

FAITH TOOLKIT



kanehealth.com

Ver. 1, 09/22/2020

TABLE OF CONTENTS

- Introduction letter3
- COVID-19 fact sheet: What you need to know4
- Definitions and concepts related to COVID-195-7
- COVID-19 prevention factors8
- Symptoms of Coronavirus (COVID-19)9
- Safe practices10-12
- Building ventilation13
- COVID-19 Quarantine vs. Isolation14
- COVID-19 Quarantine and Isolation Guidelines15
- Frequently Asked Questions16-19
- Resources20
- Appendix21
 - Sign-in sheet22
 - "We miss you" poster23
 - "Wear a mask" flier24
 - "Wear a mask" flier (no background, printer friendly).....25
 - "Watch your distance" flier26
 - "Watch your distance" flier (no background, printer friendly).....27
 - "Wash your hands" flier28
 - "Wash your hands" flier (no background, printer friendly).....29
 - "3 W's" campaign30
 - "3 W's" campaign (no background, printer friendly).....31

Authors:

Michael Isaacson, MPH
Assistant Director of Community Health
Kane County Health Department

Sophia Ottomanelli, BA
Substance Abuse Prevention Specialist
Kane County Health Department

Kathy F. Zhang, MPH
COVID-19 Communications Coordinator
Kane County Health Department



INTRODUCTION

This toolkit is designed to support all Kane County places of worship and providers of religious services to:

- Assist in safer worship practices and activities for congregants and providers of religious services in Kane County during COVID-19 in accordance with the Illinois Department of Public Health (IDPH) and the Centers for Disease Control and Prevention (CDC) guidance.
- Guide the implementation of measures to reduce COVID-19 transmission in places of worship settings, while meeting the faith and religious needs of all congregants.

The decision to reopen places of worship for in-person services and remain open will depend on several factors including but not limited to:

- Continually evolving scientific understanding of COVID-19
- Local, current COVID-19 case counts, and positivity rates
- Geographic distribution of cases
- The degree to which places of worship are contributing to community spread of COVID-19
- The capacity of our health system to identify and care for cases
- The availability and use of widespread testing to identify new cases
- The ability to quickly receive testing results to effectively isolate or quarantine county residents to minimize transmission in places of worship and the community
- The community's continued cooperation in practicing social distancing, using face coverings, staying home when sick, isolating, and taking other preventive measures as needed

This guidance will be revised based on new data regarding COVID-19 transmission and its impact on places of worship.

This document contains guidance for providers of religious services and personnel to understand what processes to follow to report any individuals who tested positive or have COVID-like symptoms to the Kane County Health Department (KCHD). This toolkit also provides resources to help providers of religious services and personnel implement state and federal guidance.

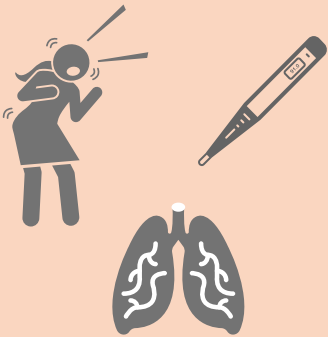
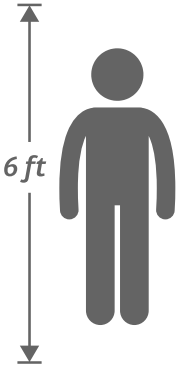
COVID-19 FACT SHEET

What you need to know

WHAT IS COVID-19?

- Coronavirus (COVID-19) is an illness caused by the SARS-CoV-2 virus that can spread from person to person. SARS-CoV-2 is a new coronavirus that has spread throughout the world. COVID-19 symptoms can range from mild (or no symptoms) to severe illness.

- One can become infected with COVID-19 by coming into close contact (about 6 feet or two arm's length for at least 15 minutes) with a person who has COVID-19. COVID-19 is primarily spread from person to person. You can become infected from respiratory droplets when an infected person coughs, sneezes, or talks. You may also be able to get it by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes.



