

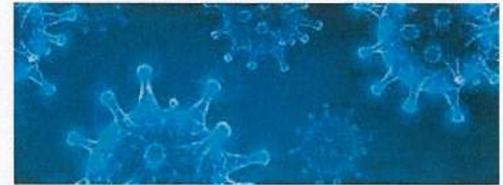
# PAG ALL-HAZARDS EMERGENCY RESPONSE PLAN

## Pandemic Influenza Plan

### Novel Coronavirus (COVID-19) Preparedness and Response Annex



**The Next Pandemic**



**What is coronavirus (COVID-19) and how can I prepare?**



#### **POLICY MEMORANDUM NO. 2020-GM01**

**To:** All Port Employees  
**Effective Date:** March 18, 2020  
**Subject:** Pandemic Influenza Plan  
Novel Coronavirus (COVID-19)  
Preparedness and Response Annex

**Approved by:**  
**Rory J. Respicio, General Manager**

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## **I. FOREWORD – PANDEMIC INFLUENZA**

Influenza viruses have been shown to be capable of causing rapid, immediate widespread morbidity and mortality on infected people. A Pandemic situation occurs when new (novel) Influenza A viruses emerge and are able to infect people quite easily and spread from individual to individual in a speedy and sustained way.

History has shown us that pandemic outbreaks of influenza viruses have left millions of people dead in their wake and have cost hundreds of billions in lost lives, wages, productivity and economic devastation.

In 1997, highly pathogenic avian influenza (HPAI) A (H5N1) viruses jumped from birds to humans in Hong Kong; six of 18 people with confirmed infections from H5N1 influenza virus died. In 2003, avian influenza A(H5N1) viruses emerged in humans again, this time in Southeast Asia, leading to severe illness and further deaths caused by this virus. Since 1997, over 1826 confirmed human infections and 784 deaths have been caused by avian influenza A(H5N1) around the world. The continual evolution and spillover of avian influenza viruses from birds into humans, coupled with their potential to rapidly spread and cause severe illness and death in people who are immunologically naïve triggered a global assessment of preparedness and response capabilities for a pandemic outbreak caused by influenza.

Over the past decade, the global public health community ramped up pandemic influenza preparedness efforts with an eye toward the emergence of HPAI influenza A(H5N1) viruses in Asia; however the real-life test of pandemic planning came in 2009 following the emergence of a novel H1N1 virus in North America.

The 2009 pandemic was caused by a novel virus designated A(H1N1)pdm09. This pandemic illustrated that pandemic influenza viruses can originate anywhere, vary in severity and population penetration, and each pandemic will differ in its range and impact. It also highlighted the speed with which a novel influenza A virus can be transmitted among people, respecting no geographic or jurisdictional boundaries, and the need for rapid development, production and availability of MCMs such as vaccines, diagnostics and antiviral drugs to mitigate the impact of the pandemic.

Pandemic influenza is different from other outbreaks we have faced because the characteristics of influenza viruses – their propensity to change, the ability to spread easily among people, and the routes of transmission – make the disease challenging to contain.

**Pandemic influenza is not a theoretical threat; rather, it is a recurring threat that is now in the form of the Novel Coronavirus or COVID-19.**

## **II. INTRODUCTION**

**Patterned after the Guam Pandemic Influenza Plan, this is the official Port Authority of Guam (PAG) plan in the prevention of, preparing for and responding to a potential outbreak of ANY AND ALL types of Influenza viruses to include the Novel Coronavirus (Covid-19).**

The PAG developed the COVID-19 Annex in response to the Coronavirus' impact to the entire island of Guam and more importantly to prevent and mitigate a potential pandemic situation at the Jose D. Leon Guerrero Commercial Port of Guam (Port). It is patterned after international, federal, and local government guidelines utilizing the Incident Command System (ICS) to manage and respond to incidents of this nature. The COVID-19 Annex is one of several hazard specific Annexes that augments the PAG All Hazard Emergency Response Plan (PAGAHERP) Basic Plan.

