



DIVISION OF MILITARY AND NAVAL AFFAIRS CONTINUITY OF OPERATIONS PLAN FOR A STATE DISASTER EMERGENCY INVOLVING A COMMUNICABLE DISEASE

Purpose

To ensure the continuation of services provided by the State of New York and the health and safety of the public sector workforce, each New York State agency and authority prepared a plan for the continuation of operations in the event that the Governor declares a state disaster emergency involving a communicable disease. These plans were finalized and posted by April 1, 2021.

Applicable agencies and authorities must remain prepared for future disasters involving a communicable disease. This includes maintaining an up-to-date plan that must be reviewed and updated as necessary and reposted annually in May with the most recent date clearly marked. These plans must be posted in (1) a clear and conspicuous location (e.g., bulletin boards or other similar location where employees normally view information posted by the employer), (2) in their employee handbook if they have one, and (3) on either their intranet or internet website.

Continuity of Operations Plan for a Disaster Emergency Involving a Communicable Disease

Individual(s) Responsible for Maintaining this Plan:

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Statutory Elements of the Plan:

A list and description of the types of positions considered essential in the event of a state-ordered reduction of in-person workforce.

"Essential" shall refer to a designation made by the employer that an employee is required to be physically present at a worksite to perform their job. Such designation may be changed at any time in the sole discretion of the employer.

A description of protocols the employer will follow for non-essential employees to telecommute including, but not limited to, facilitating or requesting the procurement, distribution, downloading and installation of any needed technology, including software, data, and the transferring of office phone lines to work or personal cell phones as practicable or applicable to the workplace, and any devices.



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"Non-essential" shall refer to a designation made by the employer that an employee is not required to be physically present at a work site to perform his or her job. Such designation may be changed at any time in the sole discretion of the employer.

A description of how the employer will, to the extent possible, stagger work shifts of essential employees in order to reduce overcrowding on public transportation systems and at worksites. A description of the protocol that the employer will implement in order to procure the appropriate personal protective equipment for essential employees, based upon the various tasks and needs of such employees, in a quantity sufficient to provide personal protective equipment to each essential employee during any given work shift. Such description shall also include a plan for storage of such equipment to prevent degradation and permit immediate access in the event of an emergency declaration.

A description of the protocol in the event an employee is exposed to a known case of the communicable disease that is the subject of the state disaster emergency, exhibits symptoms of such disease, or tests positive for such disease in order to prevent the spread or contraction of such disease in the workplace. Such protocol shall also detail actions to be taken to immediately and thoroughly disinfect the work area of any employee known or suspected to be infected with the communicable disease as well as any common area surface and shared equipment such employee may have touched, and the employer policy on available leave in the event of the need of an employee to receive testing, treatment, isolation, or quarantine. Such protocol shall not involve any action that would violate any existing federal, state, or local law, including regarding sick leave or health information privacy.

A protocol for documenting hours and work locations, including off-site visits, for essential employees. Such protocol shall be designed only to aid in tracking of the disease and to identify the population of exposed employees in order to facilitate the provision of any benefits which may be available to certain employees on that basis.

A protocol for how the public employer will work with such employer's locality to identify sites for emergency housing for essential employees in order to further contain the spread of the communicable disease that is the subject of the declared emergency, to the extent applicable to the needs of the workplace.

Any other public health requirements determined by the New York State Department of Health (DOH) that are designed to reduce transmission of infectious diseases, such as face coverings, contact tracing, diagnostic testing, social distancing, hand and respiratory hygiene, and cleaning and disinfection protocols.

A. Essential Personnel



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What are the positions your agency or authority considers essential in the event of a state-ordered reduction of your in-person workforce? Please provide a list and description of the types of positions.

- The Division of Military and Naval Affairs (DMNA) is a military organization called upon to support domestic operations. DMNA's mission often requires significant operational support (24/7/365). As such, most DMNA state employees are designated essential personnel. (Approximately three quarters of the agency's workforce is essential). Please refer to attached "Appendix/Workbook, Tab 1 (A. Essential Personnel)".

