

Appendix E COVID -19 Response

References:

INDOPACOM 260625Z FEB 20 USINDOPACOM Force Protection Directive 20-006 (ROK)
INDOPACOM CONPLAN 5003-18
COMPACFLT 060424Z MAR 20 FRAGORD 002 to 20-CPF054
COMPACFLT WARNO IN RESPONSE TO COVID-19
CNIC 031707Z MAR 20 CNIC PLANORD for COVID-19 RESPONSE/001
CNIC 112147Z MAR 20, FRAGO001 to CNIC PLANORD for COVID-19 RESPONSE
C7F 091223Z MAR 20 C7F TASKORD for Phase TWO (Mitigation)
SecDef Force Health Protection Guidance (supplement 1)
SecDef Force Health Protection Guidance (supplement 2)
SecDef Force Health Protection Guidance (supplement 3)
SecDef Force Health Protection Guidance (supplement 4)
DoDI 6300.3 Public Health Emergency Management

Time zone used throughout this order: Guam (GMT+10)

1. Situation. This plan anticipates possible execution of INDOPACOM CONPLAN 5003 Pandemic and Emerging Infectious Disease (PIED) Phase III Respond. Phase III may coincide with a WHO declaration of pandemic phase (Global Phase) or INDOPACOM initiation of phase III. All Force and Force Health Protection measures directed in COMPACFLT EXORD 20-CPF054 remain in effect. This order focuses on Installation measures to protect the Fleet, Sailors and NBG families during a pandemic.

Travel Advisories: Current as of 6 Mar 2010

DoS COVID-19 Travel Advisories

- Daegu - Level 4, Do Not Travel
- China - Level 4 –Do Not Travel
- Iran - Level 4 –Do Not Travel
- South Korea - Level 3, Reconsider Travel
- Italy - Level 3, Reconsider Travel
- Mongolia - Level 3, Reconsider Travel
- Japan - Level 2, Exercise Increased Caution
- Hong Kong - Level 2, Exercise Increased Caution
- Macau - Level 2, Exercise Increased Caution

CDC COVID-19 Travel Advisories

- China Level 3, Avoid Nonessential Travel
- Iran Level 3, Avoid Nonessential Travel
- South Korea Level 3, Avoid Nonessential Travel
- Italy Level 3, Avoid Nonessential Travel
- Japan Level 2, Practice Enhanced Precautions

-Hong Kong Level 1, Practice Usual Precautions

For up-to-date information visit the following websites:

DoS: <https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html/>

CDC: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>

2. Mission. Naval Base Guam will Implement increased health protection conditions across all Navy Installations on Guam to safeguard US personnel and their families IOT protect against spreading infection to US Forces, Allies, and the local community while ensuring warfighting readiness to execute assigned missions.

3. Execution

a. Commanders Intent.

(1) Purpose -Ensure a timely and focused response to prevent the spread of COVID-19; protect installation, capabilities and forces.

(2) Method-Execute PEID phase III operations, actions, and activities

(3) End State-NBG minimizes the impact of COVID-19 on JRM/COMNAVMAR, COMPACFLT, and CNIC interests and force readiness; allies, partners, and the local government are assured of US resolve to assist and protect against COVID-19 spread, but are ultimately self-reliant in their efforts to mitigate virus effects.

b. Concept of Operation

(1) This appendix will go into effect under three conditions:

(a) HPCON B (BRAVO) is ordered;

(b) An ocean going vessel arrives and requests support for individuals that present influenza like illness (ILI) symptoms

(c) An person from a tenant, agency, or department working on any NBG installation presents ILI symptoms

(2) HPCON B measures (TAB B) will direct all tenants, departments, and agencies to take additional actions to protect the force. Attainment will be reported in the same manner as TCCOR attainment reports.

(3) For the purpose of this plan only, individuals displaying influenza like illness (ILI) will be referred to as CASUALTIES.

(4) A Navy vessel arrives to Guam and reports they have casualty(s) on board that they need/want to disembark. The vessel will deploy their own “shuttle” to transfer the individuals to the shore, once on shore the casualty(s) will be transferred to a secondary screening location where USNH-Guam personnel will conduct a detailed interview and medical procedures. After completing the secondary screening process the casualty(s) will be transported to a quarantine/isolation location on base. Medical personnel will conduct daily medical checks either in person or via telephone to see if symptoms are progressing and if there are any other medical conditions that need addressed. While in quarantine the casualty(s) will be restricted to quarters, messing will be provided by NGB with disposable serving ware to prevent unnecessary exposure. Individuals will be quarantined for 14 days, medical staff will make the determination if the quarantine is complete. If during the quarantine, the individual symptoms get worse, medical personnel will then direct isolation.

(5) If an individual presents ILI they will inform their chain of command, after informing the CoC they are to **telephonically** contact the NGB initial designated medical screener who will ask a number of questions to determine if secondary screening is necessary. If secondary screening is deemed necessary they will be referred to USNH-Guam Preventative Medicine (PM) for medical determination, at this point it will be determined if the individual is a person under investigation (PUI) and if Restriction Of Movement (ROM) (quarantine or isolation) is warranted. Finally the NGB initial designated medical screener will contact USNH-Guam PM for status results.

c. Tasks and responsibilities

(1) All NGB tenants, departments, and agencies

(a) O/O execute HPCON measures and report attainment status to the NGB EOC

(b) BPT provide additional support to the COVID-19 response when needed

(c) Capture all COVID-19 response costs for later submission

(d) Report all flu-like symptom related sick-in-quarters name and unit to NGB CDO

(e) Identify areas where employees who develop symptoms at work may be initially isolated from other employees. Those employees should be sent home or seek medical attention immediately as appropriate.

(f) All personnel who have sick family members at home with COVID-19 to immediately inform their supervisor.

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(g) Coordinate with public works to arrange for a deep cleaning of affected facilities for a confirmed COVID-19 case.

(2) NBG MWR.

- (a) Provide isolation and quarantine housing
- (b) Provide take-out style meals for those that are in isolation or quarantine status
- (c) Provide hotel services as required
- (d) Capture all COVID-19 response costs for later submission
- (e) BPT provide additional support to the COVID-19 response

(3) NBG Admin/Installation Program Integration

- (a) BPT provide additional support to the COVID-19 response
- (b) Capture all COVID-19 response costs for later submission
- (c) Liaise with JRM to determine CIVPERS telework and leave policies (IPI)
- (d) Inform workforce to log COVID-19 related expenses (Overtime/COMP time/supplies) for possible reimbursement
- (e) Assist with identifying Category 1 – 5 personnel

(4) NBG EM

- (a) Activate EOC upon direction
- (b) Provide necessary PPE for all IMT members when EOC is activated
- (c) BPT provide additional support to the COVID-19 response
- (d) Capture all COVID-19 response costs for later submission

(5) NBG Port Ops

- (a) BPT provide alternate ship to shore transportation with coxswain
- (b) Provide direct coordination with ships regarding anchorage or pier-side docking

