

PART B.1. COVID-19 PREPAREDNESS ANNEX

This annex is intended to be utilized in conjunction with the project's Emergency Action Plan (EAP). The Actions highlighted below should be implemented in addition to the actions identified in the relevant phase of the project's EAP.

Introduction

Coronaviruses are a large family of viruses which may cause illness in animals or humans. Rarely, animal coronaviruses can infect people and then spread between people. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recently-discovered coronavirus SARS-CoV-2 causes the coronavirus disease 2019 (COVID-19). This new virus and disease were unknown before the outbreak began in Wuhan, China, in December 2019. On January 30, 2020 the World Health Organization (WHO) outbreak was declared a Public Health Emergency of International Concern and on March 11, 2020 WHO declared COVID-19 a pandemic.

COVID-19 disease information:

- **COVID-19 Transmission:** The main mode of transmission of the virus is from person to person through small respiratory droplets. Droplets spread when a person with COVID-19 coughs or sneezes. People mainly catch COVID-19 if they breathe in droplets from a person with COVID-19. Another mode of transmission is when people touch objects and surfaces where droplets land around the sick person followed by touching their eyes, nose or mouth. Studies suggest that coronaviruses may persist on surfaces for a few hours or up to several days. This may vary under different conditions (e.g. type of surface, temperature or humidity of the environment). People are thought to be most contagious when they are most symptomatic (the sickest). Although, some spread might be possible before people show symptoms, but this is not thought to be the mode of transmission of the virus. SARS-CoV-2 seems to spread easily and sustainably in some communities.
- **COVID-19 Symptoms:** The most common symptoms of COVID-19 are **fever, dry cough and shortness of breath**. Some patients may have aches and pains, nasal congestion, runny nose, sore throat or diarrhea. These symptoms are usually mild and begin gradually. Some people become infected but don't develop any symptoms and don't feel unwell. **Most people (about 80%) recover from the disease without needing special treatment.** Older people, and those with underlying medical problems like high blood pressure, heart problems, lung problems or diabetes, are more likely to develop serious illness. People with fever, cough and difficulty breathing should seek medical attention.
- **COVID-19 Risks:** For most people in most locations the risk of catching COVID-19 is still low. However, there are now places around the world (cities or areas) where the disease is spreading. For people living in, or visiting, these areas the risk of catching COVID-19 is higher. Some governments and health authorities are taking vigorous action every time a new case of COVID-19 is identified. **Be sure to comply with any local restrictions on travel, movement or large gatherings.** Cooperating with disease control efforts will reduce

your risk of catching or spreading COVID-19. COVID-19 outbreaks can be contained, and transmission stopped, as has been shown in China and some other countries. Unfortunately, new outbreaks can emerge rapidly. It's important to be aware of the situation where you are or intend to go. WHO publishes [daily updates](#) on the COVID-19 situation worldwide.

- **COVID-19 Testing:** Because symptoms are similar to many other illnesses, tests are needed to make the diagnosis, through throat swabs or blood tests. While testing is becoming more common and accessible worldwide, testing accessibility and procedures will vary country-to-country. Call your healthcare professional if you feel sick with fever, cough, or difficulty breathing, and have been in close contact with a person known to have COVID-19, or if you live in or have recently traveled from an area with ongoing spread of COVID-19.
- **COVID-19 Treatment and Vaccine:** To date, there is no vaccine and no specific antiviral medicine to prevent or treat COVID-2019. However, those affected should receive care to relieve symptoms. People with serious illness should be hospitalized. Most patients recover thanks to supportive care. Possible vaccines and some specific drug treatments are under investigation. They are being tested through clinical trials. While some western, traditional or home remedies may provide comfort and alleviate symptoms of COVID-19, there is no evidence that current medicine can prevent or cure the disease. WHO does not recommend self-medication with any medicines, including antibiotics, as a prevention or cure for COVID-19.

COVID-19 Prevention:

Protection Measures for Everyone: Stay aware of the latest information on the COVID-19 outbreak, available on the WHO website, CDC website and through your national and local public health authority. The situation is unpredictable so check regularly for the latest news. The best way to prevent illness is to avoid being exposed to this virus. You can reduce your chances of being infected or spreading COVID-19 by taking some simple precautions:

Protect yourself

- Wash your hands often with soap and water for at least **20 seconds** especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- If soap and water are not readily available, use a hand sanitizer that contains at least **60% alcohol**. Cover all surfaces of your hands and rub them together until they feel dry.
- Avoid touching eyes, nose and mouth. Hands touch many surfaces and can pick up viruses. Once contaminated, hands can transfer the virus to your eyes, nose or mouth. From there, the virus can enter your body and can make you sick.
- Maintain at least **1 meter/3 feet** distance between yourself and anyone who is coughing or sneezing. When someone coughs or sneezes, they spray small liquid droplets from their nose or mouth which may contain virus. If you are too close, you can breathe in the droplets, including the COVID-19 virus if the person coughing has the disease.
- Consider purchasing a thermometer if you don't already have one at home so you can detect whether you or a family member has a fever.
- Put **distance between yourself and other people** if COVID-19 is spreading in your community. Make sure you, and the people around you, follow **good respiratory hygiene**. This means covering your mouth and nose with your bent elbow or tissue when you cough or sneeze. Then dispose of the used tissue immediately.