B. Telecommuting

In the event of a future state disaster emergency involving a communicable disease, the agency/authority may receive direction from the Office of Employee Relations (OER) on the rules and guidelines applicable to telecommuting but may take steps in order to implement and operationalize any telecommuting program, where applicable, for the agency/authority. For the COVID-19 pandemic, OER established a Statewide, uniform, pilot telecommuting program which outlines how agencies/authorities manage telecommuting.

Agencies shall periodically assess their technology needs for telecommuting in consultation with the Office of Information Technology Services (ITS) to ensure that appropriate information technology resources are available.

- Subject to additional emergency guidance from OER, what are the protocols your agency or authority will follow for non-essential employees to telecommute including, but not limited to, facilitating, or requesting the procurement, distribution, downloading and installation of any needed technology, including software, data, and the transferring of office phone lines to work or personal cell phones as practicable or applicable to the workplace, and any devices? Please provide a description of these protocols as follows:
 - Protocol for telecommuting;
 - Protocol for procurement, distribution, downloading and installation of needed technology; and
 - Protocol for phone coverage and transfer of office phone lines to work or personal cell phones.
- DMNA will follow and implement any directives and guidance provided by OER for the roll-out and implementation of telework. DMNA has utilized case specific telework procedures during other domestic emergency responses. Best practices learned during the COVID-19 pandemic will be documented for future consideration should telework become necessary. It is DMNA's intent to procure laptops for all employees designated as able to telework. It is not the intent of the DMNA to provide printing capabilities and telephones



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to all teleworking personnel. DMNA is a client of the Department of Defense (DoD) for telecommunications (not ITS). When DoD authorizes and provides access to systems to ease telework options (i.e. Microsoft Teams) these functionalities are made available to the DMNA state workforce. DMNA's Communications Office is available and able to allow for telephone extensions to be forwarded to mobile devices or personal phone lines. DMNA will periodically assess its technology needs for telecommuting and work with agency telecommunications office and, where necessary DoD and the Budget Office, to ensure appropriate information technology resources are available.

C. Work Shifts/Schedules

How will your agency or authority, to the extent possible, stagger work shifts or adjust work hours of essential employees in order to reduce overcrowding on public transportation systems and at worksites? Consider the following in developing your work shift/schedule adjustments, if applicable:

How will your agency or authority, to the extent possible, stagger work shifts or adjust work hours of essential employees in order to reduce overcrowding on public transportation systems and at worksites? Consider the following in developing your work shift/schedule adjustments, if applicable:

- Will you need to alter working hours/shifts/schedules of essential employees?
- Will you need to split shifts or change operations to different days of the week?
- How will you manage engagement between employees and any clients and/or visitors at the worksite, accounting for physical distancing requirements, as applicable?
- How will you promote physical/social distancing in this type of operation or work setting?
- What common situations that may not readily allow for social distancing between individuals exist at the worksite (including employees, clients and essential visitors)?

- In order to accommodate building density and general health and safety concerns, DMNA will remain flexible while still ensuring its ability to support the New York Military Forces (NYMF). Please refer to attached "Appendix/Workbook, Tab 2 (C. Work Shifts/Schedules)".

D. Personal Protective Equipment

What is the protocol your agency or authority will implement in order to procure the appropriate personal protective equipment (PPE) for essential employees, based upon Department of Health (DOH) and/or Centers for Disease Control and Prevention (CDC) guidance and the various tasks and needs of such employees, in a quantity sufficient to provide personal protective equipment to each essential employee during any given work shift? You should consider different job groupings or responsibilities (e.g., patient/direct care, public-facing positions) when describing the protocol. Also, consider the following in developing your protocol:



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- What is your plan for storage of such PPE to prevent degradation and permit immediate access in the event of an emergency declaration?
- What will be your protocol for cleaning and/or disposal of PPE, to the extent applicable?
- How will you train employees on how to put on, take off, clean and disinfect (as applicable) and discard PPE?
- What is your plan for posting signage to remind employees of appropriate use of PPE?
- Identify the position(s) responsible for ensuring PPE needs are met as outlined above.
 - DMNA will follow the similar protocols it uses when procuring supplies and equipment for the NYS National Guard when activated to respond to an emergency. Requests will be submitted electronically to the DMNA Budget and Finance Procurement team who will then source and procure the needed PPE. The team is equipped to process these type of requests from their place of employment or remotely. If for some reason the staff is unable to process such request due to illness, DMNA will request assistance from the NYS Office of General Services relating to procurement.
 - DMNA has appropriated PPE stockage throughout the state to accommodate DMNA's mission. This supply includes face masks (both surgical and N95), hand sanitizer, gloves, Tyvek suits, plastic face guards and cleaning supplies. Further, at the start of and throughout any pandemic, additional supplies will be procured in accordance with (IAW) the NYS Department of Health (DOH) and or CDC requirements, to ensure each employee reporting to a worksite as essential can properly don gear required by their job duties and minimize exposure. Based on the guidelines, formulas for purchase amounts will be calculated. All purchasing and procurement will be accomplished IAW with NYS purchasing guidelines.
 - IAW Public Employee Safety and Health (PESH) bureau guidelines DMNA facility managers, the Health & Safety Program Managers (Army and Air), in coordination with Human Resources Officers, will track trend data available to assess hazards in the workplace associated with the pandemic condition (pathogen transmission process). The regular and ongoing assessment will determine the PPE needs and training as well as add to building density considerations. Purchasing appropriate PPE to meet the pathogen transmission data will be accomplished IAW NYS guidelines in coordination with the agency budget offices (state and federal). Based on market availability, the agency will target a 6-month stockpile. The appropriate facilities and operations personnel



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will regularly inspect agency's stockpile IAW with appropriate guidelines (CDC, PESH and manufacturer) to ensure its efficacy and supplies will be rotated, disposed of and/or replaced accordingly.

- Training on the use of PPE and proper cleaning will be accomplished through online training and handouts. When necessary, in-person demonstration of proper techniques will be completed.
- DMNA facilities personnel will utilize approved CDC protective outerwear, PPE, sanitizing equipment and chemicals per the EPA N list. In addition, DMNA facilities personnel would sanitize common areas and high touch contact points multiple times throughout the workday. Other protocols as issued by the NYS DOH would be implemented. DMNA facilities and operations personnel training for proper cleaning will also include proper disposal of the PPE as well as items used to sanitize areas.
- In addition to *Exposure Protocols* described in Section E each work location will regularly update employees (facilities workers as well as occupants) on where to find current information on protocols (PPE, cleaning, disposal, etc.) through email blasts, bulletin boards and online posting.
- DMNA facilities staff will ensure all proper signage, directional and distancing information is posted in each location in a clear, concise and widely posted manner. Signage will meet all NYS and CDC requirements.
- DMNA will provide periodic updates, as information becomes available on the communicable disease and its transmission as part of its exposure protocols in order to assist with reducing transmission. DMNA will implement protocols to address exposure and/or suspected cases IAW directives provided by OER, DOH and/or the CDC. Please refer to attached "Appendix/Workbook, Tab 3 (E. Exposure Protocol)". DMNA will remain fluid and adjust protocols as necessary.

E. Exposure Protocol

What is the protocol in the event an employee is exposed to a known case of the communicable disease that is the subject of the state disaster emergency, exhibits symptoms of such disease, or tests positive for such disease in order to prevent the spread or contraction of such disease in the workplace?

Requirements and lessons learned under the COVID-19 disaster emergency, as follows, should be taken into account in the description of your protocol:

- Ensure agency/authority is following all screening, testing, and tracing procedures as outlined in the applicable DOH guidance, including instructions to employees on when to return home and when to return to work.