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- (c) Provide routine services as directed
- (d) Capture all COVID-19 response costs for later submission
- (e) Provide necessary PPE for any COVID-19 operations
- (6) NBG Surface Warfare Officer (Port Operations Officer)
 - (a) Direct command duty driver with vehicle to support meal delivery
 - (b) Direct duty driver to provide land side transportation in response to this plan
- (7) NBG Security Forces
 - (a) Establish and maintain pier side quarantine zone at ship during execution of this plan
 - (b) O/O provide personnel to enforce quarantine at isolation/quarantine locations
 - (c) Capture all COVID-19 response costs for later submission
 - (d) BPT provide additional support to the COVID-19 response
- (8) NBG Chaplain Service
 - (a) BPT provide religious services as required
 - (b) BPT provide additional support to the COVID-19 response
 - (c) Capture all COVID-19 response costs for later submission
- (9) NBG Fleet and Family Support Services
 - (a) BPT provide counselling services as needed
 - (b) BPT activate the Family Assistance Center
 - (c) BPT provide additional support to the COVID-19 response
 - (d) Capture all COVID-19 response costs for later submission
- (10) NBG Public Works

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- (a) Prioritize transportation and facility sustainment resources to support requirements generated by the COVID-19 response
 - (b) Maintain essential facility services and critical infrastructure support at normal levels
 - (c) Maintain utility operations at normal levels
 - (d) BPT maximize use of telework capabilities
 - (e) BPT cease all non-mission essential construction
 - (f) BPT cease all non-essential facility service contracts
 - (g) BPT limit facility maintenance, service calls, preventative maintenance and minor work
 - (h) BPT cease all environmental planning services and limit all environmental compliance reporting requirements
 - (i) BPT cease all real property management, facility project planning documentation, and facility maintenance planning functions
 - (j) BPT provide additional support to the COVID-19 response
 - (k) Capture all COVID-19 response costs for later submission
- (11) NBG PAO
- (a) Provide all risk communication to the Navy base community
 - (b) Maintain liaison with JRM PAO and GHS/OCD PIO
 - (c) Provide up-to-date information on all social media platforms to include closures, limited services (ie Veterinary Treatment services, Visitor Control Center, Housing), changes in hours of operation, etc.
 - (d) Coordinate Virtual Town Hall meeting as required
 - (e) BPT provide additional support to the COVID-19 response when needed
 - (f) Capture all COVID-19 response costs for later submission

(12) NBG Staff Judge Advocate (SJA)

(a) BPT to provide additional support to COVID-19 response, including legal analysis of response authorities and contingency operations;

(b) BPT to continue routine operations under conditions requiring increased social distances, including telework via Outlook Web Access (OWA);

(c) Capture all COVID-19 response costs for later submission;

(13) DECA. Follow guidance recommended by PHA-Guam (See TAB D)

(14) Navy Exchange. NEX Facilities – Recommend closing food court and ceasing in-house food preparation at HPCON C.

(15) USNH-Guam Preventative Medicine. Provide guidance on non-NEX food service establishments (Infusion, Wendy's, etc.) PHA-Guam will not provide routine inspections until the HPCON level goes below C.

d. Coordinating instructions

(1) Shipboard Casualties arriving at NBG Apra Harbor

(a) Two options are available,

1 Option 1 (most preferred) the vessel will lay anchor in the outer harbor at the designated anchorage point. This option prevents unnecessary exposure to NBG ship pilot's and pier personnel. Arriving ships will utilize their on-board Rigid Hull, Inflatable Boat (RHIB) to deliver the casualty(s) to shore. If the vessel is unable to deploy their RHIB, Navy Port Control will deploy a boat to pick up the casualty(s) and deliver them to shore.

2 Option 2 (least preferred) the vessel will follow normal procedures for docking pier-side. Once the vessel is secured, a quarantine zone will be established on the pier to prevent all non-essential personnel from possible exposure. Once all hotel services are connected, medical personnel will board the vessel and conduct an initial screening. If the casualties are to be quarantined, only those individuals will be allowed to disembark, all others aboard will be directed to stay on board for the entire duration that the vessel is in port.

(b) Once on shore, NBG will take control of the casualty(s).

(c) NBG duty driver, equipped with PPE (eye protection, N95 mask, hand sanitizer, sanitizing wipes, and disinfecting spray consisting of a 1:10 bleach water) will transport the

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Casualty(s) from initial pick-up site to the secondary screen site at USNH Branch Dental clinic where the casualty(s) will go through a detailed screening process. Depending on the results, the casualty(s) will be placed into one of three categories, conditional release, quarantine, or isolation (See TAB A definitions).

(d) Casualties will then be transported to a designated housing unit and instructed on procedures to follow for cleaning and sanitation.

(e) After the casualties are dropped off at the housing unit the duty driver will begin disinfecting the transport vehicle using the cleaning and disinfecting materials carried in the vehicle following the posted procedures in the vehicle.

(f) Driver PPE and used cleaning materials will then be disposed of as normal trash.

(2) Individual or family member reporting ILI symptoms

(a) Individual contacts their Chain of Command and informs them of the ILI symptoms

(b) Individual contacts NBG Initial Medical Screener at 864 6093 and provides;

1. Name
2. Supervisor's name
3. Command
4. Residence to include address
5. Phone number

(c) NBG initial medical screener will do the initial phone screening to determine need for medical referral

(d) If positive Medical Screener will refer to Preventive Medicine for secondary screening is necessary

(e) If secondary screening is deemed necessary they will be referred to USNH-Guam Preventative Medicine (PM) for medical determination

(f) Secondary screening will determined if the individual is a person under investigation (PUI) and if Restriction Of Movement (ROM) (quarantine or isolation) is warranted.

(g) NBG initial designated medical screener will contact USNH-Guam PM for Patient Status Results

(3) Cost and Time recording and reporting.

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(a) All NBG Departments, Agencies and Tenants will create a detailed record of all time and attendance and material costs in support of the COVID-19 Response.

(b) All financial costs will be reported up through the normal reporting channels

(4) Veterinarian and Food Inspection Services. (See TAB D)

(5) NBG Fire and Emergency Service. (See TAB E)

(6) NBG MWR Operations. (See TAB I)

(7) Navy Exchange Operations (See Tab J)

(8) Priorities for vaccines and anti-viral medications. NBG Commanding Officer in coordination with USNH will prioritize distribution of vaccines and anti-viral medications unless a direct order is given by Higher Headquarter on distribution processes.

(9) DSCA support to local community. NBG will provide DSCA support to local community and follow the process as indicated in NAVBASEGUINST 3440.17C and the Stafford Act. NBG should BPT provide quarantine facility support if requested by Local Government.

(10) Support from local government. NBG will initiate Mutual Aid Agreements and Memorandums of Agreements when necessary

(11) Mortuary Affairs support. Mortuary support will be provided by USNH when needed.

(12) Sequestering Category 1 personnel. NBG will BPT provide lodging facilities to Category 1 when requested by mission essential function owner.

(13) As the response to COVID-19 progresses, NBG is postured to implement additional measures per DoD and CDC guidance and in cooperation with territorial and local community partners. Anticipated additional measures include but are not limited to:

(a) Use of questionnaires or other medical screening capabilities at entry control points or building accesses as a method to minimize exposure to COVID-19.

(b) Broadened implementation of telework for eligible employees.

(c) Develop access restriction and closure plans for facilities including morale welfare and recreations (MWR), fleet and family support centers (FFSC), exchanges and commissaries, etc.

(d) Cancel or restrict public events and limit the gatherings of personnel to the maximum extent possible.

(e) Restrict nonessential personnel access to installations and facilities.

(f) Restrict access to installations or areas on the installation to mission essential personnel and families residing on installation public private housing areas.

