DEPARTMENT OF THE NAVY

RETURN TO THE WORKPLACE

COVID-19

GUIDANCE AND RESOURCES

2020

Current as of July 21, 2020
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Due to the rapidly changing environment caused by the COVID-19 crisis, this document may contain outdated guidance. Consult the following NAVADMIN/MARADMIN links for updated guidance: NAVADMIN Library and MARADMIN Library.
COMMAND REPORTING REQUIREMENTS AND INTERAGENCY COORDINATION

Provides details on the scope of information (e.g., number of cases, number of individuals quarantined, number of deaths) and the periodicity of required reports to higher authority.

Information Collection Procedures

Questions relating to collection, consolidation, and dissemination of information and/or reporting requirements for commands.

- **NAVADMIN 115/20** (20 April 2020)

  For CONUS commands, ensure POCs continue to submit accurate and timely COVID-19 reports to USFFC and OPNAV, with an information copy to the local installation commander. For OCONUS commands, ensure POCs submit accurate and timely COVID-19 daily reports to Navy Component Command/Echelon 2 Commander and OPNAV, with an information copy to the local installation commander. (From Paragraph 5)

  Navy commands will report the following through the chain of command and OPREP-3 ensuring both CNO Washington DC and appropriate Echelon 2 commanders are included: Current Active Positive Cases/Total Currently Hospitalized/Total in ROM/Total Recovered/Total Deaths/Current total Persons Under Investigation (PUI). This information will be reported for each of the following categories of personnel: Active-Duty, DON, Civilian, Military Family Member and Navy Contractors. USFFC, COMNAVEUR/AF, COMNAVCENT, COMNAVSOUTH will report to OPNAV by 1500Q daily and COMPACFLT will report by 0100Q daily. Further details provided in linked guidance.

- **For Marine Corps**: SMB_HQMC_MCCAT@usmc.mil (open source link unavailable). HQMC MCCAT responsible for receiving/reporting on COVID specific information to be reported to higher echelons from all or particular commands (i.e. symptoms, testing of personnel, number of cases contracted, individuals quarantined, deaths, mission impacts).

  Paragraph 6.B. of MARADMIN 264/20 directs the use of the COVID-19 Manpower Tracking Application to report the status of personnel. DC, MRA has released a manpower tracking application and commanders are directed to utilize the application to report the personnel status of Marines, Sailors, civilian employees, contractors, dependents, and other Service personnel affected by COVID-19. Access to the application has been granted to Staff Noncommissioned Officers and Officers in the 01xx community, along with select civilian personnel in key billets at headquarters elements throughout the Marine Corps. Coordinating guidance and detailed reporting instructions have been disseminated to the G-1 community via Personnel Administrative Advisories (PAAs).

  Paragraph 4.A.1 of MARADMIN 353/20 directs continued reporting of Tiers 1-3 (Tier 4, if directed) testing requirements for Service-retained forces and accessions training to the Joint Staff Crisis Management Team, including requirements for Reserve forces and personnel in accordance with guidance contained in DOD COVID-19 Task Force Memorandum of 24 April 2020, DOD COVID-19 Task Force Laboratory Testing Line of Effort.

  MARADMIN 356/20 (Marine On-Line Unit Management Status Report Update for Telework) announces the functionality to identify members in a telework status in the UMSR and directs the use of this functionality when performing unit morning reports. This MARADMIN provides administrative guidance to the reporting unit level.

- **Additional Information**: Commands/units/activities may consider using DD Form 3112 (April 2020); “Personnel Accountability and Assessment Notification for a Public Health Emergency.”
Data and Privacy Safeguards

Questions relating to ensuring employee privacy during data collection and related metrics.

DON HR COVID Consolidated FAQ (Question 22)

All personally identifiable information (PII) should only be collected, used, and disclosed as necessary to safeguard public health and safety in accordance with relevant privacy laws, regulations, and policies. The infected employee’s privacy should be protected to the greatest extent possible; therefore, his or her identity should not be disclosed. In an outbreak of quarantinable communicable disease or COVID-19, management should share only that information determined to be necessary to protect the health of the employees in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA). Supervisors should consult with their agency general counsel to determine what information is releasable.
DON Return to the Workplace Consolidated FAQs & White House Guidance

ASN (M&RA) FAQs, question 2. As the decision of a Command to return to normal operations depends heavily on consultation with and guidance from local health officials, we expect such conflicts to be infrequent. However, OPM, in consultation with the Department of Justice, has determined that none of the orders issued to date restrict the ability of Federal employees from any travel necessary to perform official functions. OPM recommends that Federal agencies continue to follow staffing plans that have been adopted consistent with previous COVID-19 guidance issued by OMB and OPM. Federal employees should continue to carry appropriate Federal identification (such as a CAC or PIV card, or agency-issued letter of authorization) when traveling to carry out Federal business and report to appropriate supervisors if there has been a travel issue with local law enforcement.


Varying Employee Categories or Circumstances

Questions relating to considerations about employees’ residential location or personal circumstances.

- OPM COVID-19 Guidance
HPCON

Provides considerations for adjusting local HPCON.

General

Questions relating to consolidating HPCON guidelines throughout the DON for uniformed, civilian and contractor personnel.

- Defense Guidance

HPCON Adjustment Decisions

Questions relating to initial and subsequent adjustments to HPCON and corresponding restrictions on installations.

- NAVADMIN 147/20 (20 May 2020)
  Provides Navy guidance to Commanders on adjusting Health Protection Conditions and Base Services. It covers detailed guidelines regarding:
  - Symptom Trajectory
  - COVID-19 Case and Testing Trajectory
  - Capacity to Treat and Healthcare Worker Testing Program

- "DODI 6200.03, "Public Health Emergency Management Within the DOD" (28 March 2019)" states:
  "The determination to change the HPCON level will be made by the military commander in consultation with the Public Health Emergency Officer (PHEO) and the Military Treatment Facility (MTF) commander or director." See Section 4, par 4.a.(9)(b)

- Commanders and Public Health Information Officers should also familiarize themselves with the roles and responsibilities outlined in DODI 6200.03. Guidance on HPCON and limitation of authority can be found in this Instruction.

