



**DEPARTMENT OF THE AIR FORCE  
6TH AIR REFUELING WING (AMC)  
MACDILL AIR FORCE BASE, FLORIDA**

22 June 2020

**6 ARW COVID-19 Reopening Guide**

This guidance provides the most important pieces of information for commanders on screening procedures, best practices for operating in the workplace, and travel restrictions as MacDill AFB uses a phased approach to reopen and resume full operations.

**Intended Audience:** This guidance is intended for commanders and mission partner leadership.

**Background:** On 19 May, the SecDef released, “Guidance for Commanders on Risk-Based Changing of Health Protection Condition Levels During the Coronavirus Disease 2019 Pandemic”, granting installation commanders the authority to lower HPCON levels, and on 15 May the Department of the Air Force (DAF) released “DAF Return to Work Capacity Guidelines”, providing public health guidance for installation commanders as they return their bases to work capacity. Recently DAF has released a GENADMIN on criteria to reduce travel restrictions. In addition, the DAF released its overall testing strategy with priority tiers for testing as installations reopen. New guidance comes out often and changes frequently. This document is intended to be a living document that will be updated as new guidance is released.

**MacDill AFB Phased Approach to Reopening:**

1. On 1 May 2020, the 6 ARW/CC approved a four-phased approach to reopen MacDill AFB. Refer to attachment below for current phased plan, which is tied to corresponding HPCONs. MacDill AFB transferred from Phase 0 (mission essential only) to Phase 1 on 4 May 2020.

Attachments: Return to Normal Phases (CAO 28 May 10)

2. The attached Office of the Secretary of Defense (OSD) **Directive** establishes three main gating criteria to move to a lower HPCON level. The same gating criteria is stated in the attached “DAF Return to Work Capacity **Guidelines**” and are used to determine MacDill moving to the next higher phase of reopening.

Attachments: SECDEF Guidance for CCs (19 May 20)  
DAF Return to Work Capacity Guidelines (15 May 20)

The gating criteria are listed below.

a. Symptoms: Downward trajectory of influenza like illnesses and COVID-like illness cases reported over the preceding 14-day period.

b. Cases: Downward trajectory of documented COVID-19 cases or of positive tests as a percent of total tests over the preceding 14-day period.

c. Medical Facilities: Military Medical Treatment Facilities and/or local hospitals have the capacity to treat all patients without crisis care and have a COVID-19 testing program in place for at-risk healthcare workers.

### **Screening Procedures:**

1. As MacDill AFB opens progressively through phases to increase operational capability, the threat of COVID-19 remains. The CDC (<https://www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html>) and DoD Force Health Protection Guidance Supplement #8 (attached below) have provided guidance in an effort to protect personnel in workplaces.

Attachments: HPCON Guidance (Supp 8) – Protecting Personnel in Workplaces (13 Apr 20)

Because of this threat, the PHEO and Public Health team recommend screening all personnel who enter workspaces for COVID-19 to mitigate the risk of spreading infection. As of this time, we recommend the screening to continue until the installation reaches Phase 4. The PHEO and Public Health team recommend placing 1-2 members (non-medical personnel from work center) outside of each used entrance and screening in accordance with one of the options's below:

a. OPTION 1: Ask entering personnel a set of questions (symptoms) related to COVID-19 only. This COA poses the most risk.

b. OPTION 2: Ask entering personnel a set of questions (symptoms) and to have taken their temperature at home prior to coming to work. Employee then reports the temperature to screeners outside unit.

c. OPTION 3: Ask entering personnel a set of questions (symptoms) related to COVID-19 and take a temperature at entrance with infrared thermometers purchased by unit. This COA poses the least risk and is the one recommended by the PHEO.

2. To ask entering personnel a set of questions only, please refer to the COVID-19 Questionnaire. If chosen option involves scanning a temperature in front of workplace building, please request instructions for thermometer use from the contacts below (SrA Rabbi and SSgt Nicholson) when initiating a request to purchase a no-contact infrared thermometer. The decision to allow personnel to enter the work place vs. proceed to the MDG or to their respective healthcare provider as needed for a more thorough evaluation will be guided by the Manpower Staff Screening Flow Chart. Manpower Staff Screening Responsibilities helps clarify what PPE is required and how to set up the screening process. To request purchase of infrared thermometers (with instructions) or gloves, please email both: SrA Golam Rabbi ([mdhafizakhter.golamrabbi.mil@mail.mil](mailto:mdhafizakhter.golamrabbi.mil@mail.mil)) and SSgt Kabria Nicholson ([kabria.o.nicholson.mil@mail.mil](mailto:kabria.o.nicholson.mil@mail.mil)). For any other questions, please contact Lt Col Casey A. Naumoff at (813) 827-9805.

Attachments: COVID-19 Questionnaire (COA 8 May 20)  
Manpower Staff Screening Flow Chart  
Manpower Staff Screening Roles and Responsibilities

## **Best Practices for Operating in the Workplace:**

1. DAF Return to Capacity Guidelines list the following methods to reduce potential COVID-19 exposures in the workplace.

a. Promote telework, including activities requiring secure (classified) communication when available.

b. Utilize engineering controls and administrative policies to promote physical distancing.

c. Organize worker cohorting to minimize the number of potential exposures to unique persons (i.e., split shifts, Buc/Bolts).

d. Continue aggressive disinfection of common and high-traffic areas.

e. Implement a voluntary systematic symptom screen at beginning of work shift. Refer to COAs in Screening Personnel section.

f. Promote individual behaviors that include good hygiene at all times. Enforce isolation of personnel immediately if sick.

