



Council Members

- Chris Napoli (Seat A) • Bill Rodawalt (Seat B) • Kaleb Westfall (Seat C)
- Curt Armstrong (Seat D) • Andy Anderson (Seat E) • Gregg Marxmiller (Seat F)

DILLINGHAM CITY COUNCIL

Join Zoom Meeting <https://us04web.zoom.us/j/514796864>

SPECIAL COUNCIL MEETING	5:30 P.M.	MARCH 19, 2020
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- 1. CALL TO ORDER**
- 2. ROLL CALL**
- 3. APPROVAL OF AGENDA**
- 4. SPECIAL BUSINESS**
 - City of Dillingham Operation Plan
 - Adopt Resolution No. 2020-11; A Resolution of the Dillingham City Council Declaring a Public Health Disaster Emergency
 - Adopt Resolution No. 2020-12; A Resolution of the Dillingham City Council Authorizing the City Manager to Approve Administrative Leave During the COVID-19 Epidemic Public Health Disaster Emergency
 - Adopt Resolution No. 2020-13; A Resolution of the Dillingham City Council Approving a Grant Application and Matching Funds for a New Fire Truck
- 5. CITIZEN'S DISCUSSION**
- 6. COUNCIL COMMENTS**
- 7. MAYOR'S COMMENTS**
- 8. ADJOURNMENT**

To Participate in the Council Meeting:

Go to <https://www.zoom.us> and download ZOOM.
Join Zoom Meeting <https://us04web.zoom.us/j/514796864>

Note: this meeting will be recorded. By logging in you consent to be included in this recording.

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CITY OF DILLINGHAM, ALASKA

RESOLUTION NO. 2020-11

A RESOLUTION OF THE DILLINGHAM CITY COUNCIL DECLARING A PUBLIC HEALTH DISASTER EMERGENCY

WHEREAS, the United States Centers for Disease Control and Prevention (CDC) has identified COVID-19, a respiratory disease that can result in serious illness or death and that is a new strain of coronavirus not previously identified in humans, as posing a significant public health risk; and

WHEREAS, on January 30, 2020, the World Health Organization designated the outbreak of COVID-19 as a Public Health emergency of International Concern; and

WHEREAS, on January 31, 2020, United States Health and Human Services Secretary Alex M. Azar II declared a public health emergency for the United States to aid the nation's healthcare community in responding to COVID-19; and

WHEREAS, COVID-19 has been spreading in other countries, states, and throughout Canada, resulting in implementation of public health actions to contain the spread of COVID-19; and

WHEREAS, on March 11, 2020, Governor Mike Dunleavy under AS 26.23.020(c) declared a public health disaster emergency to exist statewide; and

WHEREAS, the State of Alaska has experienced the first confirmed case of COVID-19 on March 12, 2020; and

WHEREAS, on March 13, 2020, the President of the United States of America declared a national state of emergency; and

WHEREAS, the continued imminent threat of a COVID-19 epidemic will impact every community in the State of Alaska and will significantly affect the life and health of the citizens in the City of Dillingham; and

WHEREAS, the City of Dillingham is a political subdivision that has jurisdictional boundaries outside of a recognized borough; and,

WHEREAS, the severity and magnitude of the emergency is beyond the timely and effective response capability of local resources; and there are insufficient regularly appropriated funds to cover these expenses.

NOW THEREFORE BE IT RESOLVED, the Dillingham City Council declares a disaster emergency per AS 26.23.140 and DMC 2.64.020 (A) to exist in the City of Dillingham.

PASSED and ADOPTED by the Dillingham City Council on March 19, 2020.

Alice Ruby, Mayor

[SEAL]

ATTEST:

Lori Goodell, City Clerk

CITY OF DILLINGHAM, ALASKA

RESOLUTION NO. 2020-12

A RESOLUTION OF THE DILLINGHAM CITY COUNCIL AUTHORIZING THE CITY MANAGER TO APPROVE ADMINISTRATIVE LEAVE DURING THE COVID-19 EPIDEMIC PUBLIC HEALTH DISASTER EMERGENCY

WHEREAS, on March 19, 2020, the Dillingham City Council declared a public health disaster emergency to exist; and

WHEREAS, preparation for the carrying out of emergency functions is a top priority for City Officials; and

WHEREAS, the City is concerned about the health and safety of all citizens in Dillingham; and

WHEREAS, there is a need to maintain essential services; and

WHEREAS, in order to effectively manage City personnel it will become necessary to allow for a liberal and non-punitive leave policy; and

WHEREAS, social distancing is recommended to hinder the spread of COVID-19, flexible schedules and halting of non-essential operations will be instituted.

NOW THEREFORE BE IT RESOLVED, the Dillingham City Council authorizes the City Manager to utilize administrative leave for employees as warranted, and special pay for extra duty is approved as the need to maintain essential services with limited personnel may become necessary.

BE IT FURTHER RESOLVED, the City will monitor State and Federal guidelines regarding COVID-19 and adhere to recommended timelines as the epidemic necessitates.

PASSED and ADOPTED by the Dillingham City Council on March 19, 2020.

Alice Ruby, Mayor

[SEAL]

ATTEST:

Lori Goodell, City Clerk

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Chapter 2.64
DISASTER AND CIVIL DEFENSE¹

Sections:

[2.64.010 Purpose.](#)

[2.64.020 Definitions.](#)

[2.64.030 Director—Office created—Powers.](#)

[2.64.040 Director—Emergency powers.²](#)

[2.64.050 Organization—Membership.](#)

[2.64.060 Organization—Structure.](#)

2.64.010 Purpose.

The declared purpose of this chapter is to provide for the preparation and carrying out of plans for the civil defense of persons and property within the city in the event of disaster, and to provide for the coordination of disaster and civil defense functions of the city with all other public agencies and affected private persons, corporations and organizations. Any expenditure made in connection with such disaster and civil defense activities, including mutual aid activities, shall be deemed conclusively to be for the direct protection and benefit of the inhabitants and property of the city. (Ord. 77-7 § 2 (part), 1977; Ord. 86-8 § 1, 1986.)

2.64.020 Definitions.

As used in this chapter, the words and terms set out in this section shall have the meanings ascribed to them as follows:

- A. “Civil defense” means the preparation for the carrying out of all emergency functions other than functions for which military forces are primarily responsible, to prevent, minimize, and repair injury and damage resulting from disasters. It does not include nor does any provision of this chapter apply to any situation relating to a labor controversy.
- B. “Disaster” means actual or threatened enemy attack, sabotage, extraordinary fire, flood, storm, epidemic, riot, earthquake or similar public calamity. (Ord. 77-7 § 2 (part), 1977; Ord. 86-8 § 1, 1986.)

2.64.030 Director—Office created—Powers.

There is created the position of director of disaster and civil defense. The city manager or his/her designee shall be director of disaster and civil defense. The director is empowered to:

- A. Request the city council to proclaim the existence or threatened existence of a disaster and the termination thereof or to issue such proclamation subject to the confirmation by the city council at the earliest practicable time;
- B. Request the Governor to proclaim a state of extreme emergency when, in the opinion of the director, the resources of the area or region are inadequate to cope with the disaster;
- C. Control and direct the effort of the disaster and civil defense organization of the city for the accomplishment of the purposes of this chapter;
- D. Direct coordination and cooperation between divisions, services and staff of the disaster and civil defense organizations of the city and to resolve questions of authority and responsibility that may arise between them;
- E. Represent disaster and civil defense organization of the city in all dealings with public or private agencies pertaining to disaster and civil defense; and
- F. Review and recommend for adoption by the city disaster and civil defense and mutual aid plans and agreements and such ordinances and resolutions and rules and regulations as are necessary to implement such plans and agreements. (Ord. 77-7 § 2 (part), 1977; Ord. 86-8 § 1, 1986.)

2.64.040 Director—Emergency powers.

In the event of the proclamation of a state of extreme emergency by the governor or the state director of civil defense, the director is empowered to:

- A. Make and issue rules and regulations on matters reasonably related to the protection of life and property as affected by such disaster; provided, however, such rules and regulations must be confirmed at the earliest practicable time by the city council;
- B. Obtain vital supplies, equipment and such other properties found lacking and needed for the protection of the life and property of the people, and bind the city for the fair value thereof;
- C. Require emergency services of any city officer or employee and, in the event of the proclamation of a state of extreme emergency by the Governor in the region on which the city is located, to command the aid of as many citizens of the city as he/she thinks necessary in the execution of his/her duties such as are provided by state law for registered disaster and civil defense worker volunteers;
- D. Requisition necessary personnel or material of any city department or agency; and
- E. Execute all of his/her ordinary powers as city manager or his/her designee, all of the special powers conferred upon him/her by this chapter or the resolutions adopted pursuant thereto, all powers conferred upon him/her by statute, agreement approved by the city council, or by any other

lawful authority, and to exercise complete authority over the city. (Ord. 77-7 § 2 (part), 1977; Ord. 86-8 § 1, 1986.)

2.64.050 Organization—Membership.

All officers and employees of the city, together with those volunteer forces enrolled to aid them during a disaster, and all groups, organizations and persons who may, by agreement or operation of law, be charged with duties incident to the protection of life and property in the city during such a disaster, shall constitute the disaster and civil defense organization of the city. (Ord. 77-7 § 2 (part), 1977; Ord. 86-8 § 1, 1986.)