4. Service Support

a. General

(1) Ship to shore transfer point will be Sumay Marina

b. Material and Services

(1) Supply

(a) Class I: Subsistence. MWR will provide three take-out style meals for duration of COVID-19 Response

(b) Class II: Clothing and individual equipment. Casualty(s) are required to depart vessel with necessary clothing for 14 days.

(c) Class III: POL. Duty driver will utilize BOS-C Transportation fuel station

(d) Class IV: Construction. Not applicable for this plan

(e) Class V: Ammunition. Not applicable for this plan

(f) Class VI: Personal Demand Items. MWR NGIS will provide those items that are normally provided for in the quarters.

(g) Class VII: Major End Items. Not applicable for this plan

(h) Class VIII: Medical. USNH-Guam will provide specific medical materials and supplies when requested.

(i) Class IX: Repair parts. Not applicable for this plan

(j) Class X: Agriculture/Economic Development. Not applicable for this plan

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(2) Transportation. BOS-C Transportation will provide all necessary vehicles for COVID-19 Responses

(3) Services. All locations identified for isolation or quarantine are equipped with laundry and bath services.

c. Medical Evacuation. All requests for medical evacuation will be routed through the region dispatch center using 9-1-1.

5. Command and Signal

a. Command

(1) No change to existing Chain of Command

(2) NBG EOC will be activated upon direction

b. Signal.

(1) No change to existing communication procedures.

(2) Upon activation of the EOC,

(a) Primary: C4I reporting (<https://c4isuite.atfp.cnic.navy.mil>)

(1) Realworld site

(2) NavBase Guam

(3) JRM Chat

(b) Alternate: NIPR E-mail: eoc.nbg.fct@fe.navy.mil

(c) Contingency: SMS/internet text messages 488-7576, 489-1654

(d) Emergency: Telephone: 671-333-2784/2781/339-6455

Medical Screening: 333-2772/2773/2774

TAB A – Definitions

Conditional Release. Temporary supervision and monitoring of an individual or group, who may have been exposed to a quarantinable communicable disease to determine the risk of disease spread. Supervision is accomplished through in-person visits, telephone, or through electronic or Internet-based monitoring. Conditional release is a less restrictive alternative to quarantine and is authorized for persons who may have been exposed to a communicable disease or hazardous substances and require continued health monitoring and supervision but have been assessed and determined to be asymptomatic and present a low risk to public health. (Ref. DoDI 6200.03)

Quarantine. Applies to those who have been exposed to a contagious disease but who may or may not become ill. The separation of an individual or group that has been exposed to a communicable disease, but is not yet ill, from others who have not been so exposed, in such manner and place to prevent the possible spread of the communicable disease. Places of quarantine will be maintained in a safe and hygienic manner, designed to minimize transmission of infection or contamination or other harm to other persons under quarantine. Adequate food, clothing, medical care, and other necessities will be provided. (Ref. DoDI 6200.03)

Isolation. Applies to persons who are known to be ill with a contagious disease. The separation of an individual or group infected or reasonably believed to be infected with a communicable disease from those who are healthy in such a place and manner to prevent the spread of the communicable disease. Isolating individuals or groups serves to prevent the transmission and spread of a communicable disease or any other hazardous substances that pose a threat to public health and safety. Isolation measures may be implemented in health care facilities, living quarters, or other buildings on a DoD installation or military command. Isolation measures do not lessen the responsibilities of the MHS to provide medical care to infected or affected persons to the standard of care feasible given resources available. (Ref. DoDI 6200.03)

Person Under Investigation (PUI). a patient has signs and symptoms compatible with COVID-19; any persons, including healthcare workers², who have had close contact³ with a laboratory-confirmed⁴ COVID-19 patient within 14 days of symptom onset, or a history of travel from affected geographic areas⁵ (see below) within 14 days of symptom onset. (CDC 4 Mar 2020)

A member presenting with influenza-like-illness (temp. 100.0. and cough and/or sore throat without known cause) (C7F TASKORD)

Sequester. Keeping Mission Essential Personnel (Cat.1) separated from those in the three previous groups so that they can continue operating MEF

TAB B - HPCON B actions

(a) Consider limiting or canceling meetings, training events, formation, large social gatherings, etc. with more than 20 people

(b) Monitor Class VIII required to support medical care and quarantine

(c) Place bulk order for masks, gloves, eye protection, alcohol, hand gel, sanitation wipes for area decontamination, bleach, towels, etc.

(d) Plan for the establishment of non-medical patient isolation and care facilities

(e) Encourage strict hygiene measures, handwashing with antibacterial soap, wiping down common surface areas after each shift, wiping down common items periodically, etc. including no handshaking,

(f) Consider implementing screening at installation entry control points (i.e., installation gates, ports, etc.) as applicable.

(g) DoDEA consider cancelling classes, suspend group activities (sports, extracurricular, etc.)

(h) NBG will institute a no touch ID scanning at all entry control points. Personnel will be required to present both sides of the ID and hold for screening by guard.

(i) The NBG Emergency Operations Center will be activated to support COVID-19 responses and coordination with military and community partners.

(j) NBG Visitor Control Center personnel will utilize a COVID-19 health questionnaire to screen all personnel who seek access to Installations or facilities.

(k) Supervisors of Contractors, Vendors, Delivery services, etc. are to ensure their personnel are properly screened and do not perform services while sick or symptomatic.

(l) Encourage all personnel with pre-existing health conditions including weakened immune systems or respiratory issues to telework to reduce their risk of exposure.

(m) Direct mandatory cleaning/sanitation of all common work surfaces at a minimum of twice daily.

Tab C – Emergency Health Powers

1. DODI 6200.03 Public Health Emergency Management (PHEM) gives the Installation Commander certain authorities to preserve the health of installation personnel. These powers include:

a. Directing Service members to submit to medical examinations or testing as necessary for diagnosis or treatment. Qualified clinical personnel will perform examinations and testing

b. Collecting specimens and performing tests on any property or on any animal or disease vector, living or deceased, as reasonable and necessary for emergency response.

c. Using facilities, materials, and services for purposes of communications, transportation, occupancy (e.g., emergency shelters or quarantine/isolation), fuel, food, clothing, health care, and other purposes, and controlling or restricting the distribution of commodities as reasonable and necessary for emergency response.

d. Taking measures as reasonable and necessary, pursuant to applicable law, to obtain and control the use and distribution of needed health care supplies.

e. Closing, directing the evacuation of, or decontaminating any asset or facility that endangers public health; decontaminating or destroying any material that endangers public health.

f. Controlling evacuation routes on, and ingress and egress to and from, the affected DoD installation or military command.

g. Taking measures to safely contain and dispose of infectious or contaminated waste as may be reasonable and necessary for emergency response.

h. Restricting movement to prevent the introduction, transmission, and spread of communicable diseases or any other hazardous substances that pose a threat to public health and safety

i. Restriction of Movement

(1) Quarantine, isolation, and conditional release are types of restriction of movement that can be imposed in certain circumstances by a military commander for individuals within the scope of the commander's authority.

(a) In the case of Service members, restrictions of movement, including isolation, quarantine, conditional release, or any other measure necessary to prevent or limit transmitting a communicable disease and enhance public safety may be implemented.

(b) In the case of persons under the commander's authority other than Service members, restrictions of movement may include isolation or limiting ingress and egress to, from, or on a DoD installation or military command. Coordination with civilian public health officials, may be required.

