



# ***North Carolina National Guard COVID-19 Operations Guide***

***15 February 2021***

***This document will be updated every 2 weeks or upon issuance of updated federal or state guidance eff 27 November 2020.***

***Guide maintained at: <https://nc.ng.mil/Documents/NCNG%20COVID-19%20Operations%20Guide.pdf>***

The health and safety of our Employees and Service Members (SM) is the highest priority and a shared responsibility of all.

This document provides a guide for safe operations for the North Carolina National Guard. In order to reduce the risk of COVID-19 exposure to service members, employees, visitors, contractors, vendors, and volunteers entering NCNG owned and leased property, this guidance should be considered based on individual staff and unit functions, physical layout, and available resources to implement public health measures best suited for the specific worksite.

The guidance herein comes from the Centers for Disease Control (CDC), National Safety Council (NSC), Occupational Safety & Health Administration (OSHA), Department of Defense (DOD), Army Public Health Command (APHC), Department of the Army, Department of the Air Force, National Guard Bureau (NGB), North Carolina Department of Health and Human Services (DHHS), and Department of Public Safety (DPS).

We recommend that all Employees and Service Members follow the North Carolina DHHS's Know Your W's guidance:

- **Wear a cloth face covering**
- **Wait 6 feet apart, Avoid close contact**
- **Wash your hands or use hand sanitizer**

CDC maintains a current US case count that updates at 1200, Monday through Friday. Click here: [Coronavirus Disease 2019 \(COVID-19\) in the U.S.](#)

***For questions or recommendations, please contact the  
NCNG Safety & Occupational Health Office***

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**\*\*\*NCNG hyperlinks require CAC to access; civilian resource links do not\*\*\***

# Summary of Changes

|   |                  |
|---|------------------|
| <a href="#"><u>Updated High-Risk Medical Conditions</u></a>         | 1 February 2021  |
| <a href="#"><u>Add Testing Location Finder</u></a>                  | 1 February 2021  |
| <a href="#"><u>Updated ID Card Operations</u></a>                   | 15 February 2021 |
| <a href="#"><u>Updated DD 2977 (Deliberate Risk Assessment)</u></a> | 15 February 2021 |
| <a href="#"><u>Updated Travel Guidance</u></a>                      | 15 February 2021 |

# Daily Operations

## NC Governor Phased Reopening Plan

<https://www.nc.gov/covid-19/staying-ahead-curve>

### Face Coverings Guidance

Reference [FRAGORD 63 to OPORD 20-035 \(COVID-19 INTERNAL\)](#) for specific mass gathering guidance as it applies to NCNG operations and training.

## Workplace Guidance

Supervisors should perform a health and safety risk assessment before planning any facility changes to promote COVID-19 safety.

1-[Inspection Checklist](#)

2-[COVID-19 Deliberate Risk Assessment Worksheet](#)

Consult with the Construction Facilities and Management Office (CFMO) and the Safety and Occupational Health Office (SOH) for procurement and installation of physical barriers or space reconfigurations prior to making any changes to ensure compliance with applicable building and life safety code requirements.

## Responding to COVID-19 in the Workplace

It is important to recognize and take action to prevent transmission of infectious diseases, including COVID-19, in the workplace. This is especially important in the NCNG to ensure continuity of operations. If an employee presents COVID-19 symptoms at the workplace, Supervisors must follow [screening guidance](#) and immediately isolate the employee and conduct follow on actions IAW the [COVID-19 Symptomatic Personnel Smart Card](#). Workplace sites that have COVID-19 positive personnel will conduct [cleaning and disinfection protocol](#) as outlined by the CDC. Supervisors should not close facilities without consulting with the Chief of Staff.

# Buildings and Facilities

## General Cleaning Guidelines

Cleaning and disinfecting are key to limiting exposure to maintaining a safe environment during the COVID-19 Pandemic. Supervisors must conduct a job safety analysis to protect employees conducting cleaning operations. Provide appropriate PPE and Safety Data Sheets (SDS) for the chemicals used.

- [CDC COVID-19 Cleaning Guidance](#)
- [Safe & Effective Disinfectant Use Infographic](#)
- [List N: Disinfectants for Coronavirus \(COVID-19\)](#)

## **Worksite Cleaning Response for COVID-19 symptomatic/positive employee(s) at worksite**

Units/Sections do not necessarily need to close buildings if they can close off affected areas. Clean and disinfect all areas used by the person who is sick. If feasible, wait 24 hours before cleaning or disinfecting. Once the areas have been appropriately disinfected, they can be opened for use.

