

From: [Redacted]
To: [Redacted]

Subject: CIGG WORKFORCE UPDATE 02APR20
Date: 2020/04/02 20:56:08
Priority: Normal
Type: Note

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

Classification: ~~UNCLASSIFIED//FOUO~~

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(U) CIGG Workforce Update

(U) DIA is now at Health Protection Condition (HPCON) Charlie.

02 April 2020/1700 EST

BREAKING NEWS

[Redacted Content]

(b)(3):10 USC 424

~~(U//FOUO)~~ PERSONNEL TRAVEL RESTRICTIONS

(b)(3):10 USC 424

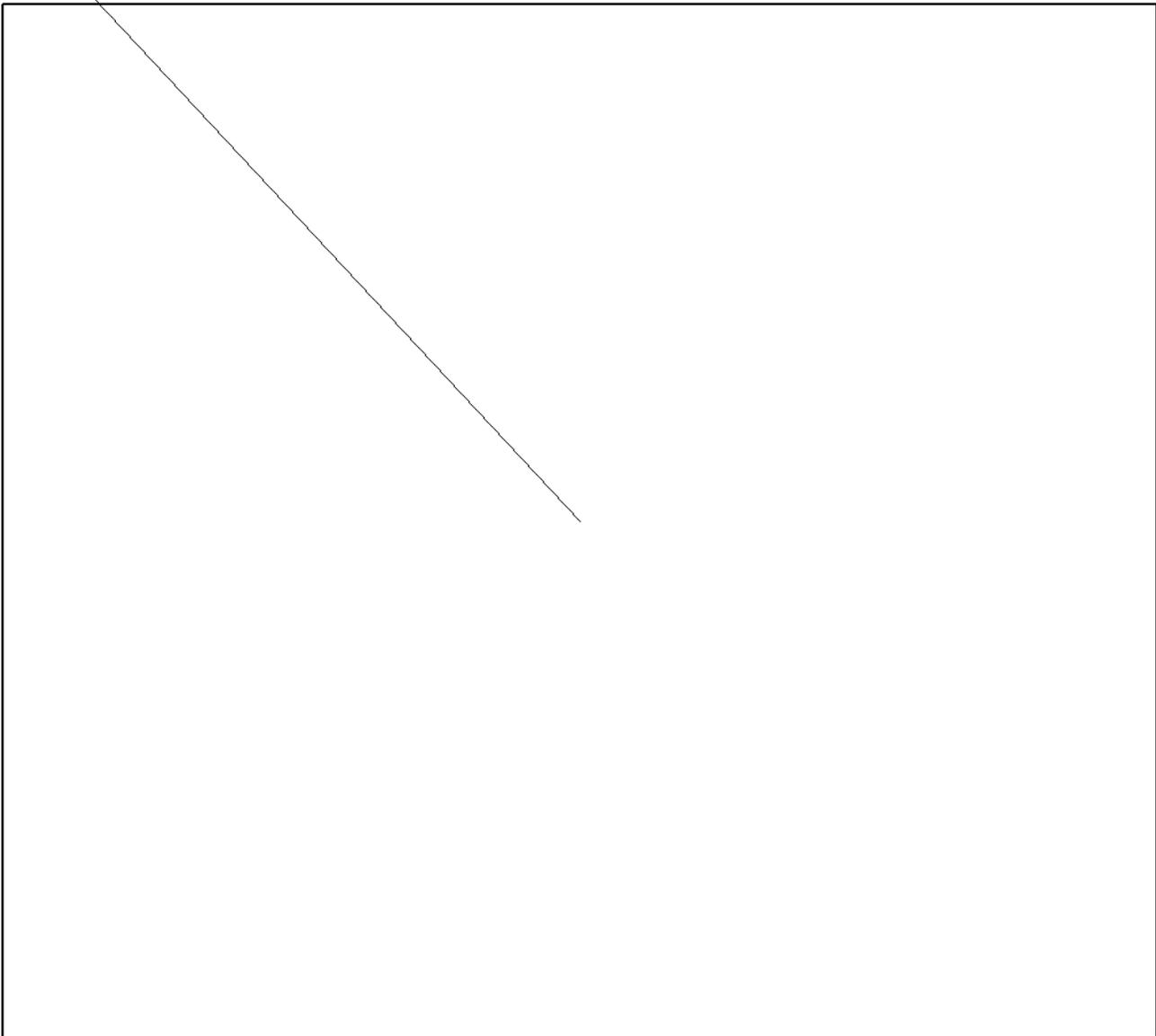
(U) Travel among the [redacted] DIA facilities [redacted]

