

From:	[Redacted]
To:	[Redacted]
Subject:	RE: Concerns regarding the CIG WORKFORCE UPDATES
Date:	2020/03/10 18:20:23
Priority:	Normal
Type:	Note

Classification: ~~UNCLASSIFIED//FOUO~~
=====

Thank you. I appreciate the response.

[Redacted]

Belief is the death of Intelligence.
~Robert Anton Wilson

[Redacted]

Subject: RE: Concerns regarding the CIG WORKFORCE UPDATES

Classification: ~~UNCLASSIFIED//FOUO~~
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We are updating our guidance to reflect this.

[Redacted]

[Redacted]

Subject: Concerns regarding the CIG WORKFORCE UPDATES

(b)(3):10 USC 424; (b)(6)

Classification: ~~UNCLASSIFIED//FOUO~~

I am in southern California and we are being bombarded with COVID-19 information, as I am sure the DMV area is as well.

One distinction that medical professionals are attempting to emphasize is that words matter and definitions are not all the same.

So pardon me if I am mistaken, but it appears that the below updates are not using the word "isolation" correctly, as it relates to communicable diseases. In particular, there are numerous references to "self-isolation" if an employee believes to have been potentially exposed to COVID-19. I see there are CDC definitions for "self-monitoring" and "self-observation" included in the CICG Workforces updates. However, the CDC definition for "isolation" is not included, but clearly stated on the CDC website:

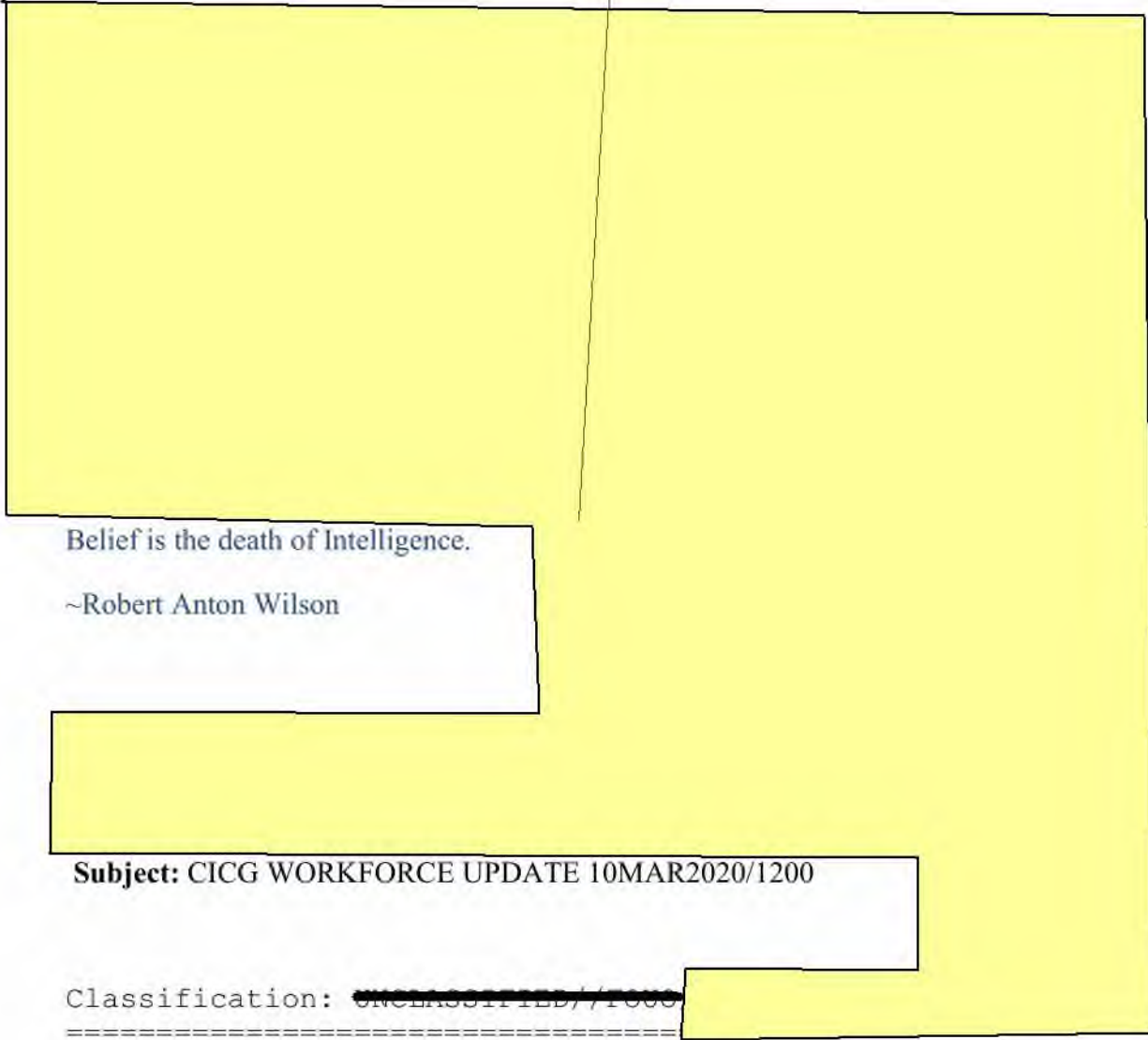
"Isolation separates sick people with a contagious disease from people who are not sick."