- Paragraph 3.A of MARADMIN 333/20 directs Installation Commanders to set HPCON Conditions in accordance with MSGs: COMMCOMM/132122ZMAR20 and 12024ZMAY20. Decisions resulting from these assessments will determine whether or not an installation is restricted for travel and appropriately reported. The Department of Defense will determine states, territories and host nations that meet the White House’s Opening Up America guidelines, per SECDEF Memo of 22MAY20.

- Paragraph 3.B of MARADMIN 353/20 states that OSD has directed Service-level data collection and analysis to inform and determine the optimal Restriction of Movement (ROM) duration and testing interval. Commanders should be prepared to adjust ROM and testing procedures based on pending results of the data analysis. Should future OSD-level and/or Department of Navy guidance deviate from ROM and testing protocols contained herein, supplemental guidance to the force will follow.
GEOGRAPHIC CONSIDERATIONS

Guidelines by Civil Authorities

Questions relating to what guidelines a civil command should follow regarding reopening.

- U.S. State Department Travel Alerts, Notifications and Warning information, and CDC Travel Health Advisories
  The U.S. State Department monitors health conditions abroad and issues Travel Alerts & Advisories for affected countries where travel restrictions exist. The Centers for Disease Control and Prevention (CDC) issues Travel Health Advisories for affected countries overseas.

Guidelines from Military Authorities

Questions relating to what guidelines a military command should follow regarding reopening.

- Public Health Emergency Management Within the DOD (28 March 2019)
  In paragraph 3.5 “Implementation Outside the United States”. Commanders and Public Health Emergency Officers should become familiar with the provisions of this Instruction.

- Commanders should consult with Staff Judge Advocate. Decision-making authorities with legal ramifications should be coordinated with SJA representation.

- Paragraph 5 of NAVADMIN 173/20 states that due to the unique nature of Forward Deployed Naval Forces (FDNF) and their Host nation relationship, NCCS will define operational requirements for FDNF units.
  Paragraph 3.C.9 of MARADMIN 150/20 directs Commanders to review the supplemental risk-based measures outlined in USD (P&R) Memo on Force Health Protection Supplement 2 and observe the following operational risk level mitigation actions for COVID-19 outlined (in MARADMIN 150). The risk based framework for all geographic areas with COVID-19 transmission is organized by the following characteristics: (a) community transmission beginning, (b) increased community transmission, (c) sustained community transmission, and (d) widespread community transmission.
WORKFORCE MANAGEMENT

Provides criteria for functions returning to the workplace.

Personnel Safety and Medical Requirements

<table>
<thead>
<tr>
<th>Questions relating to in-office health monitoring, mental preparedness, and action plans for positive cases.</th>
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| **OPM Guidance**  
(for illustrative purposes), Appendix A provides guidance on Operating Site Preparedness Considerations. |
| **Commanders Guidance**  
This chart illustrates for Commanding Officers direction to mitigate/act pursuant to guidance provided by the CNO and CMC. |
| **DON HR COVID Consolidated FAQs**  
Number 204 addresses monitoring protocols to be implemented prior to personnel reporting back to work, having sick employees stay home, establishing daily employee health checks, monitoring absenteeism and having flexible time off policies. |
| **DON HR COVID Consolidated FAQs**  
Question 8 describes the steps to be taken by an individual who tests positive. |
| **Coping with Stress During Infectious Disease Outbreaks**  
This document provides information about handling stress during the COVID-19 pandemic. |
| **For Marine Corps Reserves: MARADMIN 365/20** provides “Clarifying Guidance to Reserve Component Performance of Inactive Duty Training, Annual Training and Individual Ready Reserve Muster in Persistent Pandemic Environment”. |
| **Available Resources for Military Personnel and their Families:** |
| • **Military Crisis Line:** 24/7 confidential and toll-free support for service members and veterans in crisis. Call 1-800-273-TALK (option 1), text 838255 or visit www.militarycrisisline.net. |
| • **Military OneSource:** Confidential non-medical counseling available to service members and families. Call 1-800-342-9647 or visit www.militaryonesource.mil. |
| • **Navy Chaplain Care:** Communications are 100 percent confidential unless the service member decides otherwise. Call 1-855-NAVY-311 to request chaplain support or visit http://www.navy.mil/local/chaplaincorps/. |
| • **Psychological Health Resource Center:** Free and confidential professional health resource for service members, families and clinicians. Call 1-866-966-1020 or visit http://www.realwarriors.net/livechat to speak with a consultant 24/7. |
| • **Psychological Health Outreach Program (PHOP):** Provides Navy Reservists and their families’ full access to appropriate psychological health care services. Contact your local PHOP region for assistance at 1-866-578-PHOP(7467). |
| • **Navy and Marine Corps Public Health Center:** Committed to supporting Fleet and Marine Corps readiness and enhancing public health outcomes through products and services http://www.med.navy.mil/sites/nmcp/hc/health-promotion/Pages/default.aspx. **Navy Marine Corps Relief Society:** Sailors and family members who experience financial hardship due to COVID-19, which the entitlements and GOVCC initiatives don’t relieve, are highly encouraged to seek assistance from their local Navy and Marine Corps Relief Society office. A list of locations, points of contacts and amplifying information can be found at: https://www.nmcrs.org/pages/quick-assist-loan-qal. |
Workforce Rights, Responsibilities and Performance

Questions relating to reporting symptoms and positive tests to supervisors, acceptable medical documentation, refusal to work, accommodations for those who live with a vulnerable individual, and non-compliance in grooming policies.

