

CBP Muster: CDC Recommendations on the Novel Coronavirus in Wuhan, China

Please direct any questions to the CDC quarantine station responsible for your port/station, link below:

With this muster, the Centers for Disease Control and Prevention (CDC) updates CBP about an outbreak of pneumonia cases and a novel coronavirus in Wuhan, China.

Situation update

- There is an outbreak of pneumonia in Wuhan, China
- On January 10, 2020, Chinese health officials reported 41 cases of pneumonia, 7 with severe illness, and one death.
- No new cases have been identified since January 3, 2020.
- The outbreak is preliminarily identified to be caused by a novel (or new) coronavirus.
- Coronaviruses are a large family of viruses. There are several known human coronaviruses that usually only cause mild respiratory disease, such as the common cold. However, at least twice previously, coronaviruses have emerged to infect people and cause severe disease, such as has been seen with severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS). These cases tested negative for both SARS and MERS. The characteristics of this virus and how it may affect people are still unclear.
- Chinese health officials report no confirmed human-to-human spread with this novel coronavirus and no health care workers caring for patients have been reported ill.
- Reportedly, most patients have had links to a large seafood and live animal market. The market has been closed since January 1, 2020, for cleaning and disinfection.
- The situation is evolving. CDC will update this muster as more information becomes available.

About pneumonia and the Wuhan symptoms

- Pneumonia is an infection of the lungs that can cause mild to severe illness in people of all ages.
- The main symptoms in the Wuhan pneumonia cases include:
 - Fever
 - Cough
 - Difficulty breathing

How can USBP Agents protect themselves?

- Avoid direct physical contact with sick travelers. If you encounter a traveler with fever, persistent cough, or difficulty breathing, maintain a distance of about 6 feet, **if possible**, and follow CBP protocols for use of personal protective equipment.
- Wash your hands often with soap and water or an alcohol-based hand sanitizer, especially after interacting with a sick traveler or touching potentially contaminated surfaces (e.g., touched by someone who is sick). Wash your hands even if you wore gloves.

What does CBP need to do?

- **Remain especially alert for sick travelers with fever, persistent cough, or difficulty breathing who have been in Wuhan, China in the past 2 weeks.**
- Follow instructions on the **RING card** or poster: **Recognize • Isolate • Notify • Give support.**
- Give the sick person a face mask, if available and can be tolerated, or ask them to cover their nose and mouth with a tissue when coughing or sneezing. Consider placing the sick person in a private room, if available.
- **Call your CDC quarantine station** (www.cdc.gov/quarantine/quarantinestationcontactlistfull.html) to notify CDC of any sick traveler with symptoms listed on the RING card, or if you have any questions.

For more information:

- Novel Coronavirus 2019, Wuhan, China: <https://www.cdc.gov/coronavirus/novel-coronavirus-2019.html>
- CDC Travel Health Notice for Novel Coronavirus in China:
<https://wwwnc.cdc.gov/travel/notices/watch/novel-coronavirus-china>
- WHO, Coronavirus: <https://www.who.int/health-topics/coronavirus>

Office of the Chief Human Capital Officer
Workforce Health and Safety Division
Health Advisory

January 22, 2020

TO: DHS Workforce

SUBJECT: ALERT-2019 Novel Coronavirus (2019-nCoV), Wuhan, China

The Centers for Disease Control and Prevention (CDC) is closely monitoring an outbreak caused by a novel (new) coronavirus in Wuhan City, Hubei Province, China. Chinese authorities identified the new coronavirus, which has resulted in approximately 300 cases of confirmed human infections in China: 2 cases in Thailand, 1 in Japan, 1 in Korea, 1 in Taiwan and 1 in Nepal.



Coronaviruses are a large family of viruses, some causing illness in people and others that circulate among animals, including camels, cats and bats. Rarely, animal coronaviruses can evolve and infect people and then spread between people such as has been seen with MERS and SARS. Most of the patients in the outbreak in Wuhan, China have reportedly had some link to a large seafood and animal market, suggesting a zoonotic origin to the outbreak.

This is a rapidly evolving situation and information will be updated as it becomes available. What you need to know now:

*CDC and the World Health Organization (WHO) have issued a level 1 travel notice (practice usual precautions) for this destination.

*The Coronavirus can be spread by Human to Human Transmission

*Standard recommendations to prevent infection spread include regular hand washing, covering mouth and nose when coughing and sneezing, thoroughly cooking meat and eggs.

*Avoid close contact with anyone showing signs of respiratory illness, such as coughing and sneezing, who has traveled to Wuhan, China or neighboring area.

*There is now one confirmed case in the United States.

Signs and Symptoms:

Common signs of infection include respiratory symptoms, fever, cough, shortness of breath and breathing difficulties. In more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and even death.

This Safety and Health Information Bulletin is not a standard or regulation, and it creates no new legal obligations. The Bulletin is advisory in nature, for internal DHS use only; informational in content, and is intended to assist supervisors and employees in providing a safe and healthful workplace.

Office of the Chief Human Capital Officer
Workforce Health and Safety Division
Health Advisory

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What can travelers do to protect themselves?

- Avoid non-critical travel to Wuhan, China and Hubei Province – for DHS employees.

If you are planning on traveling to the affected area:

- Avoid animals (alive or dead), animal markets, and eating raw or undercooked meat.
- Avoid close contact with anyone showing symptoms of respiratory illness such as coughing and sneezing.
- Wash hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer if soap and water are not available.
- Minimize physical contact and use hand sanitizer after hand shaking activity.

If you traveled to Wuhan and feel sick, you should:

- Stay home. Except for seeking medical care, avoid contact with others.
- Seek medical care right away. Before you go to a doctor's office or emergency room, call ahead and tell them about your recent travel and your symptoms.
- Do not travel while sick
- Cover your mouth and nose with a tissue or your sleeve (not your hands) when coughing or sneezing.

Wash hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer if soap and water are not available. Disinfecting surfaces:

When: Coronaviruses can live for long periods on surfaces, so regular cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift.

What: Broad-spectrum hard surface disinfectants from the EPA registered disinfectants found at [EPA Disinfectants and Sterilizers](#) are effective against similar viruses. Special chemicals are not needed; household bleach is also effective in a solution of 3/4 Cup per 1 gallon of water – spray or wipe on, let sit 5 minutes, then wipe off. Read and follow all

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Workforce Health and Safety Division
Health Advisory

disinfectant product information and directions, including any Personal Protective Equipment needed while using the product.

This is an emerging, rapidly evolving situation and Workforce Health & Safety will provide updated information as it becomes available.

References:

1. Centers for Disease Control and Prevention- <https://emergency.cdc.gov/han/han00424.asp>
2. Centers for Disease Control and Prevention - <https://wwwnc.cdc.gov/travel/notices/watch/novel-coronavirus-china>
3. World Health Organization - <https://www.who.int/health-topics/coronavirus>
4. https://www.epa.gov/sites/production/files/2016-12/documents/list_a_sterilizer.pdf

Job Hazard Analysis (JHA) & PPE Assessment	Job Title: Exposure to 2019 Novel Coronavirus (nCoV)		Date: January 29, 2020	New X	Revised
	Title of person who does job: All CBP Personnel in Affected Areas.	Supervisor: All	Prepared By: HRM, Occupational Safety and Health (OSH) Division CBP Senior Medical Advisor		
Office: All CBP	Location: CBP Wide	Department: All	Reviewed By: Office of Field Operations United States Border Patrol		
Required or Recommended Personal Protective Equipment: surgical masks, nitrile gloves, N95 respirator, protective outer garments, gown, shoe coverings, face shield or non-vented goggles			Approved by: OSH Division Director CBP Senior Medical Advisor		

Note: This JHA only applies to the 2019 Novel Coronavirus (nCoV) outbreak linked to Wuhan, China which is being investigated by the Centers for Disease Control (CDC), World Health Organization, (WHO), Occupational Health Administration (OSHA), and other public health agencies. Although the initial outbreaks of the 2019 novel Coronavirus are believed to be linked to exposure to shellfish and meat markets in Wuhan, China, new cases of the 2019-nCoV disease have been confirmed in neighboring countries, including some as far away as here in the United States. There is growing concern the disease can be passed from person to person like influenza. Health authorities in Wuhan, China and surrounding areas are monitoring this disease closely and steps are being taken to contain the disease locally. As of January 25, 2020 all modes of transportation leaving Wuhan City (air, rail, sea, etc.) have been closed and every effort is being taken to conduct exit screening at surrounding area airports.

More information about Coronavirus can be found here at the CDC Coronavirus link <https://www.cdc.gov/coronavirus/index.html>

Summary Risk Assessment: Incomplete information regarding incubation, infectious period, and transmissibility, as well as evolving circumstances make a definitive risk assessment challenging. In light of this, awareness and operationally-informed precautions are warranted. In general, the overall risk to CBP personnel is assessed to be low. However, risk increases with increased exposure to persons potentially infected with nCoV, warranting enhanced precautions described herein. CBP will continue to monitor the situation closely in coordination with appropriate stakeholders and will adjust guidance as appropriate. CBP personnel should continue to maintain situational awareness regarding this outbreak.

Note: Risk categories (Very High, High, Medium, and Low) are to be used in conjunction with this document only. They refer to the risk relative to the hazard identified; they do not correlate to overall risk of contracting Coronavirus Disease or risk categories used by other agencies such as the Centers for Disease Control (CDC), or in other documents such as the Workforce Health and Safety Coronavirus Health Advisories Screening Guidance, CDC Coronavirus Advisories, or Health Alert Notices (HAN) meant for other audiences.

Operations	Risk Category	Hazards	PPE/Recommendations
1. Office Settings, Administrative, and HQ Staff	Low	Casual or Close Contact of Coronavirus cases is not expected.	<ul style="list-style-type: none"> Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. Frequent hand washing. Stay home if you are ill. Cover your cough/sneeze. Use of surgical mask or N95 is NOT recommended. Voluntary use of surgical masks is allowed with supervisor approval, widespread use NOT recommended. See Page 5 Notes.
2. Airport Operations	Medium	Casual Contact with passengers or persons with increased risk of exposure; <ul style="list-style-type: none"> Who may have had a travel nexus to China within the past 14 days May be able to transmit disease while asymptomatic 	<ul style="list-style-type: none"> Frequent hand washing. Wear disposable nitrile gloves. Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. Passive screening of passengers for signs of illness. Use R.I.N.G. Card and general precautions. Separate passengers with a China travel nexus and send to CDC or secondary Avoid close or direct contact with passengers with a travel nexus to China within the past 14 days. Provide surgical masks to any passengers with signs of illness. Voluntary use of N95 respirators may be considered per CBP policy and supervisor approval. (See HB 5200-08B, Ch. 26).
3. Airport Operations	High	Limited Close Contact Within six (6) feet of any traveler from Wuhan City or any traveler from China with signs or symptoms of illness <ul style="list-style-type: none"> Runny Nose Coughing Headache Sore Throat Fever Flu Like Symptoms 	<ul style="list-style-type: none"> Frequent hand washing. Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. Quickly identify and separate symptomatic passengers from others. Provide surgical masks to symptomatic passengers. Wear disposable nitrile gloves. Avoid direct contact and keep close contact to a minimum. Officer/Agent wear N95 respirator within six (6) feet of symptomatic passenger. Use R.I.N.G. Card for general precautions. Refer/escort any travelers from Wuhan City or any traveler from China with symptoms to CDC for evaluation/interview. Contact EMS for severely ill passengers (high fever, uncontrollably coughing, difficulty swallowing, etc.).