- [Cleaning and Disinfecting Decision Tool](#)
- [Disinfection Guidance](#)

## **COVID -19 Facility Restrictions**

[Gyms and workout facilities guidance](#)

[Indoor gatherings – Classrooms, Meeting Spaces, Cafeteria/DFAC, Auditoriums, etc.](#)

## **Armory Rentals and Usage by other the NCNG units**

Rental of NCARNG armories is not authorized until further notice. ETP approval is TAG.

# **ARNG Personnel**

## **Physical Fitness Readiness**

- Physical fitness readiness remains an enduring requirement and an individual responsibility. All Soldiers will maintain their physical fitness based on standards associated with the APFT and will continue to train for the ACFT.
- APFT and Height/Weight assessments current within dates identified in [OPORD 20-036 \(ACFT Implementation\) FRAGO 10](#) are valid for all administrative uses until 31 MAR 2022.
- Soldiers enrolled in ABCP are expected to continue to make progress towards meeting the Army Standards.
- ACFT testing frequency requirements are waived due to COVID-19. APFT is only administered to remove APFT flags. Battalion and Company Commanders may choose to conduct fitness testing (APFT, ACFT, ABCP) if local risk assessment indicates COVID-19 mitigation measures are adequate.
- Best practices for COVID-19 mitigation during physical training include: during APFT sit-up event use an inanimate object to hold feet; train individually or in small groups (fire team or squad); maintain social distancing; train outside; clean shared equipment with approved COVID-19 cleaner before and after each use; wear a mask when not breathing hard; and keep a mask available throughout activity.

## **Reenlistments/ Extensions/Promotions**

- Temporary Reenlistment/Extension Guidance: [PPOM 20-013, Temporary Guidance for the ARNG Extension/Reenlistment Policy during the COVID-19.](#)
- Consolidated Exception to Policy Guidance for Enlisted Promotions: [COVID-19 PME and APFT ETP Promotion Guidance.](#)

## ANG Personnel

- Consult the most updated NCANG guidance [NCANG WING COVID Policies](#)

## G1 Service Member Support Services

**RAPIDS ID Card Facilities and Services:** Effective 1 March 2021, the NCNG ID Card (RAPIDS) sites return to normal operations with the exception of certain conditions. Reference the [NCNG COVID-19 ID Card Operations](#) site for the latest updates.

**Family Programs:** For information on available programs and assistance see the [NCNG Family Programs Public Webpage](#).

**Retirement Support Services:** For assistance, call 984-664-7892 to schedule a virtual appointment.

**Employment Center:** For information on available programs and assistance see the [NCNG Employment Center Public Webpage](#).

**Education Services Office:** For information on available programs and assistance see the [NCNG Education Services Office Public Webpage](#).

**Integrated Behavioral Health System (IBHS):** To schedule a virtual telehealth treatment option appointment or to request emergent services, call 1-855-322-3848. In person sessions are currently by exception only.

## NCARNG Training Guidance

### NCARNG IDT/AT Guidance

24-48 hours prior to IDT, AT, SAD, and T32 first formation and until further notice, full-time unit staff conducts phone screening for all members using [Pre-IDT/AT Instructions](#) and provide guidance IAW instructions.

- Service Members not cleared for IDT/AT will be referred to respective fulltime medical personnel. These personnel will complete makeup training or SUTA as directed.
- Unit admin will submit cleared and not cleared roster to BN S1. Maintain screening forms until COVID-19 Operations complete.

TAG approves training and activities within NC at non-Federal and NCNG training facilities. Therefore, no Exception to Policy (ETP) is required to plan or conduct training at these locations IAW approved FY21 training plans. However, units assigned to or conducting training at Federal installations are subject to the directives of the Garrison Commander unless superseded by higher authority.

MSC Commanders have the authority to modify training locations and schedule alternate events as required, based upon risk mitigation, in order to maximize **mission essential operations and training events that are necessary to complete assigned missions or required to build and maintain readiness**. SMs are authorized 60 days from date of training to make-up IDT.

Any IDT periods that are conducted virtually from distributed locations must be documented via



the MARRS calendar. Identify virtual training by including the key word "virtual" in the "notes" column for any IDT conducted virtually.