- **Force Health Protection Guidance (Supplement 8) – Department of Defense Guidance for Protecting Personnel in Workplaces during the Response to the Coronavirus Disease 2019 Pandemic**

Collecting Information Necessary to Protect the Workplace: In view of the public health emergency, the collection by DOD Components of COVID-19-related information from individuals whose place of duty is in the DOD workplace, to the extent such collection is necessary to implement the guidance on workplace access, is authorized. DOD Components are authorized to use DD Form 3112, “Personnel Accountability and Assessment Notification for Coronavirus Disease 2019 (COVID-19) Exposure,” to collect this information.

- **DON HR COVID Consolidated FAQs**

  Question 306 addresses acceptable medical documentation that will allow an employee to stay home.

  NAV20073 addresses non compliance in uniform and grooming policies. Due to COVID-19 force health protection measures maximizing social distancing, commanding officers (CO) are authorized to relax the Navy hair length grooming standards for Sailors assigned to their command. Relaxed hair length grooming standards will only apply to the area of the scalp.

  **DON HR COVID Consolidated FAQs**

  Question 309 discusses the issues of refusing to work. **OPM Guidance** also addresses the situation where an employee refuses to return to work in question #5.

- **EEOC**

  D.13 discusses employees entitled to an accommodation under the ADA in order to avoid exposing a vulnerable family member.

Workforce Staffing Levels

Questions relating to rotating employees returning to the workplace and contract support.

- **DOD Guidance**

  Civilian Personnel Guidance for DOD Components in Responding to Coronavirus Disease 2019 provides that supervisors have the discretion to utilize several human resources flexibilities, including alternative work schedules.

- **OPM Guidance**

  The provisions of the Telework Enhancement Act only pertain to Federal civilian employees as defined by 5 USC 2105. However, there is no Federal statute or regulation that specifically prohibits Federal contractor employees from teleworking. Generally, the decision to allow a contractor employee to telework would be made by the contractor employee’s supervisor and/or in conjunction with the contracting agency/office.
TELEWORK AND REASONABLE ACCOMMODATIONS

Provides guidance on telework policies, military, civilian, and contractor, and questions that arise as an outcome of extended telework requirements continuing as a reasonable accommodation.

Contractor Employees

Questions relating to federal contractors who want to telework or a contract that requires embedded contractors.

- **OPM Guidance**
  
The provisions of the Telework Enhancement Act only pertain to Federal civilian employees as defined by 5 USC 2105. However, there is no Federal statute or regulation that specifically prohibits Federal contractor employees from teleworking. Generally, the decision to allow a contractor employee to telework would be made by the contractor employee’s supervisor and/or in conjunction with the contracting agency/office.

Continuing Telework

Questions relating to telework options once returning to the office begins to be implemented.

- The **Memorandum for Heads of Executive Departments and Agencies – Aligning Federal Agency Operations with the National Guidelines for Opening Up America Again** request that agency heads maintain the flexibility to develop and continue to use appropriate telework protocols for their operations. As conditions change, agency heads should revisit telework policies and agreements in order to continue progressing to normal operations or address changing conditions while retaining the needed flexibility during the response. As noted in OMB’s guidance, M-20-23, Aligning Federal Agency Operations with the National Guidelines for Opening Up America Again a phased return from maximum telework is appropriate and encouraged as local conditions improve. In accordance with the President’s Guidelines for Opening Up America Again, and CDC guidance, employers with vulnerable populations, agencies, components, or duty locations in states or regions that remain in the Gating period, Phase 1, or Phase 2 should maximize telework for eligible workers. Telework should be maximized for eligible workers, including but not limited to populations that CDC has identified as being at higher risk for serious complications from COVID-19 (CDC High-Risk Populations) and to CDC-identified special populations, including pregnant women (CDC Special Populations). In addition, to the extent possible, employers are encouraged to consider telework options for employees with vulnerable household members, until their state or region has entered Phase 3 in accordance with the Guidelines for Opening Up America Again. “If a vulnerable employee’s duty location is within an area that is classified as Phase 3, they may return to work at their duty location, but should continue physical distancing protocols and other mitigation measures. Agencies do not need to require certification by a medical professional, and may accept self-identification by employees that they are in one of these populations.”
Hardware for Telework

The DON CIO will work with the various front offices of the Pentagon to meet any increased demand for classified computers. Increased cleaning supplies for DON Pentagon offices are being ordered to ensure shared spaces and computers are properly maintained. Additionally, equipment orders will be placed through the appropriate IT services contracts or approved DISA device lists. Joint Service Providers (JSP) is working with DOD CIO and USD(I) to promulgate a policy change to allow approved cameras connected to government furnished equipment within an Open Secret Storage (OSS) space. Employees should not bring a camera or external microphone into an OSS space until this policy is released. For commands, offices, and employees located outside of the Pentagon Reservation, please contact your local IT services and facilities offices for details on equipment and cleaning supplies.

Barriers to Telework

Questions relating to the availability of SIPR devices, headset/cameras, and additional equipment for remote use.

Questions relating to at home telework capabilities and what to do when missions preclude telework options.

DON HR COVID Consolidated FAQs

Number 269 provides information on the use of funding to support costs incurred at home for telework capabilities such as high-speed internet and personal cell phone use.