Operations	Risk Category	Hazards	PPE/Recommendations
4. Airport Operations Secondary Passenger Processing “Entering an enclosed room/space where symptomatic person is being held or evaluated by CDC”	Very High	<p>Extended Close Contact Within six (6) feet of Symptomatic or ill passengers from China</p> <ul style="list-style-type: none"> • Runny Nose • Coughing • Headache • Sore Throat • Fever • Flu Like Symptoms 	<ul style="list-style-type: none"> • Frequent hand washing. • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. • Provide surgical masks to symptomatic passengers. • Wear disposable nitrile gloves. • Officer/Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination. • Avoid direct contact and keep close contact to a minimum. • Limit time in room to critical functions. • Use R.I.N.G. Card for general precautions.
5. Land Border Operations/ Border Patrol Check Points Primary Interdiction/processing of persons, vehicles or cargo. (Persons, Drivers, passengers, or stowaways with travel nexus to China within 14 days)	Medium	<p>Casual Contact with passengers or persons with increased risk of exposure;</p> <ul style="list-style-type: none"> • Who may have had a travel nexus to China within the past 14 days • May be able to transmit disease while asymptomatic 	<ul style="list-style-type: none"> • Frequent hand washing. • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. • Wear disposable nitrile gloves. • Passive lookout for signs of illness. • Use R.I.N.G. Card for general precautions. • Refer persons transiting via Wuhan City to CDC, medical personnel, local health system as appropriate for risk assessment. • Refer all persons transiting via China with symptoms to CDC, medical personnel, local health system as appropriate for risk assessment. • Avoid direct contact with a travel nexus to China within 14 days.
6. Land Border Operations/ Border Patrol Check Points Secondary Interdiction/processing of persons, vehicles or Cargo (Persons, driver, passengers, or stowaways with travel nexus to China within 14 days)	High	<p>Limited Close Contact Within six (6) feet of any traveler from Wuhan City or any traveler from China with signs or symptoms of illness</p> <ul style="list-style-type: none"> • Runny Nose • Coughing • Headache • Sore Throat • Fever • Flu Like Symptoms 	<ul style="list-style-type: none"> • Frequent hand washing. • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. • Quickly identify and separate symptomatic persons from others. • Provide surgical masks to symptomatic persons. • Contact nearest CDC quarantine officer/station for guidance. • Avoid direct contact or extended close contact. • Wear disposable nitrile gloves. • Officer/Agent wears N95 respirator within 6 (six) feet of symptomatic persons. • Use R.I.N.G. Card for general precautions • Refer persons transiting via Wuhan City or other regions in China to CDC, medical personnel, local health system as appropriate for risk assessment

<p>7. Land Border Operations/ Border Patrol Check Points</p> <p>"Entering an enclosed room/space where symptomatic person is being held pending evaluation by CDC or public health personnel"</p>	<p>Very High</p> <p><u>Extended Close Contact</u> Within six (6) feet of Symptomatic or ill travelers from China</p> <ul style="list-style-type: none"> • Runny Nose • Coughing • Headache • Sore Throat • Fever • Flu Like Symptoms <p>Frequent hand washing.</p> <ul style="list-style-type: none"> • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. • Provide surgical masks to symptomatic passengers. • Wear disposable nitrile gloves. • Officer/Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination. • Avoid direct contact and keep close contact to a minimum. • Limit time in room to critical functions. • Use R.I.N.G. Card for general precautions.
	<p>8. Disinfection and cleanup of Contaminated Surfaces</p> <p>Exposure to potentially harmful pathogens (Microorganisms) and disinfectant chemicals.</p> <ul style="list-style-type: none"> • Coronaviruses can live for long periods on surfaces, so regular cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift. • Use an EPA-registered disinfectant suitable for non-enveloped viruses (e.g. adenovirus, norovirus, poliovirus) to treat spills and to disinfect surfaces after bulk spill material has been removed. See https://www.epa.gov/sites/production/files/2016-12/documents/list_a_sterilizer.pdf • If an EPA-registered disinfectant is not available, use a 10% common household bleach-water solution (one (1) part chlorine bleach to nine (9) parts of water) to treat spills and to disinfect surfaces. • Nitrile or fluid impermeable gloves. • Wear an N95 respirator. • Eye protection (non-vented goggles) or face shield to cover nose and mouth. • Liquid impermeable gown (for large cleanup jobs wear liquid impermeable suit/coveralls). • Closed toe shoes and fluid impermeable shoe covers. • Dispose of all infectious material as bio hazardous waste in accordance with existing guidance.

Notes:

1. This JHA and PPE Assessment only applies to CBP operations related to exposure to 2019 Novel Coronavirus (2019-nCoV). This JHA only applies to operations that involve travelers and people who have traveled to, from or through countries identified as being affected by the Novel Coronavirus (2019-nCoV). At the time of developing this JHA, cases were being reported daily. See the CDC website below for current information on the 2019-nCoV Coronavirus Disease.
2. **CBP Respiratory Protection.** All CBP Officers and Agents who wear a respirator must be medically cleared and fit tested per the CBP Respiratory Protection Program Policy (See HB 5200-08B) and below link for respirator clearances website. All Voluntary Use of respirators will be per CBP policy as outlined in HB 5200-08B, CH 26.
3. The highest risk of contracting the 2019-nCoV Coronavirus Disease appears to be from it spreading from persons infected by the disease through coughing/sneezing in close contact with other people. Protecting yourself through droplet and respiratory protection much like other respiratory illnesses such as influenza is the best way to prevent the spread of Coronavirus Disease.
4. The HRM, OSH Division will monitor the 2019-nCoV Coronavirus Disease outbreak and will make recommendations to CBP leadership based on information received from DHS Workforce Health and Safety (WHS), CDC, OSHA, WHO and others.

References:

- CBP Muster on Coronavirus: [CBP/CDC Muster 2019 Coronavirus](#)
- CDC Coronavirus Website: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- CDC Coronavirus Frequently Asked Questions (FAQ's): <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>
- OSHA Coronavirus Webpage: https://www.osha.gov/SLTC/novel_coronavirus/
- CBP Respirator Medical Clearance's Website <https://resp-eval.foh.psc.gov/login/>
- EPA List of Disinfectants for Coronavirus: https://www.epa.gov/sites/production/files/2016-12/documents/list_a_sterilizer.pdf
- OSHA Fact Sheet – Protecting Workers During Pandemics: <https://www.osha.gov/Publications/OSHAFAQS-3747.pdf>

Job Hazard Analysis (JHA) & PPE Assessment	Job Title: Exposure to 2019 Novel Coronavirus (nCoV)	Title of person who does job: All CBP Personnel in Affected Areas.	Office: All CBP	

Operations	Risk Category	Hazards	PPE/Recommendations
1. Office Settings, Administrative, and HQ Staff	Low	Casual or Close Contact of Coronavirus cases is not expected.	<ul style="list-style-type: none"> Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. Frequent hand washing. Stay home if you are ill. Cover your cough/sneeze. Use of surgical mask or N95 is NOT recommended. Voluntary use of surgical masks is allowed with supervisor approval, widespread use NOT recommended. See Page 5 Notes.
2. Airport Operations	Medium	<u>Casual Contact</u> with passengers or persons with increased risk of exposure; Who may have had a travel nexus to China within the past 14 days May be able to transmit disease while asymptomatic	<ul style="list-style-type: none"> Frequent hand washing. Wear disposable nitrile gloves. Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. Passive screening of passengers for signs of illness. Use R.I.N.G. Card and general precautions. Separate passengers with a China travel nexus and send to CDC, other medical screeners, or secondary Avoid close or direct contact with passengers with a travel nexus to China within the past 14 days. Provide surgical masks to any passengers with signs of illness. Voluntary use of N95 respirators may be considered per CBP policy and supervisor approval. (See HB 5200-08B, Ch. 26).
3. Airport Operations	High	<u>Limited Close Contact</u> Within six (6) feet of any traveler from anywhere in China within 14 days Secondary Passenger Processing	<ul style="list-style-type: none"> Frequent hand washing. Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. Quickly identify and separate symptomatic passengers from others. Provide surgical masks to symptomatic passengers. Wear disposable nitrile gloves. Avoid direct contact and keep close contact to a minimum. Officer/Agent wear N95 respirator within six (6) feet of symptomatic passenger. Use R.I.N.G. Card for general precautions. Refer/escort any travelers from China within 14 days to CDC for evaluation/interview. Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).