Changes to annual training periods (including those impacted by COVID-19) must be documented via the MARRS calendar. Identify changes due to COVID-19 by including the key word "COVID impact" in the "notes" column.

**Effective 1700, 13 Nov 2020** the Governor of North Carolina extends Phase 3 guidance updating limits on the numbers in mass gatherings. The indoor mass gathering limit cannot exceed 10 people. The prohibitions on mass gatherings and the capacity limits generally do not apply to educational institutions or government operations in the capacity of official business (i.e. training, daily operations).

- The prohibitions on mass gatherings and the capacity limits **DO APPLY** to the North Carolina National Guard in certain instances with the exceptions being ***mission essential operations and training events that are necessary to complete assigned missions or required to build and maintain readiness***. For all events, mission and non-mission essential, COVID-19 safety and risk mitigation measures must be planned for, adhered to, and enforced.
- Examples of **mission essential activities** include but are not limited to:
  - Events necessary to maintain personnel and unit readiness including Scheduled drills, annual training, or other exercises and collective training events
  - Soldier Readiness Processing (SRP), Periodic Health Assessments (PHAs), Yellow Ribbon events
  - Scheduled Battle Rhythm events that require in-person attendance as directed by the chain of command
- Examples of **non-mission essential** events where the 10 person mass gathering limit would apply include:
  - Ceremonies (promotions, retirements, awards, recognition events, etc.) which can be conducted virtually
  - Routine meetings, workgroups, or training that do not require in-person attendance and could be conducted virtually
  - Any non-mission essential training or gatherings

Travel to the People's Republic of China is not authorized without the express approval of TAG.

### **NCARNG Professional Military Education (PME) and Functional Training**

Soldiers continue to plan PME and Functional Training attendance. Guidance (including requisite funding for quarantine) is regularly updated by installation commanders and distributed through the Orders Process in conjunction with email notification from the State Quota Source Manager to the Training Officer and NCO distribution lists.

Restriction of Movement (ROM) is defined as "Limited movement of an individual or group to prevent or diminish the transmission of a communicable disease, including limiting ingress and egress to, from, or on a military installation; isolation; quarantine; and conditional release (DODI 6200.03)."

#### Standards for ROM:

- Restrict Movement to a residence or other appropriate domicile
- ROM location is an official duty location
- Limit close contact to others

#### Official Military Travel and Temporary Duty (TDY).

- Commanders are responsible to approve official travel, utilizing the [COVID-19 Travel Restrictions Installation Status Update](#). States identified as green by DoD standards may still have local government restrictions that Commanders must take into account when approving official travel.
- Travel to or from installations that are red require an ETP waiver. The approval authority for waivers is delegated in writing to O-6. Specifically Brigade Commanders, G / J-staff section OICs, and CoS-A to provide for M-day, AGR, and Military Technicians travelling in GS status.

### **State Partnership Program (SPP) Guidance and Outlook**

SPP planning timelines remain the same, and at the 60-90 day mark, events are identified as being possible to conduct virtually or tentatively will be delayed/cancelled, on a case-by-case basis.

Impacts to events include partner country travel restrictions, DOD COVID-related travel directives, and additional time/funding requirements for personnel to meet them, e.g. an AGR Soldier may be able to meet a quarantine restriction while working at home, but a M-day Soldier would need additional orders.

Approval authority to conduct SPP engagements remains the Combatant Command, assuming Embassy concurrence, and this includes the authorization to travel and/or enter the partner country on official status.

### **Warrior Training Center (WTC) Courses**

Effective 18 December 2020, all students attending WTC Mobile Training Team (MTT) courses are subject to a ROM for 14 days prior to scheduled course start. Students should adhere to the [WTC Memorandum](#) for additional COVID-19 mitigations that apply to MTT courses.

## **Training Guidance for Quarantine/Isolation**

### **M-Day Pay & Allowance orders extension guidance for G1 Med directed quarantine:**

During all planned training, unit leadership must ensure that all Service Members scheduled for training are prescreened prior to reporting for duty. Routinely monitor those reporting for duty for

COVID-19 symptoms, and refer Service Members to medical screening and testing as required IAW [FRAGORD 56](#) to OPOD 20-35 (COVID-19 Internal).