By following good respiratory hygiene, you protect the people around you from viruses such as cold, flu and COVID-19.

Protect others

- Stay home if you feel unwell. If you have a fever, cough and difficulty breathing, seek medical attention and **call in advance**. Follow the directions of your local health authority. National and local authorities will have the most up to date information on the situation in your area. Calling in advance will allow your health care provider to quickly direct you to the right health facility. This will also protect you and help prevent spread of viruses and other infections.
- **Cover your mouth and nose** with a tissue when you cough or sneeze or use the inside of your elbow. **Throw used tissues in the trash.**
- Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.
- **Field offices should review cleaning policies with staff. Clean AND disinfect frequently touched surfaces daily.** This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.
- Keep up to date on the latest COVID-19 hotspots (cities or local areas where COVID-19 is spreading widely). If possible, avoid traveling to these places in particular, especially if you are an older person or have diabetes, heart or lung disease. You have a higher chance of catching COVID-19 in one of these areas.

Protection Measures for Offices: The following interim guidance may help prevent workplace exposures to acute respiratory illnesses, including COVID-19, in non-healthcare settings. The guidance also provides planning considerations if there are more widespread, community outbreaks of COVID-19. To prevent stigma and discrimination in the workplace, use only the guidance described below to determine risk of COVID-19. Do not make determinations of risk based on race or country of origin and be sure to maintain confidentiality of people with confirmed COVID-19.

- Actively encourage sick employees to stay home:
 - Employees who have symptoms of acute respiratory illness are recommended to stay home and not come to work until they are free of fever (100.4° F/37.8° C or greater using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants). Employees should notify their supervisor and stay home if they are sick.
 - Ensure that your sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies.
 - Talk with companies that provide your project with contract or temporary employees about the importance of sick employees staying home and encourage them to develop non-punitive leave policies.
 - Projects should maintain flexible policies that permit employees to stay home to care for a sick family member. Projects should be aware that more employees may need to stay at home to care for sick children or other sick family members than is usual.

- Send home sick employees:
 - Employees who appear to have acute respiratory illness symptoms (i.e. cough, fever, shortness of breath) upon arrival to work or become sick during the day should be sent home immediately. Sick employees should cover their noses and mouths with a tissue when coughing or sneezing (or an elbow or shoulder if no tissue is available).
- Emphasize staying home when sick, respiratory etiquette, and hand hygiene by all employees:
 - [Place posters](#) that encourage staying home when sick, cough and sneeze etiquette, and hand hygiene at the entrance to your workplace and in other workplace areas where they are likely to be seen.
 - Provide tissues and no-touch disposal receptacles for use by employees.
 - Instruct employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60-95% alcohol or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty.
 - Provide soap and water and alcohol-based hand rubs in the workplace. Ensure that adequate supplies are maintained. Place hand rubs in multiple locations or in conference rooms to encourage hand hygiene.
- Perform routine environmental cleaning:
 - **Routinely clean all frequently touched surfaces** in the workplace, such as workstations, countertops, and doorknobs. Use the cleaning agents that are usually used in these areas and follow the directions on the label.
 - **Review proper cleaning techniques with office cleaners** and ensure they know how to properly use the equipment provided. If using old mops, sponges, etc. now is a good time to refresh the projects stocks.
 - No additional disinfection beyond routine cleaning is recommended at this time.
 - **Provide disposable wipes**, where available, so that commonly used surfaces (for example, doorknobs, keyboards, remote controls, desks) can be wiped down by employees before each use.
- Guidance on facemasks:
 - Employees are not recommended to wear facemasks (also known as surgical masks or respirators) to protect against the virus. Facemasks are only recommended to be worn by symptomatic individuals (advised by a healthcare worker) to reduce the risk of transmitting the infection to other people.
- Advise employees before traveling to take certain steps:
 - Check International SOS' [Travel Restrictions, Flight Operations, and Screening Page](#) for the latest guidance and recommendations for each country to which employees will travel.
 - Advise employees to check themselves for symptoms of acute respiratory illness before starting travel and notify their supervisor and stay home if they are sick.

