

# Pandemic Influenza Annex to the Continuity of Operations Plan



**NOAA**

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## EXECUTIVE SUMMARY

In line with NOAA's All-Hazards Incident Management<sup>1</sup>, this Pandemic Influenza Annex to the NOAA Continuity of Operations Plan (COOP) facilitates coordination of NOAA-wide pandemic preparedness and response programs and activities. Rather than prescribing every intermediate step, process, or project, this Annex points the direction to more specific steps or actions that NOAA will undertake in its pandemic planning efforts.

This Annex is designed to be flexible in order to accommodate changes brought on by a pandemic. A living document, this Annex will be reviewed on a continual basis and periodically updated to reflect changes in our understanding of the threat and the state of relevant response capabilities and technologies. It will also be tested frequently to identify preparedness weaknesses and to promote effective implementation.

The following are the overall objectives of this Annex for planning and responding to pandemic influenza:

- **Plans and Procedures**—Reduce the impacts of a pandemic on NOAA;
- **Essential Functions**—Continue NOAA's essential functions, especially the Primary Mission Essential Functions, to facilitate emergency management and overall national recovery;
- **Delegations of Authority**—Ensure persons receiving critical delegations of authority are geographically dispersed and three deep per position because of anticipated rise in absenteeism;
- **Orders of Succession**—Ensure designees in orders of succession are geographically dispersed and three deep per position as the consequences of a pandemic influenza will vary and will affect regions of the United States differently in terms of timing, severity, and duration;
- **Alternate Operating Facilities**—Plan for and test the logistical support needed to execute alternatives to staff relocation/co-location such as “social distancing” in the workplace through telecommuting or other means;
- **Interoperable Communications**—Plan and consider alternate means of communicating in absence of person-to-person contact to minimize workplace risks of infection and test critical communications systems;
- **Vital Records and Databases**—Identify records needed to sustain operations for longer than 30 days and confirm these records are electronically accessible from a remote location. Identify and plan for maintenance of vital systems that rely on periodic physical intervention/servicing;
- **Human Capital**—
  - Enhance/facilitate/streamline coordination with DOC OHRM;
  - Coordinate modifications to human capital policies and plans with labor relations;
  - Review terms and conditions of contract work to ensure contractor responsibility for essential functions and to suspend non-essential work;
  - Evaluate need for hygiene supplies, medicines, and other medical necessities to promote the health and welfare of personnel;
  - Develop and/or modify an employee accountability system;
  - Promote guidance developed by public health and safety authorities;
  - Provide employees and families with relevant information and advisories about the pandemic; and
  - Assure the delivery of cross-training to ensure essential staff is available to perform functions and services.

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<sup>1</sup> All Hazards Incident Management as defined in NOAA Administrative Order (NAO) 210-100, effective 10/21/06

- **Test, Training, and Exercises**—Test, train, and exercise sustainable social distancing techniques that reduce person-to-person interactions within the workplace to include telework capabilities and impacts of a reduced staff on facilities and essential functions and services;
- **Devolution of Control and Direction**—Develop detailed guidance for devolution and consider rotating operations between regional offices as the pandemic wave moves throughout the United States;
- **Reconstitution**—Develop plans for replacement of employees unable to return to work and prioritize hiring efforts.

## I. INTRODUCTION

The Federal Implementation Plan for the National Strategy for Pandemic Influenza acknowledges that a pandemic influenza will require specialized planning. To address this, FEMA issued a memorandum on March 1, 2006, “Continuity of Operations (COOP) Pandemic Influenza Guidance”. The memorandum provides guidance to Federal Executive Branch Departments and Agencies for incorporating pandemic influenza considerations into their COOP planning.

## II. PURPOSE

This document provides guidance to NOAA Line and Staff Offices and serves as the NOAA Headquarters plan for maintaining essential functions and services during a pandemic. This Annex supplements the current approved NOAA Headquarters COOP Plan bridging the gap between the traditional, all-hazards COOP planning of Federal Continuity Directive 1 (FCD 1) and the specialized COOP planning required for a pandemic by addressing those considerations, challenges, and elements specific to the dynamic nature of a pandemic.

This document emphasizes that maintaining essential functions in a pandemic environment may not entail an official “COOP” declaration, and that maintaining essential functions may be accomplished through contact intervention (social distancing) strategies. This document recognizes that relocation may be necessary due to a separate or concurrent event. Since these requirements apply across all levels of the Agency, the term “NOAA,” for the purposes of this Annex, refers to the entire NOAA organization, including Headquarters personnel, all Line and Staff Offices, and operating elements.

The overarching objectives of the NOAA Pandemic Influenza Annex are to:

- Maintain continuous command and control of the Agency;
- Ensure the continuous performance of identified essential functions and operations;
- Mitigate disruptions to operations;
- Achieve a timely and orderly recovery from a pandemic event and resumption of full service to customers;
- Support the overall Federal preparedness and response efforts; and
- Communicate preparedness, response and recovery guidance to NOAA employees.

## III. CONCEPT OF OPERATIONS

This Annex is built upon the assumption that the Department of Commerce (DOC) COOP Pandemic Condition Level or PANCON will serve as the Pandemic COOP Plan activation criteria or “triggers” for NOAA actions. As such, worksheets aligning specific responses in each of the 11 traditional areas of COOP for each DOC PANCON levels are included in Appendix 2.

The NOAA Under Secretary or designated successor (per NAO 210-5, “Order of Succession to Key NOAA Positions”) and/or NOAA Emergency Coordinator are authorized to activate the Pandemic Influenza Annex either in its entirety or specific components.

- A. Designated successors will be in order of chain of command from NOAA Under Secretary in accordance with the NOAA Administrative Order 210-5.
- B. The Pandemic Influenza Annex may be activated by the following methods:
  - 1) Immediate: Is based on two different approaches:
    - a) Based on impact to staffing and other necessary resources affecting the ability of the Agency as a whole or a line office to continue identified essential functions; or
    - b) Based on Presidential directive, Secretary of Homeland Security, and/or the Secretary of Commerce.

- 2) Phased: Based on Presidential directive, Secretary of Homeland Security, and/or the Secretary of Commerce.

#### IV. PANDEMIC PLANNING ASSUMPTIONS

Pandemics are unpredictable and there is no way to know the characteristics of a pandemic virus before it emerges. Nevertheless, assumptions must be made to facilitate planning efforts. The following are assumptions the Department has incorporated in the DOC Pandemic Plan:

##### A. General Assumptions

- Susceptibility to the pandemic influenza will be universal.
- Efficient and sustained person-to-person transmission signals an imminent pandemic.
- The clinical disease attack rate will be 30% in the overall population during the pandemic. Illness rates will be highest among school-aged children (about 40%) and decline with age. Among working adults, an average of 20% will become ill during a community outbreak.
- Some personnel will become infected but not develop clinically significant symptoms. Asymptomatic or minimally symptomatic individuals can transmit infection and develop immunity to subsequent infection.
- While the number of patients seeking medical care cannot be predicted with certainty, in previous pandemics, about half of those who became ill sought care. With the availability of effective antiviral drugs for treatment, this proportion may be higher in the next pandemic.
- Rates of serious illness, hospitalization, and deaths will depend on the virulence of the pandemic virus and differ by an order of magnitude between more and less severe scenarios. Risk groups for severe and fatal infection cannot be predicted with certainty but are likely to include infants, the elderly, pregnant women, and persons with chronic or immunosuppressive medical conditions.
- Rates of absenteeism will depend on the severity of the pandemic. In a severe pandemic, absenteeism attributable to illness, the need to care for ill family members and fear of infection may reach 40% during the peak weeks of a community outbreak, with lower rates of absenteeism during the weeks before and after the peak. Certain public health measures (closing schools, quarantining household contacts of infected individuals, “snow days”) are likely to increase rates of absenteeism.
- The typical incubation period (interval between infection and onset of symptoms) for influenza is approximately two days.
- Persons who become ill may shed virus and can transmit infection for one-half to one day before the onset of illness. Viral shedding and the risk of transmission will be greatest during the first two days of illness. Children will play a major role in transmission of infection as their illness rates are likely to be higher, they shed more viruses over a longer period of time, and they control their secretions less well.
- On average, infected persons will transmit infection to approximately two other people.
- Epidemics will last six to eight weeks in affected communities.
- Multiple waves (periods during which community outbreaks occur across the country) of illness are likely to occur with each wave lasting two to three months. Historically, the largest waves have occurred in the fall and winter, but the seasonality of a pandemic cannot be predicted with certainty.
- The onset of pandemic activity may adversely affect the Department’s ability to continue to support identified essential functions and to provide support to the operations of clients and external agencies.

- All designated Emergency Response Group (ERG) personnel or their designated successors are available and agree to shift work as required unless already on approved leave or temporary duty elsewhere.
- Individuals and organizations identified in this document are familiar with its contents.
- Individuals and organizations identified in this document will execute their assigned responsibilities.
- Individuals identified in this document are fully trained and capable of executing their assigned responsibilities.
- Pandemic Severity Index (PSI).
  - The PSI was developed by the Centers for Disease Control and Prevention (CDC) as a new pandemic influenza planning tool for use by states, communities, businesses and schools, as part of a drive to provide more specific community-level prevention measures. It was designed to resemble the Saffir-Simpson Hurricane Scale classification scheme.
  - Appropriate matching of the intensity of intervention to the severity of a pandemic is important to maximize the available public health benefit.
  - The key measurement to a pandemic severity index is the casualty fatality ratio.

Characteristics	Pandemic Severity Index (PSI)				
	Category 1	Category 2	Category 3	Category 4	Category 5
Case Fatality Ratio (percentage)	< 0.1	0.1 - < 0.5	0.5 - < 1.0	1.0 - < 2.0	≥ 2.0
Excess Death Rate (per 100,000)	<30	30 - < 150	150 - < 300	300 - < 600	≥ 600
Illness Rate (percentage of the population)	20 – 40	20 – 40	20 – 40	20 – 40	20 – 40
Potential Number of Deaths (based on 2006 U.S. Population)	< 90,000	90,000 - < 450,000	450,000 - < 900,000	900,000 - < 1.8 million	≥ 1.8 million
20 <sup>th</sup> Century U.S. Experience	Seasonal Influenza (illness rate 5 – 20%)	1957, 1968	None	None	1918 Pandemic

**Pandemic Severity Index by Epidemiological Characteristics from Community Mitigation Guidance published February 1, 2007.**

- Upon declaration by the World Health Organization (WHO) of having entered the Pandemic Period (Phase 6) and further determination of Federal Government Response Stages 3, 4, or 5, the CDC's Director shall designate the category of the emerging pandemic based on the Pandemic Severity Index and consideration of other available information. Pending this announcement, communities facing the imminent arrival of pandemic disease will be able to define which

pandemic mitigation interventions are most indicated for implementation based on the level of pandemic severity.

## **B. NOAA Assumptions**

- NOAA is responsible for the health and safety of its employees in the workplace under Section 5(a)(1) of the Occupational Safety and Health (OSH) Act of 1970.
- NOAA will sustain essential functions and continue performing as many routine business activities as possible during times of significant absenteeism.
- All NOAA Line and Staff Offices have actionable COOP plans and capabilities in accordance with FCD-1.
- Travel restrictions, such as limitations on mass transit, implemented at Federal, State, local and/or Tribal levels will affect the ability of staff to get to work or relocate to an alternate site if needed.
- Devolution sites may be activated for use during a pandemic. Although a pandemic influenza event does not necessarily require the use of devolution sites, NOAA may make its devolution sites, along with other locations, available to be used as a precaution to separate staff, i.e., implement social distancing protocols.
- NOAA may make its alternate facilities, along with other locations, available to be used as a precaution to separate staff, i.e., to implement social distancing protocols.

## **V. AGENCY PLANNING**

By law and Executive Order, the National Oceanic and Atmospheric Administration, to include all subordinate components, is required to have the capability to maintain continuous operations of its identified essential functions. Each subordinate component must therefore be prepared to continue to function during an emergency or threat of an emergency, and to efficiently and effectively resume critical operations if interrupted.

NOAA and its line and staff offices are required to establish and maintain COOP plans/programs to ensure their ability to sustain and support their organizational mission under all circumstances. All organizations within NOAA will incorporate a Pandemic-specific Addendum into their COOP plans to ensure the continuity of organizational mission under all circumstances with reduced staffing and resources. NOAA will protect personal privacy information (PII) consistent with applicable laws and Department policies including the Privacy Act.

## **VI. ELEMENTS OF A VIABLE COOP CAPABILITY**

### **A. PLANS AND PROCEDURES**

NOAA pandemic influenza COOP planning and response actions will be appropriately linked to the Department of Commerce Pandemic Condition (PANCON) Levels (see *Appendix 1*). A change from one PANCON Level to another automatically activates certain readiness measures and procedures.

## **1. Pandemic Coordinators and Pandemic Response Teams**

The Under Secretary has designated the Director, Homeland Security Program Office (HSPO) as the NOAA Pandemic Coordinator. NOAA's Emergency Relocation Group members and the NOAA Incident Coordination Center staff will form the Headquarters Pandemic Response Team (PRT) to anticipate the impacts and assist with developing strategies to manage the effects of a pandemic outbreak on NOAA. Each Line and Staff Office will establish and designate a Pandemic Coordinator and identify and designate a LO/SO-level Pandemic Response Team to support their Pandemic Coordinator.

## **2. Sustaining Essential Operations**

Sustaining essential operations will be performed until normal business activity can be reconstituted. It may be necessary to sustain essential operations for a period longer than 30 days. The principal focus in making this determination will be the minimization of the effects of a pandemic on staff and operations. NOAA Headquarters will emphasize and implement procedures such as social distancing techniques, infection control and personal hygiene, cross-training, and telework to sustain essential operations.

## **3. Response Phases**

NOAA Headquarters and Line and Staff Offices will utilize the DOC PANCON levels to supplement the Federal Government Response Stages in order to achieve a higher state of readiness. At each Federal Government response stage, the Department of Commerce has corresponding condition levels precipitating specific preparation activities. Details on these activities can be found in Appendix 2.

## **4. Reporting**

Reporting on absenteeism, status of operations and preparation activities during response stages will be bottom-up: Supervisors will report through management channels to their designated Line or Staff Office-identified Pandemic Coordinator and/or Homeland Security Senior Management Team (HS SMT) representative for reporting to the NOAA Incident Coordination Center (ICC) consistent with NOAA Administrative Order 210-100, *All Hazards Incident Management*.

## **B. ESSENTIAL FUNCTIONS**

According to the Implementation Plan for the National Strategy for Pandemic Influenza, during a pandemic or any other emergency, essential functions must be continued to facilitate emergency management and overall national recovery. Given the expected duration and potential multiple waves of a pandemic, NOAA Line and Staff Offices must review their essential functions and services to take into account the need to perform essential functions beyond the traditional 30-day COOP requirement.

### **1. Essential Functions**

NOAA must ensure that it can continue its essential functions and services needed to sustain agency mission and operations for several months. For pandemic planning purposes, essential services and functions are likely to be broader than the traditional COOP essential functions.

NOAA is responsible for two Primary Mission Essential Functions (PMEFs) that must be performed to support or implement National Essential Functions (NEFs) before, during,

and in the immediate aftermath of an emergency. PMEFs must be uninterrupted or resumed within 12 hours after an event and maintained for up to 30 days or until normal operations can be resumed. The NOAA PMEFs are as follows:

**PMEF DOC-2:** Collect and provide the Nation with critical intelligence data, imagery, and other essential information for predictive environmental and atmospheric modeling systems and space-based distress alert systems by operating NOAA-controlled satellites, communications equipment, and associated systems.

**PMEF DOC-3:** Provide the Nation with environmental forecasts, warnings, data, and expertise critical to public safety, disaster preparedness, all-hazards response and recovery, the national transportation system, safe navigation, and the protection of the Nation's critical infrastructure and natural resources.

Additional detailed information on the PMEFs and other NOAA Mission Essential Functions, Supporting Activities, Vital Records and Databases, Emergency Relocation Group members, and Mission Critical Systems and Equipment required to perform each of the essential functions can be found in the NOAA COOP Plan and the NOAA Vital Records Server.

In addition, NOAA also has support responsibilities in thirteen (13) Emergency Support Function Annexes (ESF) of the National Response Framework:

- 1) ESF #1 – Transportation
- 2) ESF #2 – Communication
- 3) ESF #3 – Public Works and Engineering Annex
- 4) ESF #4 – Firefighting
- 5) ESF #5 – Emergency Management
- 6) ESF #8 – Public Health and Medical Services Annex
- 7) ESF #9 – Urban Search and Rescue
- 8) ESF #10 – Oil and Hazardous Materials Response
- 9) ESF #11 – Agriculture and Natural Resources
- 10) ESF #12 – Energy
- 11) ESF #13 – Public Safety and Security
- 12) ESF #14 – Long-Term Community Recovery and Mitigation
- 13) ESF #15 – External Affairs

## **2. Identification of Essential Positions and Skills**

NOAA Line and Staff Offices will identify positions, skills, and personnel needed to continue essential functions and services. Line and Staff Offices will also identify back-up personnel, in different geographic locations, by position, and ensure that all personnel needed to perform those essential functions will also receive COOP and specific pandemic influenza training.

## **3. Alternative Work Arrangements**

NOAA will assess which essential functions and services can be conducted through the use of alternative work arrangements (e.g., telework, staggered work hours, flex time, etc.)

## **4. Essential Contract and Support Services and Other Interdependencies**

NOAA will identify the contractors, suppliers, shippers, resources and other businesses that are mission critical and essential to NOAA operations. NOAA's Acquisition and

Grants Office will develop relationships with more than one supplier should a primary contractor be unable to provide the required service.

### **C. DELEGATIONS OF AUTHORITY**

At the height of a pandemic wave, absenteeism may reach a peak of 40 percent. As such, delegations of authority can be critical in some organizations.

The NOAA Delegations of Authority can be found in Tab J of the NOAA Headquarters COOP Plan.

#### **1. Three Deep per Responsibility**

NOAA will plan for delegations of authority that are at least three deep per responsibility to take into account the expected rate of absenteeism to help assure continuity of operations over an extended time period.

#### **2. Geographic Dispersion**

NOAA will plan for geographical dispersion of delegations of authority, taking into account the regional nature of an outbreak.

