mitigation strategies can be scaled up or down, depending on the evolving local situation, and what is feasible, practical, and legal in a jurisdiction. Any signs of a cluster of new cases or a reemergence of broader community transmission should result in a re-evaluation of community mitigation strategies and a decision on whether and how mitigation might need to change.
- Cross-cutting community mitigation strategies can be organized into the following categories: promoting behaviors that prevent spread; maintaining healthy environments; maintaining healthy operations; and preparing for when someone gets sick. Presuming a community is not sheltering-in-place, cross-cutting strategies under each rubric are outlined below and should be implemented to the extent possible, and in accordance with the amount of ongoing community transmission. Refer to [Table 3](#).
- Community mitigation strategies should be layered upon one another and used at the same time—with several layers of safeguards to reduce the spread of disease and lower the risk of another spike in cases and deaths. No one strategy is sufficient.
- There are range of implementation choices when setting or adjusting community mitigation plans. These choices offer different levels of protection from the risk of community transmission.
- Communities need to decide the level of risk that is acceptable and make informed choices about implementing mitigation plans accordingly.
- Individuals make choices about following the behavioral practices that are recommended. Compliance to community mitigation decisions will also impact the spread of COVID-19.
- CDC offers setting-specific strategies for a variety of sectors that include [businesses](#), [schools](#), [institutes of higher education](#), [parks and recreational facilities](#), and other places.
- Travel patterns within and between jurisdictions will impact efforts to reduce community transmission. Coordination across state and local jurisdictions is critical – especially between jurisdictions with different levels of community transmission.

Table 1. Level of mitigation needed by level of community transmission and community characteristics

Level of Community Transmission	Community characteristics and description	Level of mitigation
Substantial, uncontrolled	Large scale, uncontrolled community	Shelter in place

Substantial, uncontrolled transmission	Large scale, uncontrolled community transmission, including communal settings (e.g., schools, workplaces)	Shelter in place
Substantial, controlled transmission	Large scale, controlled community transmission, including communal settings (e.g., schools, workplaces)	Significant mitigation
Minimal to moderate community transmission	Sustained transmission with high likelihood or confirmed exposure within communal settings and potential for rapid increase in cases	Moderate mitigation
No to minimal community transmission	Evidence of isolated cases or limited community transmission, case investigations underway; no evidence of exposure in large communal setting	Low mitigation

CDC outlines a range of specific [mitigation strategies](#) to consider to slow the spread of COVID-19 by level of mitigation required. This includes protecting individuals at increased risk for severe illness, including older adults and persons of any age with underlying health conditions, and the healthcare and critical infrastructure workforces.

Table 2. Factors to Consider for Determining Mitigation Strategies

Epidemiology	<ul style="list-style-type: none"> • Level of community transmission: more extensive mitigation will be needed when there is greater community transmission • Number and type of outbreaks in specific settings or with vulnerable populations, including, but not limited to nursing homes and other long-term care facilities, correctional facilities, meat and poultry processing plants, and the homeless population • Severity of the disease • Impact of the level of community transmission and any outbreaks on delivery of healthcare or other critical infrastructure or services • Epidemiology in surrounding jurisdictions
Community Characteristics	<ul style="list-style-type: none"> • Size of community and population density • Level of community engagement and support • Size and characteristics of vulnerable populations • Access to healthcare • Transportation infrastructure (e.g., availability and use of mass transit) • Type of business or industry • Congregate settings (e.g., correctional facilities, homeless shelters) • Planned large events/gatherings, such as sporting events • Relationship of community to other communities (e.g., transportation hub, tourist destination, volume of commuting, and other attributes)
Healthcare Capacity*	<ul style="list-style-type: none"> • Healthcare workforce • Number of healthcare facilities (including ancillary healthcare facilities) • Testing activity • Intensive care capacity

intensive care capacity

- Availability of personal protective equipment (PPE)

Public Health Capacity

- Public health workforce and availability of resources to implement strategies (e.g., resources to detect, test, track, and isolate cases)
- Available support from other state/local government agencies and partner organizations

* Consult the [Framework for Healthcare Systems Providing Non-COVID-19 Clinical Care During the COVID-19 Pandemic](#) and [Ten Ways Healthcare Systems Can Operate Effectively during the COVID-19 Pandemic](#).