G1 Med will review any cases involving a positive COVID 19 test that will require a 10-day quarantine and make a determination for orders extension. If an orders extension is directed MSC/Unit will input request for orders and G1 Med will certify orders under 12301(h) authority. Directed location for all quarantine periods is SM home of record.

Contact [CPT Ryan Bedgood](#) or [LTC Lee Pearson](#) to submit an exception to policy if an orders delay occurs that negatively impacts the affected Soldier.

**Pay and Allowance Orders following exposure and resulting directive to quarantine due to Close Contact during Annual Training (AT), Individual Duty Training (IDT), or other periods of Title 32 duty:**

Options for Service Members to continue to work, train, or receive paid leave if they are subject to a mandatory quarantine due to a close contact during AT or IDT include (1) potential AT funding according to an approved training plan for the period of quarantine; (2) working from home in accordance with their employer's work from home policy, and potential authorized emergency sick leave through their civilian employer IAW the [Families First Coronavirus Response Act](#).

- No request for orders may be required if a SM is either paid their normal wage while working from home, or is authorized by their civilian employer use of emergency sick leave.
- If a SM is unable to work from home, and there is no recourse for financial reimbursement from their civilian employer through emergency sick leave or non-chargeable leave, the MSC should submit an ECW to G3T, including a letter from the civilian employer or Service Member stating the reason the SM is unable to receive pay (whether regular pay, emergency sick leave, or other non-chargeable leave).

Following a directive to quarantine, SM's should review the employer's work from home and paid leave policy, to include emergency sick leave under the [Families First Coronavirus Response Act](#), with their employer prior to requesting Pay orders. If necessary, contact the NCNG SJA Office.

If a SM is directed to quarantine by G1 Med but is currently unemployed, MSCs submit an ECW to G3T and annotate the SMs employment status.

In all cases not resulting in issuance of 12301(h) orders, if an SM is approved for Pay orders, the number of days will not exceed 14 total for quarantine (to include any quarantine days

incurred while in a duty status on orders), and is based on the date of exposure.

Since service connection to a positive test or screening over a typical IDT period cannot be presumed and follow-on care is not always necessary, LODs are not warranted in every case (each LOD determination is factually specific).

TAG maintains the authority to place Soldiers on orders to complete training and other missions as appropriate.

Factors for consideration for continuing orders after a quarantine determination:

- (1) Soldiers should request to be placed on orders
- (2) Unit Commander shall approve an appropriate training plan following Force Health Protection guidance and considerations if orders are approved
- (3) Document training prior to completion of orders
- (4) Orders may be issued in 10-day increments to allow for an adequate quarantine or isolation period
- (5) Funding comes from existing allotment

## NCANG Training Guidance

### COVID-19 Group Training Planning Guide COVID-19 AT/Inactive Duty Mission Medical Briefing Pre-Mission Planning

All service members (SM) attending inactive duty training must complete the Pre Drill/Pre AT Screen Form(see instructions) and submit to supervisor for review 72 hours prior to leaving their home of record and travelling to AT site. A temperature recording is not required on this form at this point. Any form with yes answers has to be reviewed and dispositioned by 145 MDG PRIOR to service member leaving their home of record to attend the inactive duty training. This is an NGB requirement.

All SM attending training should review and be familiar with the CDC recommendations on [“How to Protect Yourself and Others.”](#)

All SM should make sure they have three cloth masks and that they are in good working condition prior to leaving for the training.

If local lodging conditions/budgeting allow, each SM should have their own room/billeting. If conditions do not allow, lodging directors/commanders should set up billeting to maximize social distancing/distance mitigation efforts.

Unit Commanders and training planners should be aware of the COVID-19 risk at their destination. The CDC guidance on travel is available at the following link:

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/map-and-travel-notice.html>

## Travel Restrictions

**Title 32 FTNGD-OS** (including AGR, Counter Drug, and ADSW) are detailed in the [Secretary of Defense Memo dated 22 May 2020](#) and [Secretary of the Army Memo dated 21 October 2020](#). Title 32 FTNGD-OS will complete the [AGR/ADOS Leave Questionnaire](#), [AGR/ADOS Leave Risk Assessment Template](#) and [DA Form 4856 AGR/ADOS Leave Counseling](#). These documents must be submitted to HRO through KACE no later than 7 days prior to leave start

date. POC is CW3 Jerezbrea at [luis.c.jerezbrea.mil@mail.mil](mailto:luis.c.jerezbrea.mil@mail.mil).