SYMPTOMS OF COVID-19

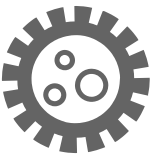
People with COVID-19 can have no symptoms, mild symptoms, or severe illness. Symptoms of COVID-19 may include:

- Fever or chills
- Cough
- Shortness of breath or Difficulty breathing
- Fatigue
- New loss of taste or smell
- Muscle or Body Aches
- Congestion or Runny Nose
- Headache
- Sore Throat
- Diarrhea
- Nausea and Vomiting

HOW IS COVID-19 SPREAD?

COVID-19 is thought to be spread mainly from person-to-person:

- Between people who are in close contact with one another (within about 6 feet for at least 15 minutes).
- Through respiratory droplets produced when an infected person coughs, sneezes, or talks.
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- COVID-19 may be spread by people who are not showing symptoms.
- It may be possible to get COVID-19 by touching an object or surface with the virus on it, then touching your mouth, nose, or eyes before washing your hands.



HOW IS COVID-19 TREATED?

Your physician can provide guidance as to your specific situation and symptoms that you are experiencing. Following supportive care guidance, such as getting plenty of rest and staying hydrated can help relieve symptoms. There is currently no vaccine available to protect against COVID-19.

DEFINITIONS AND CONCEPTS RELATED TO COVID-19

- **Antibody test:** A test to discover if your immune system has made antibodies in response to a disease, such as COVID-19. Antibody tests should not be used to diagnose someone for COVID-19. At this time, it is not yet known if having antibodies correlates with immunity to COVID-19. (FDA)
- **Asymptomatic:** An individual who does not report or appear to have any symptoms or signs of illness. To be responsible, everyone should act as if they are carriers of COVID-19. (CDC)
- **Close contact:** Being within approximately 6 feet (2 meters) of an individual with COVID-19 for at least 15 minutes. Close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with an individual who has COVID-19.
- **Community spread:** The spread of a contagious disease to individuals in a particular geographic location who have no known contact with other infected individuals. (CDC)
- **Diagnostic test:** A test to show if you have an active coronavirus infection in your body. RT-PCR and antigen tests are examples of diagnostic tests. Antigen tests are considered rapid diagnostic tests. (FDA)
- **Disease cluster:** An increased incidence of a disease occurring around the same time, and in the same geographic area. (CDC)
- **Epidemic:** An epidemic occurs when an infectious disease spreads rapidly to many people. An epidemic is generally larger and more severe than an outbreak, but less severe than a pandemic. (APIC)
- **Face coverings:** To prevent infection, it is recommended that the nose and mouth be covered with a mask or cloth face covering. Face coverings slow the spread of COVID-19 by limiting the release of the virus into the air.
- **Handwashing guidelines:** Proper handwashing reduces the spread of COVID-19. Hands should be washed frequently with soap and water for at least 20 seconds. If soap and water are not readily available, use of a hand sanitizer that contains at least 60% alcohol is appropriate. Hand sanitizer should be applied to all surfaces of both hands and rubbed together until they feel dry. (CDC)

DEFINITIONS AND CONCEPTS RELATED TO COVID-19

- **Higher risk populations:** Individuals who are at a higher risk for developing severe illness from COVID-19 include those with underlying conditions such as cancer, chronic kidney disease, lung disease, serious heart conditions, sickle cell disease, diabetes, obesity, hypertension, or those who are immunocompromised. (CDC)
- **Immunocompromised:** Individuals with a weakened immune system. Immunocompromised individuals “have a reduced ability to fight infections and other diseases” and are more likely to experience severe illness from COVID-19. (NIH) (CDC)
- **Incubation period:** The time from exposure to when the first symptoms develop. Recent studies have found the incubation period of COVID-19 to be 2-14 days and is most commonly around 5 days. (CDC)
- **Isolation:** The separation of a person or group of people known or reasonably believed to be infected with a communicable disease and potentially infectious from those who are not infected to prevent spread of the communicable disease. Isolation for public health purposes may be voluntary or compelled by federal, state, or local public health order. (CDC)
- **Outbreak:** Two or more confirmed COVID-19 cases who are epidemiologically linked to the outbreak setting and have onsets of illness within a 14 day period.
- **Pandemic:** A global spread of disease to several countries or continents, usually affecting a large number of people. A pandemic affects a greater geographical area and a greater number of people than an outbreak or epidemic. (WHO)
- **Quarantine:** The separation of a person or group of people reasonably believed to have been exposed to a communicable disease but not yet symptomatic, from others who have not been so exposed, to prevent the possible spread of the communicable disease. (CDC)
- **Social distancing:** The act of remaining out of crowded public places where close contact with others may occur and maintaining a distance of at least 6 feet from others. (CDC)