That is not the status described under the "self-isolation" guides and scenarios. I believe the accurate word would be "quarantine" – as defined by the CDC: "Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they people sick."

If I am mis-reading the below information, I apologize for taking up your time. However, I do believe these updates are not accurate in their use of "isolation." Given that this is coming from the COVID-19 Integration and Coordination Group (CICG) – the entity that has been given the mandate to provide accurate, timely information to the DIA workforce during this crisis – precision is paramount to successfully educating and informing the audience, as well as maintaining a level of trust in the institution providing the guidance.

(b)(3):10 USC 424; (b)(3):50 USC 3024(i); (b)(6)

Thank you for our time.



Belief is the death of Intelligence.

~Robert Anton Wilson

Subject: CIG WORKFORCE UPDATE 10MAR2020/1200

Classification: ~~CONFIDENTIAL//FOUO~~

Team:

Attached is the CIG Workforce Update for today.



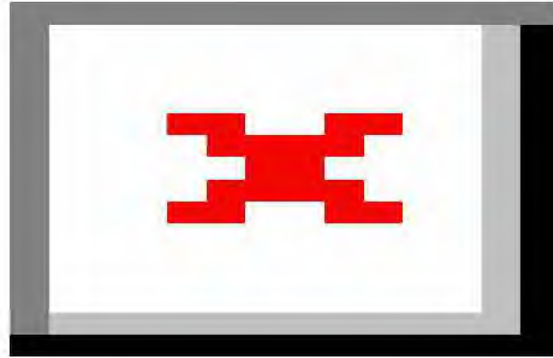
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ICG Workforce Update

10 MAR 2020 1200 EST

(b)(3):10 USC 424

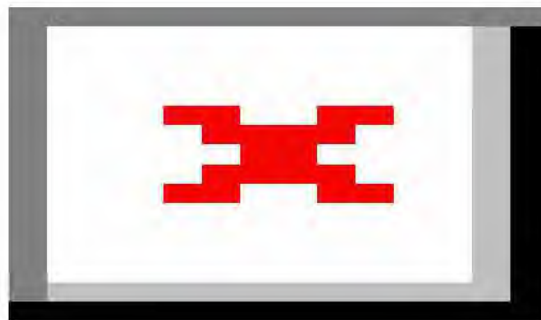
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(U) CONUS COVID-19 Statistics:

Map is UNCLASSIFIED.

SOURCE: Center for



Disease Control

Figure 2: Reported Cases

1. (U) 729 confirmed cases (+184)
2. (U) 26 deaths (+4)
3. (U) Total states with COVID-19
 - a. (U) 36 states (+4)
4. (U) States of interest:
 - a. (U) Alabama: No confirmed cases
 - b. (U) District of Columbia
 - i. (U) 23 patients being monitored/tested (+4)
 - ii. (U) 17 negative results (+3)
 - iii. (U) 4 presumptive positive results (+3)
 - c. (U) Maryland: 5 confirmed cases (+2)
 - d. (U) Virginia:
 - i. (U) 166 being monitored (+27)
 - ii. (U) 252 completed testing process with no public health action
 - iii. (U) 3 presumptive positive cases (+1)
 - e. (U) West Virginia: No confirmed cases
5. (U) States of emergency: 11 total (+3) Washington, California, Indiana, Kentucky, Maryland, New York, Pennsylvania, Utah, Ohio, Illinois, New Jersey
6. (U) COVID-19 comparison:
 - a. (U) Seasonal Flu: 0.1% fatality rate
 - b. (U) COVID-19: 3.5% fatality rate
 - c. (U) SARS: 10% fatality rate
 - d. (U) MERS: 35% fatality rate

(U) EMPLOYEES (MILITARY, CONTRACTORS, AND CIVILIANS) NEED TO CHECK THE COVID-19 ALERT SIGNS POSTED AT THE ENTRANCES AND ELEVATORS WITHIN DIA BUILDINGS ON A REGULAR BASIS AS NEW RESTRICTED COUNTRIES MAY BE ADDED.