### **D. ORDERS OF SUCCESSION**

The Orders of Succession for NOAA Headquarters can be found in Tab J of the NOAA Headquarters COOP Plan and also in NOAA Administrative Order 210-5.

#### **1. Three Deep per Position**

NOAA will plan for orders of successions that are at least three deep per position to take into account the expected rate of absenteeism.

#### **2. Geographic Dispersion**

Since a pandemic influenza may affect regions of the United States differently in terms of timing, severity, and duration, NOAA, as an Agency with geographically dispersed assets and personnel, should consider dispersing the order of succession.

### **E. ALTERNATE OPERATING FACILITIES**

The traditional use of alternate operating facilities to maintain essential functions and services may not be necessary during a pandemic. Rather, safe work practices, which include contact interventions and transmission interventions, reduce the likelihood of contacts with other people that could lead to disease transmission. Strategies for maintaining essential functions and services will largely rely on social distancing and dispersion of the workforce including telework, preventative health practices, and other efforts to reduce the chance of infection.

A separate incident concurrent to a pandemic outbreak could necessitate the use of an alternate operating facility for the NOAA Headquarters Emergency Relocation Group members. All planning requirements listed in FCD 1 referencing alternate operating facility(ies) or existing field infrastructures should be understood to be necessary only in the event of an incident concurrent with a pandemic in which their use is necessary. If

the Emergency Relocation Group members must be brought together in one location, increased use of Personal Protective Equipment (PPE) and other infection control measures must be implemented.

**1. Essential Function by Remote Location**

NOAA Line and Staff Offices will determine which essential functions and services can be conducted from a remote location (e.g., employees' homes or other geographically dispersed work locations) and those that must be performed at a designated department or agency facility.

**2. Facilities Support**

NOAA Line and Staff Offices will determine through their continuity planning the need for reliable logistical support, services, and infrastructure systems at facilities that remain open (for greater than 30 days), to include alternate operating facilities in the event of an incident concurrent with a pandemic influenza outbreak.

**3. Restriction of Movement**

NOAA Line and Staff Offices will consider the impact of restriction of movement (Federal, State, Local and Tribal) on open/accessible facilities and operating plans.

**F. INTEROPERABLE COMMUNICATIONS**

Workplace risk can be minimized through implementation of systems and technologies that facilitate communication without person-to-person contact.

**1. Telework- Analysis and Development of Capability**

NOAA will analyze its current telework capability and identify its personnel performing essential functions who anticipate a need to telework, along with the IT requirements, tools, and resources necessary to support telework during a pandemic. The use of laptops, high-speed telecommunications links, Personal Digital Assistants (PDAs), flash drives, and other systems that enable employees performing mission essential functions and services to communicate and maintain connectivity with internal organizations, external partners, critical customers, and other key stakeholders will be considered when performing analysis.

Determine how many personnel will need to telework and the type of access needed, e.g. remote connection through web-enabled email system or virtual private network (VPN) to connect a home computer to the network. This action should be coordinated independently within each line and staff office and their servicing Office of the Chief Information Officer. VPN software must be issued and a user account set up for VPN connectivity. It is expected that each line and staff office maintains a fixed number of connections currently available for use by essential employees. Guidance will be provided to NOAA organizations to consider access be granted during a Pandemic response based on a priority use basis for those staff requiring remote access to network systems. Office Directors and managers will set and maintain priority for the users within their organizations future emergency or pandemic situations. NOAA will protect personal privacy information (PII) consistent with applicable laws and Department policies including the Privacy Act.

## 2. Communications Plan

NOAA Line and Staff Offices will develop communication plans and mechanisms to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational hours.

Plans and procedures for communication and external coordination can be found in individual line and staff office COOP plans.

### a. NOAA Internal Procedures and Communications

#### 1. The Office of Workforce Management (WFM) will:

- a) Coordinate with the NOAA Office of Communications to ensure employees located in NOAA facilities are provided necessary human resources information through the use of the:
  - (i) Mass media (i.e., televisions, radio and newspapers) by utilizing customized versions of templates provided in planning documents and from lead pandemic agencies and Commerce-specific documents from OPM web site.
  - (ii) Ensure dissemination of the following human resources information as applicable and relevant to this stage:
    - (i) Current and prompt dissemination of pandemic information.
    - (ii) Contact information assistance from other agencies, e.g., Office of Personnel Management for health care provider assistance and National Finance Center for payroll assistance.
    - (iii) Salary payment information.
    - (iv) Existing pay and leave policies as they relate to the effects of a pandemic.

#### 2. The Office of the Chief Administrative Officer, Safety and Environmental Compliance Office, Safety and Occupational Health Division will:

- a) Monitor pandemic information from the HHS, WHO, OPM, DHS, and DOL, other medical resources, and world news services.
- b) Provide oversight on the Interagency Agreement with Federal Occupational Health (FOH) or other contracting mechanisms to maintain functioning health units.
- c) Coordinate with Health Unit Operators for Pandemic flu vaccination of NOAA personnel if and when vaccines become available. The Health Unit Operators will order an appropriate number of vaccines based on CDC guidance and the average number of personnel within the affected areas.
- d) Provide oversight of the Health Unit Operator to develop a schedule for vaccinations and a vaccination plan. The

vaccination plan will follow the CDC protocol for vaccinating federal agency personnel based on the quantities of known vaccine in response to an identified strain of pandemic.

3. Office of the Chief Administrative Officer (OCAO) in conjunction with the Office of the Chief Information Officer (OCIO) will:
  - a) Utilize the emergency notification system for alerting key members of the Agency, as appropriate.
  - b) Develop plans and procedures to support the actions necessary through email distribution, operations, real property acquisition support, and if necessary vacating NOAA facilities.
  - c) The NOAA Homeland Security Program Office (HSPO) will serve as the focal point for all consolidated reports pertaining to the pandemic for the Agency.
  - d) Develop procedures to support 24-hour operations.
  - e) HVAC systems that are now turned off in evenings would remain on based on area occupancy.
  - f) Janitorial services and air filter changes would follow any HHS guidance. Air exchange and pressure would be adjusted in accordance with any HHS guidance.
  - g) Real property acquisition support would be provided, as needed.
  - h) All general administrative support functions, such as personal property and real property policy would be staffed during the operational period.
  - i) OCAO and OCIO will assist and consult with the line and staff offices on any questions regarding the OCAO/OCIO subject areas, however, each organization should have their own plan for continuation of such services and evacuation plans at their individual locations.
4. Office of the Chief Financial Officer (OCFO) will:
  - a) Develop plans and procedures to support the actions necessary for travel management.
  - b) Continue to process passports, as necessary, during the operational period. Any travel reservations, if approved, would be serviced through the Department's travel management service provider.
5. NOAA Headquarters and operating units will:
  - a) Take action based upon guidance and policy issued by HHS and DOL for the protection of employee health and safety, including:

- i. Follow HHS recommendations for personal protective equipment (e.g., surgical/procedure masks, gloves) for essential employees who must report to work.
    - ii. Stockpile and disseminate the personal protective equipment recommended by HHS
  - b) Follow infection control recommendations issued by HHS.
  - c) Use medical resources associated with existing occupational health units and employee assistance programs (EAP) including:
    - i. Implement agreements to staff health unit offices during a pandemic.
    - ii. Identify additional employee assistance resources.
    - iii. Maintain contact with WFM for HHS updates regarding availability and distribution of anti-viral agents and pre-pandemic and pandemic vaccine to ensure designated employees receive them.
  - d) Maintain employee phone trees.
- b. Communicating with External Stakeholders
  - 1. NOAA's plans and procedures for Communication and External Coordination can be found in individual line and staff office COOP plans by function.

## **G. VITAL RECORDS AND DATABASES**

### **1. Identification, Protection and Availability**

NOAA will identify, protect, and ensure the ready availability of electronic and hardcopy documents, references, records, and information systems needed to support essential functions for up to several months.

### **2. Access from Remote Locations**

NOAA will determine whether systems, databases, and files can be accessed electronically from a remote location (e.g., an employee's home or alternate workplaces) and establish reliable access and security protocols for them.

### **3. Periodic Maintenance**

NOAA will identify and plan for the maintenance of those vital systems and databases that require periodic maintenance or other direct physical intervention by employees.

## **H. HUMAN CAPITAL**

Although pandemic influenza will not directly affect the physical infrastructure of an organization, a pandemic will ultimately threaten all operations by its impact on an

organization's human resources. The health threat to personnel is the primary threat to maintaining essential missions and services during a pandemic. To assist agencies in making sure they are able to fulfill their missions, while at the same time, preparing and protecting the Federal workforce should a pandemic influenza outbreak occur, the Office of Personnel Management (OPM) has updated and developed policies on leave, pay, hiring, alternative work arrangements, and other critical human capital issues in relation to pandemic influenza. This information can be found in "Human Capital Planning for Pandemic Influenza" at <http://www.opm.gov/pandemic/index.asp>.

NOAA will review this information and develop, update, exercise, and be able to implement comprehensive Human Capital plans to protect and support its workforce.

Information on NOAA's planning preparedness can be found in Chapter 16 of the NOAA Headquarters COOP Plan.

## **1. Telework**

During an Influenza Pandemic it may be necessary to allow employees to work from other locations than their regular workplace. The work may be performed at another Federal Government location, a GSA Telework Center, or at the employee's home. The use of telework may slow the spread of disease by keeping face-to-face contact to a minimum (often referred to as "social distancing") while maintaining operations as close to normal as possible.

A written telework agreement and a safety check list of the alternative office must be completed prior to an employee working away from the traditional office. In conjunction with the signed telework agreement, for individuals identified to perform essential functions during a pandemic, the supervisor will have a description of each employee's responsibilities along with the infrastructure and technological support that will be provided. NOAA's policy is located at: <http://www.wfm.noaa.gov/pdfs/Telework-Policy-no-forms.pdf>.

OPM regulations allow an agency to direct any employee to work from another location for the duration of the emergency and make a temporary exception to the requirement that an employee must report into the work site at least once a week, on a regular and recurring basis. This exception allows the employee to continue to telework and receive his or her locality rate for the regular worksite.

## **Manager Pandemic Responsibilities**

All managers should become familiar with the Office of Personnel Management's (OPM) Pandemic Influenza Information website ([www.opm.gov](http://www.opm.gov)). This site provides valuable information and guidance to fully utilize various strategies to achieve agency mission and accomplish performance goals, such as the use of alternative work arrangements, telework, hiring flexibilities and leave flexibilities. Managers should also refer employees to the OPM Interim Regulations as it offers hypothetical questions posed and answered based on current rules and regulations and will assist both manager and employees prepare for potential pandemic situations.

- Implement telework to the greatest extent possible in the workgroup so systems are in place to support successful remote work in an emergency.
- Communicate expectations to all employees regarding their roles and responsibilities in relation to remote work in the event of a pandemic health crisis.
- Establish communication processes to notify employees of activation of this plan.

- Integrate pandemic health crisis response expectations into telework agreements.
- With the employee, assess requirements for working at home (supplies and equipment needed for an extended telework period).
- Determine how all employees who may telework will communicate with one another and with management to accomplish work.
- Identify how time and attendance will be maintained.

### **Teleworker Pandemic Responsibilities**

- Maintain current telework agreement specifying pandemic health crisis telework responsibilities, as appropriate.
- Perform all duties assigned by management, even if they are outside usual or customary duties.
- Practice telework regularly to ensure effectiveness.
- Be familiar with agency and workgroup pandemic health crisis plans and individual expectations for telework during a pandemic health crisis.

### **Telework- Test, Training and Exercises**

NOAA will evaluate telework plans, procedures, and capabilities through reviews, testing, post-incident reports, lessons learned, performance evaluations, and exercises. Procedures will be established to ensure that corrective action is taken on any deficiency identified in the evaluation process.

Information on NOAA's Telework Program, Policy, current list of NOAA LO/SO Telework Coordinators, and screen-fillable application form is available at:

<http://www.wfm.noaa.gov/employees/telework.html>

## **2. Employee Assistance Program (EAP)**

The Employee Assistance Program (EAP) offers professional counseling in any situation which has created personal distress. These services will be made available in the event of an incident activating COOP. EAP also helps with day-to-day life management.

Assistance is available 24-hours a day, 7-days a week. More information is available at:

<http://www.wfm.noaa.gov/employees/eap.html>

## **3. Employee and Labor Relations**

During a pandemic health crisis, as at any other time, employees and supervisors are critical to an agency's ability to accomplish its mission. To address unique employee and labor relations issues that may arise, a section on Frequently Asked Questions with answers can be found in Appendix 5. Additional information is available at:

[http://www.wfm.noaa.gov/employee\\_relations/index.html](http://www.wfm.noaa.gov/employee_relations/index.html)

## **I. TEST, TRAINING AND EXERCISES**

Testing, training, and exercising are essential to assessing, demonstrating, and improving the ability of organizations to maintain their essential functions and services.

### **1. Tabletop, Functional, and Full-Scale Exercises**

NOAA will incorporate pandemic exercises (tabletop, functional, or full scale) in its Test, Training and Exercise Program to examine the impacts of pandemic influenza on

essential functions, to familiarize personnel with their responsibilities, and to validate the effectiveness of pandemic influenza COOP planning by senior leadership. The NOAA Test, Training and Exercises Plan (TT&E) can be found at Tab R in the NOAA COOP Plan.

## **2. Annual Awareness Training**

NOAA will include pandemic influenza planning in COOP annual awareness briefings.

## **3. Cross-Training Successors and Back-up Personnel**

NOAA will identify and train personnel, by position, needed to perform essential functions, including backups in different geographic locations (see Tab E - Essential Functions).

The Emergency Relocation Group personnel roster listed in Tab D of the NOAA Headquarters COOP Plan identifies the personnel required to support continuity of operations. Contact numbers for the Emergency Relocation Group are updated quarterly in the *NOAA Quick Reference Document for Continuity of Operations and Incident Coordination*.

## **J. DEVOLUTION OF CONTROL AND DIRECTION**

Pandemic outbreaks will occur at different times, have variable durations, and may vary in the severity; therefore, full or partial devolution of essential functions may be necessary to execute essential functions and services. Devolution planning may need to include rotating operations among regional offices as the pandemic wave moves throughout the United States.

### **1. Devolution and Essential Functions**

NOAA will take into account how it will maintain essential functions if pandemic influenza renders leadership and essential staff incapable or unavailable to execute those functions. Full or partial devolution of essential functions may be necessary to ensure continuation of these essential functions and services.

NOAA Headquarters will ensure that devolution plans and procedures are consistent with the three-deep rule and geographic dispersion (see Section C, Delegations of Authority, and Section D, Orders of Succession).

### **2. Devolution Guidance**

NOAA will develop guidance for those organization elements receiving the devolution of control and direction, including:

- Essential functions and services;
- Rotating operations geographically as applicable;
- Supporting tasks;
- Points of Contacts; and,
- Resources and phone numbers.

NOAA's Devolution Plan can be found in the NOAA COOP Plan, Tab L.

## **K. RECONSTITUTION**

Reconstitution is the ability of an organization to recover from a catastrophic event and consolidate the necessary resources that allow it to return to a fully functional entity of the Federal government. The objective during the recovery and reconstitution phase during a pandemic is to expedite the return of normal services to the nation.

### **1. Replacement of Employees**

NOAA will develop plans for replacement of employees unable to return to work and prioritize hiring efforts, including but not limited to retired federal employees and emergency use of contractor services.

### **2. Facility/Building Habitability**

NOAA will develop plans and procedures, in conjunction with public health authorities, to ensure the facilities/buildings are safe for employees to return to normal operations.

### **3. Programmatic Reconstitution**

The Assistant Administrator for Program Planning and Integration and the Director of the Office of Program Analysis and Evaluation will establish a Reconstitution Team (RT). The RT will compile a listing of the capabilities existing in NOAA after the event and determine which ones are operating at normal capacity or in a degraded capacity and develop plans for identifying and prioritizing essential programs.

## **VII. CONCLUSION**

Maintaining essential functions and services in the event of pandemic influenza requires additional considerations beyond traditional COOP planning as outlined in FCD 1. Unlike other hazards that necessitate the relocation of staff performing essential functions to an organization's alternate operating facility, a pandemic influenza will not directly affect the physical infrastructure of an organization. As such, a traditional "COOP activation" may not be required under a pandemic influenza scenario. However, a pandemic threatens an organization's human resources by removing essential personnel from the workplace for extended periods of time. Accordingly, COOP plans should be modified or supplemented to achieve a pandemic influenza capability. Plans for maintaining essential functions and services in a pandemic influenza must emphasize and implement procedures such as social distancing techniques, infection control and personal hygiene, cross-training, and telework. Protecting the health and safety of employees must be the focus of planning in order to ensure the continuity of essential functions and continuity of government.

**ACTIVATION PHASE CHART – Department of Commerce PANCON Levels**

The Department developed plans and procedures under a PANCON matrix to address Commerce-related activity. The PANCON level is a Department-wide PANCON level. Each PANCON level coincides with the WHO and Federal Government levels.<sup>2</sup> The Director of the Office of Security will provide guidance to the bureaus on implementing the PANCON levels.

<b>PANCON 4: Normal Operations, Maintain Capabilities</b>	
<i>Federal Government Response Stages 0-2</i>	0: Animal outbreak in at-risk country. 1: Suspected human outbreak overseas turning to widespread human outbreak overseas. 2: Confirmed human outbreak overseas turning to widespread human outbreak overseas.
<i>WHO Phases 1-5</i>	1: No new influenza virus subtypes have been detected in humans. An influenza virus subtype that has caused human infection may be present in animals. If present in animals, the risk of human infection or disease is considered to be low. 2: No new influenza virus subtypes have been detected in humans. However, a circulating animal influenza virus subtype poses a substantial risk of human disease. 3: Human infections with a new subtype, but no human-to-human spread, or at most rare instances of spread to a close contact. 4: Small cluster(s) with limited human-to-human transmission but spread is highly localized, suggesting that the virus is not well adapted to humans. 5: Larger cluster(s) but human-to-human spread still localized, suggesting that the virus is becoming increasingly better adapted to humans, but may not yet be fully transmissible (substantial pandemic risk).
<b>PANCON 3: Moderate Threat – Monitor, Increased Awareness Level (Employee Absenteeism between 10-15%)</b>	
<i>Federal Government Response Stage 3</i>	Widespread human outbreaks in multiple locations overseas.
<i>WHO Phase 6</i>	Pandemic phase – increased and sustained transmission in general population.
<b>PANCON 2: High Threat – Preparedness (Employee Absenteeism between 15-25%)</b>	
<i>Federal Government Response Stage 4</i>	First human case in North America, United States.
<i>WHO Phase 6</i>	Pandemic phase – increased and sustained transmission in general population.
<b>PANCON 1: Very High Threat – Response and Containment (Employee Absenteeism between 25-40%)</b>	
<i>Federal Government Response Stage 5</i>	Spread throughout the United States. Recovery and preparation for subsequent waves.
<i>WHO Phase 6</i>	Pandemic phase – increased and sustained transmission in general population.
<b>PANCON R: Reset – This is a recovery phase and the Department will be reset to PANCON 1-3 depending on seriousness of wave and information about future waves.</b>	
<i>Federal Government Response Stage 6</i>	Recovery and preparation for subsequent waves
<i>WHO Phase 6</i>	Pandemic phase – increased and sustained transmission in general population.