DEFINITIONS AND CONCEPTS RELATED TO COVID-19

- **Underlying conditions:** Individuals with serious pre-existing medical conditions, as well as older adults, are more at risk of developing serious illness from COVID-19 than others. Serious underlying health conditions that make a person more at risk for developing severe illness include: chronic lung disease, moderate to severe asthma, heart disease with complications, hypertension, diabetes, BMI > 30, renal disease, liver disease, or those who are immunocompromised due to conditions such as receiving cancer treatment. (CDC)



Symptoms of Coronavirus (COVID-19)

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



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

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

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

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



SAFE PRACTICES

The Illinois Department of Public Health states that the safest options for worship are remote and drive-in services.

Drive-In Service Guidance:

- Congregants who live together should drive together.
- Ensure that all congregants remain in their vehicles during the whole service.
- Have all vehicles be 6 feet apart to allow for social distancing, especially when windows are open.

Outdoor Worship Guidance:

- Ensure that face coverings are worn by all.
- Groups who do not live together should be sitting 6 feet apart.
- Try to have worship sessions that are 50 people or less.

Indoor Worship Guidance:

- Ensure that face coverings are worn by all.
- Groups who do not live together should be sitting 6 feet apart.
 - Mark areas where congregants are allowed to sit or not sit.
 - Consider having an usher lead congregants to appropriate seating area in order to ensure social distancing.
 - Dismiss congregants one household group at a time to ensure social distancing and minimize crossflow of people.
- Current statewide guidance encourages gatherings of no more than 50 people. When this is not possible, limit attendance to 25% of the building capacity or 100 people, whichever is lower.
- Close or restrict common areas, such as break rooms, foyers, child care rooms.
- Remove from service communal / religious water containers (e.g., sinks, vessels) or change water after each service.
- Open windows and doors when possible to allow fresh air into building.

SAFE PRACTICES

Indoor / Outdoor Worship Guidance:

- Implement a reservation system for each service time for congregants so capacity limits are adhered to.
- Shorten the length of service to limit the amount of time people are together in one setting.
- Consider offering more services for more people to attend whilst following capacity limits.
 - Offer separate services for those who are 65 or older and / or are immunocompromised.
- Screen all employees, visitors, and congregants for COVID-19 symptoms.
 - If thermometer guns are available, take everyone's temperature.
 - Ask if anyone in the household group has any COVID-19 symptoms or has come into contact with anyone who is COVID-19 positive.
 - If staff, congregant, or visitor is experiencing any symptoms or has come into contact with a positive case, have them stay home to stop the spread of disease and protect others.
- Refrain from passing around any communal objects (e.g., collection baskets).
- Refrain from using shared items, such as prayer or song books, cushions, or prayer rugs.
- Discourage staff, congregants, and visitors from activities, such as shaking hands and hugging.
- Install hand sanitizer dispensers if possible.
- Frequently disinfect common or high traffic areas (e.g., restrooms, hallways, etc.).
- Strongly consider discontinuing singing and group recitation.
 - If singing and group recitation occurs, make sure it is done in an outside setting and congregants who are not in the same household are sitting at least 10 feet apart and wearing face coverings.
 - Offer face shields in addition to face coverings when possible for extra protection.

SAFE PRACTICES

In-Person Faith Ministry Meetings and Special Events:

- All in-person meetings and special events need to limit attendance to 50 people or less.
- People who are not part of the same household need to be 6 feet apart.
- All guests or participants should wear a face covering over their mouth and nose during the event or meeting.
- Symptom monitoring and temperature checks should occur on site.
- If possible, designate one door as an entrance and one as an exit to avoid congestion.
- If check-in is required, have an online check-in option available.
- Eliminate congregate water stations. Provide individual water bottles to guests or attendees.
- If food must be served, be sure to use single-serve containers to give out food items.
- Those who are serving food should wear face coverings, disposable gloves, and wash their hands for 20 seconds with soap and water frequently.
- Increase air ventilation when available (e.g., opening windows or doors).