(2) Quarantine or isolation will be accomplished through the least restrictive means available, consistent with protection of public health.

(3) Conditional Release (previously termed as controlled monitoring) is a less restrictive alternative to quarantine and is authorized for persons who may have been exposed to a communicable disease or hazardous substances and require continued health monitoring and supervision but have been assessed and determined to be asymptomatic and present a low risk to public health.

j. A person subject to quarantine or isolation will:

(1) Obey the restrictions and orders established by the military commander.

(2) Remain in assigned quarters.

(3) Not put themselves in contact with any persons except as specified in the notice of quarantine.

k. No person may, without authorization, enter quarantine or isolation premises. A person who, by reason of unauthorized entry, poses a danger to public health and becomes subject to quarantine.

l. Submission to vaccination, treatment, or diagnostic testing may be a requirement to return to work or gain access to a DoD installation or facility or as a condition of exemption or release from restriction of movement to prevent transmitting a communicable disease and to protect public health and safety.

m. Security measures can be used to enforce quarantine and isolation

n. Individuals and groups subject to quarantine will be advised that violators may be charged with a crime pursuant to law (including Section 797 of Title 50, U.S.C.; Section 1382 of Title 18, U.S.C.; or Parts 70 or 71 of Title 42, CFR) and subject to punishment of a fine up to \$1,000 or imprisonment for not more than 1 year, or both.

(1) Service members are also subject to UCMJ actions.

(2) Those individuals or groups not subject to military law and who refuse to obey or otherwise violate an order issued in accordance with this issuance may be detained by the military commander until appropriate civil authorities can respond. The military commander will coordinate with civil authorities to ensure the response is appropriate for the public health emergency.

TAB D – Public Health Activity (PHA) Guam Veterinarian and Food Inspection Services

1. At HPCON B, PHA-Guam will take the following actions:

a. Veterinary Treatment Facility (VTFs) will remain open for privately-owned animal care and routine operations. However, all staff are empowered to deny service to any ill-appearing individuals.

b. Headquarters Operations, subsistence receipt inspections, and routine installation support plan inspections – no change from normal operations.

c. Recommend that the commissary discontinue sales of fruit and vegetable platters.

d. Personnel traveling for food protection audits will self-screen for symptoms and fever prior to departing for the airport. Any sick individuals will not travel. No individuals will transit through category 3 countries. Travelers will avoid contact with any visibly ill individuals and will do their best to maintain social distance.

2. At HPCON C, PHA-Guam will take the following actions, aimed at providing support to our core missions while keeping as many individuals home as possible:

a. (a) Veterinary Treatment Facility (VTFs) will no longer provide routine privately-owned animal care. The VTF will continue to provide the following; however, treatments and care for dogs will be performed outside the facility under the awning if possible. Staff will try to maintain a six foot distance from clients and each other; however, we recognize that this will not be possible when restraining an animal.

(1) Health certificates for animals leaving the island within ten days

(2) Rabies vaccines for adult animals whose vaccines will lapse prior to a decrease in the HPCON level.

(3) Vaccinations and deworming for juvenile animals under the age of five months.

(4) Medication refills and sales of preventatives for pets with a valid veterinary-client-patient relationship.

b. Headquarters Operations: One member of the HQ staff will be present in the office during normal working hours to ensure that phones are answered. The rest of the HQ team will work from home. The HQ staff member present is responsible for disinfecting surfaces at the end of the workday.

c. Subsistence Receipt Inspections: At least one food inspector will be present in the FISC during the workday to perform subsistence receipt inspections. We will remain responsive; if there is an anticipated on-load for offshore ships, we will support either at the FISC or at the dock.

d. Routine Installation Support Plan inspections: All routine inspections (approved source verification, food storage conditions on the Frank Cable, etc) will be discontinued until the HPCON goes below C. Requests for individual inspections will be accommodated on a case by case basis. The unit will coordinate with Navy Preventive Medicine for recommendations on base food service facilities; however, the commander has already recommended that sales of unpackaged food items which cannot be washed and sanitized prior to use be discontinued in all NEX facilities at HPCON C.

e. Commissary – Recommend ceasing deli, sushi, bakery, and rotisserie chicken operations; maintain the HPCON B cessation of fruit / vegetable platters. Recommend encouraging use of self-checkout machines and providing sanitizing wipes at these machines. Recommend temperature self-screening of all workers prior to entering the building. Recommend self-bagging of groceries rather than having baggers report to work.

f. Travel for food protection audits will cease until the HPCON level decreases, unless otherwise directed by higher headquarters.

g. All unit personnel will be directed that if they are not at work, they are to remain in their homes with the authorized exceptions of on-base beaches, running or walking outside, hiking, or other outdoor activities that allow maintenance of a six-foot distance. Shopping at the commissary or NEX is authorized but will be minimized as much as possible. No off-base shopping is authorized unless personally authorized by the PHA-Guam commander. Servicemembers may use the drive-through or pick up takeout food from on- or off-base establishments if they are out of their home for another necessary errand. Any other exceptions must be arranged in advance.

3. PHA-Guam will continue to provide support to subsistence onloads and emergency medical care to Military Working Dogs and other Government Owned Animals at all HPCON levels. PHA-Guam personnel stand ready to assist as needed at HPCON C and D. We have three veterinarians with a high level of medical knowledge; if human assets are overwhelmed we are able to assist. In addition, the unit has many combat lifesaver – trained personnel. If we are tasked to assist with human healthcare operations, one veterinarian and one technician will be held back as an unexposed MWD team to ensure readiness to respond to an MWD emergency.

4. Tasks and responsibilities

a. Commissary – see recommendations above. LTC Sangster has already spoken to Leslie Carroll and she concurred with these recommendations.

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b. NEX Facilities – Recommend discontinuing sales of unpackaged items which cannot be washed or sanitized prior to consumption at HPCON C; Lisa concurs.

c. Navy Preventive Medicine – Provide guidance on non-NEX food service establishments (Infusion, Wendy's, etc.) PHA-Guam will not provide routine inspections until the HPCON level goes below C. Meeting with PM on Monday – have not received any input to this point. Strongly recommend takeout only; recommend mask use by food preparers.

d. Public Affairs – Assist with dissemination of information regarding limited VTF services.

e. FLCY – Provide advance notice of any large subsistence onloads so that we can staff appropriately on those days.