<sup>2</sup> The World Health Organization (WHO) defined six phases, before and during a pandemic, that are linked to the characteristics of a new influenza virus and its spread through the population. In the *National Strategy for Pandemic Influenza Implementation Plan*, the Federal Government uses these characterizations to determine the immediate threat a pandemic virus poses to the U.S. population for planning and preparation activities and Department of Homeland Security developed Federal Government Response Stages to provide a framework for these actions.

## Pandemic Influenza COOP Elements Checklists for DOC PANCON Levels

**PLEASE NOTE: While the steps below outline the recommended course of action, all emergency events are different and modifications may be required. Furthermore, even though many of these actions seem to overlap generic COOP activities, the intention here is to focus on pandemic-specific actions.**

### DOC PANCON 4: Pandemic Influenza COOP Checklist

PANCON Level	4
Federal Government Response Stage	0-2
WHO Pandemic Phase	1-5

PANCON 4: Normal operations; Maintain capabilities

Federal Response Stage 0-2: 0) New domestic outbreak in at-risk country; 1) Suspected human outbreak overseas; 2) Confirmed human outbreak overseas

WHO Phases 1-5: 1) No new influenza virus subtypes have been detected in humans. An influenza virus subtype that has caused human infection may be present in animals. If present in animals, the risk of human infection or disease is considered to be low. 2) No new influenza virus subtypes have been detected in humans. However, a circulating animal influenza virus subtype poses a substantial risk of human disease. 3) Human infection(s) with a new subtype, but no human-to-human spread, or at most rare instances of spread to a close contact; 4) Small cluster(s) with limited human-to-human transmission but spread is highly localized, suggesting that the virus is not well adapted to humans; 5) Larger cluster(s) but human-to-human spread still localized, suggesting that the virus is becoming increasingly better adapted to humans, but may not yet be fully transmissible (substantial pandemic risk).

DOC PANCON 4		
Function	√	Actions to be Taken
<b>Operations</b>		
<b>MUST DO</b>		
All Line and Staff Offices		In anticipation of a migration of the outbreak to U.S. citizens, ensure essential functions and employees have been identified
All Line and Staff Offices		Determine the best methods for performing those functions under pandemic conditions, including the use of emergency personnel actions.
COOP Program Managers		Modify existing Continuity of Operations Plans to incorporate these best methods.
All Line and Staff Offices		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up
All Line and Staff Offices		Ensure readiness of primary and alternate operating facilities, telework and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate activation/relocation of the Pandemic Response Team.
All Line and Staff Offices		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment
HSPO and All Line and Staff Offices		Test, train, and exercise capability to maintain essential functions and services as specified under FCD-1.
HSPO		Monitor pandemic activity and distribute pandemic information and updates as necessary.

All Line and Staff Offices		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location
All Line and Staff Office supervisors		Develop an office draw down plan for protection of critical resources <sup>3</sup>
All Line and Staff Office supervisors		Restrict official international travel as recommended by CDC, HHS, DHS or DOC.
<b>Staffing</b>		
		<b>MUST DO</b>
All Line and Staff Offices		Semi-annually, review and verify appropriate telework agreements are in place
All Line and Staff Offices		Maintain normal delegations and devolution of authority to ensure performance of essential functions in no-notice event.
WFMO		Develop an employee-labor relations plan and conduct post-implementation bargaining that may be necessary as the result of management actions
NOS and NMFS Health and Safety Officers		Implement workforce guidelines (contact and transmission interventions) to include Personal Protective Equipment (PPE) to prevent or minimize workplace exposure to pandemic influenza or contagious disease for those employees in high-risk occupations that come in contact with potentially diseased animals.
All Line and Staff Offices		Test telework capability for people, processes, and technology
All CIOs		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
NOAA Management		Review and educate on infection prevention and control procedures and determine the supplies and materials that should be on hand. Order needed supplies to increase the stockpile of hygiene items such as soap, paper towels and cleaning supplies from the normal level to a three month supply
Line and Staff Office Health and Safety Officers		Following protocols established by DOC, coordinate disease control actions with local health authorities and other involved agencies.
		<b>TO CONSIDER</b>
All Line and Staff Offices		Review devolution procedures
WFMO		Provide leave policy and guidance package/guidance to managers and supervisors
All Line and Staff Offices		Develop a plan to provide vaccinations or anti-viral drugs for emergency employees who perform high-risk activities <sup>4</sup> .
<b>Communications</b>		
		<b>MUST DO</b>
All COOP and ICC Teams at HQ and LO/SO levels		Review and test interoperable communications systems monthly (e.g., secure and non-secure phone, video conferencing, fax, and messaging capabilities, etc.) to validate equipment and ensure both internal and external interoperability.
All Line and Staff Offices		Review and revise contact rosters on a monthly basis
HSPO		Update and distribute Quick Reference Document for COOP and Incident Coordination on a quarterly basis
WFMO lead with support by HSPO,		Develop a NOAA Employee Pandemic Flu Information Handout for distribution and posting on websites.

<sup>3</sup> A draw down plan is a strategy that establishes a relationship between the number of critical resources not available (either because of external assignment or illness) and the level of operations.

<sup>4</sup> Priority and high risk individuals and activities are defined and discussed in the HHS Pandemic Influenza Plan, Appendix D: NVAC/ACIP Recommendations for Prioritization of Pandemic Influenza Vaccine and NVAC Recommendations on Pandemic Antiviral Drug Use.

OCAO/SECO, AGO		
WFMO		Provide infection prevention and post infection information to employees.
All CIOs		Ensure IT infrastructure is sufficient to support additional requirements during a pandemic event.
		<b>TO CONSIDER</b>
HSPO/CIO		Update NOAA website with latest pandemic information.
All Line and Staff Offices		Review critical partner contact information and verify accuracy.

**DOC PANCON 3: Pandemic Influenza COOP Checklist**

PANCON Level	3
Federal Government Response Stage	3
WHO Pandemic Phase	6

PANCON 3: Moderate—Monitor, Increased Awareness Level (employee absenteeism between 10-15%)

Federal Response Stage 3: Widespread Human Outbreaks in Multiple Locations overseas

WHO Phases 6: Pandemic phase—increased and sustained transmission in general population

DOC PANCON 3		
Function	√	Actions to be Taken
<b>Operations</b>		
<b>MUST DO</b>		
All Line and Staff Offices		In anticipation of a migration of the outbreak to U.S. citizens, ensure essential functions and employees have been identified
All Line and Staff Offices		Review and update vital records data NLT 48 hours after notification of level change
AGO, LO CFOs		Identify and review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up
NOAA and LO COOP Program Managers		Ensure readiness of primary and alternate operating facilities, telework locations, and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate relocation of the Pandemic Response Team or the NOAA Emergency Relocation Group
All Line and Staff Offices		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment
HSPO		Test, train, and exercise Headquarters capability to maintain essential functions and services
All local Line and Staff Offices		Monitor NOAA absenteeism beyond the normal absentee rate of 15% and be prepared to report on it, if necessary
All local Line and Staff Offices		Connect with federal level plan for vaccinations for emergency employees and workforce
OCAO/SECO		Contact local public health authorities and coordinate the initiation of local plans for disease surveillance and control.
CIOs, teleworkers, Managers & Supervisors		Rush to completion any remaining preliminary actions needed to allow those alternative work situations to be quickly implemented.
All Line and Staff Offices		Review and revise any existing draw-down plans to meet the current situation so that all understand the ramifications of significant resource requests.
OCFO		Review resource availability and ordering procedures and respond to requests for availability and status information as needed
All Line and Staff Offices		Managers/Supervisors track critical deadlines and federal mandated reporting requirements, etc.
All Line and Staff Offices		Review and update pandemic preventive procedures.
All Line and Staff Offices		Broadcast email on agency plans and employee responsibilities.
<b>TO CONSIDER</b>		
WFMO lead with local Line and Staff Offices supporting		Issue health guidance to the general workforce
All Line and Staff Offices		Cancel all meetings. Utilize teleconferencing, video-conferencing, etc.

Staffing		
MUST DO		
All Line and Staff Offices, COOP Program Managers		Review and verify that appropriate telework agreements are in place
WFMO		Provide leave policy and guidance packages to managers and supervisors
All Line and Staff Offices, COOP Program Managers		Maintain normal delegations and devolution of authority to ensure performance of essential functions
WFMO		Initiate bargaining that may be necessary as the result of management actions
All Line and Staff Offices		Implement workforce guidelines (contact and transmission interventions) to include Personal Protective Equipment (PPE) to prevent or minimize workplace exposure to pandemic influenza or contagious disease for those employees in high-risk occupations that come in contact with potentially diseased animals.
All Line and Staff Offices		Test telework capability for people, processes, and technology
CIOs		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
All Line and Staff Offices		Implement infection prevention and control procedures in general workforce prescribed by SECO
OCFO/NOAA Travel Office		Restrict official international travel as recommended by CDC, HHS, DHS or DOC.
All Line and Staff Offices and COOP Program Managers		Review and update Delegations of Authority, Orders of Succession, and Devolution of Authority with respect to three-deep rule and geographic dispersion
TO CONSIDER		
WFMO lead with OCAO/SECO in support		<p>In anticipation of a mutation from an animal to a human outbreak, review and continuously update safety and health guidance on:</p> <ul style="list-style-type: none"> <li>▪ Employees who become ill or are suspected of becoming ill while at their normal work site;</li> <li>▪ Returning previously ill, non-infectious, employees to work;</li> <li>▪ Social distancing;</li> <li>▪ The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., sneeze and cough etiquette, hand hygiene, and social distancing strategies);</li> <li>▪ The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues);</li> <li>▪ The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment;</li> <li>▪ Vaccine and anti-viral prioritization information and distribution; and</li> <li>▪ Psychological and social needs of employees.</li> </ul>
Communications		
MUST DO		
All Line and Staff Offices and COOP and ICC Staff		Review and test interoperable communications systems monthly (e.g., secure and non-secure phone, video conferencing, fax, and messaging capabilities, etc.) to validate equipment and ensure both internal and external interoperability.
CIOs		Maintenance of VPN and connectivity with designated teleworkers is ongoing
WFMO lead with support by HSPO, OCAO/SECO, AGO		Review the previously distributed NOAA Employee Pandemic Flu Information Handout and revise if needed.
WFMO lead with		Re- distribute the revised NOAA Employee Pandemic Flu Information

support by HSPO, OCAO/SECO, AGO		Handout .
OCAO, Line and Staff Office Building Managers		Review, revise, and test the local Communications Plan (i.e., controlled access).
		<b>TO CONSIDER</b>
HSPO and OCAO/SECO		Begin actively monitoring news media and federal websites to determine if the situation warrants moving to a higher level response or take other appropriate actions.
WFMO		Review the list of actions that could assist employees and families in returning to normal operations.
WFMO, Managers and Supervisors		Review the list of actions that could be taken to replace displaced personnel.

**DOC PANCON 2: Pandemic Influenza COOP Checklist**

PANCON Level	2
Federal Government Response Stage	4
WHO Pandemic Phase	6

PANCON 2: High—Absenteeism 15-25%

Federal Response Stage 4: First Human Case in North America

WHO Phases 6: Pandemic phase—increased and sustained transmission in general population

DOC PANCON 2		
Function	√	Actions to be Taken
<b>Operations</b>		
<b>MUST DO</b>		
All Line and Staff Offices		In anticipation of a widespread outbreak to U.S. citizens, ensure employees supporting essential functions are prepared to continue performance
AGO, LO CFOs		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up
NOAA and LO COOP Program Managers		Ensure readiness of primary and alternate operating facilities, telework locations, and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate relocation of the Pandemic Response Team or the NOAA Emergency Relocation Group
All Line and Staff Offices		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment
All Line and Staff Offices		Employee absenteeism tracked through NOAA's Incident Coordination Center/Pandemic Response Team
HSPO		Submit absenteeism reports to DOC Emergency Operations Center on a daily basis
HSPO		Test, train, and exercise Headquarters capability to maintain essential functions and services
All Line and Staff Offices		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location as required
All Line and Staff Offices		Connect with federal level plan for vaccinations for emergency employees and workforce
All Line and Staff Offices		Resolve any remaining vaccination supply issues.
All Line and Staff Offices		Contact local and regional public health authorities and coordinate the implementation of local and regional plans for disease surveillance and control, as needed by local or regional situations.
Managers and Supervisors		Respond to employees exhibiting influenza symptoms at work, in accordance with federal guidelines.
COOP Program Managers and LO/SO COOP POCs		Prepare to implement NOAA's and/or LO/SO Continuity of Operations Plan(s) as needed to meet the local or regional situation.
COOP Program Managers and LO/SO COOP POCs		Continue to analyze the situation, attempt to identify potential changes and plan for contingencies.
All Line and Staff Offices		Project your organization's capacity to maintain essential functions and notify the next higher level of management and the ICC of any inability or potential operational failure.
All Line and Staff Offices		Managers/Supervisors track critical deadlines and federal mandated reporting requirements, etc.
All Line and Staff		Implement draw-down plans as required by the situation, by requests for

Offices		critical resources, or by direction from higher authority.
HSPO and Line and Staff Offices		Designated devolution staff briefed via teleconference on roles/responsibilities NLT 12 hours after notification of level change
		<b>TO CONSIDER</b>
WFMO lead and all local Line and Staff Offices in support		Issue and review health guidelines for general workforce.
All Line and Staff Offices		Cancel all meetings. Utilize teleconferencing, video-conferencing, etc.
<b>Staffing</b>		
		<b>MUST DO</b>
All Line and Staff Offices		Enforce social distancing requirements for employees returning from overseas and any domestically impacted region
Managers and Supervisors		Review and verify that appropriate telework agreements are in place
Managers and Supervisors		Implement telework at managers/supervisors discretion
All Emergency Relocation Group		All Emergency Relocation Group personnel telework, as appropriate
All Line and Staff Offices		Institute shift work
WFMO		Provide leave policy and guidance package/guidance to managers and supervisors
WFMO		Review the list of applicable actions that could be taken to backfill for vacant positions
WFMO		Process emergency personnel actions as needed by the local or regional situation.
All Line and Staff Offices, COOP Program Managers		Maintain normal delegations and devolution of authority to ensure performance of essential functions
WFMO		Continue bargaining as necessary as the result of management actions
All Line and Staff Offices		Review the list of displaced/affected employees and their specific circumstances.
All Line and Staff Offices		Take actions to replace employees based on the specific circumstances.
WFMO		Provide leave policy and guidance to managers and supervisors
All Line and Staff Offices		Implement workforce guidelines (contact and transmission interventions) to include Personal Protective Equipment (PPE) to prevent or minimize workplace exposure to pandemic influenza or contagious disease for those employees in high-risk occupations that come in contact with potentially diseased animals.
All Line and Staff Offices		Test telework capability for people, processes, and technology
CIOs		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
All Line and Staff Offices		Continue using infection prevention and control procedures as described by SECO.
OCFO NOAA Travel Office		Restrict official international and domestic travel as recommended by CDC, HHS, DHS or DOC.
All Line and Staff Offices, HSPO, COOP Program Managers, ICC		Contact mission-critical employees and confirm their status.
All Line and Staff Offices		Implement the Continuity of Operations Plans, scaled to meet the situation.
All Line and Staff Offices, HSPO, ICC		Begin planning for COOP/ICC team and critical resource replacement rotations and implement as needed.
		<b>TO CONSIDER</b>
All Line and Staff Offices, COOP Program Managers		Review devolution procedures

<p>WFMO lead with OCAO/SECO in support</p>		<p>In anticipation of a widespread human outbreak, review and continuously update safety and health guidance on, and plan to implement:</p> <ul style="list-style-type: none"> <li>▪ Employees who become ill or are suspected of becoming ill while at their normal work site;</li> <li>▪ Returning previously ill, non-infectious, employees to work;</li> <li>▪ Social distancing;</li> <li>▪ The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related guidance (i.e., sneeze and cough etiquette, hand hygiene, and social distancing strategies);</li> <li>▪ The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues);</li> <li>▪ The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment;</li> <li>▪ Vaccine and anti-viral prioritization information and distribution; and</li> <li>▪ Psychological and social needs of employees.</li> </ul>
<b>Communications</b>		
		<b>MUST DO</b>
<p>All Line and Staff Offices and COOP and ICC Staff</p>		<p>Review and test interoperable communications systems monthly (e.g., secure and non-secure phone, video conferencing, fax, and messaging capabilities, etc.) to validate equipment and ensure both internal and external interoperability.</p>
<p>WFMO lead with support by HSPO, OCAO/SECO, AGO</p>		<p>Re-distribute the revised NOAA Employee Pandemic Information Handout.</p>
<p>All Line and Staff Offices</p>		<p>Answer specific questions employees may have about infection prevention and distribute to all employees and contractors.</p>
<p>WFMO lead with support by HSPO, OCAO/SECO</p>		<p>Keep staff informed of local actions for disease surveillance and control.</p>
<p>HSPO/CIO</p>		<p>Update NOAA website with latest pandemic information.</p>

**DOC PANCON 1: Pandemic Influenza COOP Checklist**

PANCON Level	1
Federal Government Response Stage	5
WHO Pandemic Phase	6

PANCON 1: Very High—Absenteeism between 25-40%  
 Federal Response Stage 5: Spread through-out United States  
 WHO Phases 6: Pandemic phase—increased and sustained transmission in general population