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- Implement mandatory remote or in-person health screenings at a frequency determined by the Department of Health in consultation with OER for communicable disease contact or symptoms (e.g., questionnaire, temperature check) for in-person employees at or near the beginning of each workday.
- Coordinate screening to prevent employees from intermingling in close contact with each other prior to completion of the screening.
- Ensure screening staff are trained supervisory-level employees or health care professionals, wearing appropriate personal protective equipment as recommended by DOH guidance, including at least a face covering and gloves, if the screening involves contact.
- Maintain a record of all staff who are screened, as well as if screening was passed or if the staff member was instructed to return home, provided no other health information is recorded or maintained. Record must be reviewed and secured on a daily basis.
- Designate a worksite-level safety monitor whose responsibilities include continuous compliance with all aspects of the site safety plan.
- Where practicable, maintain a log of every person, including employees and visitors, who may have close contact with other individuals at the worksite or area, excluding deliveries that are performed with appropriate PPE or through contactless means.
- Utilize engineering controls, safe work practices and PPE in order to minimize exposure in a future state disaster emergency caused by a communicable disease. These controls and practices will be dependent on the communicable disease that causes such disaster emergency.
- Provide periodic updates to employees, as information becomes available, on the communicable disease and its transmission as part of its exposure protocols in order to assist with reducing transmission.
 - The first step is always to protect the workforce. Should the disaster have similarities to COVID-19, the same reporting procedures would again be implemented. For COVID positive cases or any signs of illness, supervisors were directed to immediately send the individual home then isolate the potentially affected workspaces from others until facilities personnel can assess and address the situation. Isolation would be accomplished through closing doors and/or using signs directing all to remain out of space until authorized by facilities team. No one is to attempt to clean affected spaces on his or her own. Upon notification, DMNA



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Maintenance staff will assess the incident and determine appropriate disinfecting requirements. DMNA facilities personnel will utilize approved CDC protective outerwear, PPE, sanitizing equipment and chemicals per the EPA N list. In addition, DMNA facilities personnel would sanitize common areas and high touch contact points multiple times throughout the workday. Other protocols as issued by the NYS DOH would be implemented. For COVID-19, DMNA widely distributed and redistributed DOH's "Interim Guidance for Cleaning and Disinfection of Public and Private Facilities for COVID-19". Individuals were encouraged to wipe down their own workspaces daily with provided appropriate cleaning supplies. DMNA facilities and operations personnel will be trained at each facility to properly clean and sanitize work areas and or address any other CDC/DOH prescribed directives to address the communicable disease. Depending on work location, this may be Facility Operation Assistants, Maintenance Assistants, General Mechanics, and or supervisory personnel. The facilities and operations personnel designated positions may change and or titles may be added to meet the specific pandemic situation. In each training, employees will be provided Right to Know (RTK) information about the process and cleaning agents. Additionally, employees will be advised where to find the information at their worksite and online. DMNA will utilize engineering controls, safe work practices and PPE in order to minimize exposure in a future state disaster emergency caused by a communicable disease, which will be dependent on the communicable disease that causes such disaster. DMNA will provide periodic updates, as information becomes available on the communicable disease and its transmission as part of its exposure protocols in order to assist with reducing transmission. DMNA will implement protocols to address exposure and/or suspected cases IAW directives provided by OER, DOH and/or the CDC. Please refer to attached "Appendix/Workbook, Tab 3 (E. Exposure Protocol)". DMNA will remain fluid and adjust protocols as necessary.

- The 24-hour Joint Operations Center (JOC) will be utilized as a key component for the distribution of informational updates and procedural requirements by sending daily/weekly emails. Additionally, the DMNA home page will be utilized for posting all publicly available information. Finally, OER guidance will be distributed by the State HR office and posted on all bulletin boards.

Further, agencies/authorities and staff must abide by all additional directives from the Director of State Operations which may include cleaning and disinfecting protocols, as well as notification to health officials and potential employee contacts.