The COVID-19 Annex shall be reviewed as often as necessary and after each emergency incident during which it is used. The purpose of such a review will be to ensure that changes are made, if needed, based on lessons learned and updated emergency management procedures to make sure the plan remains current.

## **III. PURPOSE**

The purpose of the COVID-19 Annex is to provide and establish standard operating procedures (SOPs) that will be implemented in preparation for, response to, and recovery from a COVID-19 incident. This Annex establishes and identifies actions that must be taken before, during, and immediately after an outbreak impacting the areas in and around the PAG. These procedures are issued to ensure the safety of employees, general public, tenants, stakeholders, and government properties during such periods.

## **IV. WHAT IS COVID-19?**

COVID-19 belongs to a family of viruses known as the Coronaviridae, which can cause illnesses ranging from the common cold to more severe diseases, such as the Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). COVID-19 infections started in China but confirmed infections have also been reported in other parts of the world.

The symptoms of COVID-19 are similar to that of pneumonia. Typical symptoms include fever, runny nose, sore throat, cough, diarrhea, and shortness of breath.

## **V. HOW IS COVID-19 SPREAD?**

When a person who has COVID-19 coughs or exhales, they release droplets of infected fluid. Most of these droplets fall on nearby surfaces and objects - such as desks, tables or telephones. People could catch COVID-19 by touching contaminated surfaces or objects – and then touching their eyes, nose or mouth.

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If an individual standing within one meter of someone with COVID-19, they can catch it by breathing in droplets coughed out or exhaled. In other words, COVID-19 spreads in a similar way to the flu. Most individuals infected with COVID-19 experience mild symptoms and recover. However, some experience a deterioration of their health and may require hospital care. The risk of serious illness rises with age: people over 40 seem to be more vulnerable than those under 40. People with weakened immune systems and people with conditions such as diabetes, heart and lung disease are also more vulnerable to serious illness<sup>1</sup>.

## **VI. SITUATION AND ASSUMPTIONS**

### **A. Situation:**

On December 31, 2019, the World Health Organization (WHO) was alerted to a cluster of pneumonia patients in Wuhan City, Hubei Province of China. One week later, on January 7, 2020, Chinese authorities confirmed that they had identified a novel (new) coronavirus as the cause of pneumonia. On February 11, 2020, the WHO named the disease COVID-19 and named the virus responsible for COVID-19 severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). On January 31, 2020, the U.S. Health and Human Services (HHS) declared the situation to be a Public Health Emergency in the United States.

Since the first cases were reported, WHO and its partners have been working with Chinese authorities and global experts to learn more about the virus, including how it is transmitted, the populations most at risk, the spectrum of clinical disease, and the most effective ways to detect, interrupt, and contain human-to-human transmission to prevent a wide-scale pandemic situation.

This strategic preparedness and response plan outlines the PAG's guidelines and measures to prevent, prepare for, respond to, and recover from a COVID-19 incident that may adversely affect people in the entire Commercial Port of Guam community.

This document takes what we have learned so far about the virus and translate that knowledge into strategic actions that can guide the efforts of all Port of Guam stakeholders in the development of their respective response plans.

It is important to note that long term success cannot be taken for granted. The PAG – including its tenants and stakeholders – must play a role in the One Guam preparedness and response process if we are to stop the spread of this virus.

### **B. Assumptions:**

1. The Port of Guam is susceptible to being impacted by the COVID-19;

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<sup>1</sup> WHO – World Health Organization

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2. Implementing guidelines and preventive measures for COVID-19, ports and global shipping can continue to operate and avoid disruptions and potential closures;
3. Timely execution of safety measures and preparedness actions by the PAG, Port Users Group of Guam (PUGG), tenants, and stakeholders are expected to limit the impact of a potential COVID-19 outbreak;
4. Should a COVID-19 infection impact manpower resources, the overwhelming threat to the Port of Guam will not be damage to infrastructure and equipment, but the dwindling number of healthy personnel with which to provide normal services and conduct required operational and administrative activities; Typical incubation of the COVID-19 is anywhere from three (3) days to twenty-four (24) days;
5. Individuals 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 for transmission will be greatest during the first two days of illness;
6. Specialized resources, as well as those normally utilized in disaster situations, may be needed to support a pandemic response. Such resources may not be readily available to the PAG since the Government of Guam's priority will be the general public;
7. Upon determination of a presidential declaration, federal resources will be made available to Guam and subsequently to all Government agencies; and
8. Extensive media interest in a potential or occurring pandemic outbreak will necessitate media management operations and resources beyond those needed for other types of emergency management operations.