## Technician/Title 5

At this time, there are no travel restrictions for Technicians/Title 5 employees when approved for personal leave.

Requests for training will be reviewed on a case-by-case basis. Training requests will continue to be submitted using [Standard Form 182, Authorization, Agreement and Certification of Training](#). HRO-HRD will adhere to current state and agency guidelines in place upon receipt of training request and will confirm no change prior to training dates. HRO-HRD will contact vendors to identify any vendor specific limitations or restrictions related to COVID-19 with regards to the requested training. Questions may be directed to [ng.nc.ncarng.mbx.hro-hrd@mail.mil](mailto:ng.nc.ncarng.mbx.hro-hrd@mail.mil).

Technician/Title 5 training travel requests will be reviewed prior to travel dates. HRO will adhere to current state and agency guidelines in place upon receipt of travel request prior to approving requests.

## Professional Education Center (PEC) in Little Rock, AR

T32 FTNGD-OS and Technicians, the authorized mode of travel to the Professional Education Center (PEC) in Little Rock, AR is military air, POV, GSA, or rental vehicle. Commercial air is only authorized in conjunction with a 14-day quarantine at PEC prior to the start date of class. MSCs submit exception to policy to use commercial air, through the G3T and G3 for the PEC Commander. The PEC [COVID-19 Information](#) page has the latest updates for training.

Commanders and Supervisors are responsible to approve official travel, utilizing the [COVID-19 Travel Restrictions Installation Status Update](#). States identified as green by DoD standards may still have local government restrictions that Commanders must take into account when approving official travel.

# Human Resources

## High Risk Employees

There are certain underlying [medical conditions identified by the CDC](#) that may increase one's risk for developing severe illness from COVID-19. This list may not include every condition and is subject to updates as new information is learned about COVID-19. Individuals with any underlying medical condition should consult with their healthcare providers to determine whether extra precautions are warranted. Employees with one or more of these conditions may present significant concerns about being asked to return to the workplace. These requests present a myriad of considerations for the employer.

## Telework

Supervisors of telework eligible technicians review [NCNG Telework Documentation Requirements](#), [NCNG Situational Telework Fundamentals Training](#) and [NCNG Situational \(COVID-19\) Telework Agreement](#). Supervisors must ensure telework eligible technicians hired after COVID-19 measures were implemented complete referenced telework requirements. Required documents are to be submitted to HRO Labor Relations at [ng.nc.ncarng.mbx.hro-labor-relations@mail.mil](mailto:ng.nc.ncarng.mbx.hro-labor-relations@mail.mil).

Supervisors of technicians self-identified as part of the CDC high risk population should maximize use of telework and must ensure and approved an accommodation is in place for employees teleworking. Supervisors should refer to [ATAAPS Telework Instructions](#) for coding of timecards during telework.

### **Weather and Safety Leave:**

Weather and Safety Leave provides a type of Administrative paid leave when weather or other safety-related conditions prevent safe travel to or safe performance of work at an approved location due to an act of God, terrorist attack, or other applicable condition (pandemic/COVID-19). For COVID-19 related situations, Weather and Safety Leave can only be used in the following situations.

- Employee is asymptomatic and is directed by the agency and/or medical professional or public health authority to stay home/self-quarantine or is subject to a Federal, State or local quarantine or isolation order related to COVID-19.
- Employee is at increased risk of severe illness from the virus that causes COVID-19 and have not been directed to report to the workplace.

Weather and Safety Leave is **only available** to technicians that are **not** eligible to telework and who also have an HRO approved accommodation.

Technicians and supervisors will follow [ATAAPS Weather and Safety Leave Guidance](#).

### **Emergency Paid Sick Leave (EPSL):**

[EPSL under Families First Coronavirus Response Act \(FFCRA\)](#) is effective 1 Apr 20 through 31 Dec 20. EPSL provides a maximum of 80 hours of paid leave that can be used in the following situations:

- Employee is asymptomatic and is directed by the agency and/or medical professional or public health authority to stay home/self-quarantine or is subject to a Federal, State or local quarantine or isolation order related to COVID-19 (full rate of pay).
- Employee is symptomatic of COVID-19 and is seeking diagnosis (full rate of pay).
- Employee has a family member who requires care as a result of a Federal, State or local quarantine or isolation order related to COVID-19 (2/3 rate of pay).
- Employee has a family member who requires care as a result of being advised by a health care provider to self-quarantine related to COVID-19 (2/3 rate of pay).
- Employee has children at home due to school or childcare center closures due to COVID-19 related reasons (2/3 rate of pay).