Operations	Risk Category	Hazards	PPE/Recommendations
4. Airport Operations Secondary Passenger Processing “Entering an enclosed room/space where symptomatic person is being held or evaluated by CDC”	Very High	Extended Close Contact Within six (6) feet of any Symptomatic or ill passengers with travel to China within 14 days <ul style="list-style-type: none"> • Runny Nose • Coughing • Headache • Sore Throat • Fever • Flu Like Symptoms 	<ul style="list-style-type: none"> • Frequent hand washing. • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. • Provide surgical masks to symptomatic passengers. • Wear disposable nitrile gloves. • Officer/Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination. • Avoid direct contact and keep close contact to a minimum. • Limit time in room to critical functions. • Use R.I.N.G. Card for general precautions.
5. Land Border Operations/ Border Patrol Check Points Primary Interdiction/processing of persons, vehicles or cargo. (Persons, Drivers, passengers, or stowaways with travel nexus to China within 14 days)	Medium	Casual Contact with passengers or persons with increased risk of exposure; <ul style="list-style-type: none"> • Who may have had a travel nexus to China within the past 14 days • May be able to transmit disease while asymptomatic 	<ul style="list-style-type: none"> • Frequent hand washing. • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. • Wear disposable nitrile gloves. • Passive lookout for signs of illness. • Use R.I.N.G. Card for general precautions. • Refer persons with travel to China within 14 days to medical personnel, local health system, CDC as appropriate for risk assessment. • Avoid close or direct contact with persons with a travel nexus to China within 14 days.
6. Land Border Operations/ Border Patrol Check Points Secondary Interdiction/processing of persons, vehicles or Cargo (Persons, driver, passengers, or stowaways with travel nexus to China within 14 days)	High	Limited Close Contact Within six (6) feet of any traveler from	<ul style="list-style-type: none"> • Frequent hand washing. • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. • Quickly identify and separate symptomatic persons from others. • Provide surgical masks to symptomatic persons. • Avoid direct contact or extended close contact. • Wear disposable nitrile gloves. • Officer/Agent wears N95 respirator within 6 (six) feet of symptomatic persons. • Use R.I.N.G. Card for general precautions • Refer persons with travel to China within 14 days to medical personnel, local health system, CDC as appropriate for risk assessment

<p>7. Land Border Operations/ Border Patrol Check Points</p> <p>"Entering an enclosed room/space where symptomatic person is being held pending evaluation by CDC or public health personnel"</p>	<p>Very High</p> <p>Extended Close Contact Within six (6) feet of Symptomatic or ill travelers from China within 14 days</p> <ul style="list-style-type: none"> • Runny Nose • Coughing • Headache • Sore Throat • Fever • Flu Like Symptoms <p>High</p> <p>8. Disinfection and cleanup of Contaminated Surfaces</p>	<ul style="list-style-type: none"> • Frequent hand washing. • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5. • Provide surgical masks to symptomatic passengers. • Wear disposable nitrile gloves. • Officer/Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination. • Avoid direct contact and keep close contact to a minimum. • Limit time in room to critical functions. • Use R.I.N.G. Card for general precautions. <ul style="list-style-type: none"> • Coronaviruses can live for long periods on surfaces, so regular cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift. • Use an EPA-registered disinfectant suitable for non-enveloped viruses (e.g. adenovirus, norovirus, poliovirus) to treat spills and to disinfect surfaces after bulk spill material has been removed. See https://www.epa.gov/sites/production/files/2016-12/documents/list_a_sterilizer.pdf • If an EPA-registered disinfectant is not available, use a 10% common household bleach-water solution (one (1) part chlorine bleach to nine (9) parts of water) to treat spills and to disinfect surfaces. • Nitrile or fluid impermeable gloves. • Wear an N95 respirator. • Eye protection (non-vented goggles) or face shield to cover nose and mouth. • Liquid impermeable gown (for large cleanup jobs wear liquid impermeable suit/coveralls). • Closed toe shoes and fluid impermeable shoe covers. • Dispose of all infectious material as bio hazardous waste in accordance with existing guidance.
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Notes:

1. This JHA and PPE Assessment only applies to CBP operations related to exposure to 2019 Novel Coronavirus (2019-nCoV). This JHA only applies to operations that involve travelers and people who have traveled to, from or through countries identified as being affected by the Novel Coronavirus (2019-nCoV). At the time of developing this JHA, cases were being reported daily. See the CDC website below for current information on the 2019-nCoV Coronavirus Disease.
2. **CBP Respiratory Protection.** All CBP Officers and Agents who wear a respirator must be medically cleared and fit tested per the CBP Respiratory Protection Program Policy (See HB 5200-08B) and below link for respirator clearances website. All Voluntary Use of respirators will be per CBP policy as outlined in HB 5200-08B, CH 26.
3. The highest risk of contracting the 2019-nCoV Coronavirus Disease appears to be from persons infected by the disease through coughing/sneezing in close contact with other people. Protecting yourself through droplet and respiratory protection much like other respiratory illnesses such as influenza is the best way to prevent the spread of Coronavirus Disease.
4. The HRM, OSH Division will monitor the 2019-nCoV Coronavirus Disease outbreak and will make recommendations to CBP leadership based on information received from DHS Workforce Health and Safety (WHS), CDC, OSHA, WHO and others.

References:

- CBP Muster on Coronavirus: [CBP/CDC Muster 2019 Coronavirus](https://www.cdc.gov/coronavirus/2019-nCoV/muster/)
- CDC Coronavirus Website: <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>
- CDC Coronavirus Frequently Asked Questions (FAQ's): <https://www.cdc.gov/coronavirus/2019-nCoV/faq.html>
- OSHA Coronavirus Webpage: https://www.osha.gov/SLTC/novel_coronavirus/
- CBP Respirator Medical Clearance's Website <https://resp-eval.foh.psc.gov/login/>
- EPA List of Disinfectants for Coronavirus: https://www.epa.gov/sites/production/files/2016-12/documents/list_a_sterilizer.pdf
- OSHA Fact Sheet – Protecting Workers During Pandemics: <https://www.osha.gov/Publications/OSHAFAQS-3747.pdf>

Guidance to BP Sectors on Novel Coronavirus, Wuhan, China

CBP Senior Medical Advisor

2/6/20 - Situation Summary

CBP is working with The Centers for Disease Control and Prevention (CDC) to closely monitor an outbreak caused by a novel (new) coronavirus (2019-nCoV) first identified in Wuhan City, Hubei Province, China. The situation is evolving. For the most current information, monitor DHS and CBP messages and check the CDC information page at <https://www.cdc.gov/coronavirus/2019-ncov/index.html> frequently for updates.

While most of the people identified with 2019-nCoV have association with Wuhan City, there has been significant spread throughout China and increasingly to other countries around the world. To date there have been multiple confirmed cases in the United States; this number is expected to continue to increase. The USG has enacted strict entry restriction and screening measures for persons with travel to China.

I. CBP Workforce Health Protection Guidance

- CBP Senior Medical Advisor continues to work with CBP OSH, DHS OCHCO, BP Safety, and BP operational leadership to monitor workforce health protection issues and PPE recommendations and requirements
- ***Updated CBP Job Hazard Analysis and PPE Assessment attached***
- ***Agents may print attached pocket cards for distribution as appropriate***
- The situation and information continue to evolve rapidly. Additional guidance or modifications will be provided as appropriate.

II. Reporting Requirements (Applies to all detainees with potential/suspected nCoV). Reports must be made within 1-hour or as soon as operationally practicable.

EVERY DETAINEE FROM CHINA OR WITH HISTORY OF TRAVEL TO CHINA:

Name

A#

DOB

Date of Apprehension:

Location of Apprehension:

Travel History:

- a) travel within mainland China within last 14 days: **Y/N**
- b) Details

Symptoms (fever/cough/difficulty breathing): **Y/N**

Consulted with CDC (required if positive travel history in China within last 14 days): **Y/N**

Disposition:

- a) Referred to hospital
- b) Quarantined (per CDC)

- c) Transferred to: _____
- d) Released

- **Reports must be routed through the CoC, USBP corridors with a cc to the following personnel:**

- (A)ACC (b)(6)&(b)(7)(C)
- (b)(6)&(b)(7)(C) (b)(6)&(b)(7)(C)
- CBP Medical Planner: (b)(6)&(b)(7)(C)
- ASC (b)(6)&(b)(7)(C)

III. Guidance for Border Patrol encounters with potential nCoV cases

1. During Field Encounter/Intake Processing

- a. Ask detainees if they have traveled from or through China in the past 14 days
- b. If no, continue regular processing to include health intake interview and medical assessment as appropriate.
- c. If yes, provide surgical mask and refer detainee to medical personnel onsite if available for health intake interview/medical assessment as appropriate and contact CDC quarantine station. Follow guidance below in consultation with medical personnel
 - i. If no medical personnel available onsite => place surgical mask, isolate, contact CDC quarantine station. Based on CDC guidance, contact local health system
- d. **For detainees with recent travel to China AND signs/symptoms of illness → refer to #2 below**
- e. **For detainees with recent travel to China AND NO signs/symptoms of illness → provide surgical mask, isolate, monitor for flu-like symptoms (cough, difficulty breathing, shortness of breath, complains of fever).**
 - i. Ensure appropriate workforce PPE (Section 1 above and JHA attached)
 - ii. If detainee develops flu-like symptoms, then see #2 below
 - iii. **Ensure contact CDC EOC Watch Desk/local CDC quarantine station to determine disposition prior to transfer or release**
 - iv. Continue processing and coordinate expedited transfer to ICE or HHS as appropriate with proper notification and documentation of circumstances.

2. For detainees with recent travel to China AND symptoms of respiratory illness:

- a. Ensure a tight-fitting surgical mask is on the detainee.
- b. Isolate the detainee to the extent possible. Practice social distancing.
- c. Ensure appropriate workforce PPE (Section 1 above and JHA attached) and notify local collateral duty safety officer if additional PPE is required
- d. Promptly consult with local medical contract personnel if available

- e. Coordinate transfer to hospital for evaluation with advanced notification of circumstances (if seriously ill – activate 911/EMS with notification of circumstances)
 - f. Ensure contact with CDC EOC Watch Desk/local CDC quarantine station for disposition
3. ***For close contacts (all persons) with detainees with travel to China within 14 days***
- a. Provide surgical mask
 - b. Implement isolation/separation with restricted movement
 - c. **Contact CDC EOC Watch Desk/local CDC quarantine station to determine disposition**
 - d. Monitor isolated detainees to observe for flu-like symptoms, if symptoms develop – see #2 above
 - e. Coordinate expedited transfer to ICE or HHS as appropriate

CDC Points of Contact:

- CDC EOC/Watch Desk – 1-866-638-9753 Opt # 0 (24 hour ops)
- El Paso Quarantine Station – 1-915-834-5950
- San Diego Quarantine Station – 1-619-692-5665

CBP Medical Points of Contact:

- (b)(6)&(b)(7)(C) CBP Senior Medical Advisor, (b)(6)&(b)(7)(C)
(b)(6)&(b)(7)(C) [REDACTED]
- SOS (b)(6)&(b)(7)(C) CBP Operational Medicine Advisor,
(b)(6)&(b)(7)(C) [REDACTED]
- (b)(6)&(b)(7)(C) CBP Medical Planner, (b)(6)&(b)(7)(C) (b)(6)&(b)(7)(C)
(b)(6)&(b)(7)(C) [REDACTED]

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PREFACE

This standard operating procedure (SOP) was developed for use during a pandemic outbreak to mitigate a mass migration during the crisis. The Del Rio Sector Chief Patrol Agent, in consultation with the Department of Homeland Security (DHS) Office of Health Affairs and Health and Human Services, will determine when Border Patrol facilities will be used as quarantine locations. When Border Patrol stations are used for isolation and quarantine it will be on a short-term basis until the appropriate agencies can find a suitable location for long-term care.