DOC PANCON 1		
Function	√	Actions to be Taken
<b>Operations</b>		
<b>MUST DO</b>		
All Line and Staff Offices		Employee absenteeism tracked through NOAA's Incident Coordination Center/Pandemic Response Team
HSPO		Submit absenteeism reports to DOC Emergency Operations Center on a daily basis
WFMO, Managers and Supervisors		Follow OPM's direction regarding leave policies, general workforce placed on administrative leave/excused absence
All Line and Staff Offices		Monitor critical contracts to maintain essential operations at all levels.
All Line and Staff Offices		Cancel all official travel for non-essential employees and provide extended travel orders to travelers quarantined in TDY areas
All staff in affected areas		Utilize teleconferencing, video-conferencing, etc.
All Line and Staff Offices		Managers/Supervisors track critical deadlines and federal mandated reporting requirements, etc.
All Line and Staff Offices		Designated devolution staff briefed via teleconference on roles/responsibilities NLT 12 hours after notification of level change
<b>TO CONSIDER</b>		
WFMO		Broadcast email outlining return to work policies
All Line and Staff Offices		All face-to-face meetings canceled. Utilize teleconferencing, video-teleconferencing, etc.
<b>Staffing</b>		
<b>MUST DO</b>		
All Emergency Relocation Group		All Emergency Relocation Group personnel will telework as appropriate
All Line and Staff Offices		Shift work in place
WFMO, supervisors		Implement the bargaining plans.
All Line and Staff Offices		Implement workforce guidelines (contact and transmission interventions) for general workforce to include Personal Protective Equipment (PPE) to prevent or minimize workplace exposure to pandemic influenza or contagious disease.
All Line and Staff Offices		Telework procedures in place
All Line and Staff Offices		General workforce—Direct telework at supervisor/manager discretion
All Line and Staff Offices, HSPO, ICC, and COOP Program Managers		Implement the Continuity of Operations Plans, scaled to meet the situation.
WFMO lead with OCAO/SECO in support		Review and continuously update, and plan on implementing, safety and health guidance on: <ul style="list-style-type: none"> <li>▪ Employees who become ill or are suspected of becoming ill while</li> </ul>

		<ul style="list-style-type: none"> <li>at their normal work site;</li> <li>▪ Returning previously ill, non-infectious, employees to work;</li> <li>▪ Social distancing;</li> <li>▪ The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related guidance (i.e., sneeze and cough etiquette, hand hygiene, and social distancing strategies);</li> <li>▪ The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues);</li> <li>▪ The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment;</li> <li>▪ Vaccine and anti-viral prioritization information and distribution; and</li> <li>▪ Psychological and social needs of employees.</li> </ul>
<b>TO CONSIDER</b>		
All Line and Staff Offices, COOP Program Managers		Review and update Delegations of Authority, Orders of Succession, and Devolution of Authority, with respect to three-deep rule and geographic dispersion
<b>Communications</b>		
<b>MUST DO</b>		
CIOs		Maintenance of VPN and connectivity with designated teleworkers is on-going
All Line and Staff Offices		Communication checks with identified critical partners
COOP Program Managers, alternate and devolution site managers		Audit alternate/devolution facility capabilities and run diagnostic check of systems/servers and ensure vital records can be retrieved by designated teleworkers
HSPO/CIO		Update NOAA website with latest pandemic information.

**DOC PANCON R: Pandemic Influenza COOP Checklist**

PANCON Level	R
Federal Government Response Stage	6
WHO Pandemic Phase	6

PANCON R: Reset—this is a recovery phase and the Department will be reset to PANCON 1-3 depending on seriousness of wave and information about future waves  
 Federal Response Stage 6: Recovery and Preparation for Subsequent Waves  
 WHO Phases 6: Pandemic phase—increased and sustained transmission in general population

DOC PANCON R		
Function	√	Actions to be Taken
<b>Operations</b>		
<b>MUST DO</b>		
HSPO, LO COOP Program Managers		Review and communicate Headquarters essential functions and services that will continue; resume some non-essential functions (based on priorities) and continue to suspend other non-essential functions
AGO, LO CFOs		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, continue standing agreements and suspend other agreements if no longer needed
All Line and Staff Offices		If COOP is implemented, scale back as needed
All Line and Staff Offices		Ensure readiness of primary and alternate operating facilities, telework locations, and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate relocation of the Pandemic Response Team or the NOAA Emergency Relocation Group (replenish stock/re-stock alternate sites if necessary)
All Line and Staff Offices		Evaluate the situation and implement a plan to return teleworkers to primary facilities. Continue to maintain readiness of staff telework arrangements to include readiness of required communications equipment
HSPO		Review Headquarters plans and procedures for pandemic influenza for lessons learned and update in preparation for next wave
HSPO		Test, train, and exercise Headquarters capability to maintain essential functions and services
All Line and Staff Offices		Review essential positions, skills, and personnel and continue to train, identify, and as necessary, augment with back-up personnel
NOAA and LO COOP Program Managers, ICC Staff, HSPO		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location
<b>TO CONSIDER</b>		
WFMO lead with OCAO/SECO in support		Review workforce guidelines for the general workforce and provide guidance to Line and Staff Offices.
<b>Staffing</b>		
<b>MUST DO</b>		
All Line and Staff Offices		Semi-annual review/verification that appropriate telework agreements are in place
All Line and Staff Offices, COOP Program Managers		Maintain normal Delegations of Authority and Devolution of Authority to ensure performance of essential functions and review and update Orders of Succession with respect to three-deep rule and geographic dispersion
WFMO and supervisors		Maintain the bargaining plans and suspend those that are no longer needed
OCAO/SECO lead and LO Health and Safety Officers		Continue to implement workforce guidelines (contact and transmission interventions) to include Personal Protective Equipment (PPE) to prevent or minimize workplace exposure to pandemic influenza or contagious

		disease.
CIOs and teleworkers		Review lessons learned and continue to test telework capability for people, processes, and technology
Line and Staff Offices and ICC		Collect and report the status of NOAA employees for the purpose of monitoring workforce levels and reporting such information to DOC
<b>TO CONSIDER</b>		
WFMO		Provide any revised leave policy and guidance to managers and supervisors
WFMO lead with OCAO/SECO in support		<p>Review and continuously update safety and health guidance on:</p> <ul style="list-style-type: none"> <li>▪ Employees who become ill or are suspected of becoming ill while at their normal work site;</li> <li>▪ Returning previously ill, non-infectious, employees to work;</li> <li>▪ Social distancing;</li> <li>▪ The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related guidance (i.e., sneeze and cough etiquette, hand hygiene, and social distancing strategies);</li> <li>▪ The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues);</li> <li>▪ The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment;</li> <li>▪ Vaccine and anti-viral prioritization information and distribution; and</li> <li>▪ Psychological and social needs of employees.</li> </ul>
<b>Communications</b>		
<b>MUST DO</b>		
COOP and ICC Members		Review lessons learned and test communications mechanisms (i.e., laptops, high-speed telecommunications links, Personal Digital Assistants (PDAs), GETS cards) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational hours.
HSPO/CIO		Update NOAA website with latest pandemic information.

## Protecting the Health of Employees

The protection of the NOAA workforce during an influenza pandemic is paramount to preserving the NOAA mission and will require dynamic awareness, prevention, and preparedness efforts across all Line and Staff Offices. This Appendix provides information on various strategies and interventions necessary to protect the health of NOAA employees during a pandemic influenza.

### 1. Recommendations for General Employee Workforce:

- a. Personal Protective Equipment: CDC recently issued (May 3, 2007) guidance for use of facemasks and respirators in non-occupational community settings during an influenza pandemic. Although they emphasize that during a pandemic, people should avoid close contact and crowded conditions instead of relying on the use of facemasks or respirators, they recognize this might not always be possible. Therefore, their interim recommendations state the wearing of facemasks and respirators should be considered for use by persons entering crowded settings and/or when sick with the flu or might have close contact (within about 6 feet) with people who are known or thought to be sick with pandemic flu.
- b. Hand washing: Transmission of influenza can occur by indirect contact from hands and articles freshly soiled with discharges of the nose and throat of an acutely ill individual. The influenza virus is readily inactivated by soap and water. Waterless alcohol-based hand sanitizers can be used as an alternative to hand washing and are especially useful when access to sinks or warm running water is limited. Place alcohol-based hand sanitizers at the entrance of facilities.
  - 1) Hand hygiene is an important step in preventing the spread of infectious diseases, including influenza. Post signs in restrooms during phase 5 of pandemic alert to increase awareness and emphasize hand washing. Hand hygiene can be performed with soap and warm water or by using waterless alcohol-based hand sanitizers. Wash hands for a minimum of 15-20 seconds.
  - 2) Basic hygiene measures should be reinforced and people should be encouraged to practice them to minimize potential influenza transmission. Use disposable single use tissues for wiping noses; Covering nose and mouth when sneezing and coughing; Hand washing after coughing, sneezing or using tissues; and emphasize importance of keeping hands away from the mucous membranes of the eyes and nose.
- c. Cleaning and Disinfecting:
  - 1) HVAC system should be cleaned and maintained in optimal operating condition.
  - 2) Telephone handsets and cradles, computer keyboards and mice, and work surfaces should be wiped down daily using an alcohol-based waterless hand sanitizer.
  - 3) Disinfectant solutions should be applied to all common areas, counters, railing, washbasins, toilets, urinals daily.
  - 4) Wear non-latex disposable gloves while disinfecting surfaces;
  - 5) Clean contaminated areas of dirt, dust, and debris, and THEN, disinfect;
  - 6) Discard disposable cloth wipes after each use;
  - 7) After removing gloves, thoroughly wash hands with soap and water.
- d. Social Distancing: Social distancing refers to strategies to reduce the frequency of contact between people. Generally it refers to mass gatherings but the same strategies can be made in the workplace setting.
  - 1) Working from home will be imperative during an outbreak. Essential personnel should avoid working in groups when possible during outbreak to avoid cross infection.
  - 2) Where feasible, shift changes should be managed to allow a time interval between shifts so that the worksite can be ventilated and cleaned.

- 3) Social distancing strategies include:
  - a. Avoid meeting people face to face - use telephone, video conferencing and the internet to conduct business as much as possible- even when participants are in the same building.
  - b. Avoid any unnecessary travel and cancel or postpone non-essential meetings/gatherings/ workshops/ training sessions.
  - c. If possible, arrange for employees to work from home or work flex hours to avoid crowding at the workplace.
  - d. Avoid public transit or public crowds.
  - e. Encourage employees to avoid recreational or other activities where they might come into contact with infectious people.
  - f. Encourage all employees to be immunized with the up-to-date seasonal influenza vaccine. This may reduce secondary infections during an outbreak.
  - g. Stay home when you are sick.
  - h. Follow safe practices at home or in public when you are sick.

## **2. Precautions for mission-critical personnel who must report to work during an acute phase of an outbreak when others are working from home.**

- a. In addition to the precautions in the general employee workforce such as ensuring good personal hygiene, social distancing, and frequent hand washing, the following is recommended:
  - 1) Develop prioritization and distribution plan for administering antiviral medication or vaccine if sufficient supplies are available. Refer to CDC for guidance when available on this issue.
  - 2) As mentioned in 1a above, the wearing of respiratory protective equipment may be necessary to minimize or avoid the exposure to pandemic flu.

## **3. Antiviral Medications and Vaccinations**

- a. Antiviral medications can be used for treatment or prophylaxis of people exposed to influenza.
- b. Health and Human Services (HHS) is the lead agency responsible for:
  - 1) Establishment and maintenance of antiviral stockpiles adequate to treat 75 million persons, divided between Federal and State stockpiles; and
  - 2) Establishment and maintenance of a Federal stockpile of 6 million treatment courses reserved for containment efforts.
- c. Because of the legal, regulatory, ethical, logistical, and economic issues encountered in ordering, storing, securing and dispensing prescription medications, NOAA employees will need to obtain any antiviral medications directly from their health care providers.
- d. The U.S. Government is working to expand domestic influenza vaccine production capacity to be able to produce pandemic influenza vaccines for the entire population within six months of a pandemic declaration. However, at the beginning of a pandemic, the scarcity of pre-pandemic and pandemic influenza vaccine will require that the limited supply be allocated or prioritized for distribution and administration.
- e. A tiered allocation for vaccines in severe pandemics is recommended with the following objectives considered to be the most important:
  - 1) Protect those who are essential to the pandemic response and provide care for persons who are ill;
  - 2) Protect those who maintain essential community services;
  - 3) Protect children;
  - 4) Protect workers who are at greater risk of infection as a result of their job, and
  - 5) Protect those who maintain homeland and national security.
- f. As with seasonal influenza vaccines, NOAA OCAO/SECO will coordinate with health unit contractors across NOAA on obtaining and providing vaccinations against an influenza with potential pandemic consequences.

**4. Reducing risk of infected persons entering the workplace during WHO Phase 5:**

- a. Set up prominent notices at all entry points to facility, advising staff and visitors not to enter if they have symptoms of influenza.
- b. Post General Infection Control (basic hygiene and hand hygiene) notices at entrances, bulletin boards, meeting rooms, and restrooms.
- c. Ensure employees have adequate supplies such as hand sanitizer, tissues, cleaning supplies.
- d. Employees must stay at home and away from others if they feel onset of influenza symptoms.
- e. Inform employees and limit non-essential travel to areas at WHO Pandemic Level Phase 5 (large clusters of human to human transmission) (refer to <http://www.cdc.gov/travel> for travel advisories and restrictions).

**5. Management of Employees with Symptoms at the workplace:**

- a. If a person feels ill, or if someone observes that another person is exhibiting symptoms of influenza at work, they should notify their supervisor and the sick employee should be instructed to leave work and contact their medical provider. They should limit contact with others and not use public transport if at all possible. People who have been in close contact with the symptomatic employee should be informed. If person cannot leave the workplace immediately, have the symptomatic individual wear a surgical mask or respirator to reduce the transmission of aerosolized droplets.
- b. Advise employees who have been in contact with a symptomatic person need to consider staying home for the duration of the reported incubation period of the disease.
- c. The suspect case's work station should be cleaned and disinfected, as indicated in the section on workplace cleaning.
- d. Advise affected staff member on how long to stay away from work (CDC will advise on this once the characteristics of the pandemic are known).
- e. Check on the affected staff member during his/her absence from work.

**6. Resource Links for current information on pandemic influenza**

- Pandemic Health and Safety: <http://www.pandemicflu.gov/health>
- Centers for Disease Control and Prevention: <http://www.cdc.gov>
- NIOSH: Worker safety and health issues with Pandemic Influenza: <http://www.cdc.gov/niosh>
- OSHA: Guidance on preparing workplaces for an influenza pandemic: <http://www.osha.gov>
- Office of Personnel Management: <http://www.opm.gov/pandemic/index.asp>
- World Health Organization: <http://www.who.int/csr/en/>

Health and Safety Measures	Proper Conduct	Remarks
Influenza immunization	<ul style="list-style-type: none"> <li>• The Centers for Disease Control and Prevention (CDC) recommend annual Influenza immunization for all children, 6-23 months old, if they are in daycare settings.</li> <li>• Employees who have, or are in contact with a person who has, high-risk medical conditions for influenza-related complications also should consider an annual vaccination.</li> </ul>	See your doctor for immunization for you and your family. This may not protect you from a new strain of influenza being researched, but will provide protection from the flu viruses already circulating in the community.

<p>Maintain good health habits</p>	<ul style="list-style-type: none"> <li>• Avoid close contact with people who are sick.</li> <li>• Don't sit near someone who is sneezing or coughing unless you are protected.</li> <li>• Avoid touching your eyes, nose or mouth unless you have just washed your hands. Use alcohol-based hand sanitizers if soap and water is not available.</li> <li>• Exercise regularly and drink 6-8 glasses of water daily</li> <li>• Avoid unnecessary travel.</li> </ul>	<p>Good health habits make your immune system stronger against common sickness</p>
<p>Stay home when you are sick</p>	<ul style="list-style-type: none"> <li>• If you are sick, stay at home. Do not return to work until you have no symptoms for a period of time determined by the CDC (the incubation period for the specific virus), or your doctor says you are no longer contagious. Follow behavior practices as stated below. Do not allow ill children to attend school or daycare.</li> <li>• Inform your doctor of your symptoms. The doctor may not want to see you in his office to prevent spread of infection.</li> </ul>	<p>The doctor may prescribe an antiviral drug</p>
<p>Safe practices at home and in public when you are sick</p>	<ul style="list-style-type: none"> <li>• Stay in a separate room or if this is not possible, keep the sick person at least 3 feet away from others, especially children.</li> <li>• Cover your mouth and nose with a tissue when you cough and sneeze. Dispose of these tissues safely, as they are contaminated.</li> <li>• Make sure tissues are available in common areas (if you don't have tissues, cough or sneeze into your upper sleeve, NOT your hands). Always clean hands using alcohol-based hand sanitizer after coughing and sneezing. Avoid touching common surfaces and objects unless your hands have been sanitized. Change toothbrush often or at least after cold or flu to prevent possible re-infection.</li> </ul>	
<p>Have a contingency plan for essential supplies at home.</p>	<ul style="list-style-type: none"> <li>• Plan to have bottled water and non perishable food at home</li> </ul>	<p>The supply chain may be interrupted and stores may have reduced stock of items for sale.</p>
<p>Maintain good hand hygiene Hand washing training (Hand washing is a learned habit)</p>	<ul style="list-style-type: none"> <li>• How to wash your hands properly with water and soap             <ul style="list-style-type: none"> <li>- Remove jewelry</li> <li>- Wet hands with warm water</li> <li>- Apply clean soap</li> <li>- Vigorously scrub with soap all over your hands and under nails for at least 20 seconds</li> <li>- Rinse hands for at least 10 seconds under warm water</li> <li>- Dry hands completely with paper towel</li> <li>- Turn off tap with paper towel to avoid hands getting dirty again</li> </ul> </li> </ul>	<p>Water alone is not sufficient for proper hand washing.</p>