2.64.060 Organization—Structure.

The functions and duties of the city disaster and civil defense organization shall be distributed among such divisions, services and special staff as the director prescribes. (Ord. 77-7 § 2 (part), 1977; Ord. 86-8 § 1, 1986.)

¹For statutory provisions requiring each local district of the state to have a local civil defense organization, see AS 26.20.060 et seq.

²For statutory provisions providing for municipal emergency disaster powers, see AS 29.35.040.

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CITY OF DILLINGHAM, ALASKA

RESOLUTION NO. 2020-13

A RESOLUTION OF THE DILLINGHAM CITY COUNCIL APPROVING A GRANT APPLICATION AND MATCHING FUNDS FOR A NEW FIRE TRUCK

WHEREAS, the Dillingham Volunteer Fire Department, DVFD, has a need for a fire truck to replace the 1971 F-660, Engine 2, which is outdated and no longer capable to fulfill the requirements of the department needs; and

WHEREAS, the age of the F-660 and the operational procedures and knowledge needed to operate the truck limit the number of people that can operate it; and

WHEREAS, the truck has limited storage and cannot accommodate all the equipment the department needs for response to various types of call; and

WHEREAS, the DVFD has discovered a Department of Homeland Security Assistance to Firefighters Grant (AFG) that will cover 95% of the cost; and

WHEREAS, the granting agency require recipients to come up with a 5% hard match for AFG grants, which will be no more than \$18,250; and

WHEREAS, the grant deadline is March 20, 2020, with the grant being awarded early fall 2020; and

WHEREAS, if awarded the grant the DVFD will work with the Planning Department to place Request for Bids; and

NOW, THEREFORE, BE IT RESOLVED that the Dillingham City Council approves the AFG grant application and authorizes the expenditure for a new fire truck from the ambulance fund not to exceed \$18,250.

PASSED and ADOPTED by the Dillingham City Council on March 19, 2020.

SEAL:

Alice Ruby, Mayor

ATTEST:

Lori Goodell, City Clerk

City of Dillingham
Fiscal Note

Agenda Date: March 19, 2020

Required 5% match for Department of Homeland Security Assistance for the Firefighters Grant

ORIGINATOR: Bradon Tinker

FISCAL ACTION (TO BE COMPLETED BY FINANCE)		FISCAL IMPACT <input type="checkbox"/> YES <input type="checkbox"/> NO	
AMOUNT REQUESTED:	\$18,250	FUNDING SOURCE	
FROM ACCOUNT 7110 4760 20 27		Project Fire Engine 2 replacement	
TO ACCOUNT:	VERIFIED BY: Anita Fuller	Date:	

EXPENDITURES

OPERATING	FY20	FY21	FY22	FY23
Fire Engine 2 replacement	\$ 18,250.00			
TOTAL OPERATING	\$ 18,250.00	\$ -	\$ -	\$ -

CAPITAL	\$ -			
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REVENUE	-			
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FUNDING

General & Special Rev. Funds	18,250.00			
State/Federal Funds				
Capital Project				
Other				
TOTAL FUNDING	\$ 18,250	\$ -	\$ -	\$ -

POSITIONS

Full-Time				
Part-Time				

Analysis: (Attach a separate page if necessary)

See Resolution 2020-13

PREPARED BY: Anita Fuller

March 17, 2020

DEPARTMENT: Finance

APPROVED BY: _____

Mayor
Alice Ruby

Manager
Tod Larson



Dillingham City Council
Chris Napoli
Bill Rodawalt
Kaleb Westfall
Curt Armstrong
Andy Anderson
Gregg Marxmiller

MEMORANDUM

Date: March 14, 2020
To: Mayor and City Council
From: Tod Larson, City Manager
Subject: Recommended City Operations During the COVID-19 Outbreak

1. Current Situation.

a. United States Federal Government.

- i. **President of the United States (POTUS).** President Trump assigned Vice President Pence to lead the federal government response for novel Coronavirus (COVID-19). On March 1st the President declared a national emergency under the authority of the National Emergencies Act (NEA) of 1976. The NEA authorizes the president to declare a national emergency, which declaration activates emergency powers contained in other federal statutes. (Swendiman & Jones, 2009) The President said that this declaration frees up \$50 Billion to fight the pandemic. The Presidential Proclamation is **Annex A** of this memorandum.
- ii. **Center for Disease Control and Prevention (CDC).** Federal, state, and local governments are working to limit the spread of COVID-19 in the U.S. and to develop effective treatments for it. (CDC, 2020)
- iii. **Federal Emergency Management Agency (FEMA).** FEMA's mission is to help people before, during and after disasters. (FEMA, 2020) FEMA provides assistance at 75% through State's for costs associated with combating (COVID-19).

b. State of Alaska (SOA).

- i. **Governor's Office.** March 11, 2020 (Anchorage, AK) – Alaska Governor Mike Dunleavy today issued a declaration of public health disaster emergency in response to the COVID-19 anticipated outbreak. The declaration initiates a

unified command structure between the Alaska Department of Health and Social Services (DHSS), Alaska Department of Military and Veterans Affairs (DMVA), and the Department of Public Safety (DPS), and fully engages state departments to utilize all capabilities to ensure a swift and effective COVID-19 response. As of March 10, 2020, 47 individuals in Alaska have been tested for COVID-19, with 31 negative tests and 16 tests currently pending. (Office of the Governor, 2020) The Governor's declaration is attached as **Annex B** to this document.

ii. **Alaska Department of Health and Social Services (DHSS).** On March 11th Governor Dunleavy declared a public health disaster emergency for the State of Alaska. The declaration permits the DHSS commissioner to exercise state statutes related to isolation and quarantine measures, and makes it easier for the state to purchase supplies, hire temporary staff, and access disaster relief funds for public assistance. (DHSS, 2020) The mission of the Department of Health and Social Services is to promote the health and well-being of Alaskans. As of February 28th the State of Alaska has the ability to test for COVID-19 at the public health laboratories. DHSS has also enlisted Alaska 211 to help with the large volume of calls it is receiving.

iii. **Alaska Department of Military and Veteran Affairs, Division of Homeland Security and Emergency Management (DHS&EM).** The mission of the Division of Homeland Security and Emergency Management is to lead the way in homeland security and emergency management to foster a prepared, resilient Alaska capable of meeting the needs of its communities and citizens in response to all-hazards events. (DHS&EM, 2020) A unified command has been established at the [State Emergency Operations Center] SEOC. The SEOC Preparedness Level remains at Level 2 – Heightened Awareness. Yesterday afternoon (March 12th), the Governor and DHSS announced Alaska's first presumptive positive case of COVID-19. The patient is a foreign national who developed a fever and respiratory symptoms shortly after arriving in Anchorage on March 11. (DHS&EM, 2020)

c. **World Health Organization (WHO).** The outbreak was declared a Public Health Emergency of International Concern on 30 January 2020. On March 11th, the WHO

made the assessment that COVID-19 can be characterized as a pandemic. (WHO, 2020)

d. The City of Dillingham. The State of Alaska had its first COVID-19 positive in the past week. We have no cases currently in Dillingham. We are taking steps to prepare our citizens and employees. We want to stress that it isn't a time to panic. This OPLAN has information that will help you prepare yourself and/or your home and business. This is the perfect time to conduct some appropriate measures to protect you and your family.

2. Mission. The City of Dillingham (COD) will maintain essential services to its citizens while taking precautionary measures to protect both the City staff and citizens from potential exposure to either. On order, the City of Dillingham will respond to the COVID-19 changing situation.

3. Operations.

a. Essential Services. The City of Dillingham will maintain: water & sewer, snow removal, senior citizen lunch meals, the landfill, Emergency Medical Services (EMS), Fire Department response, and all Law Enforcement functions.

b. Preventative Measures. All City of Dillingham employees and citizens are highly encouraged to take the basic protective measures recommended by the health organizations and medical professionals:

- i. Clean your hands often. Soap and water for at least 20 seconds. If you are using hand sanitizer, ensure that it contains at least 60% alcohol. Avoid touching your eyes, nose, and mouth.
- ii. Avoid close contact with people who are sick. Keep distance between yourself and other people, this is especially important for those at higher risk (elderly, those with compromised immunity systems, and those with heart and lung disease).
- iii. Stay home if you are sick, except to get medical care.
- iv. Cover your mouth and nose when you sneeze with tissue or the inside of your elbow. Immediately wash your hands as described above after a sneeze. A detailed checklist for individuals and families is located in **Annex C** of this document.