When missions preclude telework options please refer to: ALNAVRESFOR 011/20 and ALNAVRESFOR 012/20 for completing AT requirement via telework for Navy. In-person AT is the preference. For Marine Corps: MARADMIN 236/20 commanders shall continue to maximize the use of telework to the extent practicable. AT is considered an active duty order type and as a result, the authorization for Active Duty personnel to Telework (contained in DOD Mil-Pers Guidance) is extended to cover AT events.
Paragraph 2.G. of NAVADMIN 173/20 defines Restriction of Movement (ROM) as limiting personal interaction to reduce risk to the health, safety and welfare of a broader cohort. ROM is used to minimize risk of individuals, and to prevent personnel who have been in a higher risk area from potentially infecting others. ROM includes Isolation, Quarantine and ROM-Sequester. Units will conduct a minimum 14-day ROM-Sequester prior to deployment. Military members returning to CONUS from deployment will complete a 14-day ROM at home station. Members returning via ship or MILAIR with no active COVID-19 cases within their unit in the last 14 days, may count transit time (beginning on the day of departure from the last port or airfield) toward the ROM requirement. Service members on post-deployment ROM are restricted to their personal residence or other appropriate domicile and must limit close contact.

Paragraphs 3.B. and 3.C.1.C. of MARADMIN 353/20 provide ROM guidance for deployment and redeployment for Active Duty and Reserve Marines, as well as Sailors assigned to Marine units. All Marines and Sailors deploying outside the United States, whether to a COVID-19 operational area or not, will undergo a mandatory 14-day ROM prior to deployment except when ROM has been arranged in country. Marines and Sailors redeploying, whether from a COVID-19 operational area or not, will undergo risk-based screening and a 14-day ROM is required. The 14-day ROM will be performed at a predetermined location to include home station, the Marine or Sailor’s residence, or other suitable domicile.

Paragraph 5 of MARADMIN 333/20 provides guidance on ROM associated with Permanent Change of Station (PCS) moves. Installation Commanders will establish local HPCON levels and risk based assessments that may require Restriction of Movement (ROM) for Marines executing PCS orders. Service members who travel to, through, or from Centers for Disease Control (CDC) Travel Health Notice (THN) Level 3 or Level 2 locations should be placed under 14-day ROM upon arrival at their destination (i.e., gaining Permanent Duty Station, installation, facility).

Paragraphs 3.D and 3.E of NAVADMIN 169/20 state that during the summer, the highest volume move season, U.S. Transportation Command (USTC) will not immediately be able to support Department of Defense (DOD) and Navy demand for PCS moves. As a result, Navy will follow DOD criteria for lifting restrictions on travel and PCS orders. These criteria will take into account local conditions in countries, states and installations based on prevailing COVID risk conditions. This means that relaxation of the global stop-movement will not mean unrestricted movement to and from all locations simultaneously. Eliminating the PCS backlog could extend beyond the end of calendar year 2020. The ultimate goal is for Navy to preserve its maritime superiority by focusing on fleet readiness. Once we have eliminated the COVID-created backlog, NPC will return to a distribution environment where Sailors transfer based on their original EDD.
Paragraph 3.a. of MARADMIN 333/20 directs continuous assessment and publication of each installation condition under Marine Corps purview for the feasibility of lifting travel restrictions. Installation Commanders shall set HPCON Conditions in accordance with COMMCICOM guidance. Decisions resulting from these assessments will determine whether or not an installation is restricted for travel and appropriately reported. The Department of Defense will determine states, territories and host nations that meet the White House’s Opening Up America guidelines per SECDEF Guidance. If the state, territory or host nation meets these criteria, then the Service may certify installations under control within that state, region or territory as open for unrestricted movement.

The Secretary of Defense issued the memorandum, “Reissuance of Department of Defense Response to Coronavirus Disease 2019 – Travel Restrictions,” April 20, 2020, cancelled three prior issuances and reissued travel restriction guidance for DOD Components. Through June 30, 2020, the Secretary of Defense ordered a stop movement for DOD civilian employees and their dependents both internationally and domestically while the memorandum is in effect. This stop movement applies to all official travel including but not limited to:

- Temporary duty (TDY) travel;
- Government-funded leave travel;
- Permanent duty travel, including Permanent Change of Station (PCS) travel; and,
- Travel related to Authorized and Ordered Departures issued by the Department of State.

DOD Components may onboard civilian employees within the local community area only, and civilian employees whose travel to the local commuting area is not government-funded.

- **MARADMIN 377/20 (DOD Policy Change, COVID-19 Military Personnel Movement and Travel Restrictions, Leave and Liberty)**

  Leave travel for DOD service members is exempt from COVID-19-related travel restrictions. The MARADMIN applies to non-official leave, liberty, and administrative absence outside the local area and/or liberty limits. Amplifying guidance in par. 4. (Coordinating Instructions).

- **DOD Guidance:** DOD Travel Restrictions Guidance from 29 June 2020 provided a list of locations that meet the conditions to lift travel restrictions, subject to the assessment of conditions at individual military installations within these areas.

- **For Navy:** Paragraph 1 of NAVADMIN 189/20 amplifies above guidance removes personal leave and liberty outside of the local area as restricted travel, and in line in accordance with other OSD, DON and Navy references, transitions the stop movement approach to domestic and overseas personnel travel to a conditions-based and phased approach to lifting of travel restrictions.

- **For Marines Corps:** Paragraph 2 of MARADMIN 377/20 directs leave travel for DOD Service members is exempt from COVID-19-related travel restrictions in accordance with DOD Guidance from 29 June 2020.
Travel Waivers

Questions relating to deployments, non-routine travel, restriction of movement, and waiver authority.

- Paragraph 1.A of NAVADMIN 173/20, provides standard operating guidance. These data driven risk mitigation measures provide Commanders the tools to prevent, and when necessary, contain COVID-19 impact to safely and confidently remain on mission. Although biased toward the shipboard environment, this guidance applies to all personnel and units deploying to and from homeport (originating unit location for Reserve personnel). It does not to routine travel (e.g., PCS, TDY, TAD) unless the traveler is a deploying individual or is assigned to or will be working aboard an operational unit.

Adherence to this standardized guidance includes accounting for specific circumstances involving civilian employees or contractors per paragraph 9. Extraordinary circumstances may necessitate waivers to this guidance to meet emergent operational requirements. The Naval Component Commander (NCC) is the waiver authority unless otherwise specifically addressed.