Pandemic Definition

A sudden outbreak that becomes very widespread and affects a whole region, continent, or the world due to a susceptible population.

Epidemic Definition

A widespread occurrence of an infectious disease in a community at a particular time.

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ANNEXES

DRT Decontamination and Response Kit Standard Operating Procedures
Del Rio Sector Infectious Disease Control Plan-Ebola

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ACRONYMS

Agencies

Office of Border Patrol	OBP
Immigration and Customs and Enforcement	ICE
Homeland Security Investigations	HSI
Enforcement Removal Operations	ERO
Health and Human Services	HHS
Centers for Disease Control	CDC
U.S. Customs and Border Protection	CBP
Department of Homeland Security	DHS
Office of Health Affairs	OHA
United States Department of Agriculture	USDA
Office of Field Operations	OFO
Instituto Nacional de Inmigracion	INM

Positions and Titles

Chief Patrol Agent	CPA
Incident Commander	IC

Del Rio Sector Departments

Border Patrol Search, Trauma and Rescue	BORSTAR
Border Patrol Tactical Unit	BORTAC
Del Rio Border Patrol Sector	DRT
Strategic Communications Branch	SCB
Training and Traumatic Incident Branch	TTIMB
Law Enforcement Operations Division	LEOD
Law Enforcement Operations Programs	LEOP
Missions Readiness Operations Division	MROD
Prosecutions Office	PROS
Border Intelligence Center	BIC
Sector Intelligence Unit	SIU
Occupational Safety and Health Office	OSH
Office of Incident Management	OIM
Special Operations Detachment	SOD
International Liaison Unit	ILU

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INTRODUCTION

U.S. Customs and Border Protection (CBP) is the first line of our nation's defense against a pandemic disease outbreak, both overseas and along our borders. During a pandemic disease outbreak, it is likely that Del Rio Sector personnel and their enforcement partners will encounter American citizens, foreign nationals, animals, animal products, and cross-contaminated products from areas with a high-risk of infection. In response to this threat, the Del Rio Sector must be prepared to mitigate a pandemic disease outbreak while continuing its mission essential functions.

PURPOSE

This plan is intended to provide planning guidance for Del Rio Border Patrol Sector personnel (DRT) in the implementation of specific measures to protect the nation as they correlate to the five threat phases for a pandemic disease response. This plan is to be applied in conjunction with the U.S. Customs and Border Protection (CBP) and Office of Border Patrol (OBP) Operations Plan for Pandemic Response.

SITUATION

CBP is the first line of our nation's defense against pandemic diseases, both overseas and along our borders. In response to this threat, Del Rio Sector must be prepared to maintain its mission essential operations, to include:

- Securing our nation's borders;
- Preventing the entry of terrorists and their weapons of terror;
- Protecting our workforce and the public; and
- Containing, or otherwise mitigating the spread of pandemic disease.

CRITICAL ASSUMPTIONS

General Public

- A global outbreak of an infectious disease can occur at any time;
- Early detection, proper containment and screening methods can slow the spread into the United States;
- Susceptibility to pandemic diseases will be universal;
- Multiple waves (periods during which community outbreaks occur across the country) of illness could occur with each wave lasting two-three months.

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- Public Health Officials will implement measures and community mitigation strategies to include closing schools, social distancing, quarantining contacts of infected individuals, and other measures which are likely to increase rates of absenteeism.

CBP Planning Assumptions

- In a severe pandemic outbreak, absenteeism attributable to illness and the need to care for ill family members, will increase;
- Once an infectious disease begins to spread there will be a significant number of infected travelers and undocumented aliens detained pending removal or being turned over to medical authorities;
- Applicants seeking admission into the United States at ports of entry (POEs) will increase as well as illegal entries between ports of entry;
- A pandemic outbreak may trigger a mass migration to the United States along the land borders where there are better medical care and public health programs;
- A pandemic disease outbreak may create massive disruptions in travel and commerce, and challenge the essential stability of governments and society;
- CBP personnel, vehicles, and facilities will be exposed to and/or contaminated by infectious disease pathogens. The contamination of facilities and equipment may have a substantial impact on sustaining operations;
- Mexico and other countries may begin to refuse repatriation of its citizens, CBP facilities will be rapidly overwhelmed. The availability of detention and isolation facilities will directly impact CBP operations.

Border Patrol-Specific Planning Assumptions

- (b) (7)(E)
- Managers will have to maintain a supply of Personal Protective Equipment (PPE) for both personnel and detainees;

- (b) (7)(E)

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* (b) (7)(E)

MISSION

Del Rio Sector will protect the nation by sustaining its operational capabilities and maintaining its mission essential functions. In addition, maintaining operational control of the border is a part of national critical infrastructure protection.

While Del Rio Sector cannot prevent the global spread of an infectious disease, it can help mitigate the severity of outbreaks.

OBJECTIVES

- Ensure public safety and national security;
- Protect the health and safety of Del Rio Sector personnel;
- Mitigate the spread of a pandemic disease into and/or out of the United States;
- Prevent the use of an infectious disease as a bioterrorism agent against the United States;
- Remain vigilant to the possibility of terrorists using the crisis surrounding the pandemic disease to smuggle themselves and their weapons into the United States;
- Work with federal, state, local, and tribal government partners and the private sector to coordinate interoperable response capabilities;
- Work with foreign governments to coordinate our actions and to extend the zone of security against the threat;
- Increase awareness through education and information dissemination.

EXECUTION

The CBP Operations Plan for Pandemic Response has five planning stages associated with responses to a pandemic disease threat. The DRT Pandemic Disease Response Plan will follow the same outline and will flow in concert with the national plan. Each phase contains preparedness and response requirements. In some instances the actions contained within each phase will overlap due to concurrent and multiple threats. This will facilitate a rapid, coordinated, and tailored response.

Coordination

During the incident, the Del Rio Sector will appoint a Staff Officer who will be the Incident Commander (IC). The IC will be the sector's point of contact for coordination during an infectious disease outbreak. This Staff Officer will be in contact with the Office of Border Patrol to ensure measured responses as changes to the threat conditions occur.

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(b) (7)(E)

Communication Protocols and Reporting Requirements

The Del Rio Sector Border (b) (7)(E) will serve as DRT's Emergency Operations Center (EOC) during a pandemic disease incident. (b) (7)(E)

(b) (7)(E)

Throughout the incident, the (b) (7)(E) will continue to coordinate with and determine the current capacity of each station. Station command staff will notify the (b) (7)(E) of any incidents or issues that would preclude or limit their station's ability to house detainees.

In accordance with current CBP guidelines the (b) (7)(E) will coordinate with stations and departments to ensure that all reporting requirements such as Significant Incident Reports (SIRs) are completed when applicable.

RESPONSIBILITIES-PREPAREDNESS ACTIVITIES

Personal Protective Equipment

- Station and departments will ensure that they have sufficient Personal Protective Equipment (PPE) for their personnel;
- The Del Rio Sector (DRT) Occupational Safety and Health Office (OSHI) will stock and warehouse PPE in order to resupply stations when needed. They will also assist in determining PPE requirements particular to the infectious disease and ensure there is a 60-day supply;
- The Del Rio Sector Office of Incident Management (OIM) will ensure that a contingency stockpile is maintained for deployment with the Del Rio Sector Special Operations Detachment (SOD). They will also assist with the creation of informational muster grams for dissemination through the Del Rio Sector Border Intelligence Center (BIC);
- The Del Rio Sector Training and Traumatic Incident Management Branch (TTIMB) will assist by securing, recommending and providing refresher PPE training. In some instances they may have to secure PPE training for specialized PPE;
- The Del Rio Sector Strategic Communications Branch (SCB) will assist with a messaging campaign regarding the infectious disease and countermeasures or prevention;

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- Del Rio Sector Special Operations Detachment (SOD) will coordinate with DRTOIM to develop special PPE response kits for deployment to incidents in the field.

Del Rio Sector Command Staff Preparations

- In accordance with the CBP Plan for Pandemic Response ensure that Occupant Emergency Plans and Continuity of Operations Plans are current and accessible;
- Establish point of contacts and coordinate with other CBP offices, Department of Homeland Security (DHS) agencies, and other federal state, local and tribal law enforcement agencies;
- Establish liaisons and Points of Contact (POC's) with the U.S. Department of Health and Human Services (HHS), Center for Disease Control (CDC), U.S. Department of Agriculture (USDA), Texas Department of State Health Services, local County and City Managers, local hospitals and medical facilities, and any other partner agencies deemed critical in preparation of, response to, and recovery from pandemic disease.

Station and Department Preparations

- DRTOSH will develop an annual safety inspection schedule that specifically targets infectious disease preparations. During the inspections they will assist with identifying and acquiring PPE, hand sanitizer, disinfectants and the required amounts. (b) (7)(E)
- DRTSOD will ensure that station Emergency Medical Technicians are provided safety and informational briefs regarding the infectious disease. They will also coordinate with federal and local entities such as the Centers for Disease Control (CDC) and Texas Department of State Health Services (TDSHS) to identify the proper medical training for the particular infectious disease. If needed, they will work with DRTOIM to develop guidelines and protocols for agents who may encounter infected persons in the field;
- DRTOIM will coordinate with DRTOSH to facilitate an annual infectious disease exercise. The exercise will include participants from sector stations, departments and local agencies, appropriate;
- DRTOIM will conduct exercises for activation of the Point of Dispensing (POD) to dispense medical countermeasures during a pandemic outbreak;
- DRTTIMB will identify training requirements and determine training suspense dates for stations. DRTTIMB will coordinate with the Law Enforcement Operations Branch to identify and require refresher training available in the Virtual Learning Center (VLC) that are salient to the incident;
- Stations and Departments will:
 - (b) (7)(E)

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- Inventory vehicles equipped with separate ventilation systems and use these vehicles when transporting persons exposed to or infected by a disease;
- Ensure that agents have PPE in their vehicles, at checkpoints, and in processing areas;
- Ensure agents have the proper equipment to disinfect and clean up processing areas, vehicles and contaminated surfaces;
- Coordinate with DRTOSH to ensure they maintain a stockpile of disinfectants to assist in decontamination and cleanup of areas exposed to infectious diseases. They will also coordinate with DRTOSH for the proper methods and application of disinfectants;
- Coordinate with DRTOSH, and DRITTIMB to ensure annual PPE training is conducted;
- Contact and coordinate with local agencies for guidance regarding local response efforts and capabilities;

Designation of Quarantine Facilities

During a pandemic disease outbreak infected children and adults will be isolated at quarantine stations for a short term until other agencies are able to provide long-term care and detention. Healthy or asymptomatic detainees will be detained and processed at separate stations.