	<ul style="list-style-type: none"> <li>- Throw towel in waste basket</li> <li>• How to wash your hands using alcohol-based hand sanitizer:             <ul style="list-style-type: none"> <li>- Remove gross soil or contamination with a paper towel.</li> <li>- Wet hands with sanitizer</li> <li>- Rub hands until alcohol is dried.</li> </ul> </li> <li>• Insist that all family members, especially children, follow strict hand washing practices.</li> <li>• Have everyone practice hand washing. This will help you protect yourself and prevent the spread of virus at work, at play and at home</li> </ul>	<p>Use hand sanitizer</p>
<p>Clean/disinfect surfaces</p>	<ul style="list-style-type: none"> <li>• Clean frequently touched surfaces and objects such as toys, shared items, equipment, desks, phones, door knobs.</li> <li>• Disinfect surfaces using disinfectant solution (see Remarks for formula) or 70 % alcohol. Apply on surfaces. Allow at least 10 minutes of contact time before rinsing chlorine solution. If alcohol is used, allow it to air dry.</li> <li>• Wash linens between being used by others, especially by different children.</li> </ul>	<p>Wear gloves and use disposable wipes.</p> <p>Disinfectants may include 1% solution of household bleach (1.25 oz or about 8 teaspoons of 5.25% sodium hypochlorite solution in 1 gallon of water) for hard, non-porous surfaces; 5% solution of household bleach for porous surfaces; 5% hospital grade Lysol™; or other EPA approved disinfectant.</p> <p>A temperature of at least 71°C (160°F) for a minimum 25 minutes is recommended for hotwater washing of linens.</p> <p>Addition of chlorine bleach provides an extra margin of safety.</p>
<p>Educate family in personal hygiene, especially children.</p>	<ul style="list-style-type: none"> <li>• Teach your family frequent and proper hand washing.</li> <li>• Use common sanitary practices in public, for example, when handling a grocery cart, wipe the handle before and after use.</li> </ul>	
<p>Use personal protective personal equipment when providing direct care to a sick person or in public</p>	<ul style="list-style-type: none"> <li>• Cover your mouth and nose with an N-95 respirator when providing direct care to a sick person. Wear goggles and gloves as an extra margin of safety.</li> <li>• Use personal hand sanitizer when using commonly touched objects, such as phone buttons, ATM banking machines, door knobs, public washrooms, etc.</li> <li>• Carry your own commonly used items such as a pen (to sign receipts or credit card slips).</li> <li>• During pandemic phases, avoid public.</li> </ul>	

### Pandemic-Relevant OPM Guidance

Title	Page
What a Supervisor Should Do if an Employee Appears Ill During a Declared Pandemic Influenza or Has Been Exposed to Pandemic Influenza	<b>2</b>
Leave Flexibilities	<b>5</b>
Evacuation Payments During a Pandemic Health Crisis	<b>7</b>

Additional OPM guidance can be found at: <http://www.opm.gov/pandemic/index.asp>

## **What a Supervisor Should Do if an Employee Appears Ill During a Declared Pandemic Influenza or Has Been Exposed to Pandemic Influenza**

The chart on the following page was developed to assist managers and supervisors in determining the appropriate course of action when confronted in the workplace with an employee who appears ill during a declared pandemic influenza outbreak or an employee who has been exposed to pandemic influenza. Employees who appear to be ill include those workers with pandemic flu-like symptoms (based on symptoms identified by the Centers for Disease Control and Prevention (CDC), which will be posted at [www.pandemicflu.gov](http://www.pandemicflu.gov) once the symptoms are known). Employees who have been exposed to pandemic influenza include those employees who have a known, recent, and direct exposure to pandemic influenza (also based on guidance from CDC and from the Occupational Safety and Health Administration (OSHA)). The chart is intended to assist Federal supervisors and managers in assessing the capacity of their workforce to carry out the work for which the supervisor or manager will remain accountable during a pandemic influenza.

### **General**

Where occupational health services or authorized medical officials are available, agencies should recommend employees who appear to be ill or who have been exposed to pandemic influenza seek their assistance. If the employee refuses to seek assistance, seeks assistance but refuses to follow a medical recommendation to leave the workplace, or medical services are not available, agencies should follow the chart on the following page. The specific facts and circumstances of each case must be reviewed to determine the appropriate action to be taken. Supervisors and managers should be familiar with agency-specific rules and guidance as well as all applicable laws and leave policies. (See <http://www.opm.gov/pandemic/agency1d-leave.pdf>.) They should seek assistance from their human resources (HR) office early, and certainly before taking any adverse action, to ensure they have considered all appropriate options and have objective evidence to support the action. Supervisors should not take action based solely on their own subjective assessment of an employee's medical condition. The nature and extent of the objective evidence required will be determined on a case-by-case basis by the agency. HR staffs are equipped to assist supervisors and managers with these determinations.

### **Return to Work Following Pandemic Influenza or Exposure to Pandemic Influenza**

Supervisors should consult with their HR office and follow any public health recommendations from CDC or medical advice offered by the employee's physician when determining whether and when an employee should be allowed to return to work following an absence due to pandemic influenza.

### **Planning**

Managers and supervisors should familiarize themselves with OPM's Agency Guidance, including the Questions and Answers section, on leave, pay, employee and labor relations, hiring, alternative work arrangements, and other critical human capital issues in relation to a pandemic influenza to ensure they can continue to carry out the work of their office and protect the workforce should a pandemic influenza outbreak occur. (See <http://www.opm.gov/pandemic/index.asp>.) As part of any planning effort, managers should discuss with employees the common-sense steps employees can take to protect themselves and help prevent the spread of influenza in the workplace. These measures include, but are not limited to, frequent hand washing and other good health habits to stop the spread of germs, staying home when one feels ill, and generally decreasing contact with others, an approach known as social distancing. These and other simple steps employees can take are found on CDC's Website at [www.cdc.gov/flu](http://www.cdc.gov/flu) and [www.cdc.gov/germstopper/work.htm](http://www.cdc.gov/germstopper/work.htm).

Managers and supervisors should also keep themselves informed of the latest public health information released by CDC. Based on that guidance, managers and supervisors should follow the chart on the following page to ensure that an employee who appears ill during a declared influenza pandemic or has been exposed to pandemic influenza leaves the workplace as quickly as possible so as to protect the employee and limit exposure to other workers.

Managers and supervisors should plan in advance for the possibility that employees may need to work at home during pandemic influenza. In advance of a pandemic, managers and supervisors should discuss with employees the types of assignments they may be given if they are evacuated from the workplace (see 5 CFR 550.409) or choose to telework to promote social distancing. Assignments under the evacuation pay authority may include any work considered necessary or required to be performed during the period of the evacuation, without regard to an employee's grade level or title, provided the employee has the necessary knowledge and skills to perform the assigned work. For example, such work could include various research projects or on-line training and other employee development activities. If an employee is not physically capable of working, he or she should not be given work assignments to complete at home. If the employee is not able to work, the supervisor should pursue alternative ways of accomplishing the employee's work.

### What a Supervisor Should Do if an Employee Appears Ill During a Declared Pandemic Influenza or Has Been Exposed to Pandemic Influenza

Situation	If the employee...	Does employee request leave?	Take the following action	And
1	Appears ill with pandemic flu-like symptoms (see note 1), express concern that employee appears to be ill with pandemic flu-like symptoms and encourage employee to take leave and seek medical care.	Yes	Grant leave and send employee home on leave (see note 2).	
2		If no, consult HR to determine if there is objective evidence of medical incapacity to perform duties of his or her position. Consider use of on-site employee health services if available to assist in making this determination.	If there is objective evidence and employee still refuses to request leave, advise that you have determined the employee is incapable of working and order employee to leave and place on excused absence. Consult with HR on next steps, including potential adverse action (e.g., enforced leave) (see note 4).	
3			If there is no objective evidence, follow situations 5-8 (see note 3).	
4	Has a known, recent, and direct exposure to others with pandemic influenza, but is still capable of working (see notes 1 and 5), express concern that employee could be ill or contagious and suggest that employee take leave.	Yes	Grant leave and send employee home on leave (see note 2).	
5		If no and employee insists he or she is able to work, determine if employee has a telework agreement in place that includes directed unscheduled telework.	If employee has a telework agreement that includes directed unscheduled telework, send employee home to telework (see note 2).	
6			If employee does not have a telework agreement, or has a telework agreement that does not include directed unscheduled telework, determine if employee can telework on a periodic basis.	If employee can perform telework on a periodic basis and agrees to do so, send employee home to telework.
7				If employee can perform telework on a periodic basis but does not agree to do so, order employee to evacuate his or her worksite and perform work from home (or at an alternative location) and advise HR. See 5 CFR 550.409. (Also see notes 2 and 4.)
8		If employee cannot perform telework on a periodic basis, determine what work the employee may perform and order employee to evacuate his or her worksite and perform work from home (or at an alternative location) and advise HR. See 5 CFR 550.409. (Also see notes 2 and 4.)		

- Note:
- (1) Follow guidance received from CDC on pandemic influenza symptoms and exposure criteria (once known).
  - (2) Consult with HR office and follow medical advice from CDC or an employee’s physician when allowing an employee to return to work following pandemic influenza or exposure to pandemic influenza.
  - (3) Situations 5-8 are applicable when an employee is able to work.
  - (4) If an employee has been ordered to leave the workplace, he or she has no “right” to remain on the agency’s premises. If an employee has been ordered to leave and refuses to do so, supervisors should consult with the HR office and contact the building security staff to have the employee escorted from the premises.
  - (5) Follow OSHA workplace guidance on assessing the likelihood that an employee has been exposed to a pandemic influenza.

## Leave Flexibilities

The Federal Government offers numerous leave flexibilities to assist employees who are affected by a pandemic influenza:

**Sick Leave** – An employee may use any or all accrued sick leave when he or she is unable to perform his or her duties due to physical or mental illness; is receiving medical examination or treatment; or when he or she would, as determined by the health authorities or a health care provider, jeopardize the health of others because of his or her exposure to a communicable disease.

**Sick Leave for General Family Care and Bereavement** – An employee may use a total of up to 104 hours (13 days) of sick leave each leave year to provide care for a family member who is ill or receiving medical examination or treatment or to make arrangements necessitated by the death of a family member or attend the funeral of a family member. The amount of sick leave permitted for family care and bereavement purposes is pro-rated for part-time employees and employees with uncommon tours of duty in proportion to the average number of hours of work in the employee's regularly scheduled administrative workweek.

**Sick Leave To Care for a Family Member with a Serious Health Condition** – An employee may use a total of up to 12 workweeks of sick leave each leave year to care for a family member with a serious health condition. If an employee has already used 13 days of sick leave for general family care and bereavement purposes (discussed above), the 13 days must be subtracted from the 12 weeks.

**Annual Leave** – An employee may use any or all accrued annual leave for personal needs, such as rest and relaxation, vacations, medical needs, personal business or emergencies, or to provide care for a healthy or sick family member, including providing child care when a child care center is closed due to a pandemic. An employee has a right to take annual leave, subject to the right of the supervisor to schedule the time at which annual leave may be taken.

**Advance Annual and/or Sick Leave** – If an employee has exhausted his or her accrued annual or sick leave, he or she may request advance annual and/or sick leave. The amount of annual leave that may be advanced may not exceed the amount the employee will accrue during the remainder of the leave year. A maximum of 30 days of sick leave may be advanced for an employee's serious disability or illness.

**Leave Without Pay (LWOP)** – If an employee has exhausted his or her available annual or sick leave or other forms of paid time off, he or she may request leave without pay (LWOP). LWOP is a temporary nonpay status and absence from duty that, in most cases, is granted at the employee's request.

**Family and Medical Leave** – An employee may invoke his or her entitlement to unpaid leave under the Family and Medical Leave Act of 1993 (FMLA). Under the FMLA, an employee may take up to 12 weeks of leave without pay for a serious health condition that prevents an employee from performing his or her duties or to care for a spouse, son or daughter, or parent with a serious health condition. An employee may substitute his or her accrued annual and/or sick leave for unpaid leave in accordance with current laws and regulations governing the use of annual and sick leave.

**Excused Absence (Administrative Leave)** – OPM will consult with Federal agencies and Administration officials to develop a consistent, Government-wide approach to the use of excused absence in appropriate circumstances.

### **Donated Leave**

If an employee has a personal or family medical emergency or is adversely affected by a major disaster or emergency, he or she may qualify for donated annual leave from the Federal voluntary leave transfer program, voluntary leave bank program, and/or emergency leave transfer program.

**Voluntary Leave Transfer Program** – The voluntary leave transfer program allows Federal employees to donate annual leave to assist another Federal employee who has a personal or family medical emergency and who has exhausted his or her own available paid leave. All agencies must establish a voluntary leave transfer program.

**Voluntary Leave Bank Program** – The voluntary leave bank program allows Federal employees who are members of the agency's voluntary leave bank to receive donated annual leave from the leave bank if the employee experiences a personal or family medical emergency and has exhausted his or her own available paid leave. An agency is not required to establish a voluntary leave bank program.

**Emergency Leave Transfer Program** – An emergency leave transfer program, established by OPM when directed by the President, allows an employee in any Executive agency to donate annual leave for transfer to Federal employees who are adversely affected by a major disaster or emergency, such as a flood, earthquake, tornado, bombing, or a pandemic influenza. An employee is not required to exhaust his or her available paid leave before receiving donated annual leave. [Link to guidance](#)

### **Other Paid Time Off**

An employee may use earned compensatory time off, compensatory time off for travel, and/or credit hours if he or she is unable to report for work as a result of a pandemic influenza.

**Compensatory Time Off** – Compensatory time off is earned time off with pay in lieu of overtime pay for overtime work.

**Compensatory Time Off for Travel** – Compensatory time off for travel is earned time off with pay for time spent in a travel status away from the employee's official duty station when such time is not otherwise compensable. [Link to guidance](#)

**Credit Hours** – Credit hours are hours an employee elects to work, with supervisory approval, in excess of the employee's basic work requirement under a flexible work schedule.

## Evacuation Payments During a Pandemic Health Crisis

### Description

An Executive agency (as defined in 5 U.S.C. 105) may provide evacuation payments to its employees who are ordered to evacuate their regular worksites and work from home (or an alternative location mutually agreeable to the agency and the employee) during a pandemic health crisis. The head of an agency may delegate authority to one or more designated officials to order the evacuation of agency employees, employees assigned to certain geographic areas, or employees in certain components/divisions of the agency. In this unique situation, the agency may designate an employee's home (or an alternative location mutually agreeable to the agency and the employee), including a location under quarantine or confinement, as a safe haven during the period of evacuation. A policy to evacuate to a safe haven promotes the "social distancing" of employees and protects them from being exposed to additional viruses or mutations of a pandemic virus.

An agency may order an evacuation upon an official announcement by Federal, State, or local officials, public health authorities, and/or tribal governments, of a pandemic health crisis affecting certain geographic areas. Consistent with 5 U.S.C. 5522 and 5523 and the Department of State Standardized Regulations, responsibility for ordering an evacuation in overseas locations rests with the Department of State.

### Assignment of Work to Evacuated Employees

An evacuated employee at a safe haven may be assigned to perform any work considered necessary or required to be performed during the period of evacuation without regard to the employee's grade or title. However, an agency may not assign work to an employee unless the agency knows the employee has the necessary knowledge and skills to perform the assigned work. For example, a supervisor may assign different or lower-level duties than are normally performed by the employee. In addition, if a supervisor is sick and cannot perform his or her duties during the period of evacuation, an agency may assign the higher-level work to a subordinate employee who would, under normal circumstances, be designated as "acting" when the supervisor is on leave. Additionally, the agency must provide reasonable accommodation under the Rehabilitation Act for qualified employees with disabilities.

Managers and supervisors are encouraged to communicate regularly with employees who are performing work from home during a pandemic health crisis. Regular communication with employees will ensure they understand their work assignments and management's expectations during the period of the evacuation. Failure or refusal to perform assigned work may be a basis for terminating evacuation payments, as well as disciplinary action under 5 CFR part 752 (Adverse Actions). However, an employee's inability to perform assigned work because of lack of knowledge or skills may **not** be a basis for terminating evacuation payments or taking disciplinary action.

### Payments for Employees Ordered To Evacuate

#### *Evacuation Payments*

An agency may provide evacuation payments to an employee who is ordered to evacuate his or her regular worksite and work from home (or an alternative location mutually agreeable to the agency and the employee) during a pandemic health crisis. Evacuation payments should be paid on the employee's regular pay days, since these payments reflect the employee's regular pay. (Since most employees use electronic fund transfer to deposit pay checks to their accounts, this should not impose an additional burden on the agency.)

An agency must compute evacuation payments based on the employee's rate of pay (including any applicable allowances, differentials, or other authorized payments) to which the employee was regularly entitled immediately before the issuance of the order to evacuate, regardless of the employee's work schedule during the evacuation period. For example, an employee is considered to be regularly entitled to night pay differential (5 U.S.C. 5545(a) and 5343(f)) and Sunday premium pay (5 U.S.C. 5544(a) and

5546(a)) for applicable hours in the employee's normal basic workweek. An employee is considered to be regularly entitled to law enforcement availability pay (5 U.S.C. 5545a), administratively uncontrollable overtime pay (5 U.S.C. 5545(c)(2)), standby duty premium pay (5 U.S.C. 5545(c)(1)), regular overtime pay for firefighters (5 U.S.C. 5545b), physicians' comparability allowances (5 U.S.C. 5948), supervisory differentials (5 U.S.C. 5755), and nonforeign area cost-of-living allowances and post differentials (5 U.S.C. 5941), as applicable. An employee will receive recruitment, relocation, and retention incentive payments (5 U.S.C. 5753 and 5754) and extended assignment incentive payments (5 U.S.C. 5757) consistent with the employee's signed service agreement. The agency must make all deductions from evacuation payments that are required by law, including retirement or Social Security (FICA) deductions, authorized allotments, and income tax withholdings.

An employee's evacuation payments must cover the period of time during which an applicable order to evacuate remains in effect, unless terminated earlier. However, evacuation payments may not continue for more than 180 calendar days after the effective date of the order to evacuate. After an order to evacuate is terminated, agencies must make adjustments in an employee's pay on the basis of the rates of pay, allowances, and differentials, if any, to which the employee otherwise would have been entitled during the period of evacuation under applicable statutes. (See 5 CFR 550.408.)