MARADMIN 333/20 states waivers for travel restrictions may be granted in writing by the first GO/SES in the traveler’s chain of command. Waiver determinations shall be informed by the need to prioritize the safety and security of our personnel, their families, and our communities; to lessen the burden to personnel and their families; and to ensure continued operations.

- Updated travel guidance from the Secretary of Defense can be found here.
CDC High-Risk Populations

Based on current CDC guidance, those at high risk for severe illness from COVID-19 are:

- People 65 years and older
- People who live in a nursing home or long-term care facility

People of all ages with underlying medical conditions, particularly if not well controlled, including:

- People with chronic lung disease or moderate to severe asthma
- People who have serious heart conditions
- People who are immunocompromised

Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications.

- People with severe obesity (body mass index [BMI] of 40 or higher)
- People with diabetes
- People with chronic kidney disease undergoing dialysis
- People with liver disease

DON Return to the Workplace Consolidated FAQs (Question 18)

DON OCHR is tracking and updating guidance provided by OMB. Current guidance, provided in OMB Memorandum M-20-23, states agencies do not need to require certification by a medical professional, and may accept self-identification by employees that they are in one of the higher risk populations (e.g., CDC High-Risk Populations and CDC Special Populations).

DON Return to the Workplace Consolidated FAQs (Question 14)

In accordance with the President’s Guidelines for Opening Up America, and CDC guidance, employers with vulnerable populations in states or regions that remain in the Gating period, Phase 1, or Phase 2 should maximize telework for eligible workers. Telework should be maximized for eligible workers, including but not limited to populations that CDC has identified as being at higher risk for serious complications from COVID-19 (CDC High-Risk Populations) and to CDC-identified special populations, including pregnant women (CDC Special Populations). In addition, to the extent possible, employers are encouraged to consider telework options for employees with vulnerable household members, until their state or region has entered Phase 3.
Telework and Special Accommodations for High-Risk, Vulnerable Populations

Questions concerning policies on telework for high-risk populations, special populations, and vulnerable populations.

❖ DON Return to the Workplace Consolidated FAQs (Question 14)

In accordance with the President’s Guidelines for Opening Up America Again, and CDC guidance, employers with vulnerable populations in states or regions that remain in the Gating period, Phase 1, or Phase 2 should maximize telework for eligible workers. Telework should be maximized for eligible workers, including but not limited to populations that CDC has identified as being at higher risk for serious complications from COVID-19 (CDC High-Risk Populations) and to CDC-identified special populations, including pregnant women (CDC Special Populations). In addition, to the extent possible, employers are encouraged to consider telework options for employees with vulnerable household members, until their state or region has entered Phase 3 in accordance with the Guidelines for Opening Up America Again.

For Commands or duty locations in regions or states that remain in the Gating period or Phase 1, a combination of maximized telework and flexible work schedules (FWS) should be used to improve social distancing between employees. Commands may expand the types of FWS that are available to employees, as different types of schedules provide different degrees of flexibility. Telework and FWS can also provide significant flexibility to assist employees attempting to meet other responsibilities, such as caregiving.

❖ DON HR COVID Consolidated FAQs (Question 373)

Regarding a request to telework, a pregnant worker should not be denied a needed adjustment that the employer provides to other employees for other reasons, but who are similar in their ability or inability to work. In addition, note that pregnancy-related medical conditions sometimes can be ADA disabilities, and if that is the case, they may trigger ADA accommodation rights.

❖ What You Should Know About COVID-19 and the ADA, the Rehabilitation Act, and Other EEO Laws

Regarding special accommodation under the ADA in order to avoid exposing a family member who is at higher risk of severe illness from COVID-19 due to an underlying medical condition, the ADA prohibits discrimination based on association with an individual with a disability, that protection is limited to disparate treatment or harassment. However, the ADA does not require that an employer accommodate an employee without a disability based on the disability-related needs of a family member or other person with whom she is associated.

For example, an employee without a disability is not entitled under the ADA to telework as an accommodation in order to protect a family member with a disability from potential COVID-19 exposure. Of course, an employer is free to provide such flexibilities if it chooses to do so. An employer choosing to offer additional flexibilities beyond what the law requires should be careful not to engage in disparate treatment on a protected EEO basis.
Rights and Special Accommodations for High-Risk, Special, and Vulnerable Populations

Questions concerning the rights (including privacy rights) and special accommodations that must be made for high-risk, special, and vulnerable populations.

- **U.S. Equal Employment Opportunity Commission**, *What You Should Know About COVID-19 and the ADA, the Rehabilitation Act, and Other EEO Laws*

  There may be reasonable accommodations that could offer protection to an individual whose disability puts him at greater risk from COVID-19 and who therefore requests such actions to eliminate possible exposure. Even with the constraints imposed by a pandemic, some accommodations may meet an employee’s needs on a temporary basis without causing undue hardship on the employer.

  The ADA requires that all medical information about a particular employee be stored separately from the employee’s personnel file, thus limiting access to this confidential information. An employer may store all medical information related to COVID-19 in existing medical files. This includes an employee’s statement that he has the disease or suspects he has the disease, or the employer’s notes or other documentation from questioning an employee about symptoms.