The DRT Chief Patrol Agent has designated the (b) (7)(E) as quarantine facilities. The (b) (7)(E) is the primary quarantine facility for detaining and processing children and family units infected with a contagious disease. (b) (7)(E) will be the primary quarantine facilities for detaining and processing adults.

Upon direction by the Chief Patrol Agent, the Del Rio Sector Law Enforcement Operations Division (DRTLEOD) will direct the use of these quarantine facilities during a pandemic outbreak in accordance with the DRT Operations Plan for Pandemic Response in an effort to mitigate and contain an infectious disease. DRTLEOD will conduct an (b) (7)(E) of the facilities it has designated as quarantine facilities.

These facilities must complete the following pre-incident preparation:

- Coordinate with the DRT Occupational Safety and Health Office to establish protocols for a 60-day supply of Personal Protective Equipment (PPE) for their personnel and detainees;
- Review and address proper transportation protocols for people with infectious diseases, such as vehicles with separate ventilation systems;
- Ensure engineering controls such as holding cells producing negative pressure, are in place to protect employees;
- Review and update, as necessary, contact information for local health services;

RESPONSIBILITIES- OPERATIONS

Stations and Departments

- Del Rio Sector Occupational Safety and Health Office

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- Act as the liaison between the IC and other federal, state, and local agencies in regards to health related response measures such as the acquisition of PPE, procedures for using PPE, and engineering controls that reduce the likelihood of cross contamination of an infectious disease;
- Coordinate with the CBP Occupational Safety and Health as well as the Centers for Disease Control and Texas Department of State Health Services;
- Coordinate with the (b) (7)(E) to provide safety bulletins and informational alerts to all personnel;
- Ensure the proper training and necessary tools, including personal protective equipment, are available to ensure that all employees are prepared;
- Attend pandemic planning work group meetings with federal, state and local agencies;
- Coordinate with Office of Health Affairs and other agencies for the inoculation of front line personnel with medical countermeasures;
- Del Rio Sector Office of Incident Management
 - Act as the liaison between the IC and other federal, state, and local emergency managers to coordinate response measures such as the deployment or assistance with medical countermeasures;
 - Coordinate with IC for the deployment of contingency PPE into designated hot zones or areas where infected travelers or aliens are encountered such as at checkpoints;
 - Attend pandemic planning work group meetings with federal, state, and local agencies;
 - Coordinate with DRTOSH and with Office of Health Affairs for directives in activating the local Point of Dispensing (POD) to dispense medical countermeasures;
- Del Rio Sector Special Operations Detachment
 - (b) (7)(E)
 - BORSTAR-Provide information and training primarily to station emergency medical technicians;
 - BORSTAR-Review documents and health data for the POD, if activated;
- Del Rio Sector Strategic Communications Branch
 - Designate a spokesperson and/or subject-matter experts for media responses;
 - Develop local fact sheets, talking points, press releases and provide updates as the environment changes;
 - Disseminate, as appropriate, the most current public affairs guidance issued by U.S. Border Patrol Headquarters.
- Del Rio Sector (b) (7)(E)
 - (b) (7)(E)
 - Coordinate with (b) (7)(E) to ensure their personnel have been advised of PPE precautions and guidance that must be taken by their employees and for detainees;
 - Coordinate with (b) (7)(E) to ensure compliance with transportation routes and protocols pertinent to the infectious disease;

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- Coordinate with local detention facilities to house detainees that must be quarantined when the detention capabilities of the stations have been exceeded.
- Del Rio Sector International Liaison Unit (ILU)
 - Establish initial notification and coordination with the Mexican Consulate and Instituto Nacional de Inmigracion (INM).
- Del Rio Sector (b) (7)(E) [REDACTED] Includes (b) (7)(E)
 - Participate in DHS and CBP (b) (7)(E) planning sessions;
 - Research, monitor, and analyze development associated with pandemic threats from (b) (7)(E) media channels, and the academic/medical community;
 - Report significant developments, trends and patterns via muster grams (b) (7)(E) alerts, and (b) (7)(E)
 - Provide updates on new and relevant information to Del Rio Sector and Station Command Staff;
 - Obtain information on organizations and individuals that (b) (7)(E) (b) (7)(E) the United States;
 - Create Collection Requirements such as (b) (7)(E)
(b) (7)(E)
 - Establish a liaison and designate POCs with Federal, state, local, and tribal public health and agricultural agencies as is pertinent and necessary to fulfill this mission;
 - Establish a liaison and designate POCs with any other pertinent (b) (7)(E) (b) (7)(E)
 - Achieve these objectives utilizing established (b) (7)(E) (b) (7)(E)
 - Provide a list of high-risk countries with current animal outbreak that will be posted in common viewing areas for employee reference;
- Del Rio Sector Stations and Departments
 - *Minimum Staffing Requirements* –Stations and departments will determine minimum staffing required to maintain their mission essential functions. In the event of catastrophic absenteeism, managers must ensure that their employees are prepared to assist and/or replace officers trained in specific skill sets.
 - To accomplish minimal staffing requirements stations must develop staffing recovery plans to maintain operations during multiple or continuous extended periods of absenteeism that may involve (b) (7)(E) of the work force and last for several months each. (b) (7)(E)
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- *Fleet Management* – Stations and Departments will maintain an inventory of vehicles equipped with separate ventilation systems. These vehicles will be dedicated for transporting sick persons to holding facilities.
- *Detention, Isolation, and Surge Capacity* – During an infectious disease stations will track their detention capacities and update (b) (7)(E). They will identify other locations in their area of operation that may be used to house large populations of quarantined persons.
- *Specialty Skills Personnel* – Identify personnel with special skill sets, qualifications, licenses, or certifications. Examples of special skill sets, qualifications, licenses, or certifications include: emergency medical technician, registered nurse, medic (Military), volunteer firefighter, first responder, etc.
- *Continuity of Operations Plans* – In accordance with CBP directives, identify and maintain a list of mission-essential personnel and functions.
- *Training* – Ensure personnel will complete any online course currently available through the Virtual Learning Center that is pertinent to the infectious disease.
- *Personal Protection Equipment*-Maintain a supply of PPE and decontamination agents in accordance with CBP Occupational Safety and Health guidelines;
- *Medical Countermeasures*-Coordinate with DRTOIM to ensure front line employees receive medical countermeasures;
- *Media Inquiries* – Instruct personnel to route all media requests for information/interviews will be coordinated through the DRT Strategic Communications Branch;
- Del Rio Sector Strategic Planning and Coordination Branch
 - Coordinate with the DRT Law Enforcement Operations Division Office and Office of Field Operations to synchronize pandemic response and mass migration SOPs. Included in these SOPs will be:
 - (b) (7)(E)
 - Vetting protocols for high-risk persons and animals that agents come into contact with (b) (7)(E)
 - Procedures for isolating high-risk animals, and designated isolation areas for contingency quarantine and isolation areas for animal products, animals, and persons per USDA/HHS guidelines.
 - Animal and animal product handling and seizure guidelines. Del Rio Sector will implement isolation procedures for high-risk animals.

Planning Phases

These are five planning phases currently outlined in the CBP Operations Plan for Pandemic Response. They provide a template for a coordinated response involving Border Patrol Sectors and other CBP Components. These planning phases will be used in concert with responses by OBP. They are a

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playbook by which CBP entities will initiate their responses in order to focus efforts and minimize distortion of the plan.

Preparedness Activities (Previously Covered Under Responsibilities Section)

Phase I – Outbreak in Animals within North America

Phase II – Sustained Human-to-Human Transmission Overseas

Phase III – Sustained Human-to-Human Transmission Outbreak within North America

Phase IV – First Wave, Global or North American Pandemic

Phase V – Follow-on Waves, Global and North American Pandemic

Phase I – Outbreak in Animals within North America

Del Rio Sector (b) (7)(E)

In coordination with other CBP Components will generate a Priority Information Request. All aliens will be questioned to their knowledge of infected animals and animal smuggling both inside and outside United States. All (b) (7)(E) will be documented on an FIR. Any (b) (7)(E) will also be documented within a Department of Homeland Security (b) (7)(E) as appropriate using (b) (7)(E) protocols.

In coordination with other appropriate (b) (7)(E) entities will monitor at risk groups and behavior to identify key indicators and evaluate the spread of the infectious disease. Information received from other partner tracking entities will be utilized in (b) (7)(E)

Del Rio Sector International Liaison Unit

- DRTILU will maintain open communication and coordination with Mexico throughout the incident.

Del Rio Sector Strategic Communications Branch

Will develop materials (fact sheets, talking points, press releases) immediately covering as many phases as possible. This information will be distributed as the threat environment changes. DRTSCP will monitor media activity and identify a spokesperson and subject matter expert (SME) for media response as required and will defer to HQOBP for guidance and dissemination.

Del Rio Sector Law Enforcement Operations Division

- Coordinate with state, local, tribal, and federal law enforcement agencies, HHS, and other partner agencies as needed.
- Designate isolation areas within every sector. Del Rio Sector will designate contingency quarantine and isolation areas within every sector for animal products, animals, and persons per USDA/HHS guidelines.

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- Prepare and plan for detention/quarantine surge capacities in the event of failure of other alternatives.
- Implement animal and animal product handling and seizure guidelines. Del Rio Sector will implement isolation procedures for high-risk animals.
- Implement mandatory use of PPE around animals or in agricultural environments.
- (b) (7)(E)
- Develop contingency staffing plans for successive phases that include the phase of rapidly escalating outbreaks and high employee absenteeism.
- Make plans to closely monitor employee absenteeism during successive phases.

Phase II – Sustained Human-to-Human Transmission Overseas
Continue all pertinent actions identified in previous phases.

Del Rio Sector (b) (7)(E)

- In coordination with other CBP Components, generate a Priority Information Request. (b) (7)(E)
- (b) (7)(E)
- In coordination with other appropriate (b) (7)(E) monitor at risk groups and behavior to identify key indicators and evaluate the spread of the infectious disease. (b) (7)(E)
- (b) (7)(E)
- The Del Rio Sector (b) (7)(E) will support this by gathering information that identifies high-risk human and/or animal threats.

Del Rio Sector International Liaison Unit (DRTILU)

- DRTILU will maintain open communication and coordination with Mexico throughout the incident.

Del Rio Sector General Guidelines and Responsibilities

Del Rio Sector will apply a measured response at the sector level based on (b) (7)(E) a high-risk human and/or animal infectious disease threat attempting to gain entry into the United States within a region and/or sector's AOR.