Refer to [FFCRA Process](#), [FFCRA EPSL Request Form](#), and [FFCRA ATAAPS Guidance](#).

Refer to [NCNG COVID-19 Workplace Leave Flexibilities Matrix](#) to determine appropriate leave category. Questions can be directed to [nq.nc.ncarnq.mbx.hro-ben@mail.mil](mailto:nq.nc.ncarnq.mbx.hro-ben@mail.mil).

Personnel on Title 32 FTNGD-OS (including AGR, Counter Drug, and ADSW) are also afforded the opportunity to request an [accommodation](#) if not able to work at the primary designated workplace location. These personnel also have several leave options IAW [AR 600-8-10](#) if unable to be at the workplace nor telework.

### **Accommodation Process**

Employees not able to return to the worksite will complete and submit the appropriate temporary accommodation request listed below for approval.



Title 5, Title 32 and FTNGD-OS personnel should complete the [NCNG COVID-19 Non-Medical Temporary Accommodation Request Form](#) for Temporary Non-Medical Accommodation requests due to COVID-19 guidelines and restrictions impacting their daily lives.

Title 5 and Title 32 personnel should complete the [NCNG Reasonable Accommodation Request Form](#) found in HRO's [Reasonable Accommodation \(RA\) SOP](#) when requesting an accommodation for medical reasons.

AGR and FTNGD-OS personnel should complete the [NCNG AGR & FTNGD-OS COVID-19 Medical Temporary Accommodation Request Form](#) when requesting an accommodation for medical reasons.

Personnel should consult HRO's Labor Relations Specialist at [ng.nc.ncarng.mbx.hro-labor-relations@mail.mil](mailto:ng.nc.ncarng.mbx.hro-labor-relations@mail.mil) regarding the processing of RA requests as well as temporary non-medical accommodation requests. HRO will provide final approval of NCNG COVID-19 Medical

### **Temporary Accommodation Request forms**

All COVID-19 requests are due NLT 16 February 2021. Requests related to COVID-19 will be closely monitored and will evolve based on guidance released by local, state and federal entities. Personnel is responsible for notifying their respective supervisors of any changes affecting approved accommodations. Supervisors should update HRO Labor Relations when accommodations are no longer needed or are rescinded for any reason.

## **Equal Employment Opportunity (EEO) and Americans with Disabilities Act (ADA)**

The EEO laws, including the ADA and Rehabilitation Act, continue to apply during the time of the COVID-19 pandemic, but they do not interfere with or prevent employers from following the [guidelines and suggestions made by the CDC or state/local public health authorities](#) about steps employers should take regarding COVID-19. **Employers should remember that guidance from public health authorities is likely to change as the COVID-19 pandemic evolves. Therefore, employers should continue to follow the most current information on maintaining workplace safety.** Many common workplace inquiries about the COVID-19 pandemic are addressed in the CDC publication "[General Business Frequently Asked Questions](#)."

The ADA has restrictions on when and how much medical information an employer may obtain from any applicant or employee. Once an employee begins work, any disability-related inquiries or medical exams must be job related and consistent with business necessity.

A more detailed listing of EEO and ADA related considerations is available at [What You Should Know about COVID 19 and the ADA, the Rehabilitation Act, and Other EEO Laws](#).

## **Frequently Asked Questions**

Reference the [HRO COVID-19](#) SharePoint for additional information. There is also a list of [Frequently Asked Questions](#) (FAQs) available.

# COVID-19 Screening, Testing, and Reporting

## Screening – General

72 hours prior to reporting for any duty status, utilize the [COVID-19 Screening Phone Contact Form](#) to assess Service Members and Employees for COVID-19 risk, IAW the latest [DoD Force Health Protection Guidance](#). Supervisors must report any potential COVID-19 exposures IAW [COVID-19 CCIR](#) guidance.

- [Screening Form Map](#)
- [Screening Requirements](#)

## Screening and Return to Work for FTS Employees

Service Members and Full-Time employees utilize the [Clearance Form](#) for onsite work prior to entering the workplace after COVID exposure or quarantine.