- What actions will be taken to immediately and thoroughly disinfect the work area of any employee known or suspected to be infected with the communicable disease as well as any common area surface and shared equipment such employee may have touched?



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- How will work areas be isolated when there is an exposure until such area can be cleaned?
 - What specific actions are necessary to adjust to the needs of field employees?
 - What is your policy on available leave in the event of the need of an employee to receive testing, treatment, isolation, or quarantine?
 - The amount and types of leave available to an employee will be dependent on the particular disaster emergency that has been declared and any provisions of law that provide for leave under such circumstances. Policy on available leaves will be established by the Department of Civil Service and/or OER who shall provide guidance to the agencies/authorities on how to instruct employees about available leaves.
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- As noted above, workforce protection is the first priority. Each location's facilities staff will be trained, ready and contacted immediately to address any areas where possible contamination occurred. Staff properly trained in cleaning, sanitizing and disposal will clean all areas using proper PPE.
 - Each work area will be provided PPE, cleaning and sanitizing resources to clean individual work areas throughout the day for added sanitization security.
 - Other protocols as issued by NYS leadership and/or the federal government, would be implemented as directed.
 - DMNA protocols will include regular updates to all employees and ensure visitor data is current to minimize exposure to the communicable disease and help diminish transmission within the worksite and community.
 - State HR will distribute all guidance on changes to Attendance and Leave Rules associated with the communicable disease disaster to possibly include, quarantine leave, leave for vaccination and extended deadlines for use of leave accruals.
 - DMNA will remain fluid and adjust protocols as necessary.

F. Protocol for Documenting Work Hours/Locations

How will your agency or authority document hours and work locations, including off-site visits, for essential employees? Your protocol shall be designed only to aid in tracking of the disease and to identify the population of exposed employees in order to facilitate the provision of any



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benefits which may be available to certain employees on that basis. You should also consider the following questions in describing your protocol:

- How will these records be maintained?
- Who is responsible for maintaining these records?
- Who will be in charge of accessing these records for the purposes of disease tracking and identifying potential exposures?
- If these records are in paper form, what are your protocols for preserving these records?
- If these records are in paper form, what are your protocols for preserving these records?

➤ DMNA will implement protocols IAW directives provided by OER, DOH and/or the CDC for employees reporting to work locations. In addition, all supervisors will be required to provide human resources work schedules, to include rotational telework schedules, of employees reporting to worksites. The schedules must be updated when changes occur. Confirmation of changes or no changes must be submitted regularly, at least every two (2) weeks. Further, supervisors will ensure current procedures are being followed requiring state employees to sign-in and out every day they report to a work site. If an employee is in a travel status/reporting other than usual work site, they must notify their supervisor and sign-in/out as a visitor upon arrival at the location visited. Health screening protocols must be followed at each worksite to include when in a travel status.

The primary point of contact for questions and concerns for contact tracing is the State Human Resources Office (MNHS). All incidents of positive/infected individuals as well as employees in close contact with individuals must be reported to MNHS. The data will be tracked electronically to the extent practicable. As with COVID, the intent would be to maintain a secure online data system of all state and federal personnel infected or close contact to ease contact tracing and other tracking requirements/needs. Information provided by employees as well as available health screening data and sign-in sheets will be utilized to conduct contact tracing. The data will minimally include name, phone number, status (infected or close contact), quarantine or isolation location, symptomatic or asymptomatic, date placed in quarantine/isolation and date cleared from quarantine/isolation. Other data to be collected will be based on the specific pandemic. The database as well as any other electronic or handwritten records will be maintained IAW state archive guidelines. Medical records provided by employees will be placed in an employee's separate medical file and maintained IAW state archive guidelines.

G. Protocol for Identifying Emergency Housing for Essential Employees



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How will you work with local officials or other state agencies to identify sites for emergency housing for essential employees in order to further contain the spread of the communicable disease that is the subject of the declared emergency, to the extent applicable to the needs of the workplace?