(U) Employees working in one of the high-risk countries should monitor their health status. If they become symptomatic (cough, fever, shortness of breath) they should contact their medical provider first to receive guidance. Employees must then notify their supervisor if advised to stay at home; if admitted to a health care facility; or if placed in community quarantine related to COVID-19. If diagnosed with COVID-19, please contact the MSOC immediately at 202-231-1900.

(U) Unlike the common cold or seasonal flu, the specific symptoms of COVID-19 are cough, fever, and shortness of breath. If you experience symptoms, stay at home and call your medical provider for guidance.

(U) Precautionary measures include: frequent hand washing at work and home for at least 20 seconds with soap and water; use hand-disinfecting gels (containing 60% or greater alcohol); cough into your elbow; and try to avoid shaking hands whenever possible to reduce the risk of transmission of COVID-19.

(b)(3):10 USC 424; (b)(3):50 USC 3024(i); (b)(6)

Employee General Guidance

- **Do NOT shake hands.**
- **Wash your hands often with soap and water for 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.**

- Practice social distancing to reduce the probability of contact between persons carrying an infection, and others who are not infected, to minimize disease transmission, morbidity and ultimately, mortality.
- If sick or ill stay home and call your medical provider for guidance.

Employees who have visited China, Italy, Korea, Hong Kong, Japan, Iran within the last 14 days

- Are required to go home for 14 days home self-isolation.
- Self-observe for symptoms of COVID-19 (fever, cough, shortness of breath)
- Self-monitor for symptoms of COVID-19 (fever, cough, shortness of breath)
- Take your temperature twice a day (one in morning, once in evening)
- Call your medical provider for guidance if you experience the specific triad of symptoms. If you are unable to reach your provider, call urgent care, or your local hospital for guidance.
- If you test positive for COVID-19, notify your supervisor and call the DIA MSOC.
- Follow local and state health department authority guidance if you test positive for COVID-19.

Employees returning from China, Italy, Korea, Hong Kong, Japan, or Iran (scenarios)

- If a DIA employee tests positive for COVID-19
 - Their medical provider is legally required to notify state and local health departments of your health status.
 - Each health department has a COVID-19 website.

- If your provider asks you to report your own test information, contact the health department and provide the medical provider contact information.

Employees Scenarios for Home Self-Isolation (New)

- If a DIA employee comes into contact with any person (family, child, co-worker, clergy, shopkeeper) who is confirmed to have COVID-19, the employee goes into 14 day home self-isolation. See home self-isolation guidance.
- If a DIA employee comes into contact with *someone else* who came in contact with a COVID-19 diagnosed person (third party contact), then the employee reports to work and self-monitors. If possible, the employee will follow up with exposed person to see if they test positive.
- If a DIA employee is cohabitating with a person who just returned from a Level 2/3 country, the DIA employee will go into 14 day home self-isolation.
- If a DIA employee is in home self-isolation due to DIA guidance, but is not showing signs of COVID-19, the person is on Admin Leave. If the employee becomes ill, they go on Sick Leave.

Home Self-Isolation Guidelines for DIA Employees Working at DIA Facilities:

- Stay at home and do not come to work.
- Avoid all non-essential travel around the community.
- Avoid crowds, public events, meetings, social activities, or other group activities. If possible, have your food delivered to your door to minimize exposure and transmission.

- Avoid close contact (coming within 6 feet of someone): For example, you may take a walk outside but avoid close contact with others.
- Do not share utensils, toothbrushes, water bottles, pillows, and avoid shaking hands, kissing, hugging, or other intimate activities.
- Call your medical provider for guidance before going to a medical appointment. If you need to get urgent or emergency care, let the medical staff at your personal provider's office, the urgent care center or the emergency department medical staff at your local hospital know that you have been on home self-isolation because of travel to China, Korea, Hong Kong, Italy, Japan or Iran within the past 14 days.