BUILDING VENTILATION

For building ventilation:

- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible, for example by opening windows and doors. Do not open windows and doors if doing so poses a safety or health risk (e.g., risk of falling or triggering asthma symptoms).

Since COVID-19 may be spread by those with no symptoms, organizations should evaluate and institute controls according to the [hierarchy of controls](#) to protect their staff and members of the general public. **Consider improving the engineering controls using the building ventilation system.** This may include some or all of the following activities:

- Increase ventilation rates.
- Ensure ventilation systems operate properly and provide acceptable indoor air quality for the current occupancy level for each space.
- Increase outdoor air ventilation, using caution in highly polluted areas. With a lower occupancy level in the building, this increases the effective dilution ventilation per person.
- Disable demand-controlled ventilation (DCV).
- Further open minimum outdoor air dampers (as high as 100%) to reduce or eliminate recirculation. In mild weather, this will not affect thermal comfort or humidity. However, this may be difficult to do in cold or hot weather.
- Improve central air filtration to the MERV-13 or the highest compatible with the filter rack, and seal edges of the filter to limit bypass.
- Check filters to ensure they are within service life and appropriately installed.
- Keep systems running longer hours, 24/7 if possible, to enhance air exchanges in the building space.

Note: Some of the above recommendations are based on the American Society of Heating, Refrigerating, and Air-Conditioning Engineers (ASHRAE) [Guidance for Building Operations During the COVID-19 Pandemic](#). Review these ASHRAE guidelines for further information on ventilation recommendations. The ASHRAE site also recommends HEPA filters.

COVID-19: Quarantine vs. Isolation

QUARANTINE keeps someone who was in close contact with someone who has COVID-19 away from others.



If you had close contact with a person who has COVID-19



- Stay home until 14 days after your last contact.



- Check your temperature twice a day and watch for symptoms of COVID-19.



- If possible, stay away from people who are at higher-risk for getting very sick from COVID-19.

ISOLATION keeps someone who is sick or tested positive for COVID-19 without symptoms away from others, even in their own home.



If you are sick and think or know you have COVID-19



- Stay home until after
 - At least 10 days since symptoms first appeared **and**
 - At least 24 hours with no fever without fever-reducing medication **and**
 - Symptoms have improved



If you tested positive for COVID-19 but do not have symptoms



- Stay home until after
 - 10 days have passed since your positive test



If you live with others, stay in a specific “sick room” or area and away from other people or animals, including pets. Use a separate bathroom, if available.



Covid-19 Isolation and Quarantine Guidelines

Person A

Confirmed COVID-19 positive case



WITH SYMPTOMS:

Individual must **isolate** at home until:

- 10 days since symptoms first appeared and
- 24 hours with no fever (without use of fever-reducing medication) and
- Symptoms have improved

WITHOUT SYMPTOMS

(ASYMPTOMATIC):

Individual must **isolate** for 10 days from the test date. During this time:

- Monitor self daily for any new symptoms
- If no new symptoms present, may be released from **isolation** after 10 days

Person B

Household member of Person A



Household member must **quarantine** at home until:

- 14 days from last close contact with Person A prior to Person A being able to **isolate** away from other household members

Person C

Any close contacts of Person A

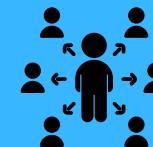


Individual must **quarantine** at home until:

- 14 days since last date of close contact with Person A
- Contact Kane County Health Department at 630-208-3801
- Contact primary care provider
- Monitor self daily for any new symptoms
- If symptoms appear, must follow **isolation** rules for cases (check out Person A scenarios)

Person D

Any person who was exposed to Person B or Person C



May continue daily activities while maintaining **social distancing** unless:

- If Person B develops symptoms or tests positive, Person D may have to **quarantine** for 14 days from last contact with Person B

Then:

- Contact Kane County Health Department at 630-208-3801
- Contact primary care provider
- Monitor self daily for any new symptoms

- **Close contact:** Being within approximately 6 feet (2 meters) of an individual with COVID-19 for at least 15 minutes. Close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with an individual who has COVID-19.
- **Isolation:** The separation of a person or group of people known or reasonably believed to be infected with a communicable disease and potentially infectious from those who are not infected to prevent spread of the communicable disease. Isolation for public health purposes may be voluntary or compelled by federal, state, or local public health order. (CDC)
- **Quarantine:** Separation of a person or group of people reasonably believed to have been exposed to a communicable disease but not yet symptomatic, from others who have not been so exposed, to prevent the possible spread of the communicable disease. (CDC)

FAQS

Question: What should I do if a congregant travels within the United States or outside of the country?