TAB E – NBG Fire and Emergency Services

CONCEPT OF OPERATIONS – COVID 19

HPCON-B: Outbreak of Heightened Exposure Risk

1. Our EMS mission remains the same, pre-hospital care and transport. However, will be impacted by periods of heightened HPCON
2. Fire Operations procedures for transporting a suspected patient to a Medical Treatment Facility (MTF):
 - a. Don the proper protective gear IAW guidance from the CDC and EMS Medical Director, and Don surgical masks on the suspect patient
 - b. Conduct a proper turnover to ED staff and notify the on-duty Assistant Fire Chief and Fire Chief when the Medic unit is cleared from the emergency.
 - c. Fire Chief will notify NBG leadership and the EOC that the Medic crew will require quarantine and/or isolation quarters following suspect patient contact.
 - d. Medic crew will drive the ambulance to the assigned quarters at Apra Palms.
 - e. Medic unit will be decontaminated by personnel other than the ones under monitoring.
3. It is expected that 1 or more Medic crew will be placed on a 14 day monitoring status during this crisis. In the likely event, the following draw down procedures apply:

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	Main Base		Outside NBG	Munitions	Nimitz Hill	Naval Hospital		NCTAMS			
	STA 1		STA 6	STA 2	STA 3	STA 4		STA 5			
	Eng 1	Med 1	Trk 6	Eng 2	Eng 3	Eng 4	Med 4	Eng 5	Med 5		
Optimal Manning	4	2	4	4	4	4	2	2	2	28	
SITUATION: One Medic Unit and Crew taken Out of Service											ACTIONS
(-) Med 1	4	0	3	3	4	4	2	2	2	26	Stand up Spare Medic and move to Sta 1
	Stby Med	2									1 man from Eng 2 fill-in Truck 6
(-) Med 4	4	2	3	3	4	4	0	2	2	26	Stand up Spare Medic and move to Sta 4
						Stby Med	2				1 man from Eng 2 fill-in Truck 6
(-) Med 5	4	2	3	3	4	4	2	2	0	26	Option 1
								Stby Med	2		Stand up Spare Medic and move to Sta 5
											1 man from Eng 2 fill-in Truck 6
	4	2	4	3	4	4	2	3	0	26	Option 2
											Request Andersen NW cover Med 5 AOR
											1 man from Eng 2 fill-in Sta 5
	Main Base		Outside NBG	Munitions	Nimitz Hill	Naval Hospital		NCTAMS			
	STA 1		STA 6	STA 2	STA 3	STA 4		STA 5			
	Eng 1	Med 1	Trk 6	Eng 2	Eng 3	Eng 4	Med 4	Eng 5	Med 5		
Optimal Manning	4	2	4	4	4	4	2	2	2	28	
SITUATION: Two Medic Units and Crews taken Out of Service											ACTIONS
(-) Med 1 & Med 4	4	0	3	3	4	3	0	3	2	24	Stand up Spare Medic and move to Sta 1
	Stby Med	2									Med 5 Move down to Sta 4.
											1 man from Eng 2 to fill-in Truck 6
											1 man from Eng 4 to fill-in Eng 5
											Request Andersen NW cover Med 5 AOR
(-) Med 4 & Med 5	4	2	3	3	4	3	0	3	0	24	Stand up Spare Medic and move to Sta 4
						Stby Med	2				1 man from Eng 2 to fill-in Truck 6
											1 man from Eng 4 to fill-in Eng 5
											Request Andersen NW cover Med 5 AOR
(-) Med 1 & Med 5	4	0	3	3	4	3	2	3	0	24	Stand up Spare Medic and move to Sta 1
	Stby Med	2									Request Andersen NW cover Med 5 AOR
											1 man from Eng 2 to fill-in Truck 6
											1 man from Eng 4 to fill-in Eng 5
	Main Base		Outside NBG	Munitions	Nimitz Hill	Naval Hospital		NCTAMS			
	STA 1		STA 6	STA 2	STA 3	STA 4		STA 5			
	Eng 1	Med 1	Trk 6	Eng 2	Eng 3	Eng 4	Med 4	Eng 5	Med 5		
Optimal Manning	4	2	4	4	4	4	2	2	2	28	
SITUATION: Three Medic Units and Crews taken Out of Service											ACTIONS
(-) Med 1, Med 4, Med 5	4	0	3	3	4	3	0	3	0	22	Stand up Spare Medic and move to Sta 1
	Stby Med	2									1 man E-2 to fill in Truck 6
											1 man E-4 to Fill in E-5
											Notify USNH no Navy Fire Med unit available
											Request Andersen NW cover Med 5 AOR

4. Fire Prevention Division's procedures for daily operations during heightened HPCON:

a. Cancel all public education campaigns throughout the base (i.e., fire safety briefings at base indoctrination, fire warden training, and fire evacuation drills).

b. Fire Inspectors assigned to the Fire Prevention Division are not mission essential, and therefore will be considered for Telework. However, under emergency declaration, can augment the Safety Department's manning as SME for facility occupancy loading and risk assessment purposes.

c. Implement social distancing practices while conducting facility fire inspections.

5. Fire Management Staff: consisting of the Fire Chief, Deputy Fire Chief, Fire Operations Chief, Fire Prevention Chief, Chief of Training and Admin Assistant.

a. As program managers for their respective specialties, meetings, plans reviews, and large scale training events, etc., will be cancelled.

b. The administrative assistance is a non-essential position and will be considered for Telework.

c. All Chief Fire Officers has an operational role to play during an emergency and therefore not eligible for Telework. Chief Officers serves as Incident Commanders (IC) or supports the IC as Emergency Operations Center/Incident Management Team members, Safety Officers, Accountability Officers or augment operations staffing as needed.

TAB F – Cleaning and Sanitation

Environmental Cleaning and Disinfection Recommendations

Interim Cleaning Recommendations for Facilities Housing Persons Under Quarantine for Coronavirus Disease 2019 (COVID-19), Updated February 29, 2020

Background

There is much to learn about the newly emerged coronavirus disease 2019 (COVID-19). Based on what is known about early cases of COVID-19, spread from person-to-person via the respiratory route and usually happens among close contacts (within about 6 feet).

People with certain types of exposure to cases of COVID-19 may be housed and quarantined for observation until 14 days after their exposure. The purpose of the observation period is to ensure they don't develop symptoms and infect others during this time. Some people stay at home for the observation period, but others may be housed either separately or in groups in other types of facilities.

In these facilities, individuals and families are provided separate quarters with separate bathroom facilities. They are instructed that congregation and shared public spaces are to be avoided. Because the people under quarantine are not ill, the risk to cleaning staff is inherently low.

Purpose

This guidance provides recommendation on the cleaning and disinfection of rooms of persons under quarantine, as well as associated worker protection practices according to expected job tasks. The goal is to minimize interactions between persons under quarantine and cleaning staff. These recommendations will be updated if additional information becomes available.

General Recommendations for Housing Facilities for Persons Under Quarantine

- Employers should develop policies for worker protection and provide training to all cleaning staff on-site prior to beginning work. Training should include:
 - An understanding of when to use personal protective equipment (PPE)
 - What PPE is necessary and why (see below for PPE recommendations)
 - How to properly don (put on), use, and doff (take off) PPE
 - How to properly dispose of PPE
- Employers must ensure workers are trained on the hazards of the cleaning chemicals used in the workplace in accordance with OSHA's Hazard Communication standard, 29 CFR 1910.1200.
- Employers must comply with OSHA's standards on Bloodborne Pathogens (29 CFR

- 1910.1030), including proper disposal of regulated waste, and PPE (29 CFR 1910.132).
- Cleaning staff should perform hand hygiene often including immediately after removing PPE by washing hands with soap and water for 20 seconds. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
 - Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures (e.g., contact with a quarantined individual without wearing appropriate PPE) to their supervisor.
 - Employers should educate workers to recognize the symptoms of COVID-19 and provide instructions on what to do if they develop symptoms until 14 days after the last day they had possible exposure to the virus.
 - Cleaning staff should immediately notify their supervisor and the local health department if they develop symptoms of COVID-19. The health department will provide guidance on what actions need to be taken.
 - Cleaning staff should follow normal preventive actions while at work and home including covering their mouth and nose with a tissue when coughing or sneezing and avoiding touching eyes, nose, or mouth with unwashed hands.
 - If surfaces are dirty, they should be cleaned using a detergent and water prior to disinfection.
 - A list of products with EPA-approved emerging viral pathogens claims, maintained by the American Chemistry Council Center for Biocide Chemistries (CBC), is available at: <https://www.americanchemistry.com/Novel-Coronavirus-Fighting-Products-List.pdf>.
 - Products with EPA-approved emerging viral pathogens claims are expected to be effective against COVID-19 based on data for harder to kill viruses.
 - Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, PPE) for use.