- v. **Clean and Disinfect.** Clean all frequently touched surfaces daily. To disinfect use a diluted bleach solution of 1/3rd cup bleach to a gallon of water. If you use alcohol to clean, be certain that it contains at least 70% alcohol. Detailed cleaning and disinfecting guidance are in **Annex D** of this memo.
 - vi. **Preparing your home.** The CDC has issued recommendations for preparing your home. This is an ideal time to review their recommendations. The CDC's Interim Guidance to Get Your Home Ready is attached as **Annex E** of this plan.
 - vii. **Businesses and Employers.** There are a number of steps that businesses and employers can take to prepare and protect their employees and customers. Many of the preventative measures listed above are applicable to businesses and employers. A great checklist is included as **Annex F** of this plan.
- c. City of Dillingham Continuity of Operations.** With the City Council's approval during the Special Meeting of March 19th we will conduct a number of protective measures through April 5th, 2020. We will be in a reduced services mode during this time period and will reassess the situation prior to April 5th to determine if an extension of these measures is prudent. As we all have seen, this is a fluid situation and there will be changes to this Operation Plan, but this provides us with a start point to prepare our citizens and the staff of the City of Dillingham. The organizational diagram is located in **Annex G**. The City Departments and their status is listed below:
- i. Public Safety Department.** The Police Department is an essential service and will operate as normal (with individual preventative measures to protect themselves and all citizens) with the exception of the Department of Motor Vehicles (DMV). The DMV is a place where numerous citizens go to daily and because of the physical location, both parties are in close proximity. This measure is necessary to prevent this closeness between the DMV agent and local citizenry. Outside of the DMV, our public safety (police, dispatch, corrections, and animal control) will be available and operational.
 - ii. Planning Department.** The Planning Director will telework throughout this period and will be available by phone and email.
 - iii. Finance Department.** The Finance Director will utilize a number of options to keep business flowing. She will have some teleworking and some split shifting. I am asking the Council to close City Hall to the public through the prevention

period. We will still receive mail and will have a drop box located at the front door to City Hall. There will be a mild disruption to business, however, the finance staff will work hard to make sure we continue to provide exceptional customer service and continuity of operations.

- iv. **Fire and Emergency Medical Services (EMS) Department.** The Fire and EMS Department is an essential service and will operate as normal (with individual preventative measures to protect themselves and all citizens). We have some of the best professionals possible working in the Fire and EMS Department. They are trained to handle all types of situations including infectious disease.
- v. **Library.** I am requesting that the library be closed during this time. This is one of the areas in the City where many people gather and its necessary for everyone's protection to cease operations until we are confident that the risk has subsided. The librarian will be available by phone and email.
- vi. **Port and Harbor.** The seasonal employees have not reported for duty yet so these two operations are currently closed. The Port Director will be teleworking and will be available by phone and email.
- vii. **City Clerk.** The City Clerk will be teleworking and will be available by phone and email.
- viii. **Public Works.** Public Works has essential services to conduct. The landfill will be open for normal business. Because of the nature of their work, the three personnel at the landfill maintain social distance all day long. The sewer and water personnel will perform required tasks to keep our water and sewer system functioning. The Public Works director will manage his personnel in the same manner as everyone else – protecting our employees and citizens by making prudent and well thought out decisions.
- ix. **Senior Center.** I am requesting that the senior center and senior bus close through this time period. They are one of the most vulnerable populations we have and are in close proximity to each other while at the senior center. This isn't a good combination considering the risk. We will still be cooking lunch, but instead of the senior coming to us, we'll take the meals to them with our bus. We realize that the lunch we serve may be the only good meals for some of our elders. We care deeply for them and wish to continue meal service.

x. **Administration.** The HR/Executive assistant will telework and the City Manager will be in and out of the office and telework for some time. Both will still be available by phone and email.

4. **Communications.** All City email will be operational as usual. If the employee is teleworking or otherwise unavailable, their phone will be forwarded to them so the community will still be able to contact the City staff. The contact numbers are listed below by department and also located at <https://www.dillinghamak.us/contact> .

- a. Public Safety. 911 and 842-5354.
- b. Planning. 842-3785.
- c. Finance. 842-5211.
- d. Fire and EMS. 911 and 842-2288.
- e. Library. 842-5610.
- f. Port and Harbor. 842-1069.
- g. City Clerk. 842-5212.
- h. Public Work. 842-2260.
- i. Senior Center. 842-1231.
- j. Administration. 842-5148.

5. **Summary.** The City of Dillingham will continue to operate and provide essential services to the community. Just as many across the country have done, we must take steps to protect everyone in the community as best we can. The health officials all tell us that washing our hands, cleaning our areas/homes, maintain social distance, cancel gatherings, and isolate oneself is the best way to stop the spread of COVID-19. Alaskans are resourceful and ready to emerge from the other side of this and move on to accomplish great things.

Tod Larson, City Manager

Alice Ruby, Mayor

Annexes.

Annex A - Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus

Annex B - State of Alaska Disaster Declaration

Annex C - CDC Checklist for Individuals and Families

Annex D - CDC Recommendations to Clean & Disinfect

Annex E - CDC Interim Guidance to Get Your Home Ready

Annex F - CDC Interim Guidance for Businesses and Employers

Annex G - City of Dillingham Organizational Chart

References

- The White House. (2020) Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak. Retrieved from:
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- The White House. (2020) Coronavirus: Resources, Updates, and What You Should Know. Retrieved from: <https://www.whitehouse.gov>
- Alaska Department of Health and Social Services. (2020) 2019 Novel Coronavirus (COVID-19). Retrieved from: <http://dhss.alaska.gov>
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- Office of the Governor of the State of Alaska. (2020) Governor Issues Public Health Disaster Emergency Declaration for COVID-19. Retrieved from:
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**Proclamation on Declaring a National Emergency Concerning the Novel
Coronavirus Disease (COVID-19) Outbreak**

Issued on: March 13, 2020

In December 2019, a novel (new) coronavirus known as SARS-CoV-2 (“the virus”) was first detected in Wuhan, Hubei Province, People’s Republic of China, causing outbreaks of the coronavirus disease COVID-19 that has now spread globally. The Secretary of Health and Human Services (HHS) declared a public health emergency on January 31, 2020, under section 319 of the Public Health Service Act (42 U.S.C. 247d), in response to COVID-19. I have taken sweeping action to control the spread of the virus in the United States, including by suspending entry of foreign nationals seeking entry who had been physically present within the prior 14 days in certain jurisdictions where COVID-19 outbreaks have occurred, including the People’s Republic of China, the Islamic Republic of Iran, and the Schengen Area of Europe. The Federal Government, along with State and local governments, has taken preventive and proactive measures to slow the spread of the virus and treat those affected, including by instituting Federal quarantines for individuals evacuated from foreign nations, issuing a declaration pursuant to section 319F-3 of the Public Health Service Act (42 U.S.C. 247d-6d), and releasing policies to accelerate the acquisition of personal protective equipment and streamline bringing new diagnostic capabilities to laboratories. On March 11, 2020, the World Health Organization announced that the COVID-19 outbreak can be characterized as a pandemic, as the rates of infection continue to rise in many locations around the world and across the United States.

The spread of COVID-19 within our Nation’s communities threatens to strain our Nation’s healthcare systems. As of March 12, 2020, 1,645 people from 47 States have been infected with the virus that causes COVID-19. It is incumbent on hospitals and medical facilities throughout the country to assess their preparedness posture and be prepared to surge capacity and capability. Additional measures, however, are needed to successfully contain and combat the virus in the United States.

Annex A to COD COVID-19 OPLAN

NOW, THEREFORE, I, DONALD J. TRUMP, President of the United States, by the authority vested in me by the Constitution and the laws of the United States of America, including sections 201 and 301 of the National Emergencies Act (50 U.S.C. 1601 et seq.) and consistent with section 1135 of the Social Security Act (SSA), as amended (42 U.S.C. 1320b-5), do hereby find and proclaim that the COVID-19 outbreak in the United States constitutes a national emergency, beginning March 1, 2020. Pursuant to this declaration, I direct as follows:

Section 1. Emergency Authority. The Secretary of HHS may exercise the authority under section 1135 of the SSA to temporarily waive or modify certain requirements of the Medicare, Medicaid, and State Children's Health Insurance programs and of the Health Insurance Portability and Accountability Act Privacy Rule throughout the duration of the public health emergency declared in response to the COVID-19 outbreak.

Sec. 2. Certification and Notice. In exercising this authority, the Secretary of HHS shall provide certification and advance written notice to the Congress as required by section 1135(d) of the SSA (42 U.S.C. 1320b-5(d)).

Sec. 3. General Provisions. (a) Nothing in this proclamation shall be construed to impair or otherwise affect:

- (i) the authority granted by law to an executive department or agency, or the head thereof; or
 - (ii) the functions of the Director of the Office of Management and Budget relating to budgetary, administrative, or legislative proposals.
- (b) This proclamation shall be implemented consistent with applicable law and subject to the availability of appropriations.
- (c) This proclamation is not intended to, and does not, create any right or benefit, substantive or procedural, enforceable at law or in equity by any party against the United States, its departments, agencies, or entities, its officers, employees, or agents, or any other person.

Annex A to COD COVID-19 OPLAN

IN WITNESS WHEREOF, I have hereunto set my hand this thirteenth day of March, in the year of our Lord two thousand twenty, and of the Independence of the United States of America the two hundred and forty-fourth.

DONALD J. TRUMP

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STATE OF ALASKA
DECLARATION OF PUBLIC HEALTH DISASTER EMERGENCY

WHEREAS, the United States Centers for Disease Control and Prevention (CDC) has identified COVID-19, a respiratory disease that can result in serious illness or death and that is a new strain of coronavirus not previously identified in humans, as posing a significant public health risk.