- **DON HR COVID Consolidated FAQs** (Questions 372 and 373)

  Although the CDC list of people who are at higher risk for severe illness if they contract COVID-19 includes a recommendation to monitor women who are pregnant, an employer may not lay off or place on furlough a woman who is pregnant but does not have COVID-19, or symptoms associated with the disease. Pregnant employees are protected under Title VII of the Civil Rights Act. Employment actions based on pregnancy are employment actions based on sex, so decisions about layoffs or furloughs should not be based on pregnancy. Regarding a request to telework, a pregnant worker should not be denied a needed adjustment that the employer provides to other employees for other reasons, but who are similar in their ability or inability to work. In addition, note that pregnancy-related medical conditions sometimes can be ADA disabilities, and if that is the case, they may trigger ADA accommodation rights.
By Memorandum dated April 5, 2020, the Secretary of Defense requires that all individuals on DOD property, installations and facilities wear cloth face coverings when they cannot maintain six feet of social distance in public areas and work centers (this does not include in a Service member’s or Service family member’s personal residence on a military installation). The cloth covering may be made from household items or common items. (Questions 311-317 of DON Civilian HR (Plans and Policy)), states that the Centers for Disease Control and Prevention (CDC) has recommended that surgical masks and N95 masks are in short supply and should be reserved for health care professionals or other medical first responders.) The cloth face covering should not minimize efforts to maintain social distancing at all times, when possible.

If you make your own cloth face covering, the cloth face covering must cover the nose and mouth, fitting snugly but comfortably against the side of the face, be secured with ties or ear loops, include multiple layers of fabric, allow for breathing without restriction, and be able to be laundered and machine dried without damage or change to shape. The CDC has provided instructions on how to make the cloth face coverings from various methods, which can be found at: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html. The cloth face coverings may be made from items in your home or common household items at low cost. Reimbursements will not be provided for the cloth face coverings.

If you believe you have a medical exception to wearing the cloth face covering, advise your supervisor and initiate the waiver process; this may result in you being asked to work from home or alternate worksite, take leave, or be placed on leave. All employees who elect not to wear the cloth face coverings as prescribed, and who have not initiated the waiver process or possess an authorized waiver, are subject to discipline and denial of access to the worksite.

USMC service level guidance on facemasks (PPE) is found in MARADMIN 218/20.
FACILITIES, SCREENING, AND TESTING

Details information concerning facility sanitation and testing requirements.

Facility Sanitation Guidance

Questions relating to the procedures and frequency of cleaning and disinfecting facilities to include offices, recreation spaces, and restrooms.

- CDC Guidance provides recommendations on the cleaning and disinfection of rooms or areas occupied by those with suspected or with confirmed COVID-19. It is aimed at limiting the survival of SARS-CoV-2 in key environments.
- CDC Guidance also provides information on cleaning and disinfecting facilities. This includes developing implementing and maintaining plans. The OPM Returning to Facilities provides a framework that is intended to support OPM supervisors with guidelines and planning considerations for how to evaluate the needs of employees.
- This EPA site provides guidance on approved cleaning products.

Air Quality

Questions related to how facilities will keep airborne particles from spreading, and whether improvements to air circulation and ventilation have been addressed.

- OSHA has Provided Guidance on Safeguarding the Workplace
  The OSHA planning guidance section “Implement Workplace Controls”, includes isolating employees from work related hazards. In workplaces where they are appropriate, three types of controls reduce exposure to hazards without relying on worker behavior and can be the most cost-effective solution to implement. These include: Installing high-efficiency air filters; increasing ventilation rates in the work environment; and installing physical barriers, such as clear plastic sneeze guards.
- CDC’s Interim Guidance for Businesses and Employers Responding to Coronavirus Disease (2019 May 2020)
  Included in this website is a table for employers to use to implement the most appropriate controls for your workplace, including installing barriers.
- Preparation of Cleaner Air Shelters and Cleaner Air Spaces
  Here, the CDC recommends that if separate spaces in the same building are needed to separate individuals with and without COVID-19 symptoms, it is important to ensure that air does not flow from the space sheltering individuals with COVID-19 to the space sheltering others. To do so, it may be necessary to work with a qualified heating, ventilation, and air conditioning (HVAC) professional.
- See Airborne Respiratory Virus Protection
  This poster from WHS reminds us to follow social distancing guidelines and continuously washing hands while at the workplace.
Confirmed COVID-19 Cases

Questions related to how employers share this information while respecting privacy concerns and safety of the workplace after a confirmed COVID-19 case.

- **NAVADMIN Guidance on Positive Cases and Privacy**
  
  This NAVADMIN lists requirements for reporting COVID-19 cases and addresses following HIPPA and privacy rules.

- **MARADMIN 236/20**
  
  In accordance with Reference H, commanders will collect COVID-19-related information from individuals whose place of duty is in a Marine Corps workplace to the extent that such collection is necessary to implement the guidance above on workplace access.

- **Suspected or confirmed cases of COVID-19 in the Workplace.** The CDC addresses what to do when there are confirmed COVID-19 cases in the workplace. Their recommendations include not necessarily shutting down your facility. The CDC recommends to close off any areas used for prolonged periods of time by the sick person, wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. (If waiting 24 hours is not feasible, wait as long as possible). Finally, during this waiting period, open outside doors and windows to increase air circulation in these areas.

- It is important to remember that anyone who has close contact with someone with COVID-19 should stay home for 14 days after exposure based on the time it takes to develop illness.

Screening & Testing

Questions related to entering facilities, screening requirements and what COVID-19 tests are available and for whom.

- **MARADMIN 262/20**
  
  Section 3.A.1 provides information about medical screening for all Navy personnel entering facilities and prior to deployment.

- **MARADMIN 262/20**
  
  To help prevent the transmission of the Novel Coronavirus Disease (COVID-19), Marine Corps installation/site commanders shall take reasonable steps to protect security personnel as they interact with DOD personnel and visitors accessing Marine Corps installations and sites.

- **MARADMIN 353/20**
  
  This section addresses guidance for deploying forces and how the Navy now has sufficient testing capacity. See Section 4 describes the populations to be tested, such as those with an increased risk of infection and certain professions.

- **MARADMIN 353/20**
  
  Section 3.1.C addresses the availability of tests for Marine Corps personnel, both CONUS and OCONUS.
Best Practices to Implement Social Distancing

**Questions regarding implementing social distancing.**

- **DON Return to the Workplace Consolidated FAQs** (Questions 1 and 14)
  
  Commands should distribute CDC guidance as appropriate. They may also develop hygiene and social distancing training programs based on CDC guidance but tailored to specific employee work environments.