## Process/requirements for employees coming in close contact with a known infected COVID-19 or a NCNG Employee testing positive for COVID-19

Consult the [COVID-19 NCNG Symptomatic Personnel Smart Card](#) for actions to take when an employee or Service Member exhibits suspected COVID-19 symptoms.

## Screening for IDT/Annual Training

All Service Members complete temperature checks and the [On-Site Screening Form](#) upon arrival to IDT or AT. Units must conduct safety briefings and daily screening during IDT/AT periods. For any IDT/AT training period greater than 5 days, complete the [COVID-19 After Training Screening Form](#).

## COVID-19 CDR Critical Information Requirements

- Positive diagnosis of COVID-19 of NCNG employee OR positive diagnosis of close contact family member.
- Closure of NCNG Facility due to COVID-19
- Any installation or facility closures that affect NCNG training or mission
- Notification upon units hitting a critical level of manning or execution. Any Unit / Installation not able to be manned or checked
- Notification of NCNG service member, employee or family member traveling to/from high risk countries (China, Korea, Iran, Italy, etc.)
- NGNC Employee or close contact family member directed to self-quarantine by their primary care provider recommended or, urgent care provider, or local health department
  - [COVID-19 CCIRs](#)
  - [COVID-19 Green 8](#)

## COVID-19 Testing Requirements and Options

If you have COVID-19 symptoms, immediately isolate, notify your supervisor and please call your Primary Care Provider or closest Urgent Care. You may be directed to physically have a medical appointment or will be referred to your local public health department or [other testing location](#). Supervisor will be responsible for submitting Corona 8 SIR and identifying close contacts. Upon SIR receipt, COVID-19 Response Team will determine return to work plan.



The [COVID-19 NCNG Symptomatic Personnel Smart Card](#) defines close contacts who may require isolation, quarantine, and/or testing.

## Return to Duty Dates

Reference the COVID-19 Microsoft Teams channel for Service Member return to duty dates following COVID-19 related quarantine located on Microsoft Teams within the "NCNG JFHQ" Team, Team Code: v4wo4cy on the "JOC COVID-19 Return to Duty" channel. Once in the "JOC COVID-19 Return to Duty" channel, click on the "Files" tab at the top of the page. Service Member's full-time supervisor is the Point of Contact and responsible for all updates.

## COVID-19 Vaccination Information

It is the priority of The Adjutant General of North Carolina to vaccinate the force in order to maintain a ready, reliable force and to continue support of COVID-19 operations throughout the state. Information regarding the vaccination process can be found in [OPORD 21-016](#), Hornet Vaccination. Use the [Hornet Vaccine Tracker Instructions](#) as a reference to complete vaccine trackers as required.

All personnel must complete the [DHA Form 207](#) regardless of accepting or declining the vaccine.

## Communications and Information Technology

[NCNG Teleworking Training & Documentation Requirements](#)

[NCNG Teleworking Agreement](#)

[NCNG Telework Training](#)

[NCNG Telework and Conference Help Pages](#)

[MS TEAMS SOP](#)

[COVID-19 Media Troop Card](#)

During longer periods of teleworking (excess of 30 days), employees are required to bring in their laptop/tablet at least once a month in order to receive critical updates that cannot be pushed over VPN. The device must be left on the network overnight and the preferred method is leaving the device on the network over a weekend.

If employees are issued a desktop and are required to telework and have not been issued a laptop/tablet, then submit a KACE ticket for additional hardware: <https://ngncem-350-07.ng.ds.army.mil/>. Approval will be based on quantities of hardware on hand and mission priorities.