WHEREAS, on January 30, 2020, the World Health Organization designated the outbreak of COVID-19 as a Public Health Emergency of International Concern;

WHEREAS, on January 31, 2020, United States Health and Human Services Secretary Alex M. Azar II declared a public health emergency for the United States to aid the nation's healthcare community in responding to COVID-19;

WHEREAS, COVID-19 has been spreading in other states, and throughout Canada, resulting in implementation of public health actions to contain the spread of COVID-19;

WHEREAS, the Commissioner of the Department of Health and Social Services (DHSS) has certified that it is highly probable that an outbreak of COVID-19 will occur in this state in the near future in accordance with Alaska Statute 26.23.900(2)(E);

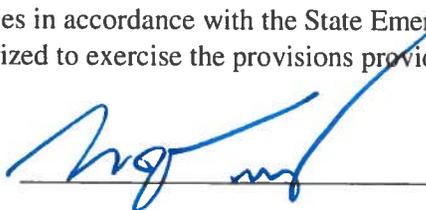
WHEREAS, the imminent threat of an outbreak of COVID-19 will impact every community in the State of Alaska and will significantly affect the life and health of Alaskans statewide;

WHEREAS, a statewide response under Alaska Statute 18.15.390, coordinated by DHSS, is needed to fully address this condition of public health importance;

THEREFORE, on this 11th day of March, 2020, under the authority granted by Alaska Statute 26.23.020(c), I hereby declare that a condition of public health disaster emergency exists statewide, and this condition is of sufficient severity and magnitude to warrant a public health disaster emergency declaration in order to provide assistance.

FURTHER, the Commissioners of the Department of Military and Veterans Affairs (DMVA) and DHSS are hereby authorized to use funds made available for these purposes, that are considered necessary for public health disaster assistance. I anticipate spending of state funds under Alaska Statutes 26.23.020(i) and (k) and 26.23.050. The Commissioner of DMVA is further authorized to task state departments and agencies in accordance with the State Emergency Operations Plan. The Commissioner of DHSS is authorized to exercise the provisions provided under Alaska Statute 18.15.390(1-12).

By:



Mike Dunleavy
Governor

This declaration will allow the governor to exercise his emergency powers to help meet, mitigate, and respond to the dangers posed by COVID-19. Specifically it will allow the Governor to:

- Activate the state’s disaster response and recovery aspects of state, local, and interjurisdictional disaster emergency plans
- Direct distribution of any supplies, equipment, materials, and facilities assembled, stockpiled, or arranged to be made available under the state’s disaster act
- Use all available resources of the state government and of each political subdivision of the state as reasonably necessary to cope with the disaster
- Transfer personnel or alter the functions of state departments and agencies or units in order to perform or facilitate performance of disaster emergency services
- Make provisions for the availability and use of temporary emergency housing
- Allocate food, water, fuel, clothing, medicine, or supplies
- Assure the release of funds from the state’s Disaster Relief Fund to local or state agencies, and “set the table” for the state to obtain further federal disaster assistance

In conjunction with AS 18.15.390, and in coordination with DMVA, provide greater authority to respond quickly to an outbreak in appropriate circumstances, including by:

- Close, direct, compel evacuation of, or decontamination of any facility if there is reasonable cause to believe the facility may endanger public health
- Adopting and enforcing measures to provide for safe disposal of infectious waste or contaminated material as may be reasonable and necessary to respond to the disaster
- And additional authorities.



THE STATE
of **ALASKA**
GOVERNOR MIKE DUNLEAVY

**Department of
Health and Social Services**

OFFICE OF THE COMMISSIONER

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COVID-19 DISASTER CERTIFICATION MEMORANDUM

TO: The Honorable Michael J. Dunleavy
Governor

THRU: Ben Stevens
Chief of Staff

FROM: Adam Crum
Commissioner

DATE: March 11, 2020

SUBJECT: 2020 COVID-19 Novel Coronavirus Disaster Certification

A novel (new) coronavirus, SARS-CoV-2, has been identified and infecting humans since December 2019, causing an infection known as COVID-19. The infection is highly contagious, due to community (person-to-person) spread and an exponential infection rate.

- On January 30, 2020 the World Health Organization declared that the outbreak of COVID-19 was a Public Health Emergency of International Concern.
- On January 31, 2020 the United States Department of Health and Human Services Secretary Alex Azar declared a public health emergency for COVID-19, with retroactive effect to January 27, 2020.
- To date, over 100,000 cases of COVID-19 have been confirmed worldwide, and over 600 cases in the United States.

Because COVID-19 is a new disease in humans, no one has an existing immunity to this virus. It appears likely that transmission can occur before the onset of symptoms. As such, some people who are infected could inadvertently transmit the virus to others. COVID-19 can cause severe disease, including pneumonia and death. Older individuals and people with serious underlying health

conditions (e.g., lung disease, heart disease, or diabetes) or immune disorders are at increased risk for severe illness. There have been no confirmed cases of infection with the novel coronavirus in Alaska.

For these reasons, under Alaska Statute 26.23.900(2)(E), I certify that an outbreak of COVID-19 has a high probability of occurring in the near future. I further certify that a disaster exists in the form of the imminent threat of widespread injury and loss of life due to illness and fatalities caused by COVID-19.



Adam Crum

Commissioner, Department of Health and Social Services



Governor Michael J. Dunleavy
STATE OF ALASKA

ADMINISTRATIVE ORDER NO. 315

I, Mike Dunleavy, Governor of the State of Alaska, under the authority of Article III, Sections 1 and 24, Constitution of the State of Alaska, find and direct the following:

BACKGROUND

Recently, the United States Centers for Disease Control (CDC) has determined that COVID-19, a respiratory disease that can result in serious illness or death and that is a new strain of coronavirus not previously identified in humans, poses a significant public health risk.

Further, the CDC has classified the public health threat posed by COVID-19 as “high”, both globally and in the United States, and has advised that COVID-19 will continue to occur globally and in the United States.

Accordingly, the United States Department of Health and Human Services Secretary Alex Azar declared a public health emergency for COVID-19 on January 31, 2020, retroactively applicable to January 27, 2020.

Currently, we are not aware of any diagnosed cases of COVID-19 in Alaska, but in anticipation of possible cases, and in order to ensure that Alaska’s public is educated about the public health risk, I issue this Order.

ORDER

I direct the Department of Health and Social Services to establish, coordinate, and manage an information management structure to monitor COVID-19 developments, provide public health information, make recommendations for further responses, and implement actions to address the COVID-19 outbreak. Further, I direct the Department of Health and Social Services to consider its current statutory authority should it be necessary to implement public health measures under AS 18.15.355 – 18.15.385, and direct that it shall do so, as necessary, to address public health and safety.

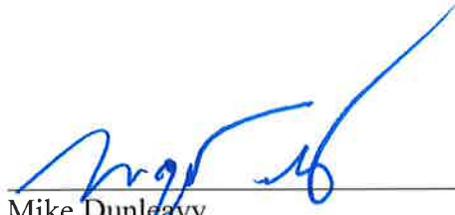
This Order is to alert all departments, agencies, officials, and state entities to the seriousness of COVID-19, and of the need to stay informed and comply with official state, national, and global health directives.

All state departments, officials, and public corporations are to treat requests from the Department of Health and Social Services and the Chief Medical Officer, related to preparation and responses to the COVID-19 outbreak, as of the highest priority. All State departments, officials, and public corporations are further directed to use available resources and take actions reasonably necessary to implement steps recommended by the Department of Health and Social Services to address COVID-19.

The Department of Military and Veterans' Affairs is instructed to consider possible recommendations to the Governor, in consultation with the Department of Health and Social Services, regarding potential further action to protect public health and safety.

This Order takes effect immediately.

DATED at Juneau, Alaska on this 9 day of March 2020.



Mike Dunleavy
Governor

CDC Checklist for Individuals and Families

As a family, you can plan and make decisions now that will protect you and your family during a COVID-19 outbreak. Creating a household plan can help protect your health and the health of those you care about in the event of an outbreak of COVID-19 in your community. Use this checklist to help you take steps to plan and protect the health of you and your family.

PLAN AND PREPARE

Get up-to-date information about local COVID-19 activity from public health officials

Create a household plan of action.

- Consider members of the household that may be at greater risk such as older adults and people with severe chronic illnesses.
- Ask your neighbors what their plan includes.
- Create a list of local organizations you and your household can contact in case you need access to information, healthcare services, support, and resources.
- Create an emergency contact list including family, friends, neighbors, carpool drivers, healthcare providers, teachers, employers, the local public health department, and other community resources.
- Choose a room in your house that can be used to separate sick household members from others.

Take everyday preventive actions:

- Wash your hands frequently
- Avoid touching your eyes, nose, and mouth.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces Be prepared if your child's school or childcare facility is temporarily dismissed or for potential changes at your workplace.