Answer: Travel increases your chance of getting and spreading COVID-19. Staying home is the best way to protect yourself and others from COVID-19.

Depending on your travel history, it may be recommended to quarantine for a period of 14 days from the time you left an area with widespread or ongoing community spread.

CDC provides recommendations on postponing or canceling travel. These are called travel notices and are based on assessment of the potential health risks involved with traveling to a certain area. A list of destinations with travel notices is available at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>.

You can get COVID-19 during your travels. You may feel well and not have any symptoms, but you can still spread COVID-19 to others. You may spread COVID-19 to other people including your family, friends, and community for 14 days after you were exposed to the virus.

Question: If congregants are exposed but not showing symptoms, should I allow them to the place of worship?

Answer: Congregants may have been exposed if they are a “close contact” of someone who is infected, which is defined as being within about 6 feet of a person with COVID-19 for 15 minutes, should quarantine for 14 days following the last date of exposure.

- Potentially exposed congregants who **have** symptoms of COVID-19 should self-isolate and contact their healthcare provider.
- Potentially exposed congregants who **do not have** symptoms should remain at home or in a comparable setting and practice social distancing for 14 days.

All other congregants should self-monitor for symptoms and wear cloth face coverings when in public. If they develop symptoms, they should notify their medical provider and stay home.

FAQS

Question: If a congregant receives a negative COVID-19 test during their quarantine period, can they return to the place of worship before the 14 days are up?

Answer: Anyone exposed to a positive case should quarantine for 14 days from the last day of exposure. The incubation period for SARS-CoV 2 (virus that causes COVID-19) is 14 days.

Therefore, if the person becomes infectious during the 14 days they will not be exposing others. **If a congregant receives a negative COVID test during their 14 day quarantine, they still need to complete the full 14 day quarantine.** The test is a point in time. Therefore, someone can test negative on day 5 of their quarantine and become infectious on day 11 of quarantine. The 14 day period is to closely monitor and reduce the spread of the infectious disease should the close contact become infectious during the quarantine period.

Question: When should a congregant suspected or confirmed to have COVID-19 return to the place of worship?

Answer: Congregants should not return to the place of worship until they meet the following criteria to discontinue home isolation:

- At least 10 days* have passed since symptom onset **and**
- At least 24 hours have passed since resolution of fever without the use of fever-reducing medications **and**
- Other symptoms have improved.

*A limited number of persons with severe illness may produce replication-competent virus beyond 10 days that may warrant extending duration of isolation for up to 20 days after symptom onset. Consider consultation with infection control experts.

Question: Should I require a congregant to provide a doctor's note or proof of positive COVID-19 test?

Answer: Providers of religious services should not require sick congregants to provide a COVID-19 test result or a healthcare provider's note to validate their illness or to return to the

FAQS

place of worship. Healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely manner.

- Most people with COVID-19 have mild illness and can recover at home without medical care and can follow CDC recommendations to determine when to discontinue home isolation and return to the place of worship.

Question: Should I be screening congregants every time for COVID-19?

Answer: Screening congregants is an optional strategy that providers of religious services may use. Screening and health checks are not a replacement for other protective measures such as social distancing.

Consider encouraging individuals planning to enter the place of worship to self-screen prior to coming onsite and not to attempt to enter the place of worship if any of the following are present:

- Symptoms of COVID-19
- Fever equal to or higher than 100.4°F*
- Are under evaluation for COVID-19 (for example, waiting for the results of a viral test to confirm infection)
- Have been diagnosed with COVID-19 and not yet cleared to discontinue isolation

If implementing in-person health checks, conduct them safely and respectfully. Providers of religious services may use social distancing, barrier or partition controls, or personal protective equipment (PPE) to protect the screener.