## **VII. CONCEPT OF OPERATIONS**

The concept of operations incorporated into the COVID-19 Annex is consistent with guidelines highlighted in the World Health Organization (WHO) 2019 Novel Coronavirus (2019-nCoV): Strategic Preparedness and Response Plan, the Pandemic Response Annex found in the 2016 Guam Comprehensive Emergency Management Plan (Guam CEMP) and the 2017 U.S. Department of Health and Human Services (HHS) Pandemic Influenza Plan Update.

The COVID-19 Annex establishes a general concept of operations for a unified response by the PAG, its tenants, and stakeholders with respect to the public health and medical aspects required in the event of an outbreak. The COVID-19 Annex is intended to be an adjunct to the Guam Pandemic Response Annex in that it encapsulates the activities of non-medical entities to support preparedness and response efforts and provide preventive measures to address the implications a COVID-19 outbreak can have on the Port of Guam community.

The overarching operational goals of the PAG in the execution of preparedness and response activities are:

1. Minimize health risk to employees;

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2. Minimize the risk of Port premises becoming a node of transmission;
3. Ensure plans are in place should employees be quarantined or infected; and
4. Ensure communication, prevention, and mitigation arrangements are coordinated with originating ports, shippers, freight forwarders, suppliers and customers to prevent disruption of commerce and ensure continuity of business operations at the Port of Guam.

**A. Notification**

1. The PAG will notify the Guam Homeland Security/Office of Civil Defense (GHS/OCD) and the Department of Public Health and Social Services (DPHSS) of an impending or occurring outbreak of COVID-19 at the Port of Guam and will recommend that the GUAM CEMP be activated in support of its medical intervention efforts;
2. After concurrence from GHS/OCD and DPHSS, the PAG will notify the US Coast Guard, the PUGG, tenants, and stakeholders of an impending or occurring outbreak of COVID-19 and will recommend that respective Pandemic Response Plans be activated; and
3. The PAG will maintain open lines of communication with the State Emergency Operations Center (EOC) to ensure that continued coordination is in place and immediate responses are addressed as requests for assistance are received by the PAG's Response Activity Coordinators (RACs).

**B. Threat Classification**

Patterned after the Guam CEMP, there are six (6) classifications to quantify the progress of a pandemic as part of a pandemic preparedness plan. Each pandemic phase and its corresponding recommended response measures are specified below:

1. Inter-Pandemic Period
  - a. Phase 1 - Strengthen pandemic preparedness at territorial levels.
  - b. Phase 2 - Minimize the risk of transmission to humans; ensure rapid detection and reporting of the first occurrence of the novel virus in humans.
2. Pandemic Alert Period
  - a. Phase 3 - Ensure rapid characterization of the new virus subtype and early detection, notification and response to additional cases.
  - b. Phase 4 - Contain the new virus within limited foci or delay spread to gain time to implement preparedness measures, including vaccine development.
  - c. Phase 5 - Maximize efforts to contain or delay spread, to possibly avert a pandemic, and to gain time to implement pandemic response measures.
  - d. Phase 6 - Minimize the impact of the pandemic, while striving to

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maintain routine provision of public health and healthcare delivery.

3. Post-Pandemic Alert Period (Mitigation and Recovery)

Continue public health actions, evaluations and research, public communications, mental health activities, surveillance, and preparations for reoccurring or additional outbreaks.

**C. PAG Prevention, Preparedness, and Response Measures**

The following measures have been adopted by the PAG to reduce the risk of employees contracting the COVID-19 virus and ensure that the workplace will not be a mode of transmission.