TAKE ACTION

- In case of an outbreak in your community, protect yourself and others:
- Stay home and speak to your healthcare provider if you develop fever, cough, or shortness of breath
- If you develop emergency warning signs for COVID-19 get medical attention immediately. In adults, emergency warning signs*:
 - Difficulty breathing or shortness of breath
 - Persistent pain or pressure in the chest
 - New confusion or inability to arouse
 - Bluish lips or face
 - *This list is not all inclusive. Please consult your medical provider for any other symptom that is severe or concerning.
- Keep away from others who are sick
- Limit close contact with others as much as possible (about 6 feet)

Put your household plan into action

- Continue to practice everyday preventive actions
- If someone in the household is sick, separate them into the prepared room
- If caring for a household member, follow recommended precautions and monitor your own health
- Keep surfaces disinfected
- Avoid sharing personal items
- If you become sick, stay in contact with others by phone or email
- Stay informed about the local outbreak situation
- Notify your work if your schedule needs to change
- Take care of the emotional health of your household members, including yourself

Take additional precautions for those at highest risk, particularly older adults and those who have severe underlying health conditions.

- Consider staying at home and away from crowds if you or a family member are an older adult or have underlying health issues

Annex C to COD COVID-19 OPLAN

- Make sure you have access to several weeks of medications and supplies in case you need to stay home
- When you go out in public, keep away from others who are sick and limit close contact with others
- Practice good hand hygiene

Take the following steps to help protect your children during an outbreak:

- Notify your child's school if your child becomes sick with COVID-19
- Keep track of school dismissals in your community
- Discourage children and teens from gathering in other public places

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CDC Recommendations to Clean & Disinfect

Interim Recommendations for US Households with Suspected/Confirmed Coronavirus Disease 2019

Background

There is much to learn about the novel coronavirus that causes [coronavirus disease 2019](#) (COVID-19). Based on what is currently known about the novel coronavirus and similar coronaviruses that cause SARS and MERS, spread from person-to-person with these viruses happens most frequently among close contacts (within about 6 feet). This type of transmission occurs via respiratory droplets. On the other hand, transmission of novel coronavirus to persons from surfaces contaminated with the virus has not been documented. Transmission of coronavirus occurs much more commonly through respiratory droplets than through fomites. Current evidence suggests that novel coronavirus may remain viable for hours to days on surfaces made from a variety of materials. Cleaning of visibly dirty surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in households and community settings.

Purpose

This guidance provides recommendations on the cleaning and disinfection of households where [persons under investigation \(PUI\)](#) or those with confirmed COVID-19 reside or may be in self-isolation. It is aimed at limiting the survival of the virus in the environments. These recommendations will be updated if additional information becomes available.

These guidelines are focused on household settings and are meant for the general public.

- **Cleaning** refers to the removal of germs, dirt, and impurities from surfaces. Cleaning does not kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.
- **Disinfecting** refers to using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface *after* cleaning, it can further lower the risk of spreading infection.

Annex D to COD COVID-19 OPLAN

General Recommendations for Routine Cleaning and Disinfection of Households

Community members can practice routine cleaning of frequently touched surfaces (for example: tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks) with household cleaners and EPA-registered disinfectants that are appropriate for the surface, following label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

General Recommendations for Cleaning and Disinfection of Households with People Isolated in Home Care (e.g. Suspected/Confirmed to have COVID-19)

- Household members should educate themselves about COVID-19 symptoms and preventing the spread of COVID-19 in homes.
- **Clean and disinfect high-touch surfaces daily in household common areas (e.g. tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks)**
 - In the bedroom/bathroom dedicated for an ill person: consider reducing cleaning frequency to **as-needed** (e.g., soiled items and surfaces) to avoid unnecessary contact with the ill person.
 - As much as possible, an ill person should stay in a specific room and away from other people in their home, following [home care guidance](#).
 - The caregiver can provide personal cleaning supplies for an ill person's room and bathroom, unless the room is occupied by child or another person for whom such supplies would not be appropriate. These supplies include tissues, paper towels, cleaners and EPA-registered disinfectants (examples at [this linkpdf iconexternal icon](#)).
 - If a separate bathroom is not available, the bathroom should be cleaned and disinfected after each use by an ill person. If this is not possible, the caregiver should wait as long as practical after use by an ill person to clean and disinfect the high-touch surfaces.
- Household members should follow [home care guidance](#) when interacting with persons with suspected/confirmed COVID-19 and their isolation rooms/bathrooms.

How to clean and disinfect:

Surfaces

- Wear disposable gloves when cleaning and disinfecting surfaces. Gloves should be discarded after each cleaning. If reusable gloves are used, those gloves should be dedicated for cleaning and disinfection of surfaces for COVID-19 and should not be used for other purposes. Consult the manufacturer's instructions for cleaning and disinfection products used. [Clean hands](#) immediately after gloves are removed.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.
 - Diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer's instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.
 - Prepare a bleach solution by mixing:
 - 5 tablespoons (1/3rd cup) bleach per gallon of water or
 - 4 teaspoons bleach per quart of water
 - [Products with EPA-approved emerging viral pathogens claimspdf iconexternal icon](#) 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, etc.).
- For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. After cleaning:
 - Launder items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water

setting for the items and dry items completely, or
Use products with the EPA-approved emerging viral pathogens claims
(examples at [this linkpdf iconexternal icon](#)) that are suitable for porous
surfaces.

Clothing, towels, linens and other items that go in the laundry

- Wear disposable gloves when handling dirty laundry from an ill person and then discard after each use. If using reusable gloves, those gloves should be dedicated for cleaning and disinfection of surfaces for COVID-19 and should not be used for other household purposes. [Clean hands](#) immediately after gloves are removed.
 - If no gloves are used when handling dirty laundry, be sure to wash hands afterwards.
 - If possible, do not shake dirty laundry. This will minimize the possibility of dispersing virus through the air.
 - Launder items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry from an ill person can be washed with other people's items.
 - Clean and disinfect clothes hampers according to guidance above for surfaces. If possible, consider placing a bag liner that is either disposable (can be thrown away) or can be laundered.

Hand hygiene and other preventive measures

- Household members should [clean hands](#) often, including immediately after removing gloves and after contact with an ill person, 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 at least 60% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
- Household members should follow normal preventive actions while at work and home including recommended [hand hygiene](#) and avoiding touching eyes, nose, or mouth with unwashed hands.
 - Additional key times to clean hands include:

Annex D to COD COVID-19 OPLAN

- After blowing one's nose, coughing, or sneezing
- After using the restroom
- Before eating or preparing food
- After contact with animals or pets
- Before and after providing routine care for another person who needs assistance (e.g. a child)

Other considerations

- The ill person should eat/be fed in their room if possible. Non-disposable food service items used should be handled with gloves and washed with hot water or in a dishwasher. [Clean hands](#) after handling used food service items.
- If possible, dedicate a lined trash can for the ill person. Use gloves when removing garbage bags, handling, and disposing of trash. [Wash hands](#) after handling or disposing of trash.
- Consider consulting with your local health department about trash disposal guidance if available.

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CDC Interim Guidance to Get Your Home Ready

This interim guidance is based on what is currently known [about the Coronavirus Disease 2019 \(COVID-19\)](#). The Centers for Disease Control and Prevention (CDC) will update this interim guidance as needed and as additional information becomes available.

This interim guidance is to help household members plan for community transmission of coronavirus disease 2019 (COVID-19) in the United States. The Centers for Disease Control and Prevention (CDC) encourages household members to prepare for the possibility of a COVID-19 outbreak in their community.

COVID-19 is caused by a new virus. There is [much to learn about its transmissibility, severity, and other features of the disease](#). We want to help everyone prepare to respond to this public health threat.

Before a COVID-19 outbreak occurs in your community: Plan

A COVID-19 outbreak could last for a long time in your community. Depending on the severity of the outbreak, public health officials may recommend community actions designed to help keep people healthy, reduce exposures to COVID-19, and slow the spread of the disease. Local public health officials may make recommendations appropriate to your local situation. Creating a household plan can help protect your health and the health of those you care about in the event of an outbreak of COVID-19 in your community. You should base the details of your household plan on the needs and daily routine of your household members.

Create a household plan of action

- **Talk with the people who need to be included in your plan.** Meet with household members, other relatives, and friends to discuss [what to do if a COVID-19 outbreak occurs in your community](#) and what the needs of each person will be.
- **Plan ways to care for those who might be at greater risk for serious complications.** There is limited information about [who may be at risk for severe](#)

[complications from COVID-19 illness](#). From the data that are available for COVID-19 patients, and from data for related coronaviruses such as SARS-CoV and MERS-CoV, it is possible that older adults and persons who have underlying chronic medical conditions may be at risk for more serious complications. Early data suggest older people are more likely to have serious COVID-19 illness. If you or your household members are at increased risk for COVID-19 complications, please consult with your health care provider for more information about [monitoring your health for symptoms suggestive of COVID-19](#). CDC will recommend actions to help keep people at high risk for complications healthy if a COVID-19 outbreak occurs in your community.

- **Get to know your neighbors.** Talk with your neighbors about emergency planning. If your neighborhood has a website or social media page, consider joining it to maintain access to neighbors, information, and resources.
- **Identify aid organizations in your community.** Create a list of local organizations that you and your household can contact in the event you need access to information, health care services, support, and resources. Consider including organizations that provide mental health or counseling services, food, and other supplies.
- **Create an emergency contact list.** Ensure your household has a current list of emergency contacts for family, friends, neighbors, carpool drivers, health care providers, teachers, employers, the local public health department, and other community resources.