To reduce risk of infection, and possible cross-contamination, minimize travel between the different DIA buildings. For example, if you work at Reston and need to communicate with HQ, call or utilize a Tandberg whenever possible.

- (U) If you, or someone living with you, **traveled to/from, or stopped in**, any foreign country, or the states of California, Colorado, Florida, Louisiana, Massachusetts, New Jersey, New York, Texas, and/or Washington within the past 14 days, you may not access any DIA facility. You must return home and self-monitor for 14 days before requesting a medical clearance to return to work. If you have symptoms, such as cough, fever, or shortness of breath, call your medical provider and notify your supervisor for further guidance. In keeping with the Governors of Maryland, Virginia, and District of Columbia "Stay-at-Home" orders, travel should be limited to home and duty station, unless traveling for gas, food, and medical emergencies, or as stated in the Executive Orders. Continue to maintain social distancing of at least six feet from any person while in public. This new guidance is intended to minimize exposure to you and your fellow employees.

Links: [Maryland Executive Order](#) | [Virginia Executive Order](#) | [D.C. Executive Order](#)

(b)(3):10
USC 424



(b)(3):10 USC 424

****Important Recurring Data****

I. (U) DIA Director Critical Information Requirements (Top of Page)

(U) LTG Ashley requests that all employees avoid inadvertently spreading possible contagions by going straight to their desks upon arriving at work. Detours and delays increase the potential risk of infection. Practice social distancing by avoiding face-to-face meetings and conducting business by telephone, [redacted] or other available options. Try to avoid touching surfaces and use body parts other than fingers (e.g., elbows or wrists) when you must. Use the hand sanitizer located at the main entrances and dispersed throughout the building.

****End Important Recurring Data****

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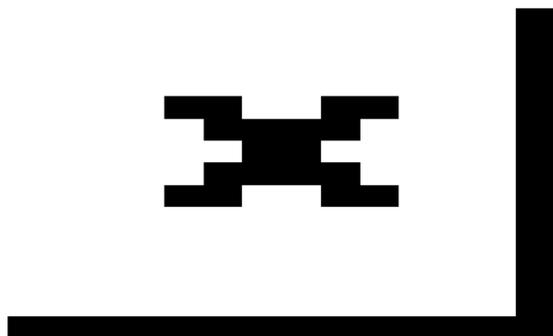
(U) To return to work, even though the DIA Clinic is closed, you MUST still call [redacted] for authorization before you return to duty.

Map is UNCLASSIFIED

SOURCE: World Health Organization

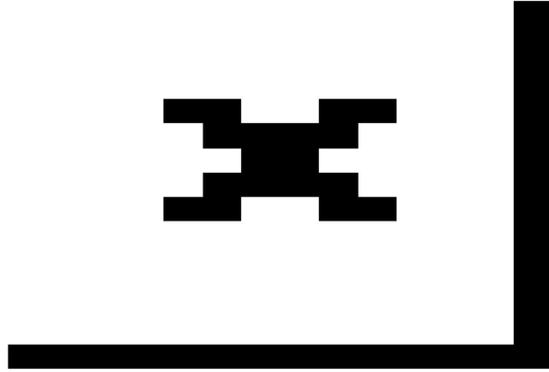
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USC 424

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(U) CONUS COVID-19 Statistics:
Map is UNCLASSIFIED

SOURCE: Center for Disease Control 02 April 2020



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(U) So, how should you handle grocery shopping? See Appendix A.