  For Commands or duty locations in regions or states that remain in the Gating period or Phase 1, a combination of maximized telework and flexible work schedules (FWS) should be used to improve social distancing between employees. Commands may expand the types of FWS that are available to employees, as different types of schedules provide different degrees of flexibility. Telework and FWS can also provide significant flexibility to assist employees attempting to meet other responsibilities, such as caregiving.

- **DON HR COVID Consolidated FAQs** (Questions 295 and 19)
  
  For an employee covered by a telework agreement, ad hoc telework arrangements can be used as a flexibility to promote social distancing and can be an alternative to the use of sick leave for exposure to a quarantinable communicable disease for an employee who is asymptomatic or caring for a family member who is asymptomatic. An employee’s request to telework from home while responsible for such a family member may be approved for the length of time the employee is free from care duties and has work to perform to effectively contribute to the agency’s mission.

  To ensure maximum compliance with the CDC’s social distancing guidance and DOD Components’ telework arrangements, routine industrial hygiene and safety surveys may be discontinued at the discretion of the Component Designated Agency Safety and Health Official, or his or her designated representative, for the duration of the pandemic, until travel restrictions are lifted or the workplace returns HPCON “0,” whichever comes later.
The DON CIO follows guidance promulgated by the DOD CIO re: commercial cloud offerings. DOD is aware that several components have expressed pursing unauthorized cloud and collaboration capabilities. These capabilities place DOD information at risk and are not authorized to conduct internal DOD business. Components should not initiate communications using unapproved commercial collaboration capabilities, but may participate in sessions if initiated by outside partners for public, unclassified purposes. The use of cloud services must be formally authorized by a component Authorizing Official (AO) and comply with requirements in the DOD Cloud Computing Security Requirements Guide.

DON CIO procurement, manpower and budget are aligned with the current shift towards enabling a remote digital workplace. Procurement has been streamlined through automated tools to allow continuity of operations while teleworking. Manpower and budget levels have increased to support increased reliance on telework.

DON CIO has sufficient IT devices to sustain future ad-hoc telework requirements. DON CIO has VTC capabilities readily available for Secretariat customers, including planned MS Teams-capable conference rooms to facilitate virtual meetings in the building with the remote workforce.

Equipment will be purchased through the NMCI contract or approved DISA device lists. JSP is working with DOD CIO and USD(l) to promulgate a policy change to allow approved cameras connected to government furnished equipment within an Open Secret Storage (OSS) space. Employees should not bring a camera or external microphone into an OSS space until this policy is released.

Certain positions and functions could be converted to full time telework. Full time teleworkers would utilize their current assigned equipment. This includes, laptops, docking stations and monitors. IT Support cannot support not government issued equipped such as printers, scanners, or other mobile devices.

There are concerns about shared walk-up SIPR and JWICS systems, whether more systems will be provided or if they will be thoroughly cleaned. The DON CIO will work with the various front offices to meet any increased demand for classified computers. Increased cleaning supplies are being ordered to ensure shared spaces and computers are properly maintained.
Questions relating to increased VPN capability, machine enhancements, network capacity, automated tools, etc..

- The increased VPN capability and collaboration tools will remain if a resurgence occurs. The DON CIO’s plan to accelerate digital modernization includes building off of the infrastructure and capability gains made during COVID-19, creating greater flexibility in the new remote digital workplace.

- Consistent with the DON Information Superiority Vision, the DON CIO will continue building off gains made during COVID-19 to accelerate the deployment of Microsoft Office 365 across the enterprise over the next 12-18 months. The DON CIO in partnership with the DOD CIO and Microsoft are looking at ways to improve the overall user IT experience. This includes appropriate security controls to make MS Teams a secure option in the work place. For the Pentagon: The DON CIO is reviewing options to install audio/visual equipment within the Pentagon that is compatible with Microsoft Teams (Logitech Room Solution for Microsoft Teams, etc.) to optimize the virtual experience between those in and out of the building.

- Transferring records to DON TRACKER would remain consistent while utilizing the NMCI VPN remotely.

- DON CIO currently does not have any automated tools to ensure proper social distancing.

Top Ten Telework Tools

DON CIO telework page on the SECNAV SharePoint Portal is a good source of available approved tools for telework.
TRANSPORTATION AND PARKING

Provides guidance about specific considerations such as transportation and parking.

Parking Considerations (Pentagon)

Questions relating to the increased need for parking at the Pentagon.

- Reentry Guide and Parking Plan and Procedures During COVID-19 Pandemic

  WHS PMO is conducting routing parking usage counts to determine supply and demand of parking spaces. The purpose of this building circular is to inform all Pentagon, Mark Center and Suffolk building occupants about the COVID-19 Phases 1 – 4 commuter parking plan procedures. The new parking plan and procedures for the Pentagon, Mark Center, and Suffolk Building are in response to the current reduction of mass transit services. The new parking plan and procedures are effective beginning Monday, June 15, 2020. Read the Parking section in the Workplace Re-Entry Guide on page 7 or the Temporary Parking Clearance for COVID-19 section for updates on parking WHS will issue. Temporary parking clearance request forms will be issued due to reduced mass transit services caused by COVID-19. You must request temporary parking and should submit the COVID-19 Temporary Parking Clearance Form to WHS Parking Management Office. Remember, you must have a clearance to park on the Pentagon Reservation. Visit here for updates on parking information. Pentagon customers are encouraged to request and submit parking clearances via email to the following group mailbox: whs.pentagon.fsd.mbx.parking-program@mail.mil; Phone number: 703-697-6251.