Cleaning Activities During the Quarantine Period

Because cleaning needs are limited during the quarantine period, CDC is recommending that cleaning staff do not clean occupied rooms in quarantine facilities. Instead, all rooms should be provisioned with personal cleaning supplies, e.g., tissues, paper towels, cleaners and disinfectants that are EPA- approved against emerging viral pathogens (see list above) for use by persons under quarantine as needed. Rooms and common areas occupied by persons under quarantine should not be cleaned by cleaning staff until all persons under quarantine have been released from quarantine and have vacated the area and no sooner than 24 hours after rooms and common areas have been vacated.

During the quarantine:

- Persons under quarantine should bag trash and place the closed bag outside their door

for daily pick up.

- Similarly, persons under quarantine should bag soiled linens and place the closed bag outside their door for pick up.
- Cleaning, laundry, and trash removal staff should wear disposable gloves and gowns for all tasks in the cleaning process, including collection of closed bags.
 - Staff should remove gloves after cleaning a room or area occupied by persons under quarantine before moving to the next room.
 - After delivering bags to their final destination, staff should clean and disinfect any hard, cleanable surfaces where bags have been stored (such as on carts or on the floor).
 - Laundry and trash removal staff collecting the closed bags should remove their gloves promptly after bags are delivered to their destination and cleaning and disinfection has been performed.
 - Any time staff remove gloves, they should perform hand hygiene immediately by washing their hands with soap and water for 20 seconds. If hands are not visibly dirty and soap and water are not available, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
- If possible, for fabrics or other materials that can be laundered, use the warm water setting and dry items completely on high heat.
- If a person under quarantine has a special need for assisted cleaning (e.g., an elderly person who is unable to clean a spill such as vomiting in their quarters), public health staff will oversee the cleaning process as part of their evaluation of the individual.

Cleaning a Room Vacated by a Person under Quarantine with COVID-19 (Enhanced Cleaning)

Rooms that housed a person under quarantine with COVID-19 should remain closed to further use until cleaned and disinfected by appropriately trained cleaning staff. The room should not be entered by cleaning staff for at least for 24 hours.

- Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process.
 - These gloves and gowns should be compatible with the disinfectant products being used
 - Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk for splash.
 - Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area.
- Cleaning should be undertaken using products with EPA-approved emerging viral pathogens claims (<https://www.americanchemistry.com/Novel-Coronavirus-Fighting-Products-List.pdf>). All products should be used according to label instructions.
 - Clean the surface first, and then apply the disinfectant as instructed on the disinfectant manufacturer's label. Ensure adequate contact time for effective

- disinfection.
- Adhere to any safety precautions or other label recommendations as directed (e.g., allowing adequate ventilation in confined areas, proper disposal of unused product or used containers and donning appropriate PPE).
- Avoid using product application methods that cause splashing or generate aerosols.
- Cleaning activities should be supervised and inspected periodically to ensure correct procedures are followed.
- After cleaning and removal and disposal of gloves, staff should perform hand hygiene by washing hands often with soap and water for at least 20 seconds or using an alcohol- based hand sanitizer that contains 60 to 95% alcohol. Soap and water should be used if the hands are visibly soiled.
- Clean and disinfect all frequently touched surfaces in quarantine locations (e.g., counters, tabletops, doorknobs, light switches, bathroom fixtures, toilets, phones, keyboards, tablets, remotes and bedside tables) according to instructions described for products with EPA- approved emerging viral pathogens claims.
- For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present. Launder items as appropriate in accordance with the manufacturer's instructions. Porous materials that will be laundered can be transported to the laundry facility in the usual manner. If possible, launder items using the warm water setting and dry items completely on high heat.
- When cleaning is completed, collect soiled material and PPE in a sturdy, leak-proof (e.g., plastic) bag that is tied shut and not reopened. This waste can go to the regular solid waste stream (e.g., municipal trash) as it is not biohazardous or regulated medical waste.
- If bulk material and spills containing blood or body substances are present, cleaning staff should use absorbent materials, such as towels, to remove the material. The area should then be cleaned and then disinfected with products with EPA-approved emerging viral pathogens claims used according to product label instructions.
- No additional cleaning is needed for supply and return ventilation registers or filtration systems for the building.
- No additional treatment of wastewater is needed before discharging to sanitary sewer.

Cleaning Recommendations for Quarantined Persons from Uncontrolled Sources (e.g. increased likelihood of many cases such as on cruise ships, etc.)

Cleaning for facilities housing persons under quarantine because of exposure from an uncontrolled source should be conducted following the Enhanced Cleaning procedures and include cleaning of common areas outlined above.

Cleaning a Room Vacated by persons under quarantine without COVID-19

After all persons under quarantine are released and assuming the quarantined persons are not from an uncontrolled source (see above):

- If all persons under quarantine have been released and vacated the housing area and no persons tested positive for COVID-19, the facility (e.g., rooms, common areas) should be cleaned according to standard procedures.
- No additional PPE is required beyond what is normally worn for regular housekeeping activities.

Cleaning of Common Areas of a Housing Facility (if used)

If common areas are used by persons under quarantine, those areas will require cleaning and disinfection during the quarantine period.

- Common areas of a facility should be cleaned on a daily basis, and as needed.
- Regardless of known COVID-19 status of persons under quarantine, common areas should be cleaned according to Cleaning a Room Vacated by a person under quarantine with COVID- 19(Enhanced Cleaning) recommendations, since communication to cleaning staff about persons under quarantine who develop symptoms or test positive for COVID-19 may not be able to occur as quickly as cleaning services are required.
- No quarantined individuals should be present in a common area during cleaning. Common areas of a facility should be closed off to all persons except for cleaning staff before cleaning and disinfection activities take place.

Additional Resource:

OSHA COVID-19 Website: <https://www.osha.gov/SLTC/covid-19/>

TAB G – Religious Support

NBG RMT has a few options to consider:

1. All personnel will stay home and follow notifications via commander's channel or EOC notifications through phone calls and texts.
2. NBG Chapel will be shut-down upon BCO approval until further notification.
3. On-line worship will be utilized. Chaplains will preach through FB Livestream and may record messages to upload on NBG Chapel Facebook or send to group WhatsApp accounts.
4. Email sermon manuscript to our congregation.
5. Consider an outdoor service with social distancing, about 5-6 feet away.
6. Encourage families to do family worship at home
7. Essential personnel for the chapel will report only (CH Lee and CH Brunner). Enlisted staff and contracted workers will follow guidance and/or telework. Pastoral calls will be made by phones/PCs.
8. Recall rosters will be used for accountability, etc.
9. When or if casualty ministry is needed, it will be done by social distancing and phone calls, unless directed to wear appropriate PPE.
10. For Catholic Communion and Sacraments:
 - a. Families that would like to receive Communion needs to contact CH Brunner through the Chapel's FB page or through his cell phone.
 - b. Each family would designate one member as Communion Minister. By either Phone or email, I would provide the minimum amount of training needed.
 - c. On Sunday morning Chaplain Brunner celebrates Mass privately at the chapel to consecrate enough Communion for distribution.
 - d. The designated family member would sign-up for a time slot (at ten minute intervals) to pick-up Communion for the rest of the family. Only one family Communion Minister would be at the chapel at a time. Social distancing would be maintained to minimize the possibility of transferring the contagion.