(U) How long can the COVID-19 virus stay in the air and on surfaces? See Appendix B.

(U) COVID-19 Increased Risks. See Appendix C.

(U) COVID-19 Diagnosis

(U) Medical providers will evaluate patients with symptoms of illness, including symptoms of COVID-19 (cough, fever, and shortness of breath), by completing a diagnostic assessment that includes, but is not limited to, the following: history of present illness and symptoms (the most important part of the evaluation), travel history/exposure history, past medical history, family medical history, current medications, and social history.

(U) Medical providers will then order laboratory and other tests to assist with making a diagnosis. These tests may include blood tests, strep tests, and flu tests.

(U) Given the severe shortage of COVID-19 laboratory tests and personal protective equipment (PPE), not all patients presenting COVID-19 symptoms will be tested. Medical providers are following CDC guidance along with clinical judgment to determine if a COVID-19 laboratory test will be ordered.

(U) Medical providers will then make a diagnosis to a reasonable degree of medical certainty:

- (U) A confirmed case/diagnosis based on medical provider diagnostic assessment of clinical symptoms and a COVID-19 positive laboratory test.
- (U) A presumptive clinical case/diagnosis case based on medical provider diagnostic assessment of clinical symptoms and without a COVID-19 laboratory test.

(U) Medical providers will initiate a COVID-19 treatment plan for both groups of patients.

(U) The CDC definition of a presumptive case of COVID-19 is different from a presumptive clinical case/diagnosis made by a medical provider. Per the CDC, a presumptive case of COVID-19 meant that a state laboratory confirmed a positive laboratory test for COVID-19, but the CDC laboratory had not confirmed it yet.

(U) If you think you might be getting sick, stay at home! Please do not threaten the safety of your co-workers!

(U/~~FOUO~~) If you are out for self-monitoring for COVID-19, have a test pending for COVID-19, tested positive for COVID-19, or were diagnosed with COVID-19, you are not permitted back into any DIA facility until you have been approved by the DIA Surgeon General. This applies to ALL personnel working in ALL DIA facilities (military, civilian, or contractor). Absolutely no one can approve you coming back into the building other than the DIA Surgeon General, who can be contacted at

(b)(3):10 USC 424

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USC 424

(U//~~FOUO~~) How to Contact OSG and Get Cleared: Employees, or supervisors on behalf of their employees, may request medical clearance, by sending an email on [redacted] OSG will need the name and contact number(s) for the employee.

[redacted]
(b)(3):10 USC 424

(U) Please remember it is important to continue practicing social distancing, hand hygiene, and respiratory hygiene to minimize your risk of exposure to and transmission of COVID-19.