To the extent needed, [DMNA's Director of State Human Resources \(MNHS\)](#) will be the point of contact for the identification of emergency housing for essential employees. The [Director of MNHS](#), will be responsible for contacting county and local elected officials, owners/operators of local hotels and similar establishments, and local college and university officials (both public and private) to develop information about the local availability of emergency housing for essential employees. Emergency housing opportunities, once developed, will be communicated to employees who may be in need of such housing.

- [In accordance with state finance rules, as well as any directives issued by OER, DOH, State Operations or other executive leadership, DMNA human resources will work with local areas to identify emergency housing options \(for example, NYC Isolation Program\). Human resources will contact local supervisors, DOH or other available resources to help identify regional options. Where necessary, and if NYS travel or emergency procedures allow, the agency will help secure or authorize hotel accommodations for impacted personnel. DMNA will update this plan as well as available employee resources \(DMNA website and bulletin boards\) when resources specific to the pandemic are identified.](#)

H. Other Requirements Determined by the NYS DOH

DOH may determine other requirements and guidelines based on the specific communicable disease, severity and longevity. Agencies/authorities must have internally identified key points of contact including but not limited to site safety monitors, individuals responsible for monitoring compliance with this plan and central points of contact who will coordinate efforts to notify appropriate health authorities of positive cases and assist with required contact tracing. For example, DOH guidelines for COVID-19 included the following steps, which may also be applicable during future emergencies related to a communicable diseases and should be considered in planning efforts:

- Ensure applicable social distancing is maintained among employees at all times, unless safety of the core activity requires a shorter distance (e.g., moving and lifting equipment). Any time an employee must come within a distance less than applicable of another person, the employee and person should wear acceptable face coverings.
- When distancing is not feasible between workstations or areas, provide and require the use of face coverings or erect physical barriers, such as plastic shielding walls, in lieu of face coverings in areas where they would not affect air flow, heating, cooling, or ventilation.



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- Tightly confined spaces should be occupied by only one individual at a time, unless all occupants are wearing face coverings. If occupied by more than one person, occupancy will be kept under 50% of maximum capacity.
- Social distancing markers should be posted around the workplace using tape or signs that indicate appropriate spacing in commonly used areas and any areas in which lines are commonly formed or people may congregate (e.g., clock in/out stations, health screening stations, break rooms, water coolers, etc.). Further, bi-directional foot traffic should be reduced by using tape or signs with arrows in narrow aisles, hallways or spaces.
- Post signs, consistent with the DOH signage requirements, to remind employees about social distancing, hand hygiene, PPE, and cleaning guidelines.
- Limit employee travel for work to only essential travel.
- Hygiene and sanitation requirements from the Centers for Disease Control and Prevention (CDC) and DOH must be followed, and cleaning logs that include the date, time, and scope of cleaning must be maintained.
- Hand hygiene stations, including handwashing with soap, water, and disposable paper towels, as well as NYS Clean hand sanitizer or a hand sanitizer containing 60% or more alcohol for areas where handwashing facilities may not be available or practical, must be provided and maintained for personnel.
- Appropriate cleaning/disinfection supplies for shared and frequently touched surfaces must be provided, and employees must use these supplies before and after use of these surfaces, followed by hand hygiene.
- Regular cleaning and disinfection of the office location must be undertaken. More frequent cleaning and disinfection must be undertaken for high risk areas used by many individuals and for frequently touched surfaces, at least after each shift, daily, or more frequently as needed, and align with DOH's guidance.
- Exposed areas must be cleaned and disinfected in the event of an employee testing positive for the communicable disease. Such cleaning should include, at a minimum, all heavy transit areas and high-touch surfaces (e.g., vending machines, handrails, bathrooms, doorknobs, etc.).
- CDC guidelines on "Cleaning and Disinfecting Your Facility" should be complied with if someone in your facility is suspected or confirmed to have the communicable disease.
 - DMNA MNHS will utilize OER and other resources available to ensure it maintains current contact information and resources available from the NYS DOH and, if applicable, CDC.