2. DAF guidelines make special considerations for high-risk personnel. Regarding high risk personnel, COVID-19 complications, including hospitalization, respiratory failure, need for intensive care unit care, and death are higher in older persons and/or those with chronic medical conditions. Individuals in this category should not be compelled to return to work until MacDill AFB has returned to full operations unless deemed mission essential by commanders. Commanders and supervisors may not know everyone in their units who are considered high risk, and subordinates may be reluctant to voluntarily disclose that information. Commanders should share the list of high risk conditions with employees and encourage them to voluntarily disclose if they have a condition, which places them at high risk. Service members do not need to disclose the exact condition, but their statement of having any one of the conditions deemed high risk by the CDC (<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html>) should be taken as valid and used for commanders' planning on who should return to work. Civilian employees who continue in a pay status pursuant to Weather and Safety Leave may be required to provide medical documentation. For civilian employees who do not voluntarily disclose any high risk condition, reasonable efforts should be made to exclude employees over the age of 65 from return to work until full operations have resumed. Commanders are encouraged to consult with medical advisors, civilian personnel, and the legal office before requesting medical documentation. For any questions or concerns regarding this high risk person guidance, please contact the Public Health Flight at 813-244-1764.

## **Air Force Testing Strategy:**

1. To plan for return to full workplace capacity, DAF released the “Air Force Testing Strategy – 26 May 2020 Update. Also attached, are the accompanying definitions of AF testing tiers and DAF guidance on deployment testing.

Attachments: Air Force Testing Strategy (26 May 20)  
SECDEF Priorities for Diagnostic and Screening Testing  
AF COVID-19 Lab Testing Guidance - Pre- and Post-Deployment (Tier 2-3)

The Air Force strategy accounts for testing of symptomatic patients with a lower threshold of testing based on COVID like symptoms as well as testing of potentially exposed patients along with a 14 day Restriction of Movement (ROM) or quarantine. It also outlines testing of other personnel by Tiers 1 – 4. Currently MacDill AFB does not have any Tier 1 personnel as defined by the Air Force. Tier 2/3 personnel are those who require testing as part of the pre/post-deployment process. A plan is currently in development for sentinel surveillance testing of MacDill AFB medical and non-medical personnel.

### **ROM And Testing For Deployers:**

1. On 11 March 20, OSD released Force Health Protection (FHP) Supplement #4 which required anyone returning from international travel from a CDC defined (<https://www.cdc.gov/coronavirus/2019-ncov/travelers/map-and-travel-notice.html>) Level 2 or Level 3 country to complete a 14 day ROM. This includes deployers returning from OCONUS deployments. Guidance has been updated with the release of FHP Supplement #9 which also requires a ROM based on a risk-assessment. It also covers the DOD requirement for pre/post-deployment testing based on symptoms/possible exposure.

Attachment: HPCON Guidance (Supp 4) - Guidance for Personal Travel During COVID Outbreak (11 Mar 20)  
HPCON Guidance (Supp 9) - Deployment and Redeployment (26 Mar 20)

### **Mission Essential Functions and Change of Command Ceremonies:**

1. Per MacDill AFB Updated HPCON Charlie Memo, dated 1 Jun 20 (attached below), mission essential functions will be allowed as directed by unit commanders not to exceed 50 people while practicing social distancing to the greatest extent practical. Official ceremonies are authorized but should not exceed 10 people while practicing social distancing, unless an exemption is granted by 6 ARW/CC after a public health review.

Attachment: HPCON Charlie Update Memo (16 Jun 20)

2. Once MacDill AFB transitions to HPCON Bravo, mission essential functions and official ceremonies will be allowed as directed by unit commanders not to exceed 50 people while practicing social distancing to the greatest extent practical.

3. Once MacDill AFB transitions to HPCON Alpha, mission essential functions and official ceremonies will be allowed as directed by unit commanders without any cap on the number of people allowed as long as social distancing is practiced to the greatest extent practical.

## **Travel and Lodging**

1. The Air Force Personnel Center (AFPC) is continuously updating travel information to include PCS and TDY. For the most updated information visit [https://mypers.af.mil/app/answers/detail/a\\_id/46624/p/2](https://mypers.af.mil/app/answers/detail/a_id/46624/p/2). AFPC developed a quick user's guide for JTR questions.

Attachment: JTR Revision Guidance

2. The Force Support Squadron developed procedures and identified an area within lodging for quarantining/isolating personnel. Personnel who are identified to be quarantined/isolated will fill out the lodging support form. Once quarantined/isolated personnel are checked into their rooms they will utilize the attached laundry service guide.

Attachment: Lodging Support Form (Update)  
Quarantine Area  
Laundry Services

## **Facility Cleaning**

1. For facilities that may have a suspected or actual confirmed case of COVID each Facility Manager will notify the COR cleaning office for disinfectant cleaning.

2. For COVID-19 cleaning requirements that do not exceed \$2500, the organization is responsible for payment and may use their GPC as payment. The Contracting Office is establishing COVID-19 pricing on the existing custodial contract, against which future requirements may be placed.

Attachment: Procedures for Requesting COVID-19 Cleaning

BENJAMIN S. ROBINS, Colonel, USAF  
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