**1. Prevention – Workplace and Personal Hygiene Measures**

With the knowledge that contamination on surfaces touched by employees and customers is one of the main ways that COVID-19 spreads, the PAG will implement the following measures for its employees. Tenants of PAG property will be encouraged to do the same.

- Make sure work areas are clean and hygienic
  - Surfaces (e.g. desks and tables) and objects (e.g. telephones, keyboards) need to be wiped with disinfectant regularly;
- Place sanitizing hand rub dispensers in prominent places around the workplace. Ensure dispensers are regularly refilled;
- Do not spit on the floor;
- Maintain good indoor ventilation;
- Maintain good personal hygiene, including handwashing with soap and water, or the use of alcohol-based hand rubs. Wash hands:
  - regularly and thoroughly with soap and water
  - Before and after preparing food
  - After going to the toilet
  - Before and after eating
  - After coughing and sneezing; cover your mouth always
  - After removing personal protective equipment
  - Display notices in washrooms on proper handwashing techniques;
- Always wear a mask
  - If you have a fever, cough, or runny nose
  - If you are recovering from an illness;
- Change your mask regularly or if soiled or wet;
- Wash your hands with soap and water after disposing a soiled mask properly into a bin;
- Sneezing and coughing should be done onto tissue paper which should be carefully disposed;

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- Avoid sharing cups, cutlery, etc.; and
- Avoid physical contact such as shaking hands.

**2. Preparedness Planning**

With the rise of reported cases of the COVID-19 virus in the Asia-Pacific Region and the rate of its spreading to other countries, it is critically important that the PAG implement preparedness guidelines to prevent its arrival at the Port of Guam.

The PAG will ensure the following measures are in place in the event that an employee or visitor is suspected to be ill with the COVID-19 virus.

- **Facility – Isolation Planning**
  - The ill person will be referred to a pre-identified structure near the Point Of Entry (POE) to wait for an interview by a DPHSS screening nurse;
  - Ensure that at least 1 meter of spatial separation is always maintained between the interviewer and the potentially infected individual;
  - Ideally, the structure should also have the capacity to isolate an employee or visitor who, after interview, is suspected of having COVID-19 virus, while they wait for transport to a healthcare facility;
  - In coordination with DPHSS personnel, make arrangements with local healthcare facilities so individuals who are suspected of having COVID-19 infection can be promptly relocated and treated;
  - A quarantine facility should be located in a place that is separate from the POE in case there is a need to accommodate a large number of contacts, as well as suspected and confirmed cases;
  - POE personnel shall instruct suspected cases:
    - To wear a medical mask while they are waiting for transport to the healthcare facility;
    - Not to touch the front of their mask. If they do touch the front of the mask, they must perform hand hygiene with an alcohol-based hand rub or soap and water. If the mask gets wet or dirty with secretions, it must be changed immediately;
    - Practice respiratory hygiene at all times. This includes covering the mouth and nose during coughing or sneezing with tissues or a bent elbow if not wearing a mask, followed by performing hand hygiene with an alcohol-based hand rub or soap and water;
    - Not to share spaces with people who are not suspected to have COVID-19 infection (for example,