Practice good personal health habits and plan for home-based actions

- **Practice everyday preventive actions now.** Remind everyone in your household of the importance of practicing everyday preventive actions that can help prevent the spread of respiratory illnesses:
 - Avoid close contact with people who are sick.
 - Stay home when you are sick, except to get medical care.
 - Cover your coughs and sneezes with a tissue.

Annex E to COD COVID-19 OPLAN

- Clean frequently touched surfaces and objects daily (e.g., tables, countertops, light switches, doorknobs, and cabinet handles) using a regular household detergent and water. If surfaces are dirty, they should be cleaned using a detergent and water prior to disinfection. For disinfection, a list of products with Environmental Protection Agency (EPA)-approved emerging viral pathogens claims, maintained by the American Chemistry Council Center for Biocide Chemistries (CBC), is available at [Novel Coronavirus \(COVID-19\) Fighting Productspdf iconexternal icon](#). Always follow the manufacturer's instructions for all cleaning and disinfection products.
- **Choose a room in your home that can be used to separate sick household members from those who are healthy.** Identify a separate bathroom for the sick person to use, if possible. Plan to clean these rooms, as needed, when someone is sick. [Learn how to care for someone with COVID-19 at home.](#)

Be prepared if your child's school or childcare facility is temporarily dismissed

- **Learn about the emergency operations plan at your child's school or childcare facility.** During a COVID-19 outbreak in your community, local public health officials may recommend [temporary school dismissals](#) to help slow the spread of illness. School authorities also may decide to dismiss a school if too many students or staff are absent. Understand the plan for continuing education and social services (such as student meal programs) during school dismissals. If your child attends a college or university, encourage them to learn about the school's plan for a COVID-19 outbreak.

Plan for potential changes at your workplace

- **Learn about your employer's emergency operations plan.** Discuss sick-leave policies and telework options for workers who are sick or who need to stay home to care for sick household members. [Learn how businesses and employers can plan for and respond to COVID-19.](#)

During a COVID-19 outbreak in your community: Act

During an outbreak in your community, protect yourself and others by:

- Staying home from work, school, and all activities when you are [sick with COVID-19 symptoms](#), which may include fever, cough, and difficulty breathing.
- Keeping away from others who are sick.
- Limiting close contact with others as much as possible (about 6 feet).

Put your household plan into action

- **Stay informed about the local COVID-19 situation.** Get up-to-date information about local COVID-19 activity from [public health officialsexternal icon](#). Be aware of temporary school dismissals in your area, as this may affect your household's daily routine.
- **Stay home if you are sick.** Stay home if you have [COVID-19 symptoms](#). If a member of your household is sick, stay home from school and work to avoid spreading COVID-19 to others.
 - If your children are in the care of others, urge caregivers to watch for COVID-19 symptoms.
- **Continue practicing everyday preventive actions.** Cover coughs and sneezes with a tissue and wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use a hand sanitizer that contains 60% alcohol. Clean frequently touched surfaces and objects daily using a regular household detergent and water.
- **Use the separate room and bathroom you prepared for sick household members (if possible).** [Learn how to care for someone with COVID-19 at home](#). Avoid sharing personal items like food and drinks. Provide your sick household member with clean disposable facemasks to wear at home, if available, to help prevent spreading COVID-19 to others. Clean the sick room and bathroom, as needed, to avoid unnecessary contact with the sick person.

Annex E to COD COVID-19 OPLAN

- If surfaces are dirty, they should be cleaned using a detergent and water prior to disinfection. For disinfection, a list of products with EPA-approved emerging viral pathogens claims, maintained by the CBC, is available at [Novel Coronavirus \(COVID-19\) Fighting Productspdf iconexternal icon](#). Always follow the manufacturer's instructions for all cleaning and disinfection products.
- **Stay in touch with others by phone or email.** If you live alone and become sick during a COVID-19 outbreak, you may need help. If you have a chronic medical condition and live alone, ask family, friends, and health care providers to check on you during an outbreak. Stay in touch with family and friends with chronic medical conditions.
- **Take care of the emotional health of your household members.** Outbreaks can be stressful for adults and children. [Children respond differently to stressful situations than adults](#). Talk with your children about the outbreak, try to stay calm, and reassure them that they are safe.

Inform your workplace if you need to change your regular work schedule

- **Notify your workplace as soon as possible if your schedule changes.** Ask to work from home or take leave if you or someone in your household gets sick with [COVID-19 symptoms](#), or if your child's school is dismissed temporarily.

Take the following steps to help protect your children during an outbreak

- **If your child/children become sick with COVID-19, notify their childcare facility or school.** Talk with teachers about classroom assignments and activities they can do from home to keep up with their schoolwork.
- **Keep track of school dismissals in your community.** Read or watch local media sources that report school dismissals. If schools are dismissed temporarily, use alternative childcare arrangements, if needed.
- **Discourage children and teens from gathering in other public places while school is dismissed to help slow the spread of COVID-19 in the community.**

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CDC Interim Guidance for Businesses and Employers

Plan, Prepare and Respond to Coronavirus Disease 2019

This interim guidance is based on what is currently known [about the coronavirus disease 2019 \(COVID-19\)](#). The Centers for Disease Control and Prevention (CDC) will update this interim guidance as needed and as additional information becomes available.

CDC is working across the Department of Health and Human Services and across the U.S. government in the public health response to COVID-19. Much is unknown about how the virus that causes COVID-19 spreads. Current knowledge is largely based on what is known about similar coronaviruses.

CDC Industry Guidance

CDC Public and Private Partner Call for COVID-19 — March 4, 2020

Dr. Jay Butler, CDC's Deputy Director for Infectious Diseases and Senior Response Official for the COVID-19 response provided a situational update for CDC partners, including members of the private sector, public health organizations, universities, and clinical societies.

Coronaviruses are a large family of viruses that are common in humans and many different species of animals, including camels, cattle, cats, and bats. Rarely, animal coronaviruses can infect people and then spread between people, such as with MERS-CoV and SARS-CoV. The virus that causes COVID-19 is spreading from person-to-person in China and some limited person-to-person transmission has been reported in countries outside China, including the United States. However, respiratory illnesses like seasonal influenza, are currently widespread in many US communities.

The following interim guidance may help prevent workplace exposures to acute respiratory illnesses, including COVID-19, in non-healthcare settings. The guidance also provides planning considerations if there are more widespread, community outbreaks of COVID-19.

To prevent stigma and discrimination in the workplace, use only the guidance described below to determine risk of COVID-19. Do not make determinations of risk based on race or country of origin, and be sure to maintain confidentiality of people with confirmed COVID-19. There is much more to learn about the transmissibility, severity, and other features of COVID-19 and investigations are ongoing. Updates are available on CDC's web page at www.cdc.gov/coronavirus/covid19.

Recommended strategies for employers to use now:

- **Actively encourage sick employees to stay home:**
 - Employees who have symptoms of acute respiratory illness are recommended to stay home and not come to work until they are free of fever (100.4° F [37.8° C] or greater using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants). Employees should notify their supervisor and stay home if they are sick.
 - Ensure that your sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies.
 - Talk with companies that provide your business with contract or temporary employees about the importance of sick employees staying home and encourage them to develop non-punitive leave policies.
 - Do not require a healthcare provider's note for employees who are sick with acute respiratory illness to validate their illness or to return to work, as healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way.
 - Employers should maintain flexible policies that permit employees to stay home to care for a sick family member. Employers should be aware that more employees may need to stay at home to care for sick children or other sick family members than is usual.
- **Separate sick employees:**
 - CDC recommends that employees who appear to have acute respiratory illness symptoms (i.e. cough, shortness of breath) upon arrival to work or

become sick during the day should be separated from other employees and be sent home immediately. Sick employees should cover their noses and mouths with a tissue when coughing or sneezing (or an elbow or shoulder if no tissue is available).

- **Emphasize staying home when sick, respiratory etiquette and hand hygiene by all employees:**

- Place posters that encourage [staying home when sick](#), [cough and sneeze etiquette](#), and [hand hygiene](#) at the entrance to your workplace and in other workplace areas where they are likely to be seen.
- Provide tissues and no-touch disposal receptacles for use by employees.
- Instruct employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60-95% alcohol, or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty.
- Provide soap and water and alcohol-based hand rubs in the workplace. Ensure that adequate supplies are maintained. Place hand rubs in multiple locations or in conference rooms to encourage hand hygiene.
- Visit the [coughing and sneezing etiquette](#) and [clean hands webpage](#) for more information.

- **Perform routine environmental cleaning:**

- Routinely clean all frequently touched surfaces in the workplace, such as workstations, countertops, and doorknobs. Use the cleaning agents that are usually used in these areas and follow the directions on the label.
- No additional disinfection beyond routine cleaning is recommended at this time.
- Provide disposable wipes so that commonly used surfaces (for example, doorknobs, keyboards, remote controls, desks) can be wiped down by employees before each use.

- **Advise employees before traveling to take certain steps:**

- Check the [CDC's Traveler's Health Notices](#) for the latest guidance and recommendations for each country to which you will travel. Specific travel

Annex F to COD COVID-19 OPLAN

information for travelers going to and returning from China, and information for aircrew, can be found at on the [CDC website](#).