#### *Additional Allowance Payments*

The head of the agency or designated official, in his or her sole and exclusive discretion, may grant additional special allowance payments, based on a case-by-case analysis, to offset the direct added expenses incidental to performing work from home (or an alternative location mutually agreeable to the agency and the employee) during a pandemic health crisis. (See 5 CFR 550.409.) This may include increased costs for a computer, printer, fax machine, scanner, and telecommunications equipment incurred by an employee ordered to work from home (or an alternative location mutually agreeable to the agency and the employee) during the evacuation period. An employee is not entitled to additional allowance payments for such increased costs unless the allowance payments are specifically approved by the agency head or designated official. An agency may not require an employee to absorb increased expenses (e.g., long-distance calls, supplies, or delivery services) incidental to performing work from home (or an alternative location) if the increased expenditures primarily benefit the Federal Government, unless the agency has specific statutory authority to do so.

Employees who are ordered to evacuate their official duty stations may receive additional allowance payments as necessary to offset the direct added expenses incident to travel outside the limits of their official duty station—e.g., travel and subsistence expenses. During a pandemic health crisis, payment of travel and subsistence expenses should not be necessary in most situations. (See 5 CFR 550.405.) An advance salary payment may be made to an employee who is ordered to evacuate his or her official duty station when an agency official has determined that payment in advance of the date on which the employee otherwise would be entitled to be paid is required to help the employee defray immediate expenses incidental to an employee's departure. An advance salary payment is equivalent to a loan and must be treated as a debt owed to the Federal Government. During a pandemic health crisis, it is highly unlikely advance salary payments will be necessary, since employees will receive evacuation payments on their regular pay days. In addition, payroll providers may continue to provide employees "emergency pay" based on a "standard tour of duty" and make corrections after the fact.

#### **Termination of Payments**

An authorized agency official must terminate an employee's advance salary payments or evacuation payments on the date of the earliest of the following events, as applicable:

- The employee is assigned to another duty station outside the evacuation area.
- The employee is separated from his or her position with the agency.
- The elapsing of 180 days since the effective date of the order to evacuate.
- The employee resumes his or her duties at the regular worksite from which he or she was evacuated after the applicable order to evacuate is rescinded.

- The agency determines payments are no longer warranted (e.g., based on guidance provided by the Centers for Disease Control and Prevention or local health officials regarding the status of the pandemic health crisis).

**Agency Plan**

Agencies must establish a plan and procedures for providing evacuation payments during a pandemic health crisis. A Sample Agency Plan is available on OPM's Website at <http://www.opm.gov/oca/pay/html/PandEvacPlan.asp>.

References

- 5 U.S.C. 5522 – 5524 and 5 U.S.C. 5526 – 5527
- 5 CFR part 550, subpart D

## Employee and Labor Relations During a Pandemic Crisis

During a pandemic health crisis, NOAA may employ alternative work arrangements in order to achieve its mission, while promoting the “social distancing” of its employees to ensure their safety and well-being.

Health and safety issues could potentially impact employees in a number of ways, including telework, alternative work arrangements, evacuation payments, and leave flexibilities. The administration of these programs is governed by DOC and NOAA policies and/or applicable collective bargaining agreements.

NOAA will provide specific guidance on agency operating status, including whether employees should work from an alternative worksite for a period of time. As circumstances warrant, the Office of Personnel Management will issue additional and updated guidance regarding the use of alternative work arrangements and leave flexibilities to address issues that may arise during a pandemic health crisis.

Frequently Asked Questions on each topic are included. However, specific questions and concerns regarding the impact of pandemic events on employees should be forwarded to your servicing Workforce Management Office Advisors.

### **Telework**

Refers to any arrangement in which the employee regularly performs officially assigned duties at home or at an alternative office site.

The NOAA Telework Policy incorporates the requirements of the Department of Commerce Telework Policy. Each line and corporate offices may have specific implementing procedures developed as an addendum to the provisions of the NOAA Telework Policy.

### **QUESTIONS AND ANSWERS:**

1. *How does an employee request a telework arrangement?*

The NOAA Telework Policy sets forth the procedure for requesting a telework arrangement. However, line and corporate office may have additional requirements. The employee’s supervisor has the authority to grant or deny the employee permission to telework, based on the principles enunciated in the NOAA Telework Policy and any implementing procedures the line/corporate office may have.

2. *Can management be forced to implement telework arrangements?*

No. There currently is no authority for agency heads or OPM to order management to implement telework arrangements. Under Public Law 106-346, telework arrangements are voluntary. OPM is committed to providing agencies, managers, supervisors, and employees with current guidance and support to facilitate the use of telework in the Federal sector, including guidance on teleworking during an emergency as part of agency contingency planning.

3. *Can an agency mandate telework?*

Yes. Employees with an approved telework agreement can be required to work during

emergency closures or other emergencies, including pandemics and for COOP purposes, on any day when the agency is closed by an emergency even if that day is not a regular telework day or a day with specific approval for situational/episodic telework.

4. *Can my supervisor prevent me from teleworking?*

Yes. Telework is a management option rather than an employee benefit, and does not change the terms and conditions of employment. Management has the right to decline or terminate an employee's use of the telework option pursuant to the terms of the telework agreement.

5. *May Federal agencies cover additional costs incurred by employees as a result of telework (DSL line, additional phone line, increased use of electricity, etc.)?*

An agency may not use appropriated funds to pay for items of personal expense, such as home utility costs, home maintenance, or insurance, unless there is specific statutory authority.

Authorized expenses incurred while an employee is conducting business for the Government at a telework site may include, at an agency's discretion, installation of phone lines, payment for telecommunications services (e.g. broadband DSL or Virtual Private Network), and payment for monthly telephone and internet service provider charges. Such services may be used only for purposes of federal employment.

8. **[HYPOTHETICAL]** *Due to the pandemic, an employee must telework from home and may not be able to report to the official worksite. Will locality pay be affected?*

An employee's official worksite is the location of his or her position of record where the employee regularly performs his or her duties. For an employee covered by a telework agreement, scheduled (while in duty status) to report at least once a week on a regular and recurring basis to the regular worksite for his or her position of record, the regular worksite is the official worksite, and the employee is entitled to the locality rate designated for the regular worksite. However, OPM's regulations at 5 CFR 531.605(d)(3) permit an agency to make a temporary exception to the requirement that a telework employee report at least once a week to the regular worksite and allow the telework employee's official worksite to remain the regular worksite.

9. **[HYPOTHETICAL]** *While teleworking, an employee is injured at home. Is this a line-of-duty injury?*

Government employees suffering work-related injuries and/or damages at the alternative worksite are covered by the Military Personnel and Civilian Employees Claims Act, the Federal Tort Claims Act, or the Federal Employees' Compensation Act (workers' compensation).

### **ALTERNATIVE WORK SCHEDULES**

NOAA may implement various alternative work schedules (AWS) instead of traditional fixed work schedules (e.g., 8 hours per day, 40 hours per week) to minimize commuting and potential exposure to pandemic related hazards. AWS enable full-time employees to complete the basic 80-hour biweekly work requirement in less than 10 workdays.

Questions and Answers:

1. **[HYPOTHETICAL]** *I am on a flexible work schedule. I am teleworking from home during the pandemic. May I choose to work extra hours each day so I can earn credit hours?*

An employee must comply with NOAA and/or applicable collective bargaining unit policies for earning credit hours. Credit hours are any hours within a flexible work schedule in excess of an employee's basic work requirement and which the employee elects to work to vary the length of a

workweek or a workday. The law prohibits carrying over more than 24 credit hours from one pay period to the next (5 U.S.C. 6126).

2. Will I be able to continue working a flexible work schedule if a pandemic influenza reaches my area?

If an employee is currently on a flexible work schedule, NOAA may continue to allow the employee to remain on a flexible work schedule during a pandemic health crisis. However, employees do not have a statutory or regulatory entitlement to work a particular work schedule. Schedules may be modified pursuant to government regulations and/or applicable collective bargaining agreements.

3. *Can management mandate an alternative work schedule?*

In line and corporate offices with **bargaining unit** employees (employees represented by a labor union), the proposing office must negotiate an alternative work schedule program (**compressed** work schedule or **flexible** work schedule) with the unions representing these employees prior to implementation.

Those offices with **non-bargaining unit** employees (employees not represented by a labor union) may unilaterally install **flexible** work schedules (FWS).

NOTE: If the compressed work schedule would be mandatory for all employees, a majority of the affected employees must vote to be included in a **compressed** work schedule program. A majority is obtained when the number of affirmative votes exceeds 50 percent of the number of employees and supervisors in the organization proposed for inclusion in a compressed work schedule. Voluntary schedules do not require voting.

## EVACUATION PAYMENTS

An agency may provide evacuation payments to its employees who are ordered to evacuate their regular worksites and work from home (or an alternative location mutually agreeable to the agency and the employee) during a pandemic health crisis.

In this unique situation, the agency may designate an employee's home (or an alternative location mutually agreeable to the agency and the employee), including a location under quarantine or confinement, as a safe haven during the period of evacuation. A policy to evacuate to a safe haven promotes the "social distancing" of employees and protects them from being exposed to additional viruses or mutations of a pandemic virus.

An evacuated employee at a safe haven may be assigned to perform **any work**<sup>5</sup> considered necessary or required to be performed during the period of evacuation without regard to the employee's grade or title. Such work may be assigned to any employee with the necessary knowledge and skills to perform the assigned work. Failure or refusal to perform assigned work may be a basis for terminating evacuation payments, as well as disciplinary action under 5 CFR Part 752 (Adverse Actions).

Evacuation payments are computed on the basis of the employee's rate of pay (including any applicable allowances, differentials, or other authorized payments) to which the employee was regularly entitled immediately before the issuance of the order to evacuate. NOAA will make all deductions from evacuation payments that are required by law, including retirement or Social Security (FICA) deductions, authorized allotments, and income tax withholdings.

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<sup>5</sup> The modification of work assignments for bargaining unit employees must be done in accordance with applicable collective bargaining agreements and/ or the provisions of 5 USC 7106.

The head of the agency or designated official, in his or her sole and exclusive discretion, may grant additional special allowance payments, based on a case-by-case analysis, to offset the direct added expenses incidental to performing work from home (or an alternative location mutually agreeable to the agency and the employee) during a pandemic health crisis. However, an agency must provide reasonable accommodation to its qualified employees with disabilities consistent with its obligations under the Rehabilitation Act.

#### QUESTIONS AND ANSWERS:

1. *If an agency orders its employees not to report to their offices during a pandemic influenza, will employees continue to be paid? Will employees be required to use their annual leave?*

Agencies may offer alternative work arrangements to ensure work continues to be accomplished during a pandemic health crisis and employees continue to be paid. For example, agencies may direct employees who are under an approved telework agreement to telework from home or order employees to evacuate their worksites and direct them to work from home during a pandemic influenza.

An agency may authorize evacuation payments for employees who have been ordered to evacuate their worksites. Evacuation payments reflect the regular pay an employee would have received for the time period he or she would have been expected to work (but for the evacuation). An agency may require an employee to perform any work considered necessary or required to be performed during the period of the evacuation without regard to the employee's grade or title. If an employee refuses to work from home, he or she may be required to use accrued annual leave<sup>6</sup> (i.e., "enforced leave"), may be furloughed, or may be disciplined, as appropriate. In addition, agencies may direct employees who are under an approved telework agreement to telework from home.

2. *Will agencies release employees from work to lessen the probability of significant numbers of employees catching the flu?*

During a pandemic health crisis, heads of agencies will strive to protect the health of employees while ensuring the Federal Government's work is accomplished. Agencies may use a number of alternative work arrangements to promote the "social distancing" of employees. An agency may authorize evacuation payments and require employees to work from home during a pandemic health crisis. In addition, an agency may require employees with approved telework agreements to telework from home.

3. **[HYPOTHETICAL]** *My office is open, but the schools are closed and I cannot find child care. May I receive evacuation payments so I may work at home while caring for my children?*

When there is imminent danger to the lives of an employee's dependents or immediate family, an agency may authorize evacuation payments and require employees to work from home during a pandemic health crisis. An employee who is ordered to work from home during a pandemic health crisis may not care for his or her children while performing work. However, the employee may request changes in his or her work schedule to allow the employee to work during the periods he or she is not responsible for caring for the child (e.g., when the child is sleeping or when a spouse or other family member is available to care for the child).

An employee may request annual leave or other paid time off, such as earned compensatory time off or earned credit hours to care for a healthy child.

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<sup>6</sup> The procedures for forcing an employee to take annual leave will be consistent with applicable collective bargaining agreements and 5 CFR Part 75.

## LEAVE FLEXIBILITIES

There are several leave programs and policies and other paid time off flexibilities to assist employees prevented from reporting for work and performing their duties because of illness caused by a pandemic health crisis or caring for a family member who is affected by a pandemic health crisis. Provisions for taking leaving are governed by these policies and applicable collective bargaining unit agreements.

Affected employees should consult their servicing Workforce Management Office for policy guidance on the appropriate use of each program and policy.

## QUESTIONS AND ANSWERS:

1. *What are my leave options if I have been diagnosed with the flu?*

An employee who has been diagnosed with the flu may use accrued sick leave or annual leave, request advanced sick leave or annual leave, request donated leave under the agency's voluntary leave transfer or leave bank program or an established emergency leave transfer program, or use any earned compensatory time off, earned compensatory time off for travel, or earned credit hours. In addition, an employee may invoke his or her entitlement to unpaid leave under the Family and Medical Leave Act (FMLA) and take a total of up to 12 weeks of leave without pay for a serious health condition. An employee may substitute his or her accrued annual leave and sick leave, as appropriate, for unpaid leave under the FMLA.

2. *May I take sick leave if I have been exposed to the flu?*

An employee may use accrued sick leave when he or she would, as determined by the health authorities or a health care provider, jeopardize the health of others because of his or her exposure to a communicable disease. An employee may also take accrued annual leave or other paid time off if he or she was exposed to a communicable disease.

3. *Do I have to use all of my annual and sick leave before requesting donated leave from my coworkers?*

No, an employee may request donated leave before he or she exhausts available annual and sick leave. However, before an employee may become an approved leave recipient under NOAA's Voluntary Leave Transfer Program, it must be determined that the employee's absence from duty without available paid leave because of a medical emergency is (or is expected to be) at least 24 hours. (For part-time employees or employees on uncommon tours of duty, the period of absence without paid leave is prorated.) An employee may receive donated annual leave once he or she is approved as a recipient. An employee is not required to exhaust his or her available paid leave before receiving donated annual leave.

4. *If I'm afraid of catching the flu and don't want to come to work, what are my leave options?*

An employee who is healthy may request annual leave for the period of absence from his or her job. An employee has a right to take annual leave, subject to the right of the supervisor to approve the request or propose another time at which annual leave may be taken. In addition, an employee may request to use other paid time off, such as earned compensatory time off, earned compensatory time off for travel, or earned credit hours. An employee may also request leave without pay.

5. **[HYPOTHETICAL]** *My family was planning to leave for a vacation when my annual leave was canceled because of a pandemic influenza. Can my agency cancel my leave? Will the agency reimburse me for my plane tickets?*

Yes, an employee's scheduled annual leave may be cancelled for operational reasons. An employee may use annual leave for personal needs, such as vacations, but his or her supervisor has the right to schedule the time at which annual leave may be taken. There is no obligation or authority to reimburse an employee for costs incurred by an employee resulting from the cancellation of his or her leave.

6. **[HYPOTHETICAL]** *The cafeteria in my building is closed due to the pandemic influenza. The nearest food facility is more than half an hour away. Will I be charged leave because it takes me at least an hour and a half to get to the nearest restaurant, eat, and return to work?*

Yes. If an employee is allowed 30 minutes for lunch, and he or she chooses to take 1.5 hours for lunch, the employee may request annual leave, other paid time off, or leave without pay to account for the additional hour.

7. **[HYPOTHETICAL]** *I have "use or lose" annual leave, which I scheduled to use before the end of the leave year. My agency has canceled all scheduled annual leave until further notice because employees must be at work due to a pandemic influenza. It looks like this situation will continue through the beginning of the new leave year. Will I be forced to forfeit my "use or lose" annual leave?*

If an employee schedules "use or lose" annual leave in writing before the third biweekly pay period prior to the end of the leave year, and the leave is canceled due to an exigency of the public business (i.e., an urgent need for the employee to be at work), the employee may request restoration of the forfeited annual leave.

8. **[HYPOTHETICAL]** *I have “use or lose” annual leave, which I scheduled to use before the end of the leave year. I know if I take sick leave because of sickness or injury, my scheduled annual leave will be restored if I am unable to use it before the end of the leave year. My wife, however, is the one who is sick with the flu. If I take sick leave to care for my wife, will my “use or lose” annual leave be restored?*

No. Only “use or lose” annual leave forfeited because of a period of absence due to an employee’s own sickness or injury may be restored. Employees who are using sick leave, donated leave, or other paid time off during a pandemic health crisis must be diligent about scheduling and using any excess annual leave (“use or lose” annual leave) by the end of the leave year.

9. **[HYPOTHETICAL]** *A family member has the flu, or complications from the flu, and I must care for him or her. What are my leave options?*

An employee may use a total of up to 104 hours (13 days) of sick leave each leave year to provide general medical care to a family member and up to 12 weeks (480 hours) of sick leave to care for a family member who develops a serious health condition. If the employee has already used 13 days of sick leave for general family care and bereavement purposes, that amount must be subtracted from the 12 weeks (480 hours) of sick leave an employee may use to provide care for a family member with a serious health condition. In addition to sick leave, an employee may use annual leave, accrued compensatory time off, compensatory time off for travel, or credit hours. The employee also may request to receive donated annual leave through the voluntary leave transfer program. Finally, an employee may invoke his or her entitlement to unpaid leave under the Family and Medical Leave Act (FMLA) and take a total of up to 12 weeks (480 hours) of leave without pay to provide care for a spouse, son or daughter, or parent with a serious health condition.

10. *If I exhaust all of my annual and sick leave, what are my options?*

There are a number of alternatives for an employee who has exhausted his or her accrued annual and sick leave. An employee may request advance annual and/or sick leave. The amount of annual leave that may be advanced may not exceed the amount the employee will accrue during the remainder of the leave year. A maximum of 30 days of sick leave may be advanced for an employee’s serious disability or ailment. In addition, an employee who has a personal or family medical emergency and who has exhausted his or her own available paid leave may be eligible to receive donated annual leave from the voluntary leave transfer program. If OPM has established an emergency leave transfer program, the employee also may be eligible to receive donated leave from the emergency leave transfer program.