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- employees/visitors with other illnesses waiting for interview);
  - POE personnel should avoid entering the isolation area where suspected cases are waiting for transport. If they must enter, they should adhere to the following guidance:
    - Wear a tightly fitted medical mask that covers the nose and mouth when entering the room. The front of the mask should not be touched during use. If the mask gets wet or dirty with secretions, it must be changed immediately;
    - After use, discard the mask in a waste bin, close the lid, and then perform hand hygiene with an alcohol based hand rub or soap and water;
  - POE personnel should clean their hands with an alcohol-based hand rub or soap and water before entering and after exiting the isolation room;
  - Tissues, masks and other waste generated in the isolation area and by travelers with suspected COVID-19 infection should be placed in a container with a lid in the isolation room and disposed of according to national regulations for infectious waste;
  - Frequently touched surfaces in the isolation area, such as furniture, light switches, sinks and bathrooms used by employees/visitors with suspected COVID-19 infection need to be cleaned three times a day (morning, afternoon, night) by personnel wearing appropriate Personal Protective Equipment (PPE);
  - Cleaning should be done with regular household soap or detergent first and then, after rinsing with water, regular household disinfectant containing 0.5% sodium hypochlorite (that is, equivalent to 5000 ppm or 1 part to 9 parts water) is recommended to be used; and
  - Employees/visitors suspected to have COVID-19 infection should remain in an area that has a comfortable temperature and good ventilation, that has chairs or other places to sit, and they should be given blankets, as needed. They should also be given food and water as needed and according to their ability to eat and drink; they must be kept in the most comfortable conditions possible.
- **PAG Special Conditions for Incoming Vessels**  
The following preventive measures will apply to any vessels that have answered “Yes” to any questions in the US Coast Guard Declaration as it relates to early detection and prevention of the COVID-19 virus (*General Manager February 18, 2020 Memorandum on COVID-19*).

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In this context, “Yes” would be the affirmative response to any real-time circumstance affecting any individual on board any vessel that would have any regulatory agency believe a concern exists with the arrival of such vessel.

- All shippers and shipping agents must provide information on the last three (3) vessel port of calls in the vessel’s “Notice of Arrival” log;
- 24 hours prior to vessel arrival, all shippers and shipping agents must report the health status of all crew members on board to the Harbor Master’s Office via email or telephone;
- Sick crew members must stay onboard and quarantined to their respective quarters and are not allowed to disembark without clearance from the Territorial Epidemiologist at the Department of Public Health;
- Prior to vessel arrival, crew members will be screened thoroughly from point of origin when embarking or upon departure of all vessels bound for Guam;
- All service boat operators are to limit contact with crew members from the impacted vessel;
- If the vessel is berthed at Port wharves, no crew members will be allowed to disembark the vessel during its call;
- All shipping agents, representatives and crew members must wear PPE (e.g., mask, goggles and gloves, etc...) while on board the vessel;
- The US Coast Guard will screen all incoming commercial vessels in accordance to applicable guidance prior to granting entry into Apra Harbor;
- Port personnel attending to the vessel will not be allowed on board until clearances have been given by the Guam Customs & Quarantine Agency;
- Safety and Harbor Master Divisions will be required to oversee the clearance process and ensure the following:
  - A Pre-Operation Safety Brief will be conducted and shall include:
    - For every instance of potential exposure, this information shall be included in the Special Instructions prepared by the Operations Manager or his designee for the impacted vessel operation;
    - All Port personnel will be issued and required to use PPE (e.g., masks, goggles and gloves) prior to boarding the vessel;
    - Port employees shall minimize all interaction with the crew as much as practically possible and to avoid entering both private and common

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- areas of the vessels typically used by crew members;
- Port employees shall maintain safe distance from ship crew members;
- Do not shake hands;
- While on the vessel, work the plan; do not deviate from your assignment;
- Port personnel are prohibited from loitering alongside dock fronting the vessel;
- Exercise good hygiene by washing your hands often;
- Upon completion of operation, all employees are to report to Operations person-in-charge who will be responsible to ensure that all assigned to the shift are accounted for;
- Immediately report any problems or unsafe conditions to your leader or supervisor.
- Illness of a person onboard a vessel that may adversely affect the safety of a vessel or port facility is a hazardous condition per 33 CFR.216 and must be immediately reported to the U.S. Coast Guard Captain of the Port (COTP) under 33 CFR 160.206. Cases of person who exhibit symptoms consistent with COVID-19 must be reported to the COTP. Such individual will be evaluated and treated on a case by case basis; and
- Per 42 CFR 71.21, vessels destined for a U.S. port are required to report to the CDC any sick or deceased crew/passengers during the 15 days prior to arrival at a U.S. port. Guidance to vessels on reporting deaths and illnesses to the CDC can be found at: <https://go.usa.gov/xdjmi> (MSIB No. 02-20).