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- DMNA MNHS will update online resources and distribute informational flyers for bulletin boards of any known guidance for maintaining personal, workplace and community safety.
- Each facility manager will ensure posting of all guidance issued from MNHS to include personal care guidance, pathogen awareness, and, if applicable, testing, vaccination, behavioral and financial support resources.
- DMNA MNHS will work to ensure information is provided to employees and is available for questions and concerns.
- DMNA will also comply with all executive orders and emergency regulations related to the state disaster emergency.
- DMNA is available to discuss the emergency disaster plans in labor-management meetings.
- DMNA facilities staff will ensure all proper signage, directional and distancing information is posted in each location in a clear, concise and widely posted manner. Signage will meet all NYS and CDC requirements.
- Throughout any emergency disaster, DMNA will continue to comply with provisions of any applicable collective bargaining agreement and any applicable federal or state laws, rules and regulations.

I. Return to Normal Operations

During plan development and updates, agencies and authorities should determine how to transition from the procedures and protocols listed in Sections A-F above to non-emergency operations. The timing and degree of return to normal operations is dependent upon the type and severity of an outbreak and will be directed by guidance from but not limited to DOH, State Operations, and OER.

Who from your operation will be tasked with assembling a Return to Normal Operations plan reflecting timing and guidance provided?

How do you plan on communicating the plan to employees?

What position(s) will be responsible for ensuring any physical preparations that may be needed, such as deep cleaning or installation of barriers, are accomplished?

- As noted in Section A, the DMNA is a military organization called upon to support domestic operations. DMNA's mission often requires significant operational support (24/7/365). As such, most DMNA state employees are designated essential personnel. Based on the Agency's mission and workforce make-up, a return to "normal" operations is very dependent on the emergency. If an outbreak is large scale, such as COVID, DMNA will have emergency operations paralleling normal



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operations for a long period of time. While much of the workforce is considered essential and likely would already be reporting full-time, agency leadership would task Directorate/Unit leaders with providing necessary guidance and standard operating procedures (SOP) to employees to ensure proper support continued to the emergency operations as well resuming daily operations.

- Monthly leadership meetings are held with The Adjutant General. This provides executive leadership the ability to provide guidance and receive feedback as a touch point that information is being properly conveyed and changes are being implemented in accordance with all current standards
- Communication to the workforce would be a combined effort between agency leadership, State HR and field/unit supervisors. Communication would include email blasts, staff/unit meetings and use of the agency website and facility bulletin boards. For example, in the instance of COVID, DMNA facilities continue to follow NYS and DoD protocols for wearing masks. As NYS lifted mask requirements, DoD mask requirements followed the CDC guidelines. Daily emails were sent from the JOC providing community transmission levels. Additionally, agency leadership and State HR communicated at the Command, Directorate and supervisory levels to ensure proper mask protocols were being implemented in each county as transmission levels changed.
- The COVID pandemic provided the opportunity to introduce telework as a viable option to meet operational goals. DMNA has implemented a telework pilot program which provides more stability for supervisors and employees as they manage the transition into normal operations. This further affords the agency to be more prepared to respond quickly to building density requirements in the event there is an outbreak.
- PPE remains readily available for an employees and visitors.
- Visitors to buildings/facilities are required to sign-in before entry to ensure an ability to contact them should there be a need due to an outbreak. Further, they are briefed on current procedures being followed by the building such as mask, sanitizing or social distancing requirements.
- The Operations and Maintenance teams are responsible for any office or structural changes necessary to meet physical preparations within facilities. Any equipment obtained as a result of COVID, such as barriers and higher cubicle walls, would be added or removed and maintained in proper storage for future utilization. As previously noted, all operations and maintenance staff were, and will continue to be, properly trained in PPE, cleaning, sanitizing and proper disposal procedures.



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Regular training and updates will occur so staff remains capable and knowledgeable should there be a future communicable disease outbreak.