Table 3. Overview of Possible Mitigation Strategies to Consider in Communities with Local COVID-19 Transmission Across Settings and Sectors*

Promote Behaviors that Prevent Spread

- Educate people to stay home when [sick](#) or when they have been in [close contact](#) with someone with COVID-19
- Teach and reinforce practicing [hand hygiene](#) and respiratory etiquette
- Teach and reinforce the use of [cloth face coverings](#) to protect others (if appropriate)
- Ensure you have accessible sinks and enough supplies that are easily available for people to clean their hands (e.g., soap, hand sanitizer with at least 60% alcohol, and a way to dry hands, such as paper towels or a hand dryer).
- Post [signs](#) or posters and promote messaging about behaviors that prevent spread

Maintain Healthy Environments

- Intensify [cleaning and disinfection](#) of frequently touched surfaces
- Ensure ventilation systems operate properly and increase circulation of outdoor air
- Ensure all water systems are safe to use
- Modify layouts to promote social distance of at least 6 feet between people – especially for persons who do not live together
- Install physical barriers and guides to support [social distancing](#) if appropriate
- Close communal spaces, or stagger use and [clean and disinfect](#) between use
- Limit sharing of objects, or [clean and disinfect](#) between use

Maintain Healthy Operations

- Protect people at [higher risk](#) for severe illness from COVID-19
- To [cope with stress](#), encourage people to take breaks from the news, take care of their bodies, take time to unwind and connect with others, particularly when they have concerns
- Maintain awareness of local or state regulations
- Stagger or rotate scheduling
- Create static groups or “cohorts” of individuals and avoid mixing between groups
- Pursue virtual events. Maintain [social distancing](#) at any in-person events, and limit group size as much as possible
- Limit non-essential visitors, volunteers, and activities involving external groups or organizations, especially with those who are not from the local area
- Encourage telework and virtual meetings if possible
- Consider options for non-essential travel in accordance with state and local regulations
- Designate a COVID-19 point of contact

- Implement flexible and non-punitive leave policies
- Monitor absenteeism and create a back-up staffing plan
- Train staff on all safety protocols
- Consider conducting daily health checks such as [temperature screening](#) or [symptom checking](#)
- Encourage those who share the facilities to also adhere to mitigation strategies
- Put in place communication systems for:
 - Individuals to self-report COVID-19 [symptoms](#), a positive test for COVID-19, or [exposure](#) to someone with COVID-19
 - Notifying [local health authorities](#) of COVID-19 cases
 - Notifying individuals (employees, customers, students, etc.) of any COVID-19 exposures while maintaining confidentiality in accordance with privacy laws
- Notifying individuals (e.g, employees, customers, students) of any facility closures

Prepare for When Someone Gets Sick

- Prepare to isolate and safely transport those who are sick to their home or to a healthcare facility
- Encourage individuals who are sick to follow [CDC guidance for caring for oneself and others who are sick](#)
- Notify [local health officials](#) of any case of COVID-19 while maintaining confidentiality in accordance with the [Americans with Disabilities Act \(ADA\)](#) [↗](#) .
- Notify those who have had [close contact](#) with a person diagnosed with COVID-19 and advise them to stay home and [self-monitor for symptoms](#), and follow [CDC guidance](#) if symptoms develop
- Advise individuals who are sick when it would be safe for them to return based on CDC's [criteria to discontinue home isolation](#)
- Close off areas used by someone who is sick. Wait >24 hours before cleaning and disinfecting. Ensure [safe and correct use](#) and storage of [EPA-approved List N disinfectants](#) [↗](#) , including storing products securely away from children.

* Not all bullets are relevant to each setting or sector. The bullets are meant to be illustrative of community mitigation measures to consider. Refer to [CDC webpage](#) for more detailed information by setting or sector.