- Complete the health checks in a way that helps maintain social distancing guidelines, such as providing multiple screening entries into the building.
- To prevent stigma and discrimination in the place of worship, make congregant health screenings as private as possible. Do not make determinations of risk based on race or country of origin and be sure to maintain confidentiality of each individual's medical status and history.

FAQS

Question: What are my responsibilities as a provider of religious services?

Answer:

- Communicate with congregants. Provider of religious services should inform congregants that the health department will contact persons diagnosed with COVID-19 or those in close contact with someone testing positive for COVID-19. Providers of religious services should encourage congregants to work with the health department to discuss their illness, exposures, and contacts so the health department can limit further spread of COVID-19.
- Notify congregants if they have been a close contact (i.e. exposed) to COVID-19 in the place of worship. Providers of religious services should adhere to medical privacy laws and protections. Do not share names or any personal or medical information of the positive case with close contacts. Close contact should follow quarantine guidance and should not return to the place of worship for 14 days following the exposure.
- Cooperate with your local health department. This may include health department-initiated interviews, site visits, and record reviews to better understand risks for transmission within the place of worship (e.g., barriers to social distancing or use of cloth face coverings).
- Comply with reporting requirements outlined in the Joint Committee on Administrative Rules - Administrative Rules. This may include daily reporting to the health department on congregants who have tested positive for COVID-19, congregants who are experiencing COVID-like symptoms, and demographic data (including but not limited to congregant's name, date of birth, gender, phone number, and county of residence).

Question: How can my place of worship host a special event or meeting?

Answer: Following Department of Commerce and Economic Opportunity (DCEO) guidelines, special events, including fundraisers and meetings, are limited to 50 people or less. Please see additional guidance in the "Safe Practices" section of this toolkit. Consider hosting virtual fundraisers or events, such as an online silent auction.

RESOURCES

Cleaning and Disinfecting Your Facility:

- <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

COVID-19 Risk Level of Different Activities Matrix:

- <https://www.wellandgood.com/covid-19-risk-level-matrix-chart/>

DCEO COVID-19 Resources:

- <https://dceocovid19resources.com/>

Differences in Masks:

- <https://www.cdc.gov/niosh/npptl/pdfs/UnderstandDifferenceInfographic-508.pdf>

Executive Order 2020-32 on Masking and Social Distancing:

- <https://www2.illinois.gov/Pages/Executive-Orders/ExecutiveOrder2020-32.aspx>

IDPH Places of Worship Guidance:

- <https://www.dph.illinois.gov/covid19/community-guidance/places-worship-guidance>

IDPH Travel Guidance:

- <https://www.dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/coronavirus/travel-guidance#:~:text=When%20you%20do%20travel%2C%20practice,least%206%20feet%20from%20others.>



APPENDIX

We Miss You!



We know these last few months have been difficult and that the pandemic has changed how we currently perform services. Our parish is here for you, and we hope to return to our normal worshipping practices very soon!

Here are some tips on how we can work together to worship together!

- Wear a facemask over your nose and mouth to protect others.



- Wash your hands often with soap and water for 20 seconds.



- Stay home if you have COVID-19 symptoms or have been exposed to a positive case.