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Will support HHS/CDC in enforcement of Title 42 (The Public Health and Welfare) and Executive Order 13295(List of Quarantinable Communicable Diseases) by performing such activities as observing detainees for infectious disease symptoms.

List of Quarantinable Diseases:

- Cholera
- Diphtheria
- Infectious Tuberculosis
- Plague
- Smallpox
- Yellow Fever;
- Viral Hemorrhagic Fevers (Lassa, Marburg, Ebola, Crimean-Congo, South American, and others not yet isolated or named)

People directly or indirectly originating from affected countries are at higher risk for infection. Therefore, CBP officers and Border Patrol agents will look for symptoms of the infectious disease in travelers, which could lead to detention and evaluation by a CDC medical officer. There are two forms of disease surveillance: passive surveillance and active surveillance.

Passive Surveillance: Passive surveillance of persons coming into the United States from foreign countries consists of the recognition and reporting of overt visible signs of illness. Passive surveillance does not involve the eliciting of a medical history or performance of a medical examination.

Border Patrol Agents may assist the CDC in conducting passive surveillance. CDC will provide Border Patrol personnel with a symptoms list for guidance about specific symptoms to look for in arriving passengers.

If a person appears to be symptomatic:

- Ask the individual about his/her history of travel outside of the country; and
- If the person's overt symptoms and travel history indicate that the person may have an infectious disease, start isolation protocols and contact designated public health officials.

Active Surveillance: Active surveillance may consist of a number of methods to assess the risk that people entering the United States from affected countries or regions are carrying an infectious disease. Del Rio Sector may assist CDC in conducting active surveillance. (b) (7)(E) (b) (7)(E) CDC will ensure that a quarantine

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officer or designated official with public health training will be on site at ports of entry to evaluate any individual identified through active surveillance.

- Del Rio Sector will detain, (b) (7)(E) those travelers designated by CDC to be subject to a temporary detention or quarantine order.
- Whenever a Border Patrol Agent encounters a traveler or aliens with symptoms of an infectious disease,
- Del Rio Sector will contact local public health official for guidance.
- As necessary and practicable to operational demands and at the direction of the Chief Patrol Agent,
- Del Rio Sector will assist CDC personnel, in enforcing quarantine rules and regulations; and Del Rio Sector will detain, (b) (7)(E) those persons designated by CDC to be subject to a temporary detention order or quarantine order.
- The Del Rio Sector CPA may cancel leave and non-essential details in order to deploy assets as needed in each sector's AOR based on intelligence of a high-risk human and/or animal infectious disease threat.
- Del Rio Sector will implement infection protocols for alien isolation/detention/transportation, and designate isolation/quarantine areas within every sector.
- Del Rio Sector will implement decontamination protocols for personnel, facilities, and resources and mandate stringent health, safety, and sanitation protocols for all agents.
- Del Rio Sector will review and update POCs with federal, state, and local agencies and external stakeholders.
- Del Rio Sector will track rates of illness and absenteeism in employees.
- Del Rio Sector will prepare to (b) (7)(E)
(b) (7)(E)
- Del Rio Sector will monitor, track, all employees who are who have been potentially exposed to persons suspected of having an infectious disease and arrange for their examination by local medical services.
- Agents will heighten screening of aliens and crew from countries with confirmed human outbreaks. Targeting will be based on countries/regions visited, occupation, purpose of travel, and other risk factors.
- Del Rio Sector will mandate use personal protection equipment (PPE) when processing aliens.

Phase III – Sustained Human-to-Human Transmission within North America
Continue all pertinent actions identified in previous phases.

Guidelines

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**DEL RIO SECTOR
DEL RIO SECTOR OPERATIONS PLAN
FOR PANDEMIC RESPONSE
SECTOR HEADQUARTERS**

(b) (7)(E)

- Del Rio Sector will implement existing rapid response plans for deploying assets to (b) (7)(E) (b) (7)(E) and increasing operational tempo to ensure (b) (7)(E) (b) (7)(E) and to compensate for assets (b) (7)(E) (b) (7)(E)
- Del Rio Sector will monitor rates of infection within the workforce. PAICs will closely monitor employee absenteeism and track flu-related illness and report to CDC.
- Del Rio Sector will implement enhanced hygiene protocols, in addition to decontamination protocols for personnel, facilities, and resources. Del Rio Sector will mandate use of PPE when processing aliens.
- All aliens will be screened for symptoms of infection using all available technology, agent observation, interview, and questionnaires. Del Rio Sector will begin using a travel data and illness questionnaire for all apprehended aliens. All (b) (7)(E) will be documented on an (b) (7)(E). Any (b) (7)(E) will also be documented within a Department of Homeland Security (b) (7)(E) as appropriate using (b) (7)(E) protocols.
- Del Rio Sector will begin isolating apprehended persons showing symptoms and implement infection protocols for alien isolation/detention/transportation.
- (b) (7)(E) will engage Mexican counterparts to assess levels or incidence of outbreak in bordering countries.

Phase IV – First Wave, Global or North America Pandemic
Continue all pertinent actions identified in previous phases.

Guidelines

Del Rio Sector will identify and compensate for deployment of personnel to support Emergency Support Functions (ESF) without impacting operational control. Maintaining operational control of our Nation's Borders is a critical function and is a part of the critical infrastructure of the United States.

- Del Rio Sector will initiate rapid response into areas with confirmed or suspected incidences of infection as requested by DHS.
- Del Rio Sector will implement mandatory airborne protection (masking) protocols for detainees.
- Del Rio Sector will limit access to all facilities by nonessential personnel.
- Del Rio Sector will use other DHS law enforcement (LE) components to augment BP personnel.

Phase V – Follow-on Waves, Global and North America Pandemic

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**DEL RIO SECTOR
DEL RIO SECTOR OPERATIONS PLAN
FOR PANDEMIC RESPONSE
SECTOR HEADQUARTERS**

Continue all pertinent actions identified in previous phases.

ADMINISTRATION/LOGISTICS

- A. Cost/Funding Issues:** The Sector Finance Office will be responsible for coordinating with OBP HQ to resolve cost issues when the plan is put into effect. Stations and Departments will seek and obtain immediate approval for funds before they can be obligated for overtime, supplies and any specialized or required Personal Protective Equipment.
- B. Travel:** Operational requirements will dictate the need for travel status.
- C. Special Equipment:** All departments will maintain an inventory of PPE and replenish their stocks in coordination with the DRT Office of Safety and Health and Sector Finance Office.
- D. Communications:** Agents will follow established communications protocols. Stations and departments must ensure their employees are familiar with (b) (7)(E)
(b) (7)(E)

Del Rio Sector Zones

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DEL RIO SECTOR
DEL RIO SECTOR OPERATIONS PLAN
FOR PANDEMIC RESPONSE
SECTOR HEADQUARTERS

(b) (7)(E)

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This information shall not be distributed beyond the original addressees without prior authorization of the originator. Page 1/3

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DEL RIO SECTOR
DEL RIO SECTOR OPERATIONS PLAN
FOR PANDEMIC RESPONSE
SECTOR HEADQUARTERS

(b) (7)(E)

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This information shall not be distributed beyond the original addressee without prior authorization of the originator. Page 2/3

COMMAND/CONTROL

The established chain of command will apply within Del Rio Sector. All managers will be familiar with the communications protocols established by the National Response Plan and the HHS–DHS Memorandum of Understanding regarding serious communicable and quarantinable diseases.

It should be noted that pursuant to Homeland Security Directive (HSPD) – 5 Management of Domestic Incidents, the Secretary of Homeland Security is responsible for coordinating federal operations to prepare for, respond to, and recover from major disasters and other emergencies, and is the “Principal Federal Official” for domestic incident management in a pandemic. This does not diminish the role or responsibility of the Department of Health and Human Services to provide leadership or

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**DEL RIO SECTOR
DEL RIO SECTOR OPERATIONS PLAN
FOR PANDEMIC RESPONSE
SECTOR HEADQUARTERS**

coordination of health and medical issues and is consistent with the NRP and National Incident Management System (NIMS).

In addition, CBP has established Field Office and Sector Points of Contact regarding Pandemic Planning and these sources will be used to coordinate preparation and response to a threat of a pandemic.

A. Chain of Command:

Name and Title	
1	CPA(b)(6)&(b)(7)(C)
2	DCPA
3	DC(b)(6)&(b)(7)(C) (Law Enforcement Operations)
4	DC(b)(6)&(b)(7)(C) (Law Enforcement Operational Programs)
5	DC(b)(6)&(b)(7)(C) (Mission Readiness Operations)
6	XO(b)(6)&(b)(7)(C)
7	ACPA Agent(b)(6)&(b)(7)(C)
8	ACPA(b)(6)&(b)(7)(C)
9	ACPA
10	ACPA
11	ACPA
12	ACPA

B. Points of Contact:

<u>Sector / Station</u>	<u>Telephone Numbers</u>
Del Rio Sector Headquarters	(b)(6)&(b)(7)(C)
Abilene Station	
Brackettville Station	
Carrizo Springs Station	
Comstock Station	
Del Rio Station	
Del Rio Air Branch	
Eagle Pass North Station	
Eagle Pass South Station	
Rocksprings Station	
San Angelo Station	
Uvalde Station	
Del Rio Sector BIC	

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DEL RIO SECTOR
DEL RIO SECTOR OPERATIONS PLAN
FOR PANDEMIC RESPONSE
SECTOR HEADQUARTERS

DISCLOSURE

This document is an internal policy of the Del Rio Sector and will remain in effect until cancelled or superseded.

(b)(6)&(b)(7)(C)

(b)(6)&(b)(7)(C) Chief Patrol Agent
Del Rio Sector

Mar 09, 2015

Date

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Changes to the threat conditions and the implementation of protective measures will be made through the Office of the Commissioner in consultation with the Assistant Commissioner (AC) of the Office of Field Operations (OFO), Chief, Office of Border Patrol (OBP), the Director, Office of Intelligence and Operations Coordination, and other relevant offices within CBP. When necessary, offices will coordinate the appropriate set of action steps with other agencies.

PLANNING PHASES

Preparedness Activities – CBP will develop and maintain a high level of preparedness and communicate with federal, state, and local agencies to prevent, respond to, and mitigate the crisis and consequences of any threat to the United States.

Phase I – Outbreak in Animals within North America Significant outbreak in an animal population as determined by Centers for Disease Control and Prevention (CDC) and/or U.S. Department of Agriculture (USDA).