- Advise employees to check themselves for symptoms of [acute respiratory illness](#) before starting travel and notify their supervisor and stay home if they are sick.
- Ensure employees who become sick while traveling or on temporary assignment understand that they should notify their supervisor and should promptly call a healthcare provider for advice if needed.
- If outside the United States, sick employees should follow your company's policy for obtaining medical care or contact a healthcare provider or overseas medical assistance company to assist them with finding an appropriate healthcare provider in that country. A U.S. consular officer can help locate healthcare services. However, U.S. embassies, consulates, and military facilities do not have the legal authority, capability, and resources to evacuate or give medicines, vaccines, or medical care to private U.S. citizens overseas.
- **Additional Measures in Response to Currently Occurring Sporadic Importations of the COVID-19:**
 - Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and refer to CDC guidance for [how to conduct a risk assessment](#) of their potential exposure.
 - If an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA). Employees exposed to a co-worker with confirmed COVID-19 should refer to CDC guidance for [how to conduct a risk assessment](#) of their potential exposure.

Planning for a Possible COVID-19 Outbreak in the US

The severity of illness or how many people will fall ill from COVID-19 is unknown at this time. If there is evidence of a COVID-19 outbreak in the U.S., employers should plan to be able to respond in a flexible way to varying levels of severity and be prepared to

refine their business response plans as needed. For the general American public, such as workers in non-healthcare settings and where it is unlikely that work tasks create an increased risk of exposures to COVID-19, the immediate health risk from COVID-19 is considered low. The CDC and its partners will continue to monitor national and international data on the severity of illness caused by COVID-19, will disseminate the results of these ongoing surveillance assessments, and will make additional recommendations as needed.

Planning Considerations

All employers need to consider how best to decrease the spread of acute respiratory illness and lower the impact of COVID-19 in their workplace in the event of an outbreak in the US. They should identify and communicate their objectives, which may include one or more of the following: (a) reducing transmission among staff, (b) protecting people who are at higher risk for adverse health complications, (c) maintaining business operations, and (d) minimizing adverse effects on other entities in their supply chains. Some of the key considerations when making decisions on appropriate responses are:

- Disease severity (i.e., number of people who are sick, hospitalization and death rates) in the community where the business is located;
- Impact of disease on employees that are vulnerable and may be at higher risk for COVID-19 adverse health complications. Inform employees that some people may be at higher risk for severe illness, such as older adults and those with chronic medical conditions.
- Prepare for possible increased numbers of employee absences due to illness in employees and their family members, dismissals of early childhood programs and K-12 schools due to high levels of absenteeism or illness:
 - Employers should plan to monitor and respond to absenteeism at the workplace. Implement plans to continue your essential business functions in case you experience higher than usual absenteeism.

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- Cross-train personnel to perform essential functions so that the workplace is able to operate even if key staff members are absent.
- Assess your essential functions and the reliance that others and the community have on your services or products. Be prepared to change your business practices if needed to maintain critical operations (e.g., identify alternative suppliers, prioritize customers, or temporarily suspend some of your operations if needed).
- Employers with more than one business location are encouraged to provide local managers with the authority to take appropriate actions outlined in their business infectious disease outbreak response plan based on the condition in each locality.
- Coordination with [stateexternal icon](#) and [localexternal icon](#) health officials is strongly encouraged for all businesses so that timely and accurate information can guide appropriate responses in each location where their operations reside. Since the intensity of an outbreak may differ according to geographic location, local health officials will be issuing guidance specific to their communities.

Important Considerations for Creating an Infectious Disease Outbreak Response Plan

All employers should be ready to implement strategies to protect their workforce from COVID-19 while ensuring continuity of operations. During a COVID-19 outbreak, all sick employees should stay home and away from the workplace, respiratory etiquette and hand hygiene should be encouraged, and routine cleaning of commonly touched surfaces should be performed regularly.

Employers should:

- Ensure the plan is flexible and involve your employees in developing and reviewing your plan.
- Conduct a focused discussion or exercise using your plan, to find out ahead of time whether the plan has gaps or problems that need to be corrected.

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- Share your plan with employees and explain what human resources policies, workplace and leave flexibilities, and pay and benefits will be available to them.
- Share best practices with other businesses in your communities (especially those in your supply chain), chambers of commerce, and associations to improve community response efforts.

Recommendations for an Infectious Disease Outbreak Response Plan:

- Identify possible work-related exposure and health risks to your employees. OSHA has more information on how to [protect workers from potential exposures](#) to COVID-19.
- Review human resources policies to make sure that policies and practices are consistent with public health recommendations and are consistent with existing state and federal workplace laws (for more information on employer responsibilities, visit the [Department of Labor's](#) and the [Equal Employment Opportunity Commission's](#) websites).
- Explore whether you can establish policies and practices, such as flexible worksites (e.g., telecommuting) and flexible work hours (e.g., staggered shifts), to increase the physical distance among employees and between employees and others if state and local health authorities recommend the use of social distancing strategies. For employees who are able to telework, supervisors should encourage employees to telework instead of coming into the workplace until symptoms are completely resolved. Ensure that you have the information technology and infrastructure needed to support multiple employees who may be able to work from home.
- Identify essential business functions, essential jobs or roles, and critical elements within your supply chains (e.g., raw materials, suppliers, subcontractor services/products, and logistics) required to maintain business operations. Plan for how your business will operate if there is increasing absenteeism or these supply chains are interrupted.
- Set up authorities, triggers, and procedures for activating and terminating the company's infectious disease outbreak response plan, altering business operations (e.g., possibly changing or closing operations in affected areas), and transferring

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business knowledge to key employees. Work closely with your local health officials to identify these triggers.

- Plan to minimize exposure between employees and also between employees and the public, if public health officials call for social distancing.
- Establish a process to communicate information to employees and business partners on your infectious disease outbreak response plans and latest COVID-19 information. Anticipate employee fear, anxiety, rumors, and misinformation, and plan communications accordingly.
- In some communities, early childhood programs and K-12 schools may be dismissed, particularly if COVID-19 worsens. Determine how you will operate if absenteeism spikes from increases in sick employees, those who stay home to care for sick family members, and those who must stay home to watch their children if dismissed from school. Businesses and other employers should prepare to institute flexible workplace and leave policies for these employees.
- Local conditions will influence the decisions that public health officials make regarding community-level strategies; employers should take the time now to learn about plans in place in each community where they have a business.
- If there is evidence of a COVID-19 outbreak in the US, consider canceling non-essential business travel to additional countries per [travel guidance](#) on the CDC website.
 - Travel restrictions may be enacted by other countries which may limit the ability of employees to return home if they become sick while on travel status.
 - Consider cancelling large work-related meetings or events.
- Engage [stateexternal icon](#) and [localexternal icon](#) health departments to confirm channels of communication and methods for dissemination of local outbreak information.

Resources for more information:

CDC Guidance

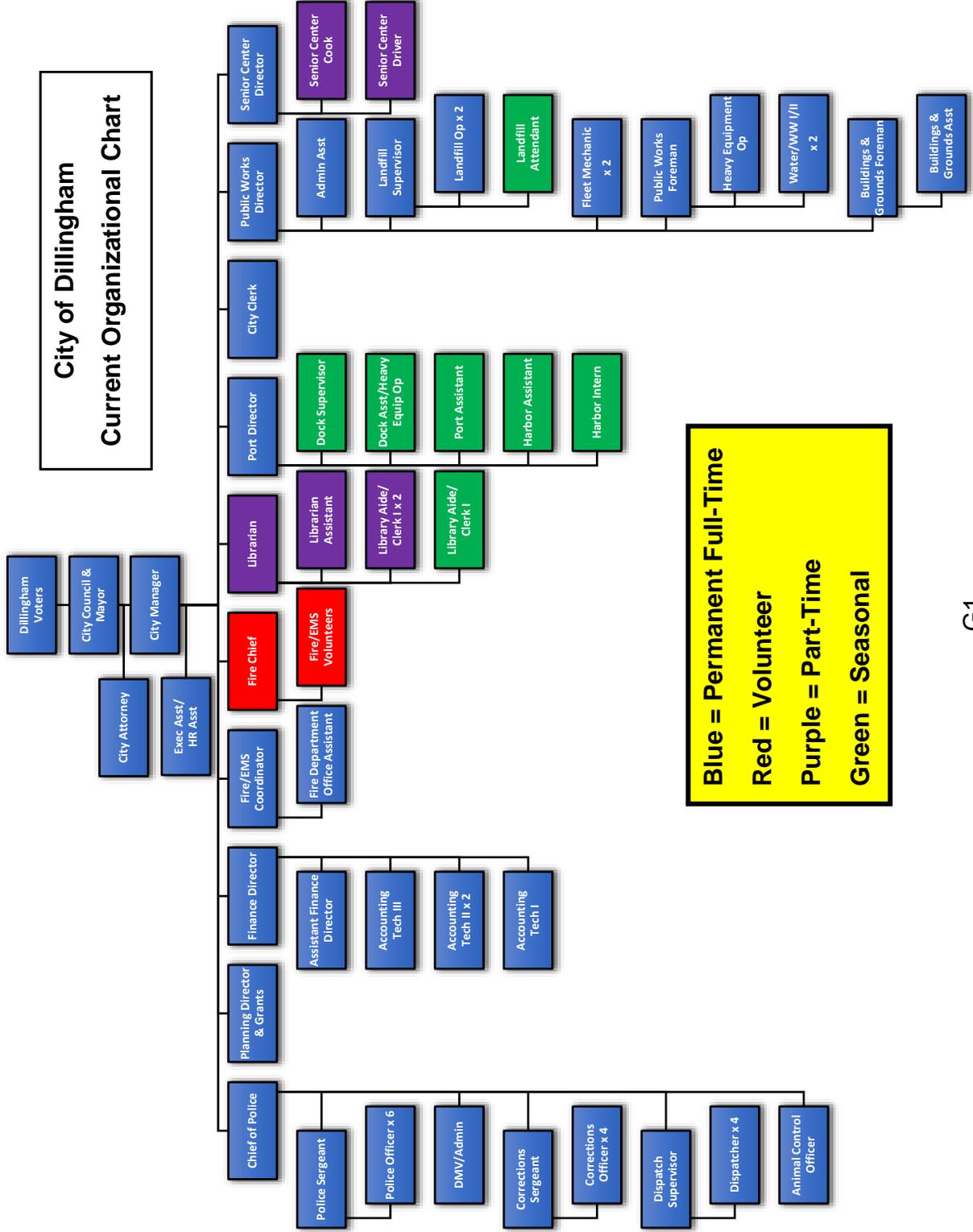
- [COVID-19 Website](#)
- [What You Need to Know About COVID-19pdf icon](#)
- [What to Do If You Are Sick With COVID-19pdf icon](#)
- [Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus Disease 2019 \(COVID-19\) Exposure in Travel-associated or Community Settings](#)
- [Health Alert Network](#)
- [Travelers' Health Website](#)
- [National Institute for Occupational Safety and Health's Small Business International Travel Resource Travel Plannerpdf icon](#)
- [Coronavirus Disease 2019 Recommendations for Ships](#)