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Duty hours contact at: 671-339-2126

Non duty hours contact:

671-488-0274 (Duty Chaplain),

671-486-6187 (Command Chaplain Cell)

671-988-9985 (CH Brunner)

671-689-6764 (CH Phelps)

11. When video chatting, we will use: Facebook, Skype, Oovoo, WhatsApp, and Facetime.

12. Overall Religious Support

a. When the mission requires, CH Lee (NBG Command Chaplain), CH Brunner (Deputy Chaplain) will each locate themselves where the need is greatest. CH Phelps and RPs will stand by for any religious, moral, and spiritual support.

b. RMT will provide direct and area Religious Support by accomplishing three key tasks:

(1) Nurture and Living- Provide individual and group religious support in the form of worship services, rites, and sacraments, prayers, and pastoral presence to encourage spiritual wellness and faith formation.

(2) Care for the wounded- Provide pastoral care for the injured, sick, weary and traumatized.

(3) Honor the Dead- Provide pastoral ceremonies, religious services and other rituals to honor deceased personnel.

c. In the event of a Mass Casualty event or other emergency, --NBG Chaplains will partner with Naval Hospital Mortuary Officer, FFSC, JRM Chaplain, and Hospital Chaplain.

TAB H – EOC Operations

1. PURPOSE.

a. The purpose of this Naval Base Guam (NBG) Virtual Emergency Operations Center (EOC) plan is twofold:

(1) To provide guidance concerning EOC activation during a base lockdown, shutdown, and any other event that may prevent an EOC Incident Management Team (IMT) member from reporting to the EOC.

(2) To provide guidance for communications while the Virtual EOC is active. This guidance includes how to support the incident commander, conduct incident action planning, and process Request for Information/Support.

b. Emergency Response Objectives. For later guidance in this plan, it is important to first understand emergency response objectives.

(1) Primary Objectives. NAVBASEGUINST 3440.17 provides the Primary Objectives of Commander, Naval Base Guam Emergency Management (EM) Program. To more easily grasp what these Primary Objectives translate into, they can be thought of as the initial Incident Commander's Objectives and Commanding Officer's Intent. The Primary Objective are:

(a) Protect personnel onboard the installation (i.e., Categories 1-5 personnel).

(b) Maintain critical missions performed aboard the installations [i.e., Continuity of Operations (COOP) for Mission Essential Functions (MEF) performed in Critical Mission Facilities (CMF) linked to the National Military Strategy].

(c) Restore MEFs performed aboard the installation [e.g., Mission-Essential Vulnerable Assets, Continuity of Government (COG) and/or Continuity of Business (COB)].

2. ASSUMPTIONS

a. This plan is designed to reflect the possibility of any or all of the below conditions existing. The following events may occur during an emergency:

(1) Damage to or Disruption to all EOC Sites.

(2) Base lockdown due an active shooter.

(3) When conditions warrant due to a pandemic environment.

(4) HAZMAT or CBRNE incidents affecting all EOC Sites.

(5) Civil disturbance or disobedience prevents employees from reporting to the EOC

b. Mitigation activities conducted to the occurrence of an emergency will not result in a potential reduction in the above events.

c. NBG EOC IMT members although properly trained to prepare for, respond to, and recover from an incident or event will be significantly degraded from properly managing the incident/event while activation of a Virtual EOC.

3. SCOPE & APPLICABILITY

a. Due to nationwide incidents and events that have occurred to include active shooter, bomb threats, pandemic there is a high probability that a Virtual EOC will be activated.

b. This plan applies to all Department of Defense (DOD) uniform personnel, civilian personnel, and contractors appointed to the Naval Base Guam Incident Management Team.

4. CONCEPT OF OPERATIONS

a. EOC activation using the primary location in building 3190 is unchanged from standard activation procedures.

b. The activation of the Virtual EOC is primarily established in the response phase of Emergency Management. The Response Phase is the onset of an emergency that creates a need for time-sensitive actions to save lives and property, as well as for action to begin stabilizing the situation so that NBG can regroup. Such response actions include notifying EM personnel of the crisis, warning and evacuating or sheltering the population if possible, keeping the population informed, rescuing individuals and providing medical treatment, maintaining the rule of law, assessing damage, addressing mitigation issues that arise from response activities, and even requesting help from outside the installation.

5. SYSTEMS AND COMMUNICATIONS. Multiple systems are required to maximize alert, recall and incident management capabilities during the activation of the Virtual EOC.

a. Outdoor Voice commonly known as Giant Voice. This is an installation-wide loud speaker voice announcement system which includes exterior and some interior speakers. The primary control location for the Giant Voice system at Naval Base Guam is in the EOC with a secondary control system at the EOC COOP site. If both NBG system fails, Joint Region Marianas – Regional Operations Center (JRM ROC) have a backup system with the capability to transmit announcements and warnings throughout all the installations.

b. AtHoc. AtHoc has two main components: Automatic Telephone Notification System (ATNS) and Computer Desktop Notification System (CDNS). The primary administrators for AtHoc are the NBG EM Staff followed by JRM ROC Watchstanders.

(1) ATNS. Interactive, community notification systems capable of providing voice and/or data messages to multiple receivers (landline telephone, cellular phones, cell phone text messaging, pagers, and e-mail) with an interactive method to record receipt of notification/warning and a call-prioritization method.

(2) CDNS. An administrative broadcast across the computer system network consisting of a notice from a central location that would over-ride current computer applications, thus reaching the region's ONE-NET computer users nearly instantaneously.

c. Command, Control, Communications, Computers, and intelligence (C4I) Suite. C4I Suite is the primary Emergency Management incident management online program with the following capabilities: Log keeping, battle rhythm, chat, and Common Operating Picture. C4I Suite is DOD CaC enabled and can be accessed at (<https://c4isuite.atfp.cnmc.navy.mil>).

6. VIRTUAL EOC ACTIVATION PROCEDURES

a. Upon activation at any level, the EOC serves as the centralized location (physically and virtually) to monitor and report the impact of emergencies while providing communication and information between the Incident Command Post, Joint Region Marianas (JRM) Regional Operations Center (ROC), higher headquarters (HHQ), key decision-makers, and local government. The EOC is the focal point for coordination between NBG and local government for Immediate Response (IR) and Defense Support of Civil Authorities (DSCA) support to local government within the JRM Area of Responsibility (AOR). Discussed below are the key elements for the Virtual EOC activation to ensure effective decision making and prompt activation of the Incident Management Team (IMT).

(1) Activation Authority. Ultimate decision for Virtual EOC activation rests with the NBG Operations Officer (OPSO) and NBG Emergency Management Officer (EMO).

(2) Pre-activation Process. The pre-activation process starts with notification of an incident/event to the EOC or NBG Command Duty Officer (CDO). The NBG OPSO, or NBG EMO, or NBG EOC Manager is alerted and conducts an immediate incident assessment to determine the scope and impact of the incident by using information provided from the emergency responders and situational awareness tools as appropriate. This assessment leads to a recommendation to activate the EOC virtually or physically to support the Incident Command Post (ICP) or other military and government EOCs.