WEAR A MASK

#MASKUP
KANE COUNTY



WEAR
a mask



WATCH
your distance



WASH
your hands



WEAR A MASK

#MASKUP
KANE COUNTY



WEAR
a mask



WATCH
your distance



WASH
your hands



6 ft or 2m



WATCH YOUR DISTANCE

#MASKUP
KANE COUNTY



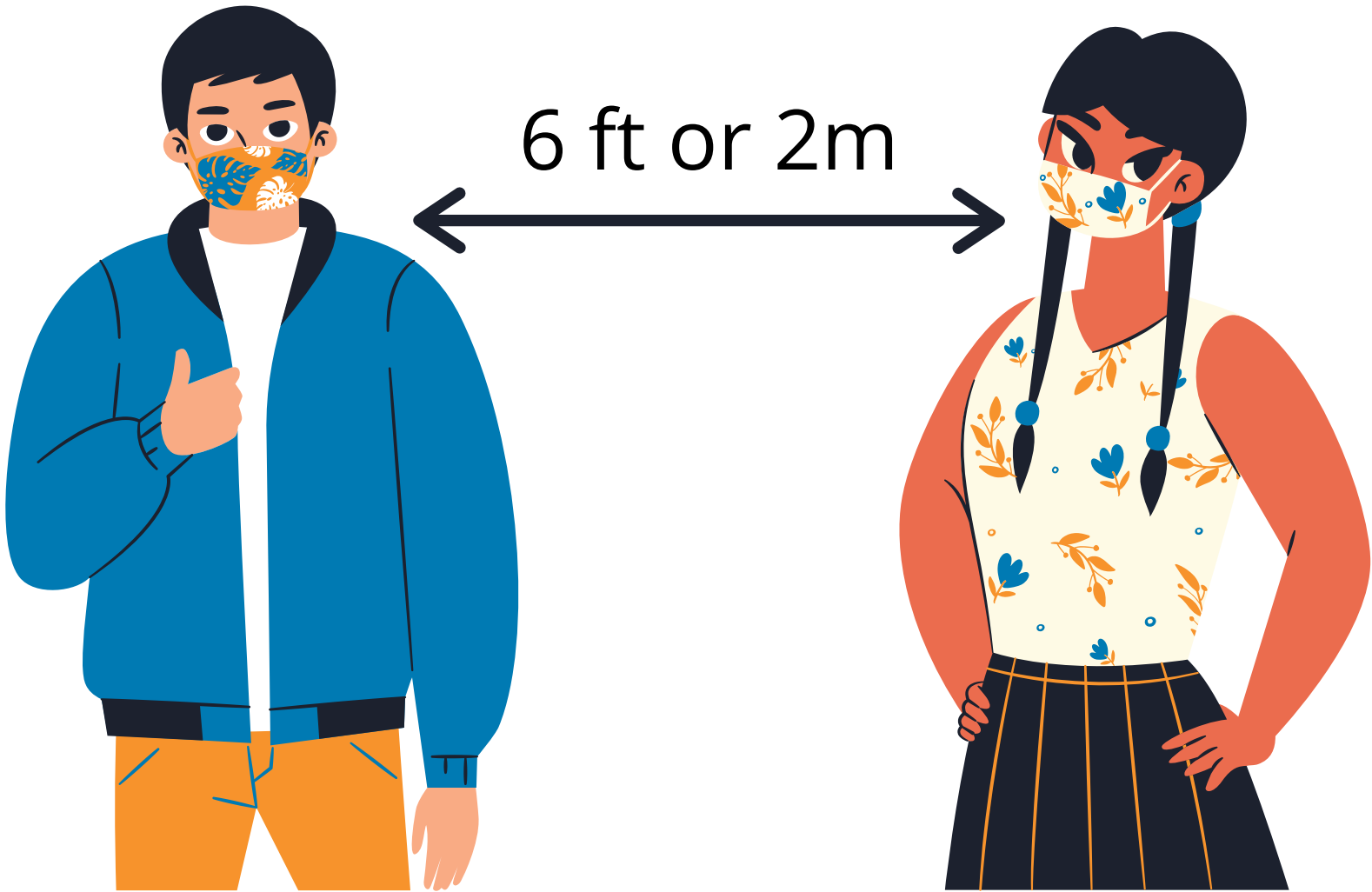
WEAR
a mask



WATCH
your distance



WASH
your hands



WATCH YOUR DISTANCE

#MASKUP
KANE COUNTY



WEAR
a mask



WATCH
your distance



WASH
your hands



WASH YOUR HANDS

#MASKUP
KANE COUNTY



WEAR
a mask



WATCH
your distance



WASH
your hands



WASH YOUR HANDS

#MASKUP
KANE COUNTY



WEAR
a mask



WATCH
your distance



WASH
your hands



WEAR A MASK

WASH YOUR HANDS



6 ft or 2m



WATCH YOUR DISTANCE

#MASKUP
KANE COUNTY



WEAR
a mask



WATCH
your distance



WASH
your hands



WEAR A MASK

WASH YOUR HANDS



6 ft or 2m



WATCH YOUR DISTANCE

#MASKUP
KANE COUNTY



WEAR
a mask



WATCH
your distance



WASH
your hands