How Do I Monitor My Health?

- During this time employees are required to monitor symptoms including fever, cough and shortness of breath.
- Employees must also check and record their temperature twice a day. If it's elevated above 100 degrees Fahrenheit during the 14 days, employees should call their medical provider first for further clinical guidance.

(b)(3):10 USC 424

CDC DEFINITION - *Self-monitoring means people should monitor themselves for fever by taking their temperatures twice a day (morning and evening) and remain alert for cough or difficulty breathing during the self-monitoring period, they should self-isolate, limit contact with others, and seek advice by telephone from a healthcare provider or their local health department to determine whether medical evaluation is needed.

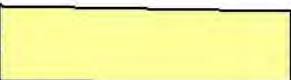
CDC DEFINITION - *Self-observation means people should remain alert for subjective fever, cough, or shortness of breath. If they feel feverish or develop cough or shortness of breath during the self-observation period, they should take their temperature, self-isolate, limit contact with others, and seek advice by

telephone from their healthcare provider or their local health department to determine whether further medical evaluation is necessary.

If You Must Go Out for Essential Reasons:

- Cough/sneeze into your shoulder/elbow.
- Wash your hands often with soap and water for 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Do not shake hands.
- Avoid touching your mouth, nose, and eyes to minimize transmission.

(U//FOUO)



Workforce Questions

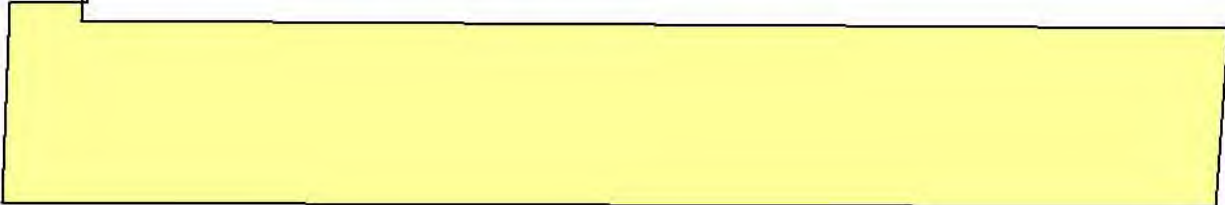
(b)(3):10 USC 424

1. (U) There is guidance, which encourages anyone who shows any symptoms of COVID-19 to seek a medical diagnosis. If an employee follows this recommendation, will DIA cover the cost of their medical expenses?

(U) DIA does not reimburse employees for personal medical expenses. The employee should consult their insurance provider regarding personal medical concerns.

2. (U) Is telework voluntary?

(U) Yes, generally, telework is a voluntary flexibility. However, in certain circumstance, employees may be required to telework.



"DOD Civilian Workforce Guidance 08 MAR 2020" – found under Admin tab

(U) Security Update

(U)The DIA Police and Office of Security are committed to protecting the Agency and its employees from the risks posed by potential exposure to the COVID-19. The DIA Police have established the following procedures to assist with protecting the workforce from possible COVID-19 exposure in DIA facilities:

1. (U) DIA employees and visitors to DIA facilities should expect to see additional procedures put in place to protect the workforce against the spread of the COVID-19.
2. (U) DIA Police have placed notices on the entrances of all DIA facilities notifying employees and visitors that if they have visited China, Hong Kong, Korea, Japan, Italy or Iran in the last 14 days, they will not be allowed in the facility.

(U) Service PCS Travel Restrictions

- (U) ARMY: On 7 Mar 20, the Department of the Army released fragmentary order (FRAGO) 4 from execute order (EXORD) 144-20 Army wide preparedness and response to COVID-19 outbreak. **Effective immediately, Army PCS moves to and from CDC Level 3 countries (Korea and Italy) will stop and delay travel until 6 May 2020 or further notice.** Soldiers stationed in countries with a CDC level 2 or above, who are scheduled to attend CONUS PME for 6 months or less, in a training status, will postpone their schooling until further notice. Soldiers in countries with CDC COVID-19 level of 2 and above, who are scheduled to attend CONUS PME for 6 months or longer, will arrive 14 days early to sites identified for screening and quarantine. Soldiers will not attend training, exercises, exchanges, and visits in countries with a CDC COVID-19 Level 2 and above, and international students from countries with a CDC COVID-19 alert level category 2 and above will not participate in all CONUS scheduled exercises, exchanges, and visits.