11. **[HYPOTHETICAL]** *My child’s school has been closed because of the flu pandemic. My child is not sick, but I cannot find a babysitter. What are my leave options?*

An employee who is healthy or is caring for a family member who is healthy may request annual leave for the period of absence from his or her job. An employee has a right to take annual leave, subject to the right of the supervisor to schedule the time at which annual leave may be taken. In addition, an employee may request to use other paid time off, such as earned compensatory time off, earned compensatory time off for travel, or earned credit hours.

12. **[HYPOTHETICAL]** *A family member died due to complications from the flu. I have to make arrangements for and attend his/her funeral. What leave can I take?*

An employee may use a total of up to 104 hours (13 days) of sick leave each leave year to make arrangements necessitated by the death of a family member or attend the funeral of a family member. In addition, an employee may request to use accrued annual leave or other paid time off, such as earned compensatory time off, earned compensatory time off for travel, and earned

credit hours.

13. **[HYPOTHETICAL]** *My fiancé is very sick with the flu and I am the only person available to take care of him. May I use sick leave?*

An employee may use a total of up to 12 weeks (480 hours) of accrued sick leave to care for a family member with a serious health condition. A family member includes any individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship (as determined by NOAA).

14. *May I receive donated annual leave from my coworkers to care for a sick family member?*

An employee with a personal or family medical emergency who has exhausted his or her own available paid leave may be eligible to receive donated annual leave from the voluntary leave transfer program. If OPM has established an emergency leave transfer program, the employee also may be eligible to receive donated leave from the emergency leave transfer program.

## Supervisory Guidance on Employee and Labor Relation Issues During a Pandemic Crisis

During a pandemic health crisis, as at any other time, employees and supervisors are critical to an agency's ability to accomplish its mission. This section provides guidance on unique employee and labor relations issues that may arise in a pandemic health crisis.

Below is a brief discussion of the roles and responsibilities of supervisory personnel and employees alike. For specific questions and guidance, please contact your servicing Workforce Management Office.

### KEEPING EMPLOYEES AWAY FROM THE WORKPLACE

As managers and supervisors, you are responsible for ensuring that NOAA's operations continue in a safe environment. However, you do not have the unmitigated discretion and latitude to act as medical professionals in determining whether or not employees have access to the workplace. Such determinations must be made in accordance with applicable collective bargaining agreements and government regulations.

### QUESTIONS AND ANSWERS:

1. *If an employee exhibits signs of the flu, may a supervisor order him/her to leave work or work from home? If so, will the employee be paid during the absence?*

As with any illness, any medical diagnosis by a supervisor is very problematic and should be avoided. However, when a supervisor observes an employee exhibiting signs of illness, he or she may express general concern regarding the employee's health and remind the employee of his or her leave options for seeking medical attention, encouraging him or her to take sick or annual leave. Employees on approved sick or annual leave will continue to be paid during their absence.

Although leave is generally voluntary, an employee may be directed to take leave. This action requires advance notice, opportunity to reply, and an agency decision. Procedures for directing an employee to take leave must be consistent with relevant provisions of applicable collective bargaining agreements, USC Chapter 71, and 5 CFR Part 75.

The supervisor could also suggest telework as alternative.

2. *If a supervisor orders an employee to leave work, will the employee be placed on administrative leave, or be required to use his/ her annual or sick leave?*

An employee must be placed on administrative leave until the procedures for enforcing leave have been completed. In general, an agency's determination to provide excused absence should be consistent with the government-wide policy on granting excused absence during a pandemic influenza.

3. *If a supervisor suspects an employee is ill or contagious, may the supervisor prohibit the employee from reporting for work or returning to work?*

If your job requires you to be in a certain physical condition to perform adequately, you may be required to submit to a medical exam before returning to work. If the criteria are met for requiring a medical examination and you refuse the exam, you risk discipline up to and including removal from Federal service. However, most positions do not have established physical or medical requirements.

For those positions without physical requirements, unless an agency has tangible evidence (suspicion is not enough) that an employee is physically unable to perform the job or poses a risk to himself/herself or others, it may not prohibit an employee from reporting to work. Such action would constitute a constructive suspension and would require providing the employee with advance notice and an opportunity to reply prior to making the decision. In addition, the employee would have the opportunity to appeal or grieve the decision to prevent him or her from reporting to work.

In the interim, if a supervisor wants to prevent an employee from reporting to work, the employee must be placed on administrative leave until the decision to keep the employee from the worksite has been adjudicated.

Supervisors must consult their servicing Workforce Management Office before refusing to allow an employee to report for work or to return to work.

4. *May a supervisor require an employee to have a medical exam or physical, or prevent an employee from returning to work until the results of an exam or physical show the employee is not contagious?*

Management may require a medical examination when the position occupied by the employee contains properly developed physical or medical requirements (see 5 CFR § 339.301). If the criteria are met for requiring a medical examination and the employee refuses the exam, he or she may be disciplined, up to and including removal from Federal service.

If an employee does not occupy a position with medical standards, requiring a medical examination based on the perception of an employee's flu-like symptoms is very problematic and should be avoided. However, when a supervisor observes an employee exhibiting signs of illness, the supervisor may express concern regarding the employee's health and remind the employee of his or her leave options for seeking medical attention, such as requesting sick or annual leave. If the employee has no leave available, supervisors may approve requests for advanced leave or leave without pay, based on agency policy.

## **REQUIRING EMPLOYEES TO WORK**

You are responsible for making sure that you have qualified staff available to continue your operations to the extent possible. However, there are several issues that may impact your ability to require employees to report for work. The enforcement of these requirements must be consistent with applicable collective bargaining agreements and government regulations.

## **QUESTIONS AND ANSWERS:**

1. *If an agency activates emergency preparedness plans and sends designated employees to alternative worksites, may a designated employee refuse to go? If an employee is on travel during the order to deploy, may he or she go home instead of deploying to the designated worksite? If an employee refuses to deploy to the designated worksite from a travel status, who pays for the employee's transportation home?*

Designated employees are expected to report for work where deployed or remain at work in dismissal or closure situations, unless otherwise directed by their agencies. An agency may determine that

circumstances justify excusing a designated employee from duty and allowing the employee to use accrued leave because of an individual hardship or circumstances unique to the employee. For example, factors such as the illness of a family member or lack of available alternatives to childcare or eldercare may be considered. An employee may not go home instead of deploying to the designated worksite, and employees who refuse to follow emergency related orders may be subject to appropriate discipline, up to and including removal from Federal service. Travel expenses not-related to the deployment or the termination of the official assignment are not reimbursable.

2. *Will an employee who has direct contact with the public (e.g., investigator, park ranger, health care professional, police officer, firefighter) be required to report for work and perform the normal duties of his or her position? If an employee refuses, will the employee be fired?*

Employees are expected to report for work and perform the normal duties of their positions. If an employee fails to report for duty without an administratively acceptable reason for his or her absence, the employee could be considered absent without leave and may be subject to disciplinary action, up to and including removal from Federal service. The agency makes the determination as to whether the employee has an administratively acceptable reason for his or her absence.

When an employee reports for work, he or she is expected to first carry out lawful supervisory orders to work, and may later choose to appeal or grieve an order after complying with it. An employee who refuses to comply with a supervisor's order may be disciplined, up to and including removal from Federal service. However, an employee may refuse to carry out a particular work assignment if, at the time the assignment is given, the employee reasonably believes carrying it out will immediately endanger his or her safety or health.

3. *May an employee leave work or refuse to report for work because he or she is afraid of contracting the flu from co-workers?*

If an employee is concerned about contracting the flu from a co-worker, the employee should first raise the concern with his or her supervisor to discuss appropriate action, such as moving to a different work area, taking annual leave, or teleworking. Employees who leave their duty stations without approval may be considered absent without leave (AWOL). AWOL may result in disciplinary action, up to and including removal from Federal service.

4. *Could an agency take disciplinary action against an employee who is absent without leave (AWOL) despite the employee's good faith efforts to report for work?*

An agency may discipline an employee who is AWOL. However, such action is at the discretion of the agency and should only be taken after careful consideration of the facts and circumstances regarding the unauthorized absence. Employees having difficulty reporting to work should discuss the circumstances of their absence with their supervisor in a timely manner.

5. *May an employee refuse to use required safety equipment (e.g., protective equipment or decontamination stations) provided by the agency?*

When an agency requires employees to follow certain safety procedures, such as using protective equipment or going through a decontamination station, it is to protect the safety and health of its employees. As with any other agency policy, employees are expected to comply with agency safety and health policies. Employees who refuse to comply may be subject to appropriate disciplinary action, up to and including removal from Federal service.

6. *May an employee refuse to report for work if he or she believes it is unsafe, even though the threat of contracting the flu has subsided?*

The Federal community is working to protect the health and safety of employees in the workplace by following recommendations from the Departments and agencies such as the Department of Health and

Human Services and the Centers for Disease Control and Prevention. Therefore, it is unlikely an employee will be directed to report for work when it is unsafe to do so.

If an employee refuses to report for work based on his or her personal belief that it is unsafe to do so, and the employee is not in an approved leave status, the employee may be considered absent without leave (AWOL). An agency may take disciplinary action for AWOL, up to and including removal from Federal service.

## **LEAVE ISSUES**

Employees who are uncomfortable reporting for work during a pandemic crisis may seek to use annual or sick leave to remain at home. Several factors affect your ability to force employees to report for duty. Administrative actions taken by management in response to employees' absences must be consistent with applicable collective bargaining agreements and government regulations.

### **QUESTIONS AND ANSWERS:**

1. *May an employee who is not sick call in sick because he or she is afraid of contracting the flu?*

No. Generally, an employee may use sick leave when he or she is unable to work due to a physical or mental illness or is receiving medical examination or treatment.

An employee who is not eligible for sick leave may request annual leave. An employee has the right to take annual leave, subject to the right of the supervisor to schedule the time at which annual leave may be taken. If an employee's request for leave is denied and the employee still refuses to report for work, the employee may be considered AWOL and may be subject to disciplinary action, up to and including removal from Federal service.

2. *May an employee call in sick after a supervisor has canceled annual leave and ordered the employee to report for work?*

An employee is entitled to use sick leave when incapacitated for duty or receiving medical treatment. Absent medical documentation from a physician, granting this request requires a judgment call by the supervisor. If a supervisor suspects that an employee is using sick leave but is able to work, he or she may request that the employee provide medical documentation prior to approving the requested leave.

If the supervisor does not grant the request for sick leave or any other leave, the employee may be considered AWOL. An agency may take disciplinary action for AWOL, up to and including removal from Federal service.

## **LABOR RELATIONS IN GENERAL**

Collective bargaining agreements articulate the policies and procedures that govern the operations of an office and the employees within that office who are covered by the agreement. Ordinarily, management is obligated to provide the union representing the affected employees with notice and the opportunity to bargain, as appropriate, over proposed changes in conditions of employment prior to implementing these changes.

During a pandemic crisis, management may have some flexibility in implementing changes in working conditions. Management has the right to take whatever actions are necessary to carry out the agency mission during an emergency. In such instances, management may modify the working conditions of bargaining unit employees without providing notice and the opportunity to bargain to the union prior to implementation. However, this does not automatically negate management's obligation to engage the union regarding the change(s). Post-implementation notice and the opportunity to bargain may be

required.

As always, before providing notice of or implementing any changes in working conditions not previously addressed by a collective bargaining agreement, please consult your servicing Workforce Management Office for advice and guidance.

## Legal Authorities

This Legal Authorities Appendix provides the statutory legal foundation for an integrated Federal and local response to biological and agricultural incidents, including pandemic influenza.

**Homeland Security Presidential Directive-5**—Management of Domestic Incidents, February 28, 2003, is intended to enhance the ability of the United States to manage domestic incidents by establishing a single, comprehensive national incident management system. In HSPD-5 the President designates the Secretary of Homeland Security as the Principal Federal Official for Domestic Incident management and empowers the Secretary to coordinate Federal resources used in response to or recovery from terrorist attacks, major disasters, or other emergencies in specific cases. The directive assigns specific responsibilities to the Attorney General, Secretary of Defense, Secretary of State, and the Assistants to the President for Homeland Security and National Security Affairs, and directs the heads of all Federal Departments and agencies to provide their "full and prompt cooperation, resources, and support," as appropriate and consistent with their own responsibilities for protecting national security, to the Secretary of Homeland Security, Attorney General, Secretary of Defense, and Secretary of State in the exercise of leadership responsibilities and missions assigned in HSPD-5. The directive also notes that it does not alter, or impede the ability to carry out, the authorities of Federal Departments and agencies to perform their responsibilities under law.

**National Response Framework (NRF)**—The NRF defines the key principles, roles, and structures that organize the way we respond as a Nation. It describes how communities, tribes, States, the Federal Government, and private-sector and nongovernmental partners apply these principles for a coordinated, effective national response. It also identifies special circumstances where the Federal Government exercises a larger role, including incidents where Federal interests are involved and catastrophic incidents where a State would require significant support. The NRF enables first responders, decisionmakers, and supporting entities to provide a unified national response.

**Robert T. Stafford Disaster Relief and Emergency Assistance Act** — (1974) (codified as amended at 42 U.S.C. §§ 5121-5206, and scattered sections of 12 U.S.C., 16 U.S.C., 20 U.S.C., 26 U.S.C., 38 U.S.C. (2002)). The Stafford Act establishes programs and processes for the Federal Government to provide disaster and emergency assistance to States, local governments, tribal nations, individuals, and qualified private nonprofit organizations. The provisions of the Stafford Act cover many hazards including natural disasters and terrorist events. In a major disaster or emergency as defined in the Stafford Act, the President "may direct any Federal agency, with or without reimbursement, to utilize its authorities and the resources granted to it under Federal law (including personnel, equipment, supplies, facilities, and managerial, technical, and advisory services) in support of State and local assistance efforts."

**The Stafford Act, 42 U.S.C. § 5196(i)(I)** —authorizes DHS/FEMA to "*procure by condemnation or otherwise, construct, lease, transport, store, maintain, renovate or distribute materials and facilities for emergency preparedness.*" (emphasis added). The term "materials" includes "raw materials, supplies, medicines, equipment, component parts and technical information and processes necessary for emergency preparedness," *id.* § 5195a(5); the term "facilities" includes "buildings, shelters, utilities, and land." *Id.* § 5195(a)(6). The term "emergency preparedness" includes measures to be undertaken in preparation for anticipated hazards, during a hazard, or following a hazard. An influenza pandemic would fit within the broad definition of "hazard." See, *id.* § 5195a(a)(I), 5195a(a)(3).

**The National Emergencies Act**—50 U.S.C. §§ 1601-1651 (2003), establishes procedures for Presidential declaration and termination of national emergencies. The act requires the President to identify the specific provision of law under which he or she will act in dealing with a declared national emergency and contains a sunset provision requiring the President to renew a declaration of national emergency to prevent its automatic expiration. The Presidential declaration of a national emergency under the act is a prerequisite to exercising any special or extraordinary powers authorized by statute for use in the event of national emergency.

**Emergency Federal Law Enforcement Assistance Act**—Upon written request by a Governor, the Attorney General can coordinate and deploy emergency Federal law enforcement assistance to State and local law enforcement authorities. 42 U.S.C. § 10501. Federal law enforcement agencies that are authorized to provide assistance to State and local government officials by enforcing State and local law should be duly deputized to do so under State and local statutes.

**The Insurrection Act**—10 U.S.C. 331-335. The President may, upon request of a State legislature, or the Governor when the legislature cannot be convened, send the Armed Forces as necessary to suppress an insurrection against State authority. *Id.* at § 331. Ordinarily requests under this provision specify that the violence cannot be brought under control by State and local law enforcement agencies and the State National Guard troops. In addition, the President may use the Armed Forces or the federalized National Guard as he considers it necessary to suppress any insurrection, domestic violence, unlawful combination or conspiracy if it (1) so hinders the execution of State and Federal law that people are deprived of their rights secured by the Constitution and laws, or (2) opposes or obstructs the execution of Federal law. *Id.* at § 333. The President may also use the Armed Forces of the federalized National Guard to enforce Federal law. *Id.* at 332. This statutory authority is an exception to the Posse Comitatus Act, 18 U.S.C. § 1385 (2002), authorizing the military to make arrests, conduct searches, and perform other traditional law enforcement functions.

**Military Support for Civilian Law Enforcement Agencies**—The Secretary of Defense may, in accordance with other applicable law, make available any equipment (including associated supplies or spare parts), base facility, or research facility of the DOD to any Federal, State, or local civilian law enforcement official for law enforcement purposes. 10 U.S.C. sec. 372(a). Training and personnel to maintain and operate equipment may also be provided. 10 U.S.C. sec. 373-4.

**The Defense Production Act of 1950** — (codified as amended by the Defense Production Act Reauthorization of 2003, Pub. L. 108-195, 117 Stat. 2892 (2003) at 50 U.S.C. app. §§ 2061-2170 (2002)), is the primary authority to ensure the timely availability of resources for national defense and civil emergency preparedness and response. Among other things, the DPA authorizes the President to demand that companies accept and give priority to government contracts that the President "deems necessary or appropriate to promote the national defense." The DPA defines "national defense" to include critical infrastructure protection and restoration, as well as activities authorized by the emergency preparedness sections of the Stafford Act. Consequently, DPA authorities are available for activities and measures undertaken in preparation for, during, or following a natural disaster or accidental or man-caused event.

**The Public Health Security and Bioterrorism Preparedness and Response Act of 2002**—Pub. L. No. 107-188, 116 Stat. 294 (2002) (codified in scattered sections of 7 U.S.C., 18 U.S.C., 21 U.S.C., 29 U.S.C., 38 U.S.C., 42 U.S.C., and 47 U.S.C. (2002)), is designed to improve the ability of the United States to prevent, prepare for, and respond to bioterrorism and other public health emergencies. Key provisions of the act, 42 U.S.C. § 247d and §300hh among others, address the development of a national preparedness plan by HHS designed to provide effective assistance to State and local governments in the event of bioterrorism or other public health emergencies; operation of the National Disaster Medical System (NDMS) to mobilize and address public health emergencies; grant programs for the education and training of public health professionals and improving State, local, and hospital preparedness for and response to bioterrorism and other public health emergencies; streamlining and clarifying communicable disease quarantine provisions; enhancing controls on dangerous biological agents and toxins; and protecting the safety and security of food and drug supplies.