Phase II – Sustained Human-to-Human Transmission Outbreak Overseas

Phase III – Sustained Human-to-Human Transmission within North America

Phase IV – First Wave, Global or North America Pandemic

Phase V – Follow-on Waves, Global and North America Pandemic

Preparedness Activities

CBP Sectors and Field Offices will establish SOPs in compliance with the CBP National Pandemic Operational Order. CBP will ensure compliance with the National Pandemic Plan through audit and established performance measures.

Chief Patrol Agents (CPAs) and Directors of Field Operations (DFOs) are to ensure that Occupant Emergency Plans (OEP) and Continuity of Operations Plans (COOP) are current and accessible. They will coordinate with other CBP offices, DHS agencies and other federal, state, local, and tribal law enforcement agencies. Points of contact with emergency agencies must be established, communicated, and periodically checked for accuracy.

Each CBP office shall be responsible for taking all appropriate proactive steps available to reduce **vulnerability of personnel and facilities within each specific jurisdiction, and increase their ability to respond effectively to a pandemic threat.** To provide management with situational awareness of the health of their workforce, CBP offices will develop, test, and obtain baseline data for sick call surveillance.

To support various pandemic phases, all CBP sites and facilities will develop, review, and prepare to implement procedures for the arrival and deployment of additional personnel to support operations.

CBP will maintain a steady state of constant vigilance to potential and growing threats, to include pandemic influenza and other diseases requiring quarantine. CBP will promote the collection, analysis, and dissemination of information both to protect the CBP workforce and to respond effectively. A vital aspect of this effort will be training of all personnel. CBP will monitor domestic and international intelligence information to provide continuous situational awareness of national threats. This information is critical throughout all phases of a pandemic crisis and consequence management.

OBP 50/1/J-C



U.S. Customs and
Border Protection

OCT 17 2014

(b)(6)&(b)(7)(C)

MEMORANDUM FOR:

All Chief Patrol Agents (b)(6)&(b)(7)

All Division Chiefs (b)(6)&(b)(7)(C) (b)(6)&(b)(7)

FROM:

(b)(6)&(b)(7)(C)

U.S. Border Patrol

SUBJECT: Pandemic Plans Overview

Events such as the recent outbreak of the Ebola Virus in West Africa call attention to our role as our Nation's first line of defense along our borders and remind us that adequate planning and preparation for a pandemic event will help us to maintain Mission Essential Functions and a safe work environment for our employees.

To meet these expectations, Border Patrol sectors and stations will review their existing infectious disease plans, such as pandemic plans, bloodborne pathogen plans, and mass migration plans, and provide their employees an overview of guidance and standard operating procedures related to addressing infectious diseases.

U.S. Border Patrol Headquarters is gathering additional guidance from the Centers for Disease Control and Prevention (CDC), the Office of Health Affairs, and other agencies and offices. While this information is acquired and distributed to the field, Border Patrol sectors and stations will take the following steps:

- Adhere to current Personal Protective Equipment (PPE) protocols found in the existing pandemic plans and bloodborne pathogen plans;
- Establish an inventory of existing PPE supplies;
- Review and address proper transportation protocols for people with infectious diseases, such as using vehicles with separate ventilation systems;
- Review and address designated sector isolation sites for infected people;
- Review and update, as necessary, contact information for local health care services, including CDC offices;
- Remind employees of the importance of good personal hygiene practices, such as regular hand washing, hand sanitizer use, etc.; and
- Remind employees that all media inquiries should be addressed to sector public affairs offices.

Thank you for keeping our Nation and our employees safe. Staff may direct questions about this memorandum to Assistant Chief (b)(6)&(b)(7)(C)

Continuity of Operations: Maintenance and restoration of essential and critical operations affected by the loss of essential personnel, including the implementation of prioritized actions to achieve a sustainable level of heightened response activities.

OBP is committed to maintaining operational strength throughout the lifespan of any pandemic crisis.

Preparedness Activities

During this phase Chief Patrol Agents will take action to mitigate the risk of introduction of the disease into the United States, and to prepare for successive phases.

Sectors will establish Pandemic Operational Plans in compliance with the CBP National Pandemic Operational Plan. OBP will ensure compliance with the National Pandemic Plan through audit and establishing performance measures.

All Sector Chief Patrol Agents and their staff will familiarize themselves and comply with the Memorandum of the Chief, Office of Border Patrol dated November 23, 2005, and the Memorandum of Understanding between the Department of Homeland Security and the Department of Health and Human Services (see attachment 6). This is to include the relevant operational guidelines attached to this memorandum. Additional guidelines are available in memoranda from the Assistant Commissioner of the Office of Field Operations dated April 7, 2006, "CBP Procedures for Handling Bird Importations" and the Chief of the Border Patrol dated October 18, 2005, "Interim Infectious Disease Guidelines."

OBP HQ, Sectors, and Stations will establish a liaison and POCs with the U.S. Department of Health and Human Services (HHS), CDC, U.S. Department of Agriculture (USDA), U.S. Department of Interior (DOI), U.S. Forestry Service (USFS), National Park Service (NPS), and any other partner agency in the fight against pandemic disease. Sectors will designate POCs for state and local law enforcement and fish and wildlife/game wardens. OBP HQ, Sectors and Stations will generate a liaison with any and all entities that are deemed critical partners in preparation of, response to, and recovery from pandemic disease.

Sectors will design and conduct Tabletop Exercises (TTX) in conjunction with DHS, Federal, state, local, and tribal pertinent agencies that cut across all levels of the organization. They will develop scenarios relevant to local operations and to both animal and human outbreak phases. Example phases are to be prepared and provided by CBP HQ as necessary. Additionally, they will involve appropriate stakeholders such as USDA, CDC, ICE, USCG, state and local law enforcement, and port authorities as appropriate. OBP will utilize tabletops to assess current preparedness and jointly develop local protocols and SOPs with stakeholders.

Sector and HQ personnel will participate in exercises conducted by other agencies. They will incorporate "lessons learned" and best practices into local procedures and report these to HQ.

OBP will apply a best practices and lessons learned strategy to develop operations planning and guidelines. Sectors will advise OBP HQ when improvements and lessons learned are discovered that improve the safety and effectiveness of agents in the field. OBP will disseminate this information to all Sectors. OBP will retain a library of best practices and lessons learned.

(b) (7)(E)

Date: 2/26/15

FROM:	NAME: (b)(6)&(b)(7)(C)						
	SUBJECT: Del Rio Sector Operations Plan For Pandemic Response						
REQUIRED COMMENTS FROM ORIGINATOR	This plan outlines the steps taken in accordance with the National Pandemic plans. It also designated Del Rio Sector quarantine facilities during a pandemic disease outbreak.						
	Request Division Chief Level Visibility: <input type="checkbox"/> Operations <input type="checkbox"/> Programs <input type="checkbox"/> Support (check all that apply)						
TO	Destination	COPY APP	Action Code(s)	Initials	Current Date	Comments	
ACTIONS REQUIRED							
S T A F U S E	Division Chief LEO Operations <input checked="" type="checkbox"/> Executive Officer Ops <input checked="" type="checkbox"/> Adjutant			(b)(6)&(b)(7)(C) 3/09 3/6		Rec App./Training for plan.	
	Division Chief LEO Operational Programs <input type="checkbox"/> ACPA Specialty Prgrms <input type="checkbox"/> ACPA Strategic Plan/Coord <input type="checkbox"/> ACPA Prosecutions / AFO <input type="checkbox"/> ACPA Strategic Comms <input type="checkbox"/> Adjutant						
	Division Chief Mission Readiness Operations <input type="checkbox"/> Personnel/Finance Director <input checked="" type="checkbox"/> ACPA Training/Traumatic Policy/Compliance Director <input type="checkbox"/> Logistics Director (Fleet) <input type="checkbox"/> Adjutant			(b)(6)&(b)(7)(C) 2/24			
	ACPA - LER/EEO/Union/MI/CIIT						
	LER/Attorney Review						
<input checked="" type="checkbox"/> Writer/Editor		(b)(6)&(b)(7)(C) 6 2/26					
FINAL APPROVAL							
O N L Y	<input type="checkbox"/> Chief Patrol Agent	(b)(6)&(b)(7)(C)					
	<input type="checkbox"/> Deputy Chief Patrol Agent			3/9			
	<input checked="" type="checkbox"/> Division Chief LEO Operations			3/09			
	<input type="checkbox"/> Division Chief LEO Operational Programs			3/2			
	<input type="checkbox"/> Divisional Chief Mission Readiness Operations			2/27			
	(b)(6)&(b)(7)(C)	(b)(6)&(b)(7)(C)		3/6	pdf-(b)(6)&(b)(7)(C)		
<input type="checkbox"/> Traffic Manager	CLOSED OUT:						
ACTION CODES:							
1. ACTION	4. CIRCULATE	7. CORRECT	10. SEE ME	13. ELECTRONIC READ FILE			
2. APPROVAL	5. COMMENT	8. FILE	11. SEE REMARKS	14. COVER MEMO			
3. AS REQUESTED	6. COORDINATE	9. INFORMATION	12. SIGNATURE				

From:
To:
Subject:
Date:

(b)(6)&(b)(7)(C)

FW: USBP REPORTING REQUIREMENT & ACTIONS - NOVEL CORONA VIRUS (COVID-19) - REMINDER
Friday, February 28, 2020 2:50:28 PM

For consideration.

(b)(6)&(b)(7)(C)

Patrol Agent in Charge

Willcox Border Patrol Station

Office: (b)(6)&(b)(7)(C)

Cell: (b)(6)&(b)(7)(C)

From: (b)(6)&(b)(7)(C) @cbp.dhs.gov>
Sent: Friday, February 28, 2020 2:25 PM
To: (b)(6)&(b)(7)(C) @CBP.DHS.GOV>; (b)(6)&(b)(7)(C)
(b)(6)&(b)(7)(C) @cbp.dhs.gov>; (b)(6)&(b)(7)(C) cbp.dhs.gov>
Cc: (b)(6)&(b)(7)(C) @cbp.dhs.gov>; (b)(6)&(b)(7)(C)
(b)(6)&(b)(7)(C) @CBP.DHS.GOV>; (b)(6)&(b)(7)(C) @CBP.DHS.GOV>;
(b)(6)&(b)(7)(C) CBP.DHS.GOV>; (b)(6)&(b)(7)(C) cbp.dhs.gov>
Subject: RE: USBP REPORTING REQUIREMENT & ACTIONS - NOVEL CORONA VIRUS (COVID-19) -
REMINDER

Folks,

Reaching out for any best practices you may have at your stations. We have a couple that many of you likely have already, but sharing just in case:

- Kits containing masks, gloves and the pocket card are being assembled. A single kit contains: (5) N-95 masks, (3) pairs of nitrile gloves (size: XL, and a pocket card (double sided). Everyone will get one of these kits and they started going out this afternoon. Agents are expected to carry these in their tricky bags. These are for you and then those taken into custody that appear sick in order to prevent further spreading. Keep these stocked. Next week additional kits will be assembled so that agents receive a total of two kits. Our (b) (7)(E) partners operating (b) (7)(E) will also receive a kit.
- PPE will always be available. Presently, the station Health & Safety Team keeps masks, gloves, and hand sanitizer in the muster room. We will have them provide a supply of these in the armory. These items are always available in the processing area as are additional PPE items.
- We will be meeting with the County Emergency Coordinator as well as officials with the county Health Dept. next week to discuss plans and resources they may have to assist with efforts.
- POCs and contact numbers for local health officials have been identified in the event we have such an encounter. This would be in addition to contact the CDC first as well

as notifications made through the chain immediately.