(3) Activation of the Virtual EOC. Upon declaration of AL increase and the situation warrants that the IMT cannot physically man the EOC, the NBG EMO or EOC Manager will send an AtHoc alert to the IMT members to activate virtually.

(4) Sequence of Actions. The process below provides guidance for EOC activation.

(a) NBG EOC or NBG CDO receives notification of an incident/event.

(b) NBG EOC or NBG CDO notifies the NBG OPSO or NBG EMO of incident/event.

(c) NBG EMO or EOC Manager will send out an AtHoc alert to the IMT member activating them virtually.

(d) Upon receiving the Virtual EOC Activation alert all IMT members will log into the C4I Suite System at <https://c4isuite.atfp.cnic.navy.mil>. If any IMT member does not have network capability he/she should contact the EOC via phone call at 671-333-2770/1 and provide them with their current contact information (Email and Phone).

(e) NBG EOC shall notify JRM ROC of EOC activation.

7. INCIDENT MANAGEMENT TEAM COMMON ACTIONS

a. C4I Suite

(1) All IMT members should have an active C4I account for incident management.

(2) Upon logging into C4I Suite, members should go to the NBG Command page by clicking onto the Naval Base Guam Tab.

(3) Once you are in the NBG Command page members should activate the “Naval Base Guam Chat” and check-in with the EOC.

(4) The Naval Base Guam Chat room will be the IMT’s primary coordination platform for incident management.

(5) At the bottom of NBG Command Page is the “NBG EOC-Battle Rhythm”. All events concerning the EOC to include change-over, meetings, do outs, etc. will be entered in this web part.

b. Government Email and Approved Contract Support Email. Government and approved contract support email addresses are the only authorized email platform for information exchange during activation of Virtual EOC.

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c. Government and Contract Support Phones. Only Government and contract support phones are the only authorized phone communication for incident management during activation of Virtual EOC.

d. Government Computers and Contract Support Computers. Government and contract support computers are the only authorized computers to for incident management during activation of Virtual EOC.

TAB I - MWR Operations

1. At HPCON B, NBG MWR will take the following actions:

MWR Program	Actions
ALL Programs	Unscheduled leave may be authorized; mission essential personnel are expected to report to work.
NGIS	Relocate remaining units at Apra Palms to Unaccompanied housing or provide certificate of non-availability. House by House Cleaning required by NGIS staff, normal operational cleaning of Bldg. 2000, Bldg. 179 would be delayed.
Food & Beverage	Establish food operations to support COVID food requirements (700 meals can be produce every two hours). Limited hours of operation for Redoubt Bar (time TBD).
Tickets & Travel	Limited hours of operation; Mon-Fri from 0900-1800, closed on Saturday
Events & Entertainment	Cancellation of all weekly programs, weekly events and special events
Library	Limited hours of operation; Tues-Fri from 1000 - 1800. Cancellation of weekly programs and events (children, teen, and adults). Facility open for item circulation and computer/Wi-Fi access only.
Fitness Department	Limited hours of operation: CKFC: Mon-Fri from 0500-2000/Sat-Sun from 0800-1500; Pool: Mon-Fri from 0500-0800/11-1400; Sat-Sun from 1000-1400 (Frequent sanitation of facility/equipment)
Outdoor Recreation	Cancellation of weekly programs and events
Auto Skills	Cancellation of weekly programs and events.
Liberty	Cancellation of weekly programs and events.
DFS	Dependent upon ships status: support with inventory and delivery to pier, transfer DFS items, canopy support, delivery of food/pizza, transport/access to all MWR Facilities from pier.

2. At HPCON C, NBG MWR will take the following actions:

MWR Program	Actions
ALL Programs	Initiate sequesting plan for CAT 1 personnel in CYP, NGIS and Food & Beverage
All Programs	CAT 1 Personnel only at EOC or working mission essential functions. CAT 5 Personnel are placed on administrative leave with daily check-in.
MWR	Closure of all non-essential programs (Redoubt, First Strike Bowling, Big Screen Theatre, Library, Liberty, CFKC, NCTS, Tickets & Travel, Special Events, Outdoor Recreation, Sumay Cove Marina, and Auto Skills)
Food & Beverage	Implement measures for installation food production only. Redoubt/TNT/SIK dine in options not available.

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MWR Program	Actions
CYP	Close operations at NBG CDC, NBG SAC, and Teen Center. Relocate childcare operations to NH CDC to support mission essential personnel, operate other centers to support back log.

TAB J – NEX Operations

PREPARE AND PROTECT

Inform & Educate Associates

- Be vigilant and watch for illness
- Promote protection measures by providing proper hygiene methods
- Use DoD screening sheet to identify a potential COVID-19 case
- Implement the 6' rule
- Discourage personal contact and food sharing
- Restrict potlucks in the work place temporarily
- Encourage associates to stay home if sick and contact their primary care provider
- Limit or cancel meetings or events that would require a large group gathering
- Identify MEP 60+ years of age and any associate with known compromised immune systems

COVID-19 Essential Supply List

HPCON Bravo Action plan:

1. Track instocks weekly and report them to EMO and PAO for public awareness
2. Communicate merchandise needs with NEXCOM
3. Limit 2 per customer/per day on items identified as COVID-19 essential
4. Be prepared to order supplies for 1st responders, command, and NEX

HPCON Charlie Action plan:

1. Request air freight on essential items through NALO or TAC
2. Increase the limit on supplies to 1 per customer/per day

Sustaining Operations:

HPCON Bravo Action plan:

1. Business as usual with increased precautions as it pertains to cleanliness and personal contact
2. Provide disinfectant wipes to customers at entrance of store
3. Increase general cleaning of public areas, common areas, work spaces, and communal surfaces per the facility cleaning plan

HPCON Charlie Action plan:

1. Close all non-essential stores (like Home Gallery)
2. Limit the hours of operation
3. Request 1 family member shop and the rest stay home (PAO to communicate)
4. Have a health care professional conduct temperature scans before entering

5. Have hand sanitizer pumps available at the store entrances
6. Take orders, pack, and deliver to NBG homes.
7. Identify associates that can telework from home
8. Provide PPE to associates (gloves, masks, hand sanitizer)
9. Increase frequency of facility cleaning plan

FOOD SUSTAINMENT

Food Action Plan:

- All vendors have been asked to sanitize all food and common areas hourly.
- Infusion and Wendy's have been asked to wipe front doors and bathroom doors in addition to above
- Vending machines will be wiped down everyday
- Micro mart counters and surfaces that customers/associates touch will be sanitized regularly

Bravo Action plan:

- Domino's has online ordering, payment, and delivery
- Subway has phone ordering and pay over the phone and delivery
- Wendy's has a drive thru
- O-kizsushi has online ordering and payment at NH and will install for NBG within one week
- Extra vending machines could be dropped or redirected – for example the cold food machines could be loaded with sandwiches
- Ask food vendors to take extra precautions by having food prep worker wear protective gear like gloves and masks to prevent food contamination.

Charlie Action plan:

- Close in-store dining room but keep "to go" orders open for business
- Provide box lunches to quarantined
- Contract our student meal provider to prepare meals that could feed hundreds if a massive outbreak occurred.
- Cease all hot food bar preparations