# Appendix 1 Health Protection Condition (HPCON) Status

| North Carolina National Guard HP CON Guidance   |       |   |
|---|-------|---|
| Situation   | HPCON | Recommended Preventative Measures (Leaders may implement Higher level measures when in Lower HPCON)   |
| Routine-<br>Prior to<br>community<br>transmission   | None  | <ol style="list-style-type: none"> <li>1. Maintain standard precautions (routine hand washing, cough on sleeve)</li> <li>2. Virus education</li> <li>3. Routine health alerts</li> <li>4. Regular preparedness activities</li> <li>5. Be familiar with signs and symptoms of disease.</li> <li>6. Obtain name and number of family primary care physician</li> <li>7. Prepare to diagnose, isolate, and report new cases</li> </ol>   |
| Limited-<br>Community<br>transmission<br>beginning  | A     | <ol style="list-style-type: none"> <li>1. Strict hygiene (no handshaking, wipe common use items)</li> <li>2. Communicate risk and symptoms of health threat to installation</li> <li>3. Review plans and verify training, supplies, and posture</li> <li>4. Ensure adequate supply of prescription and nonprescription medications on hand</li> <li>5. Avoid risk areas (informed by CDC, US State Dept. and NCDHHS)</li> <li>6. Do not report to work if sick, or caring for a sick family member</li> <li>7. Split schedule to limit personnel in facilities</li> <li>8. Begin remote work schedules (TELEWORK) (For Example: Min 25-50%)</li> <li>9. Social distancing</li> <li>10. If exposed (prolonged contact within six feet of personnel infected with COVID-19) self-quarantine and seek medical guidance and notify CoC/Supervisor</li> <li>11. If diagnosed, isolate and notify CoC/Supervisor</li> </ol> |
| Moderate-<br>Increased<br>community<br>transmission   | B     | <ol style="list-style-type: none"> <li>1. Continue all measures from previous risk level</li> <li>2. Limit person to person contact (limit or cancel in-person meetings, gatherings, temporary duty assignments)</li> <li>3. Consider cancelling large events and postponing or cancelling training events</li> <li>4. Begin limiting access to facilities</li> <li>5. Increase remote work schedules (For Example: min 50-75%)</li> </ol>  |
| Substantial-<br>Sustained<br>community<br>transmission  | C     | <ol style="list-style-type: none"> <li>1. Continue all measures from previous risk level</li> <li>2. Distribution of Non-pharmaceutical public health measures for activated Service Members. Applies to Personnel conducting operations to counter COVID-19 and <a href="#">level of PPE Required</a></li> <li>3. Limit manning to essential personnel / positions only</li> <li>4. Conduct only mission essential activities</li> <li>5. All meetings conducted via VTC / Conference Call / DCS</li> </ol>  |
| Severe-<br>High mortality<br>epidemic or<br>contamination,<br>widespread<br>community<br>transmission | D     | <ol style="list-style-type: none"> <li>1. Continue all measures from previous risk level</li> <li>2. Restriction of movement</li> <li>3. Mass evacuation</li> <li>4. Mass decontamination</li> <li>5. Subsist on secure food/water sources.</li> <li>6. Support State Operations</li> </ol>   |

## Appendix 2 Terms

- **Pandemic-** An outbreak of a disease that occurs over a wide geographic area and affects an exceptionally high proportion of the population; most people will not have immunity to the new disease.
- **Quarantine:** A state, period, or place of segregation in which people that have arrived from elsewhere or have been exposed to infectious or contagious disease are placed. When in quarantine, avoid close contact and limit sharing of personal items with other members of the household and utilize appropriate respiratory hygiene.
- **Isolation-** Denotes the physical segregation of a patient with contagious or infectious diseases in a personal residence, hospital, or ward.
- **Self-Observation:** People should remain alert for subjective fever, cough, or difficulty breathing. If they feel feverish or develop cough or difficulty breathing during the self-observation period, they should take their temperature, Self-isolate, limit contact with others, and seek advice by Telephone from a healthcare provider or their local health.
- **Self-Monitoring:** People should monitor themselves for fever by taking their temperatures twice a day and remain alert for cough or difficulty breathing. If they feel feverish or develop measured fever, cough, or difficulty breathing during the self-monitoring period, they should self-isolate, limit contact with others, and seek advice by telephone from a healthcare provider or their local health department to determine whether medical evaluation is needed.

## Appendix 3 NCNG COVID-19 Operations Links

- [OPORD 20-035 \(COVID-19 Internal\)](#)
- [OPORD 20-037 \(COVID-19 External\)](#)
- [OPORD 21-016 \(NCNG Vaccination Order\)](#)
- [APPENDIX 6 \(COVID 19 Force Health Protection Summary\) to ANNEX Q to OPORD 20-035](#)
- [CDC Printable COVID-19 Related Flyers](#)
- [NC Printable Safe Return to Work Flyers](#)
- [NCANG WING COVID Policies](#)
- [NCNG COVID-19 RESPONSE \(Resources, Screening, & Contacts\)](#)
- [DOD Coronavirus Guidance](#)