- Our station level PPE is inventoried weekly and our station Health & Safety Coordinator has a baseline figure to know when to acquire more gloves and masks to avoid being shorthanded .
- A “Text Blast” was created months ago to alert leadership with our law enforcement partners to share information (b) (7)(E) This will also be utilized to alert them if we should have a Coronavirus encounter.
- In the event there is a coronavirus encounter, the station will utilize the Emergency Notification System (ENS) to alert agents. We may also plug ATAK numbers into the system for those opting to use the devices, this would be in addition to using the current information listed in the ENS as a means to ensure greater outbound messaging.

With the possibility of an outbreak in the area we are wondering if we should generate a request for OT to backfill in the event we do have a number of agents sick and out for a period of time so that we can have at least a minimal staffing for the mission as well as officer safety (agents to back one another up).

Thank you,

(b)(6)&(b)(7)(C)
Patrol Agent in Charge
(b)(6)&(b)(7)(C)ation
(Office)
(Cell)

From: (b)(6)&(b)(7)(C) @CBP.DHS.GOV>
Sent: Friday, February 28, 2020 1:15 PM
To: (b)(6)&(b)(7)(C) @cbp.dhs.gov>; (b)(6)&(b)(7)(C) @cbp.dhs.gov>
Cc: (b)(6)&(b)(7)(C) @cbp.dhs.gov>; (b)(6)&(b)(7)(C) @CBP.DHS.GOV>;
(b)(6)&(b)(7)(C) @CBP.DHS.GOV>; (b)(6)&(b)(7)(C) @CBP.DHS.GOV>;
(b)(6)&(b)(7)(C) @CBP.DHS.GOV>; (b)(6)&(b)(7)(C) @cbp.dhs.gov>
Subject: FW: USBP REPORTING REQUIREMENT & ACTIONS - NOVEL CORONA VIRUS (COVID-19) - REMINDER
Importance: High

PAICs/DPAICs,

TCA had a conference call with HQ late this morning to discuss the Coronavirus threat. It was communicated that there have been two identified cases of coronavirus in Mexico, which hits a little closer to home. As of yet, no other details regarding these two cases or the circumstances surrounding how they contracted the virus.

Talking points from HQ for the field should be coming out later today. They will include

employee/family preparedness.

Immediate action for stations is to identify current PPE on hand at each station. We just did this drill but TCA will be updating inventory numbers. PPE that has been identified thus far are N95 Masks for employees, nitrile gloves for employees, and surgical masks for persons suspected of being infected. All employees should have unfettered access to PPE and all should have PPE with them at the "**point of apprehension**" (first contact with aliens).

Employees should also know when and how to use appropriate PPE.

Burn rates for PPE will need to be established so we can replenish stations and avoid running out.

PAO will be working on messaging, but in the meantime, please also discuss with employees to be mindful of what they are posting on social media.

v/r,

(b)(6)&(b)(7)(C)

Tucson Sector

M(b)(6)&(b)(7)(C)
O

From: (b)(6)&(b)(7)(C)

Sent: Friday, February 28, 2020 12:35 PM

To: (b)(6)&(b)(7)(C) [@CBP.DHS.GOV>](mailto:@CBP.DHS.GOV)

Subject: FW: USBP REPORTING REQUIREMENT & ACTIONS - NOVEL CORONA VIRUS (COVID-19) -
REMINDER

Importance: High

All,

TCA had a conference call with HQ late this morning to discuss the Coronavirus threat. It was communicated that there have been two identified cases of coronavirus in Mexico, which hits a little closer to home. As of yet, no other details regarding these two cases or the circumstances that they contracted the virus.

Talking points from HQ for the field should be coming out later today. They will include employee/family preparedness.

Immediate action for stations is to identify current PPE on hand at each station. We just did this drill but TCA will be updating inventory numbers. PPE that has been identified thus far are N95 Masks for employees, nitrile gloves for employees, and surgical masks for persons suspected of being infected. All employees should have unfettered access to PPE and all should have PPE with them at the "**point of apprehension**" (first contact with aliens).

Employees should also know when and how to use appropriate PPE.

Burn rates for PPE will need to be established so we can replenish stations and avoid running out.

(b)(6)&(b)(7)(C)

Tucson Sector

M(b)(6)&(b)(7)(C)

O

From: (b)(6)&(b)(7)(C) [REDACTED] CBP.DHS.GOV>

Sent: Thursday, February 27, 2020 3:49 PM

To: (b)(6)&(b)(7)(C) [@cbp.dhs.gov>; \(b\)\(6\)&\(b\)\(7\)\(C\) \[REDACTED\] \[cbp.dhs.gov\]\(mailto:cbp.dhs.gov\)>](mailto:@cbp.dhs.gov)

Cc: (b)(6)&(b)(7)(C) cbp.dhs.gov>

Subject: FW: USBP REPORTING REQUIREMENT & ACTIONS - NOVEL CORONA VIRUS (COVID-19) - REMINDER

Importance: High

All-

As a reminder on CORONA VIRUS reporting. It is vitally important that the reporting protocol is followed for all Corona virus cases, potential and verified.

CBP National Reporting Requirement for all potential cases and contacts with persons who meet the requirements of the Guidance to BP Sectors on NOVEL CORONAVIRUS dated 02/06/2020 (attached along with other pertinent important safe handling procedures)

MANDATORY REPORTING REQUIREMENT:

Reporting Requirements (Applies to all detainees with potential/suspected COVID-19).

Reports must be made within 1-hour or as soon as operationally practicable.

**Ensure contact is made with the CDC EOC Watch Desk as outlined in the attached
Guidance to BP Sector on Novel Coronavirus**

**EVERY DETAINEE FROM CHINA OR WITH HISTORY OF TRAVEL TO CHINA:
(USE THE BELOW TEMPLATE ON EVERY REPORT MEETING THE GUIDELINES)**

Name

A#

DOB

Date of Apprehension:

Location of Apprehension:

Travel History:

a) travel within mainland China within last 14 days: **Y/N**

b) Details

Symptoms (fever/cough/difficulty breathing): **Y/N**

Consulted with CDC (required if positive travel history in China within last 14 days): **Y/N**

Disposition:

- a) Referred to hospital: Y/N
- b) Quarantined (per CDC): Y/N
- c) Transferred: Y/N To: _____
- d) Released: Y/N

- **REPORTS MUST BE ROUTED THROUGH: the CoC, USBP CORRIDOR with a CC to the following EMAIL DISTRO: (b) (7)(E)**

- **REMINDER: CONSULTATION W/ CDC:** USBP Agents do not have to contact CDC unless the person meets the below requirement, positive travel history in China (from or through) within the last 14 days. Unless there are some concerns the agents on the ground feel based on their observations and they want to clear through CDC just to be on the safe side. But there is no requirement beyond that.
- ✓ Consulted with CDC (**required if positive travel history in China within last 14 days**): Y/N

From: (b)(6)&(b)(7)(C)
To: COVID-19 Info
Subject: Monday, March 2, 2020 11:08:38 AM
Date: [CoronaVirus Pocket Cards.pdf](#)
Attachments: [Sperian N95 Donning Procedures pdf](#)
Importance: High

All,

With the recent concerns over the COVID-19 virus, please read the following and see attached for information on how to respond to any possible exposed individual (PEI).

What are the signs and symptoms of COVID-19?

The common signs of COVID-19 are runny nose, headache, cough, sore throat and fever. Some of the more severe signs are pneumonia, breathing difficulties, kidney failure and diarrhea. If you have an individual displaying these signs/symptoms and they have travelled to or been in contact with someone who has travelled to the following countries, they will be at a higher risk of possibly being exposed to the virus. Countries are China, Japan, South Korea, Iran and Italy. A pocket card has been attached for you to print out.

What to do once I've identified a PEI?

Don the appropriate PPE provided by the agency and request EMS, USBP EMS or local services. A N95 mask shall also be placed on the PEI, that subject will be kept separate from any other detainees during field processing and transport. See attached for instructions on proper donning of N95 face mask. Follow USBP reporting policy for suspected encounter of PEI. Notify BPA (b)(6)&(b)(7)(C) [REDACTED], point of contact for Pinal County Public Health Services. If the donning procedures do not load properly, see the following link for directions.

<http://ia800204.us.archive.org/20/items/ParticulateFilteringFacepieceRespiratorUserInstructions/SGsperianDPW1400.pdf>

What PPE should I wear if I encounter a PEI?

Your best approach to PPE in the field will be gloves, N95 respirator face mask and eye protection.

What do I do after the encounter?

Properly dispose of possible contaminated PPE into a red bio-hazard bag and drop off into the bio-hazard bin at (b)(7)(E). The (b) (7)(E) [REDACTED] Using any alcohol based disinfectant, decontaminate all exposed surfaces as best as possible. Once back to the VMF, notify station health and safety for a full decontamination. Please include vehicle number and location in the request. In the field, alcohol based hand sanitizer is your best bet for cleaning your hands. When available, wash hands with soap and warm water for at least 20-30 seconds.

Where do I find the PPE?

N95 masks and hand sanitizer have been dropped off at the VMF for agents to use during a suspected encounter. Detention Bags have also been outfitted with N95 masks, gloves, hand sanitizer and disinfectant wipes. At the (b)(7)(E) ally port you can find gloves (sizes Small through X-Large), N95 face mask, Tyvek suits (sizes Medium through 3X), safety goggles and bio-hazard bags. Extra hand sanitizer can be found with the LPO.

If you have any further questions or concerns, please do not hesitate to reach out to me. I'll do my best to get you whatever info I can on the matter as we move forward.

Thank you,

(b)(6)&(b)(7)(C)

(b)(6)&(b)(7)(C) [REDACTED]

United States Border Patrol

TCA/Casa Grande Station

Cell (b)(6)&(b)(7)(C)

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