**General Transportation Security Authorities**—DHS has broad authority to protect transportation security, including authorities that could keep quarantinable diseases from reaching the United States. The Transportation Security Administration (TSA) is "responsible for security in all modes of transportation." 49 U.S.C. § 114. If the TSA Assistant Secretary "determines that a regulation or security directive must be issued immediately in order to protect transportation security the [Assistant Secretary] will issue the regulation or security directive without providing notice or an opportunity for comment and without prior approval of the Secretary." 49 U.S.C. § 114(l)(a). Accordingly these provisions provide the authority for TSA

to keep a flight destined for the United States from landing in the United States if it is determined that a flight may be transporting persons with a quarantinable disease. These TSA authorities are also sufficiently broad to allow TSA to direct an air carrier to temporarily avoid deplaning its passengers until HHS or other medical authorities can screen the passengers. Finally, pursuant to 49 U.S.C. § 114(q), the Federal Air Marshal Service (FAMS) of TSA has the authority to exercise law enforcement powers in the transportation domain.

**Transportation Authorities Relating Specifically to Vessels**—In the case of vessels, if there is evidence that a vessel is carrying a person or persons with a quarantinable disease that would present a public health threat to the port if the ship or the person were allowed to enter, the U.S. Coast Guard (USCG) has authority to prevent the vessel from entering a U.S. port or place until the infected person(s) can be dealt with by HHS/CDC personnel so as to prevent the spread of the disease in the United States. 50 U.S.C. §§ 191-195; 33 U.S.C. §§ 1221-1232; 33 C.F.R. part 6; 33C.F.R. § 160.111.

**General Border Authorities**—DHS has broad authority to protect U.S. borders, including specific statutory provisions designating USCG and CBP to assist in the enforcement of State health laws and Federal quarantine regulations. 42 U.S.C. §§ 97, 268. CBP has general authority pursuant to the customs and immigration laws (e.g., 19 U.S.C. §§482, 1461, 1496, 1589a, 1499, 1581, 1582, 1595a, and 8 U.S.C. §§ 1157, 1357) to examine merchandise, cargo, conveyances and persons upon their entry to and exit from the United States to ensure compliance with U.S. law, and to seize and forfeit conveyances, animals, or other things imported contrary to law or used in the unlawful importation or subsequent transportation of articles imported contrary to U.S. law. 18 U.S.C. § 545, 19 U.S.C. § 1595a. Section 421 of the Homeland Security Act transferred to the Secretary certain agricultural import and entry inspection functions under the Animal Health Protection Act, including the authority to enforce prohibitions or restrictions on the entry of animals or articles to prevent the entry into the U.S. of livestock disease. Finally, the Secretary of DHS and the Commissioner of U.S. Customs and Border Protection (CBP) may temporarily close ports of entry "when necessary to respond to a national emergency ... or to a specific threat to human life or national interests...." 19 U.S.C. § 1318(b). Such closings would effectively stop the legal entry of persons and conveyances and the legal importation and exportation of articles at those places.

**Border Authorities Relating to Travelers**—DHS has authority to find inadmissible any alien "who is determined (in accordance with the regulations prescribed by the Secretary of HHS) to have a communicable disease of public health significance." 8 U.S.C. § 1182(a)(l). Under 8 U.S.C. § 1222(a), DHS could detain aliens for the purpose of determining whether they have a communicable disease listed in Section 1 182(a). The list of communicable diseases of public health significance as defined in HHS regulations is, however, limited, and does not generally include quarantinable diseases, including pandemic influenza, listed in Executive Order 13295.

**Vessels en route to the United States**—Section 366 of the PHS Act (42 U.S.C. § 269) requires vessels at foreign ports clearing or departing for the United States to obtain a bill of health from a U.S. consular officer, U.S. Public Health Service officer, or other U.S. medical officer, unless otherwise prescribed in regulations. Historically, a bill of health was a document required from ships in international traffic that set forth the sanitary history and condition of the vessel and, in some cases, the condition of the port during the time of departure. Foreign quarantine regulations in part 71 currently state that a bill of health is not required. Under the CDC's proposed rule, the CDC Director, to the extent permitted by law and in consultation with such other Federal agencies as the Director may deem necessary, would be authorized to require a foreign carrier clearing or departing for a U.S. port to obtain a bill of health from a U.S. consular officer or a medical officer designated for such purpose.

**Aliens with pandemic influenza**—could be excluded pursuant to 8 U.S.C. § 1182(f), which provides that "[w]henver the President finds that the entry of any aliens or of any class of aliens into the United States would be detrimental to the interests of the United States, he may by proclamation, and for such period as he will deem necessary, suspend the entry of all aliens or any class of aliens as immigrants or nonimmigrants, or impose on the entry of aliens any restrictions he may deem to be appropriate." The President has not delegated the authority to make such a proclamation. Accordingly, if the President determined that the entry of any aliens or class of aliens was detrimental to the interests of the United States, including due to the

threatened spread of a pandemic into the United States, he could issue a proclamation suspending such entry and directing enforcement by all Federal agencies.

**The Public Health Service Act (PHS)**—42 U.S.C. §§ 201 et seq. Among other things, this act provides that the Secretary of HHS may declare a public health emergency under certain circumstances (see 42 U.S.C. § 247d), and that the Secretary is authorized to develop and take such action as may be necessary to implement a plan under which the personnel, equipment, medical supplies, and other resources of the Department may be effectively used to control epidemics of any disease or condition and to meet other health emergencies and problems. (See 42 U.S.C. § 243.) The PHS Act authorizes the Secretary to declare a public health emergency (42 U.S.C. 247d) and to prepare for and respond to public health emergencies (42 U.S.C. 300hh). The Secretary is further empowered to extend temporary assistance to States or localities to meet health emergencies. During an emergency proclaimed by the President, the President has broad authority to direct the services of the Public Health Service (42 U.S.C. § 217). Under that section, the President is authorized to "utilize the [Public Health] Service to such extent and in such manner as will in his judgment promote the public interest." Additionally, under 42 U.S.C. §264, the Secretary is authorized to make and enforce quarantine regulations "necessary to prevent the introduction, transmission, or spread of communicable diseases" from foreign countries into the States or possessions, or from one State or possession to another. The diseases for which a person may be subject to quarantine must be specified by the President through an Executive order.

The PHS Act (42 U.S.C. § 241) authorizes the HHS Secretary to conduct and encourage, cooperate with, and render assistance to other appropriate public authorities, scientific institutions, and scientists in the conduct of, and promote the coordination of research, investigations, experiments, demonstrations, and studies relating to causes, diagnosis, treatment, control and prevention of physical and mental disease and impairments of man.

Section 319(a) of the PHS Act (42 U.S.C. 247d), authorizes the HHS Secretary to declare a public health emergency and "take such action as may be appropriate to respond" to that emergency consistent with his authorities. Appropriate action may include making grants, entering into contracts, and conducting and supporting investigation into the cause, treatment, or prevention of the disease or disorder that presents the emergency. The Secretary's declaration also can be the first step in authorizing emergency use of unapproved products or approved products for unapproved uses under section 564 of the Food, Drug, and Cosmetic Act (21 U.S.C. 360bbb-3), or waiving certain regulatory requirements of the Department, such as select agents requirements, or—when the President also declares an emergency—waiving certain Medicare, Medicaid, and State Children's Health Insurance Program (SCHIP) provisions.

The PHS Act provides additional authorities for core activities of HHS that will be needed to plan and implement an emergency response. For example, Sections 301, 319F-1, 402, and 405 of the PHS Act authorize the HHS Secretary to conduct and support research and development of vaccines and therapeutics. Section 351 of the PHS Act and provisions of the Federal Food, Drug, and Cosmetics Act authorize the Secretary and the Food and Drug Administration (FDA) to regulate vaccine development and production. Infrastructure support for preventive health services such as immunization activities, including vaccine purchase assistance, is provided under section 317 of the PHS Act.

Section 319F-2 of the PHS Act authorizes the Secretary, in coordination with the Secretary of DHS, to maintain the Strategic national Stockpile.

Section 361 of the PHS Act (42 U.S.C. § 264), authorizes the Secretary of HHS to make and enforce regulations necessary to prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the United States, or from one State or possession into any other State or possession. Implementing regulations are found at 42 CFR Parts 70 and 71. HHS' CDC administers these regulations as they relate to quarantine of humans. Diseases for which individuals may be quarantined are specified by Executive Order; the most recent change to the list of quarantinable diseases was the April 1, 2005 Executive Order 13375, which amended the Executive Order 13295 by adding "influenza caused by novel or reemergent influenza viruses that are causing, or have the potential to cause, a pandemic" to the list. CDC

issued a new proposed rule updating these regulations on November 30, 2005. 70 Fed. Reg. 71892 ([www.cdc.gov/ncidod/dq/nprm/index.htm](http://www.cdc.gov/ncidod/dq/nprm/index.htm)). Other provisions in Title III of the PHS Act permit HHS to establish quarantine stations, provide care and treatment for persons under quarantine, and provide for quarantine enforcement by DHS and cooperating State and local entities.

Further, HHS has broad authority to coordinate vaccine development, distribution, and use activities under section 2102 of the PHS Act, describing the functions of the National Vaccine Program. The Secretary has authority for health information and promotion activities under Title XVII and other sections of the PHS Act. HHS can provide support to States and localities for emergency health planning under Title III of the PHS Act.

Section 301 of the PHS Act, authorizes the Secretary to conduct, and encourage, cooperate with, and render assistance to other appropriate public authorities, scientific institutions, and scientists in the conduct of, and promote the coordination of, research, investigations, experiments, demonstrations and studies relating to the causes, diagnosis, treatment, control and prevention of physical and mental impairments of man, and to collect and make available through publications and other appropriate means, information as to, and the practical application of, such research and other activities.

Under section 1701 of the PHS Act (42 U.S.C. § 300u), the Secretary is authorized to formulate national goals for health information, promotion, health services, and education and to undertake activities, including training, support, planning, and technical assistance, to carry out those goals.

Section 203 of the PHS Act (42 U.S.C. § 204) authorizes the Federal Government to mobilize officers of the USPHS Regular Commissioned Corps and the Reserve Commissioned Corps in times of emergencies.

State and local Quarantines. State and local officials draw their authority to enforce State and local quarantines from State and local law. Under section 311 of the PHS Act, 42 U.S.C. § 243(a), the Secretary of HHS is authorized to accept State and local authorities' assistance in the enforcement of Federal quarantine rules and regulations, and is required to assist State and local authorities in the enforcement of their quarantines and other health regulations.

Customs and Border Protection agents, Immigration and Customs Enforcement special agents and the US Coast Guard and "military officers commanding in any fort or station upon the seacoast" must, at the direction of the HHS Secretary, aid in the execution of such State quarantines and other health laws "according to their respective powers and within their respective precincts." 42 U.S.C. §97.

The President also could use the Insurrection Act (see above) and use the Armed Forces or federalized National Guard to help suppress violence arising out of a State quarantine, as for any other law enforcement activity permitted under the Insurrection Act, 10 U.S.C. §§331-335, provided the requirements for using the Act described above are met (e.g. if the President is asked by a State to assist and if the defiance to the State quarantine orders amounts to an insurrection against State authority that the State cannot handle, see 10 U.S.C. § 331, or widespread unlawful activity that has the effect of depriving people of rights secured by the Constitution and laws) . See 10 U.S.C. §333.

**Federal Quarantines**—Customs and Border Protection agents, Immigration and Customs Enforcement special agents and the US Coast Guard have specific authority and responsibility to assist with the enforcement of quarantines at ports of entry. 42 U.S.C. § 268. With regard to other Federal law enforcement officers, the U.S. Marshals Service has the broadest of Federal law enforcement missions, 28 U.S.C. § 565; and, along with other Department of Justice agencies (FBI, DEA, ATF) can be directed by the Attorney General to enforce quarantines. The U.S. Marshals Service can also deputize other Federal law enforcement officers to give them law enforcement powers in circumstances that extend beyond those for which they are otherwise statutorily authorized to exercise them, as was done during Hurricane Katrina. Under the Insurrection Act the President may direct the military to enforce quarantines, or conduct security functions such as guarding stockpiles and pharmaceuticals, when he finds it necessary to

enforce Federal law, see 10 U.S.C. §§ 331-334, or other prerequisites for use of the Act described above are met.

**Criminal Sanctions**—The violation of Federal quarantine regulations is a crime punishable by a fine of not more than \$1,000 or by imprisonment for not more than one year, or both. 42 U.S.C. § 271. Additionally, individuals may be fined up to \$250,000 if a violation of the regulation results in death, or up to \$100,000 if a violation of the regulation does not result in death. 18 U.S.C. §§ 3559, 3571(c).

**The Animal Health Protection Act (AHPA) of 2002**—7 U.S.C. 8301 et seq., detailed in Authorities Chapter 7, gives the Secretary a broad range of authorities to use in the event of an outbreak of avian influenza in the United States and to prevent the introduction of such a disease into the United States.

**The Poultry Products Inspection Act**—21 U.S.C. 451 et seq. requires the inspection of poultry products and provides for criminal penalties for adulteration and misbranding of poultry products.

**Importation of wild bird species parts and products**—The importation of these items must comply with conservation laws and treaties enforced by the Department of the Interior, including the Wild Bird Conservation Act, the Migratory Bird Treaty Act of 1918, (16 U.S.C. 703-712), the Endangered Species Act of 1973 (ESA), (16 U.S.C. 1531-1544), which implements the Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES) (T.I.A.S. 8249); the Lacey Act Amendments of 1981, (16 U.S.C. 3371-3378); and the Bald Eagle Protection Act of 1940, (16 U.S.C. 668-668d). The Department of the Interior (DOI) has the authority to take measures to restrict trade in wild birds based on threats to wildlife populations. In the event of an outbreak of Highly Pathogenic Avian Influenza (HPAI) in domestic or wild exotic birds in the United States, DOI has the authority (under 50 CFR Part 13) to suspend the issuance of export and re-export permits under CITES and the ESA if such action is deemed necessary after coordination with USDA."

## Definitions and Acronyms

Activation	When a COOP plan has been implemented whether in whole or in part.
Alternate COOP Site	A site from which NRC can maintain its minimum essential functions in the event of a situation that threatens the continuity of NRC operations.
Avian flu	A form of influenza that occurs in birds.
Capabilities	Communication, facilities, information, trained personnel, and other assets necessary to conduct the agency’s Pandemic Priority Functions (PPF).
Continuity of operations plan or planning (COOP)	An internal effort within an organization to assure that the capability exists to continue essential business functions across a wide range of potential emergencies, including localized acts of nature, accidents, and technological and/or attack/terrorist-related emergencies.
COOP, COG, ECG	Interrelated Federal policy concepts for ensuring the Continuity of Operations (COOP) within departments and agencies, the Continuity of Government (COG) within each branch of the Government, and Enduring Constitutional Government (ECG) for the entire Government throughout and following serious disruptive situations.
COOP Program Managers	Program managers across NOAA with responsibility of COOP program management for their organization
Delegation of Authority	Specifies who is authorized to act on behalf of the D/A head and other key officials for specific purposes.
Devolution	The capability to transfer statutory authority and responsibility for essential functions from an agency’s primary operating staff and facilities to other employees and facilities, and to sustain that operational capability for an extended period.
Essential Functions	Functions that enable Federal Executive Branch agencies to provide vital services, exercise civil authority, maintain the safety and well being of the general public, and sustain the industrial/economic base during an emergency.
Influenza	An acute highly contagious disease characterized by sudden onset of fever, severe aches and pains, dry cough, and progressive inflammation of the respiratory mucous membranes caused by an influenza virus.
National Capital Region (NCR)	Includes the District of Columbia; Prince Georges and Montgomery Counties in Maryland, Fairfax, Arlington, and Prince William Counties, and other Independent Cities in those counties in Virginia.

National Essential Functions (NEFs)	That subset of Government functions that are necessary to lead and sustain the country during an emergency and, therefore, must be supported through department and agency continuity capabilities. The NEF are the primary focus of the president and the national leadership in the event, and in the aftermath, of an emergency. They are not new authorities, requirements, or functions.
National Response Framework (NRF)	An all-hazards approach to enhance the ability of the United States to manage domestic incidents. It forms the basis of how the federal government coordinates with state, local, and tribal governments and the private sector during incidents.
NOAA Management	Person or people who perform the act(s) of management and/or who have the day-to-day responsibilities of managing a NOAA organization, field office, or building.
Orders of succession	Provisions for the assumption of senior agency offices during an emergency in the event that any of those officials are unavailable to execute their legal duties.
Pandemic influenza	Worldwide epidemic that occurs when a new or novel influenza strain emerges for which humans have little or no immunity. The spread can be rapid and have severe consequences of illness, death and societal disruption.
Pandemic Response Team (PRT)	Agency’s special response team to lead the agency through a pandemic.
Personal protective equipment (PPE)	Specialized clothing and equipment, such as goggles, gloves, gowns, and masks or respirators, designed to protect people against infectious diseases or other health hazards.
Point of Contact (POC)	The designated individual from each NRC Headquarters Office whose duties involve coordination of the NRC COOP Plan for his/her respective origination.
Primary Mission Essential Functions (PMEFs)	Those mission essential functions that must be performed to support or implement National Essential Functions (NEFs) before, during, and in the immediate aftermath of an emergency. Generally PMEFs must be uninterrupted, or resumed during the first 12 hours after an event and maintained for up to 30 days or until normal operations can be resumed.
Quarantine	Separation of individuals who have been exposed to a transmissible infection, but are not yet ill, from others who have not been exposed.
Regional Office	Field office composed of divisions that carry out the functions of NOAA.
Social distancing	A public health measure to reduce the frequency of contact between people in order to limit the transmission of infection.

Stakeholder	An organization or individual who has a vested interest in the activities of an organization.
Supporting Activities	Those specific activities that a department or agency must conduct in order to perform its essential functions.
Swine Influenza	Swine Influenza (swine flu) is a respiratory disease of pigs caused by type A influenza virus that regularly causes outbreaks of influenza in pigs.
Telecommuting	The process of working from home or alternative site through telecommunications, usually using computer access.
Vital Records	Electronic and hardcopy documents, references, and records needed to support essential functions during a COOP or Pandemic situation. The two basic categories of vital records are <i>emergency operating records</i> and <i>legal and financial records</i> .