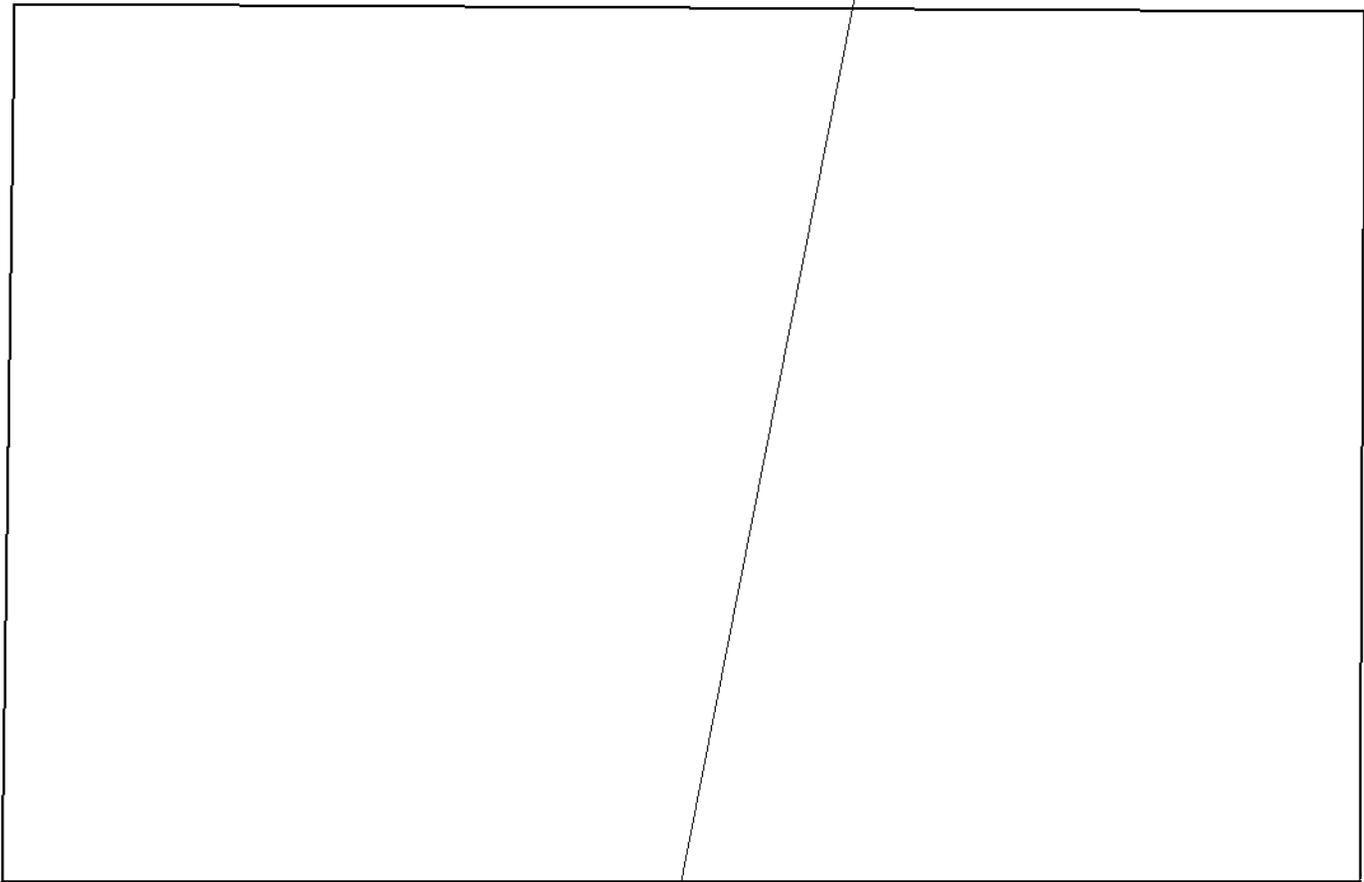
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V. (U) Office of Human Resources Update (Top of Page)