Other Federal Agencies and Partners

- OSHA Guidance: https://www.osha.gov/SLTC/novel_coronavirus/index.html[external icon](#)

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Annex G (City Organizational Chart) to COVID-19 OPLAN



Blue = Permanent Full-Time
Red = Volunteer
Purple = Part-Time
Green = Seasonal

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Alaska's Seafood Industry
Facts about Food Safety and COVID-19
11 March 2020

The Centers for Disease Control (CDC) is the lead agency for the US government on 2019 novel coronavirus, known as COVID-19, and is the [primary source of guidance](#) regarding the spread of the virus.

This information is intended to be used as a basis for communication with external stakeholders about COVID-19 and the Alaska seafood industry.

Food Safety – Can the virus be spread through food?

- The CDC, FDA, USDA, and NOAA have not found that the COVID-19 virus can be spread through food.
- Alaska seafood is safe to eat and can be enjoyed without concern.
- Alaska seafood is a healthy source of essential vitamins and nutrients and eating Alaska seafood has been proven to support a healthy immune system.
- Everyone is encouraged to continue to follow proper food safety protocols including washing your hands for at least 20 seconds before consuming any food products.
- There is currently no evidence supporting the transmission of COVID-19 through food to humans.
- Coronaviruses experience poor survivability on food surfaces, meaning there is also, ***“no evidence to support transmission of [coronavirus through] imported goods and there have not been any cases of [coronavirus] in the United States associated with imported goods”***¹ [from any country](#).
- There is likely **very low risk** of spread from *“food products [including seafood] or packaging that are shipped over a period of days or weeks at ambient, refrigerated, or frozen temperatures.”*²
- The above statements are consistent with findings from both the United States [Food & Drug Administration \(FDA\)](#) and [World Health Organization \(WHO\)](#).

¹ Centers for Disease Control <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>; “How to Protect Yourself”

² Centers for Disease Control <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>; “How It Spreads”

Additional Resources for Industry:

Where can I find additional resources to prepare my food business for the potential impacts of the COVID-19?

Food Marketing Institute (FMI) has compiled background information, a preparedness checklist, supply chain resources, templates and more to support the food industry, <https://www.fmi.org/food-safety/coronavirus>.

Where can I find talking points to share with counter staff and wait staff for my business or customers?

National Fisheries Institute (NFI) published talking points and FAQs regarding the safety and importance of including seafood in a healthy diet at <https://seafoodsafetycovid19.wordpress.com/>.

Where can I find information about COVID-19 specific to Alaska?

The State of Alaska Department of Health and Human Services is closely monitoring the situation, providing updates and preparedness recommendations and printable posters for Alaskans and Alaska businesses at <http://dhss.alaska.gov/dph/Epi/id/Pages/COVID-19/default.aspx>.

Where can I find the CDC FAQs for more information?

This and other information and health and preparedness recommendations can be found on the CDC website at <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>.



This document was prepared as an informational resource for Alaska's seafood industry by the Alaska Seafood Marketing Institute (ASMI). This was not designed as an exhaustive resource but as a starting point for companies in their research. ASMI will continue to monitor the situation and provide information and resources as available.

About Alaska Seafood Processing

Alaska seafood processors have in place the highest food safety and sanitation standards³ required by the federal government and voluntarily apply additional strict protocols to implement industrial food safety best practices. Alaska's processing facilities are audited annually regarding these food safety measures by state and federal authorities.

As part of each plant's required preparedness plans, there are contingency mechanisms in place to deal with human disease outbreaks and other externalities so as to protect the health and safety of both employees and the public and guard against threats that could cause a disruption to plant and processing activities. Human health and food safety are always the priority.

³Alaska seafood processors adhere to the following federally required and audited food safety standards:

Food and Drug Administration (FDA) current Good Manufacturing Practices (FDA cGMP)

In Alaska's seafood processing facilities, the required Food and Drug Administration (FDA) current good manufacturing practices ([cGMP](#)) address concerns pertaining to the design, maintenance and sanitation of a facility as well as personal hygiene and disease control for plant workers.

Hazard Analysis and Critical Control Point (HACCP)

Processors of seafood and seafood products are required by the FDA to address food safety by following a Hazard Analysis and Critical Control Point (HACCP) prevention system. [HACCP](#) identifies food safety hazards, creates controls to prevent hazards, and then monitors those controls within a seafood processing facility.

Sanitation Standard Operating Procedures (SSOPs)

Sanitation Standard Operating Procedures (SSOPs) are detailed procedures followed by Alaska's seafood processors specifying what to clean, how to clean, how often to clean, and the records used for monitoring. SSOPs are plant specific.

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HELPFUL TIPS ON THE CORONAVIRUS

This information has come from the Stanford Hospital Board Internal Bulletin that we wanted to share as further information on this topic:

The new Coronavirus may not show signs of infection for many days. How can one know if he/she is infected? By the time they have fever and/or cough and go to the hospital, the lung is usually 50% Fibrosis and it's too late.

Taiwan experts provide a simple self-check that we can do every morning:

Take a deep breath and hold your breath for more than 10 seconds. If you complete it successfully without coughing, without discomfort, stiffness or tightness, etc., it proves there is no Fibrosis in the lungs, basically indicates no infection. In a critical time, please self-check every morning in an environment with clean air.

THE SYMPTOMS

1. It will first infect the throat, so you'll have a sore throat lasting 3/4 days
2. The virus then blends into a nasal fluid that enters the trachea and then the lungs, causing pneumonia. This takes about 5/6 days further.
3. With the pneumonia comes high fever and difficulty in breathing.
4. The nasal congestion is not like the normal kind. You feel like you're drowning. It's imperative you then seek immediate attention.

Serious excellent advice by Japanese doctors treating COVID-19 cases:

Everyone should ensure your mouth & throat are moist, never dry. Take a few sips of water every 15 minutes at least. Why? Even if the virus gets into your mouth, drinking water or other liquids will wash them down through your throat and into the stomach. Once there, your stomach acid will kill all of the virus. If you don't drink enough water more regularly, the virus can enter your windpipe and into the lungs. That's very dangerous.

IMPORTANT ANNOUNCEMENT - CORONAVIRUS

1. If you have a runny nose and sputum, you have a common cold
2. Coronavirus pneumonia is a dry cough with no runny nose.
3. This new virus is not heat-resistant and will be killed by a temperature of just 26/27 degrees. It hates the Sun.
4. If someone sneezes with it, it takes about 10 feet before it drops to the ground and is no longer airborne.
5. If it drops on a metal surface it will live for at least 12 hours - so if you come into contact with any metal surface - wash your hands as soon as you can with a bacterial soap.
6. On fabric it can survive for 6-12 hours. Normal laundry detergent will kill it.
7. Drinking warm water is effective for all viruses. Try not to drink liquids with ice.
8. Wash your hands frequently as the virus can only live on your hands for 5-10 minutes, but a lot can happen during that time - you can rub your eyes, pick your nose unwittingly and so on.
9. You should also gargle as a prevention. A simple solution of salt in warm water will suffice.
10. Can't emphasize enough - drink plenty of water!

Take care everyone and may the world recover from this Coronavirus soon.