- COVID-19 Temporary Parking Clearance Form

  Also, Individuals are welcome to use any of the local lots they choose but the government will not be subsidizing the costs incurred.

Public Transportation (Pentagon)

Questions relating to use of public transportation to and from the Pentagon, overcrowding on mass transit, transit benefits.

- Reentry Guide, Welcome Back to the Pentagon Reservation Transportation Plan, Mass Transportation Benefit Program

  Read the Local Transportation Advisory Section and/or read the Welcome Back to the Pentagon Reservation Transportation Plan, which provides information to help you plan your commute and travel needs and alleviate concerns and unknowns as we begin to return to the Pentagon Reservation. This information is subject to change; please check the website of your transportation providers for the most current updates.

  Metro and other transit providers are recommending “self-management” in regards to social distancing and certain providers will be installing visual aids to encourage such measures. The transportation plan mentioned above provides information to help you plan your commute and travel needs on the Metro and buses to alleviate concerns on social distancing and unknowns as we begin to return to the Pentagon Reservation from phase 0 to phase 4.
Under the DOD Mass Transit Benefits, the DOD is only charged for your actual usage. Any unspent benefits are returned to the DOD. There is no concern regarding waste if you do not ride mass transit. Submission of claims from the 1-15th will be required beginning July 1st onward for future SmarTrip card funding. Claim reminder emails will resume for all MTBP participants.

Metro ridership has decreased significantly and it is not anticipated that trains and buses will be crowded. There less than 20% of the normal riders on some days. WMATA control center teams continually monitor platform conditions, and they are using 8-car trains to increase capacity. It is important to limit travel to essential trips, so that space is available for the hospital workers, government employees, and first responders who need to ride at this time. Additionally, WHS is reinstituting the issuance of Carpool/Vanpool permits and will be offering 90 day parking clearances to all individual personnel who request one.

**WMATA COVID-19 Policy**

**Government Transportation**

Questions relating to government provided transportations such as shuttle buses, executive motor pools, etc.

**Local Transportation Advisory**

Please refer to the WHS Local Transit Advisory page for updates on all DOD Shuttle Bus schedules.

**Standard Operating Procedures for EMP Operators:** All Executive Motor Pool (EMP) drivers are screened prior to the start of their shift. All drivers shall wear a mask while operating the EMP vehicle. Vehicles where applicable; have been outfitted with a physical barrier between the passengers and the driver. Vehicles where applicable have had second row seats removed or stowed. All Operators shall not provide ridership services to anyone not wearing a mask or refuses to wear a mask for the duration of the trip. Authorized Riders are not authorized to ride in the front passenger seat of the vehicle. Trips shall be limited to 1 incumbent with minimal amount of staff that cannot exceed the safe seating capacity that is providing the service. Combined runs are no longer authorized. Each movement request will be transported separately. Operators will disinfect vehicles daily with CDC approved cleaners after every shift. If contact tracing determines a passenger was positive with COVID-19, the vehicle will be removed from service for a minimum of 5 working days to be cleaned. The driver will undergo the required medical screenings to determine if they should be placed in an out of service condition. **Passenger Requirements:** All passengers are required to wear a mask at all times while using the EMP service. Authorized users are not authorized to enter the vehicle until a mask is worn. Authorized users shall not allow suspected ill staff to utilize EMP services. Incumbent will not utilize EMP services while in an ill state. Authorized riders should limit the number of personnel required to travel between locations within an EMP vehicle. Authorized riders are not authorized to share ride a trip or authorize anyone outside of the originally scheduled requirement to ride in EMP vehicle. Plan on alternate transportation if services are not available due to a priority or emergent issue.

**Pentagon Specific Transportation Issues**

Questions related to Pentagon specific transportation such as SLUG lines.

**Welcome Back to the Pentagon Reservation Transportation Plan**

The SLUG lines are operational and the Pentagon stations are open but regional slugging is not recommended. Carpool/Vanpool permits are being reinstituted as of June 15, 2020 as well as the reopening of the Metro Entrance to the building.

**Washington Headquarters Services** under the Local Transportation Advisory section.
COVID-19 RESURGENCE

Provides amplifying instructions for identifying and responding to resurgence of COVID-19.

Preventing a Resurgence

Questions relating to required actions if personnel have likely been exposed to or test positive to COVID-19 or have influenza-like symptoms.

USD P&R Force Health Protection Guidance (Supplement 8)

Restrict Workplace Access: Components will restrict access to DOD-controlled workplaces by individuals whom the CDC recommends not go to work to the fullest extent practical consistent with mission needs. This restriction applies to Service members, civilian employees, and contractor personnel. Personnel who have symptoms (e.g., fever, cough, or shortness of breath) should notify their supervisor and stay home.

Asymptomatic personnel with potential exposure to COVID-19 (either based upon travel or based upon close contact with a person who has a laboratory confirmed or clinically diagnosed or presumptive case) should notify their supervisor. They should follow CDC recommended precautions at here. Close contact means a person has spent more than 10 minutes within 6 feet of a COVID-19 infected individual without appropriate protective measures.

As a general rule, these personnel should not return to the workplace until they have self-isolated for 14 days from the COVID-19 positive individual. In cases of mission essential activities, asymptomatic personnel who otherwise would be self-isolating may be granted an exception to continue to work provided they remain asymptomatic and comply with following key practices for 14 days after the last exposure.

Identifying and Reacting to a Resurgence

Questions relating to conditions that indicate a resurgence and the guiding authority on steps to take.

NAVADMIN 147/20 (20 May 20)

Paragraph 4.C.5: “Resurgence in COVID-19 cases. As with many pandemics, there is a possibility of a COVID-19 resurgence or second wave. If COVID-19 illness trajectory increases or medical facilities become significantly burdened by the treatment of COVID-19 illness in a particular geographic area, commanders should consider increasing HPCON Level and closing services. It is important to look at the trend not just a single day change.”