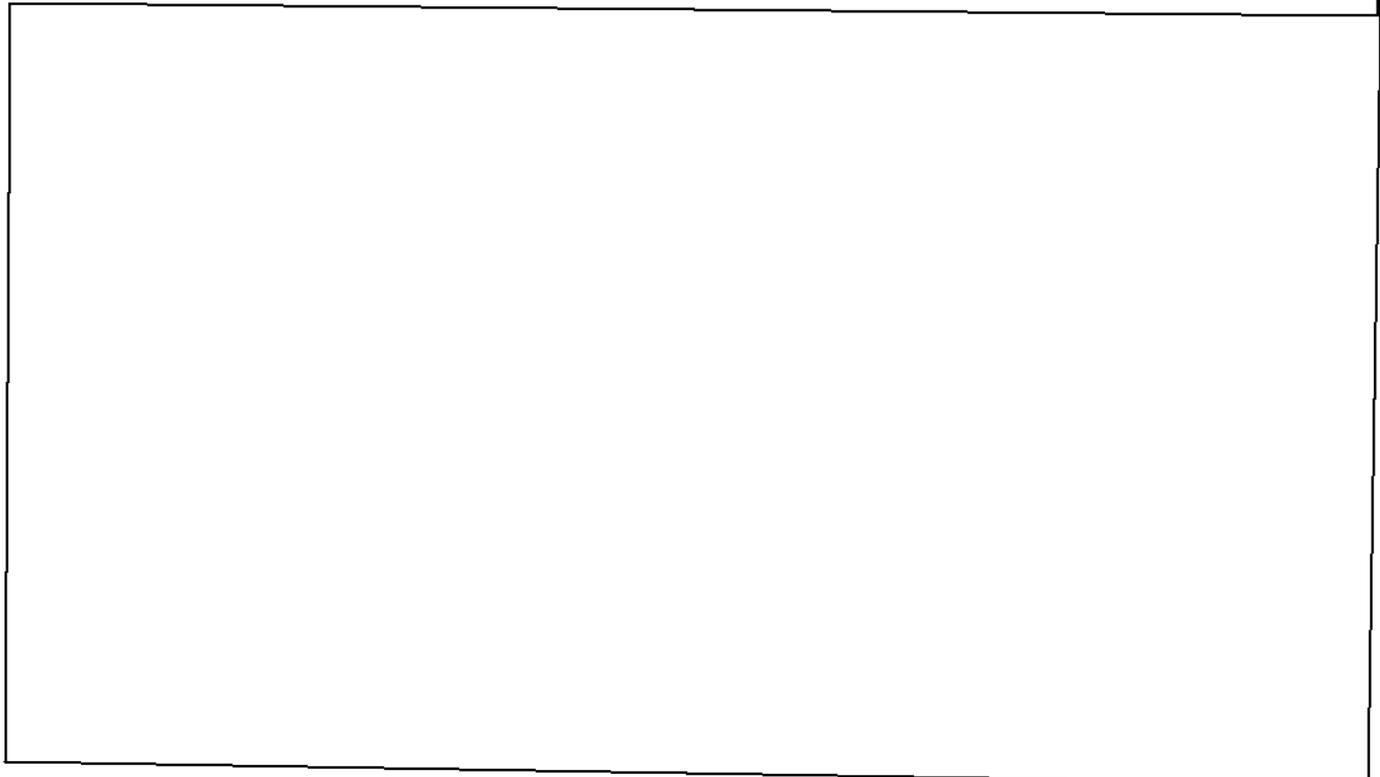
(U) Civilian employees, on military duty for more than 30 days, are entitled to Federal Employees Health Benefits (FEHB) coverage for up to 24 months. Further, employees activated under a contingency operation, may be entitled to an additional 22 days of military leave per calendar year. A full list of benefits available to DIA employees serving on active military orders will be posted to the CICG website later this week.

(U) CIO Updates to Admin Leave Coding for Timecards

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(U) To reduce risk of infection, and possible cross-contamination, do not move between different DIA buildings. If you work at Reston and need to communicate with HQ, use a phone/Tandberg whenever possible.





XIII. (U) Office/Special Office/IIC Information (Top of Page)

(U) The DI's top priority continues to be "protect the workforce." As such, DI has implemented a manning plan that seeks to optimize the available workforce, by limiting the number of officers in the workplace at any given time (the target being 25 percent), and by establishing a strategic reserve used to supplement gaps due to illness, isolation, daycare needs, or at-risk personnel not available.

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(U) [Redacted] The exceptions in DI are NCM1 and MARS, which continue to operate with 100 percent of available personnel, working daily on these critical mission areas.

(U) [Redacted] These are officers aligned to perform DI's mission-essential functions on a week-on/week-off schedule. Each team represents ~25 percent of the respective offices' overall manning, with some variations due to mission requirements. In all cases, DI leaders are constantly reviewing requirements to ensure only those officers necessary are in the workplace. In addition to overall numbers, DI is ensuring that social distancing is enforced in all

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

that we do, including meetings and seating assignments. These safe operating procedures are critical to protecting the strategic reserve [redacted]

(U) [redacted] This is DI's strategic reserve. DI has already cross-leveled the Directorate to ensure that NCMC has personnel aligned to all critical tasks.