### **3. Response Measures**

- **Risk Communications and PAG Community Involvement**
  - Risk communication and Port community engagement is a critical component in the prevention and preparation for a potential COVID-19 outbreak; one that requires a total community approach;
  - In addition to real-time, consistent, and constant communication with the State EOC through the PAG's RACs, the PAG must communicate to its tenants and stakeholders what is known about COVID-19, what is unknown, what is being done, and actions to be taken on a regular basis;
  - Preparedness and response activities should be conducted in a participatory, Port community-based way that are informed and continually optimized according to feedback to detect and respond to concerns, rumors and misinformation;

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- Changes in preparedness and response interventions should be announced and explained ahead of time, and be developed based on Port community perspectives;
- Responsive, empathic, transparent and consistent messaging utilizing trusted platforms of communication is essential to establish authority and trust and building capacity;
- It is incumbent upon the Port to work with the US Coast Guard to ensure that open communication is maintained with originating shippers/entities to prevent the entrance of COVID-19 through Guam's only seaport;
- Port partners from different countries should stand ready to coordinate with each other to support communication and Port community engagement response; and
- The PAG General Manager may appoint the Safety Administrator as the Port's Point of Contact (POC) who will receive and disseminate updated information, state-led mitigation measures and address PAG business needs and continuity plans. The Safety Administrator will:
  - Ensure that employees have a clear understanding of their roles and responsibilities before a COVID-19 virus outbreak occurs;
  - Inform employees of preventive measures that will impact them and be kept updated on the policies and progress on the measures implemented by the PAG in the event of a virus outbreak;
  - May consider setting up a communication chat group for employee updates, status reporting and inquiries;
  - Identify relevant stakeholders such as suppliers/service providers and begin a dialogue on potential contingency measures prior to, during, and after a virus outbreak.

**VIII. COMMAND AND CONTROL**

The General Manager has overall authority and control in any emergency situation affecting the PAG – its employees, assets, tenants, and stakeholders. The Deputy General Manager for Operations, Police Chief, Harbor Master and Safety Administrator will assist the General Manager at the Port Command Center upon activation to address a potential COVID-19 incident.

**IX. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES**

All Division Heads and Superintendents are responsible to their respective employees in disseminating information and ensuring prevention, preparedness and response measures are strictly enforced.

1. Actively monitor development of the COVID-19 virus outbreak and work with management to disseminate messages to employees with clear instructions when measures need to be activated;

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2. Educate employees on the latest available information on the virus. Brief them on the need for infection control measures and the preventive procedures that have been set in place;
3. Collate updated contact information of all employees, i.e. home address/home telephone number/ mobile phone number. Make sure all employees have your contact number as well as that of the Safety Administrator;
4. Inform employees that they are to contact the Safety Administrator if they are admitted to a hospital with the suspected infection for contact tracing purposes;
5. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019> - check this website daily for updated advisories on the COVID-19 virus (e.g. travel advisories) and update employees accordingly;
6. Ensure that employees who have travelled to affected areas are quarantined for a sufficient number of days, as advised by the WHO. Check on employees' health by phone or email during his/her absence from work;
7. Ensure that the workplace has adequate supplies of tissue paper/hand towels, disinfectants, and masks; and
8. Immediately inform the General Manager and Safety Administrator of a potential infected employee and execute prevention and preparedness measures as identified in this Annex.

**X. AUTHORITY AND REFERENCES**

- Guam Code Annotated, Title 5, Section 85.8515 (Public Law 1-21)
- PAG General Manager February 18, 2020 Memorandum – Guidelines on Coronavirus and Appropriate Measures to Address Risk
- U.S. Coast Guard Marine Safety Information Bulletin (MSIB No. 02-20)
- 2019 World Health Organization (WHO) Strategic Preparedness and Response Plan – COVID-19
- 2017 U.S. Department of Health and Human Services (HHS) Pandemic Influenza Plan Update
- 2016 Guam Comprehensive Emergency Management Plan (Guam CEMP) - Pandemic Response Annex