(U) [redacted] officers who are not available to work right now. This includes officers identified as "At Risk", have daycare requirements, are in self-isolation, or are sick. [redacted] priority, for those not sick or performing daycare, is telework.

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

(U) If You're Picking Up Prepacked Groceries

(U) The steps are basically the same for this option as for delivery. If you've ordered and are merely having someone put the groceries in your car in a parking lot, consider opening your car door yourself rather than having the person bringing the items to your car touch the handle. If you can tip on a supermarket's app, do so rather than handing over cash.

(U) If You're Buying Groceries In A Store

(U) A key way to prevent the virus's spread is to stay six feet away from other people. Here are a few other ideas:

(U) Go shopping at a time that's less busy. If you type in the store's name and location in Google search, a box often will pop up showing when foot traffic there is highest.

(U) Take germicide (hand sanitizer/wipes) with you. Some stores offer wipes to disinfect carts before and after you shop. If they do not, bring your own wipes and wipe your cart yourself.

(U) Use a credit or debit card. That way, you don't have to hand over bills or receive change. Also, use your own pen to sign receipts. If you can, use a virtual payment system so that you don't have to open your wallet at all.

(U) Appendix B. (Top of page)

(U) A recent study from National Institutes of Health, CDC, UCLA and Princeton University scientists in The New England Journal of Medicine published findings about how long the virus strand that causes COVID-19 can live on surfaces and in the air.

(U) According to the report, SARS-CoV-2 (the virus) is detectable for:

(U) Up to 3 hours in aerosols (droplets in the air).

(U) Up to 4 hours on copper.

(U) Up to 24 hours on cardboard.

(U) Up to 3 days on plastic and stainless steel.

(U) Due to the virus' sustainability in the air and on these surfaces, infected individuals may be spreading the virus unknowingly. This study reinforces the recommended guidance from the CDC to help prevent the spread of germs. For more information on this study, search the New England Journal of Medicine for DOI: 10.1056/NEJMc2004973.

(U) Appendix C. (Top of page)

(U) Underlying Medical Conditions That May Increase the Risk of Serious COVID-19 for Individuals of Any Age

(U) Blood disorders (e.g., sickle cell disease or on blood thinners).

(U) Chronic kidney disease as defined by your doctor. Patient has been told to avoid or reduce the dose of medications because of kidney disease, or is under treatment for kidney disease, including receiving dialysis.

(U) Chronic liver disease as defined by your doctor (e.g., cirrhosis, chronic hepatitis). Patient has been told to avoid or reduce the dose of medications because of liver disease or is under treatment for liver disease.

(U) Compromised immune system (immunosuppression) (e.g., seeing a doctor for cancer and treatment such as chemotherapy or radiation, received an organ or bone marrow transplant, taking high doses of corticosteroids or other immunosuppressant medications, HIV, or AIDS).

(U) Current or recent pregnancy in the last two weeks.

(U) Endocrine disorders (e.g., diabetes mellitus).

(U) Metabolic disorders (such as inherited metabolic disorders and mitochondrial disorders).

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(U) Neurological, neurologic, and neurodevelopment conditions (including disorders of the brain, spinal cord, peripheral nerve, and muscle, such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability, moderate to severe developmental delay, muscular dystrophy, or spinal cord injury).

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(U) Supervisor approval is required prior to telework. Those employees deemed telework-eligible by their management will be directed to telework from home and instructed not to return to their duty stations until further notice.



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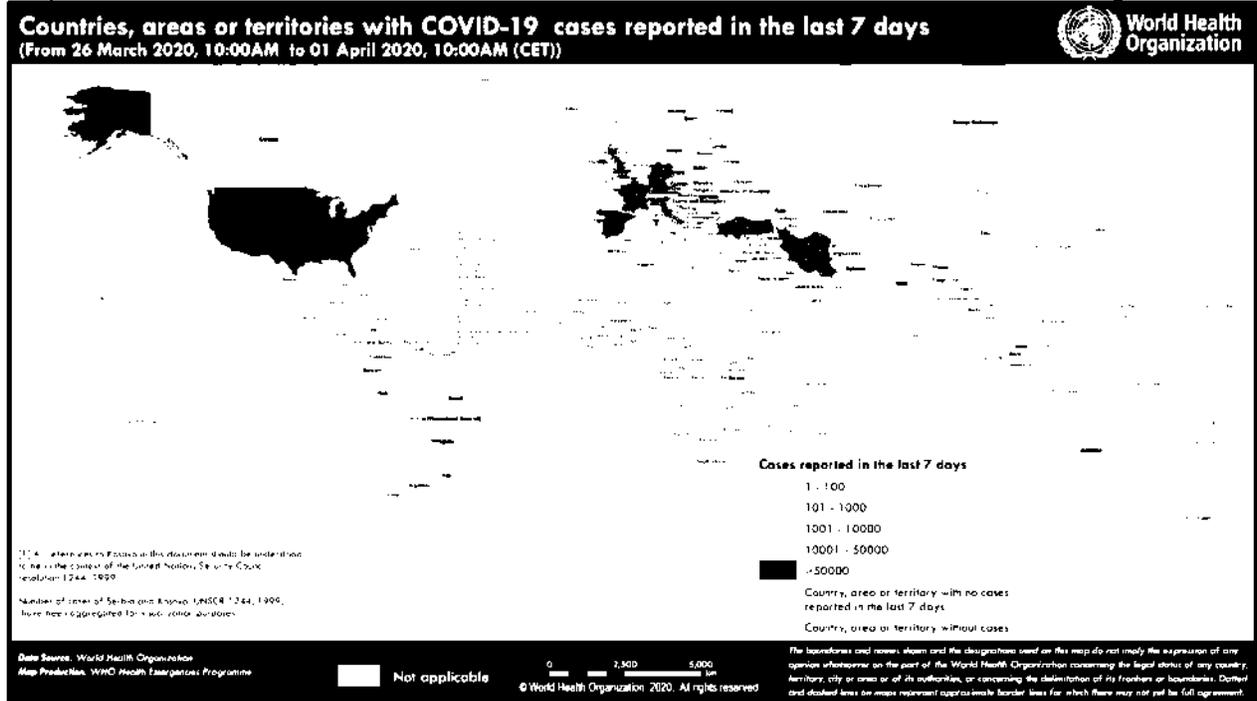
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Figure 2: Reported Cases

****New Data** ICD 02 0600L APRIL 2020**

(U) 214,461 (+26,214) confirmed cases

(U) 4,841 (+920) deaths

(U) States of Interest:

- (U) Alabama: 1,106 (+107) confirmed cases; 28 (+15) deaths
- (U) Colorado: 3,346 (+356) confirmed cases; 80 (+12) deaths
- (U) District of Columbia: 586 (+91) confirmed cases; 11 (+2) deaths
- (U) Florida: 7,765 (+1,024) confirmed cases; 100 (+15) deaths
- (U) **Hawaii**: 258 (+34) confirmed cases; 1 (+0) deaths
- (U) Illinois: 6,980 (+986) confirmed cases; 146 (+39) deaths
- (U) Maryland: 1,985 (+323) confirmed cases; 33 (+15) deaths
- (U) Nebraska: 249 (+56) confirmed cases; 5 (+1) deaths
- (U) Virginia: 1,511 (+261) confirmed cases; 34 (+7) deaths

(U) Source: Centers for Disease Control and Prevention

****End New Data****

III. (U) DIA Surgeon General Update (Top of Page)

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[Redacted]

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

been diagnosed COVID-19 positive, will have their DIA intelligence community badges turned off until they are approved for return by the Surgeon General.

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- NIPR: (b)(3):10 USC 424
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Non Responsive Record

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