- Ensure employees who become sick while traveling or on temporary assignment understand that they should notify their supervisor and should promptly call a healthcare provider for advice if needed.
- Contact International SOS with any concerns related to medical support during international travel.
- **COVID-19 information resources:**
 - [CDC handouts and posters for offices](#)
 - COVID-19 information videos ([CDC](#) , [WHO](#))
 - COVID-19 real time updates ([WHO](#), [JHCHS](#) – Johns Hopkins Center for Health security)

Phase 1 — Planning			
Phase Description	Possible Indicators	Action	Responsible Personnel ¹
<p>Phase 1 — Planning Stage</p> <p>The country or area’s health environment may begin to deteriorate. There is a current low risk or threat to [our organization] staff, offices or employees.</p> <p>Events could occur which potentially threaten [our organization] personnel, equipment and installations or employees of similar international organizations.</p> <p>This is a preparatory phase when operations proceed as normal, but with heightened awareness and the need for reporting.</p> <p>All countries are in the planning phase unless escalation is required</p>	Reported cases of COVID-19 in the region.	Select a response coordinator at each office location to oversee implementation processes, threat assessment and related financial considerations, and coordinate with the Field Office HQ and Home Office	COP
	No reported cases on COVID-19 in the country	Review project health insurance policies to determine what coverage may be necessary to mitigate the country-specific risks and effects of COVID-19, and assess whether changes are needed in employee health coverage	COP
	Public health officials started preparing for screening, detecting, and containing suspected cases of COVID-19.	Monitor local government, ministry of health, and client guidance.	COP
		Understand national and local governments’ policies and the potential impact they may have on the project’s operations, activities/workplan, and staff well-being.	COP/Ops/Tech Team
		Update staff contact lists and test phone trees and revise plan on an as needed basis. Also maintain ancillary personnel, partner, subcontractor, clients, and other stakeholders contact information.	SSFP/HR/Ops
		FOs coordinate and reach out to local labor attorneys to determine how staff are to be paid in case of remote working status (ex: some positions may not be able to perform their work from home), what other labor provisions do	HR/Ops

¹ These are suggested personnel responsible. The actual responsibilities should be designated by the COP. This template MUST be tailored to the specific circumstances of the project and country context. Additional indicators and/or actions may be appropriate; please update the document to ensure the most relevant, comprehensive plan possible.

		we need to be aware of. Update project policy manual.	
		Establish policies for alternate or flexible work modalities (e.g., videoconferencing and telecommuting) and work hours and develop emergency WAH plan.	COP/Ops/HR
		Maintain current contact information for staff, ancillary personnel, clients, and other stakeholders	SD/SSFP
		Ensure redundant forms of communication are in place	SD/SSFP
		Disseminate COVID-19 Preparedness Annex to all employees and stakeholders in advance of COVID-19, including expected roles/actions for employees and other stakeholders during implementation	SD/SSFP

Phase 2 — Alert			
Phase Description	Possible Indicators	Action	Responsible Personnel ²
Phase 2 — Alert Stage There is a moderate threat to [our organization] staff, offices or employees. The project can continue work but informs donors and partners that limits to [our organization] activities	First laboratory confirmed case reported in country Reports of limited person to person transmission documented in country	Analyze the capability of national and local governments, and INGOs to aid the project and staff	SD/SSFP
		Closely monitor the status of COVID-19 and recommended actions as reported through the World Health Organization (WHO), and other official sources such as the ICRC, CDC, local government and Ministry of Health. Utilize official, credible sources, and be careful not to share misinformation.	COP/Ops/SSFP

² These are suggested personnel responsible. The actual responsibilities should be designated by the COP.

<p>will exist if the conditions that initiated the increased level prevail. Remote work modalities should be provided to at-risk staff. This level enhances the safety of [our organization] staff by limiting their exposure through restrictions on travel to field or sensitive areas.</p> <p>Mounting tensions and/or instability/medical concerns may lead the COP, in consultation with [our organization] HQ to recommend limiting operations, increasing security measures, and reviewing the evacuation plan.</p>	<p>National and International advisories occur concerning the virus in local area</p> <p>Public health officials deployed some personnel or resources to affected area.</p> <p>(Project to refine indicators based on specific risks prevalent in country)</p>	Identify circumstances under which the project office(s) may need to close or reduce levels of operations	COP/SD
		Identify essential employees and other critical inputs required to maintain critical business operations at each office location	COP/SD
		Practice a telework day, and report on any additional resource needs and “pain points”	COP
		Work with PMU to prepare message to the client in country with our initial preparatory steps. Ensure that correspondence with USAID/FCO/DFID/UNICEF/GF is captured in writing to the greatest extent possible in line with the client consultation process.	COP
		Review local and national health policies and plans regarding possible quarantines, border closures, airport closures, school closures, and transportation restrictions	COP/SSFP
		Confirm policies and procedures are updated per local law and government guidance.	HR
		Refine EAP to include specific guidelines in the event international staff and/or dependents have an authorized or ordered departure. (See corollary Departures section at the end of this document)	SD/SSFP/SMU
		Develop and issue culturally and linguistically appropriate educational guidelines on modes of COVID-19 transmission, signs and symptoms of infection, basic infection control procedures, contingency plans, and travel awareness	SD/SSFP/SMU
		Maintain sufficient and accessible, infection control supplies at all office locations based on WHO and CDC recommendations	COP/procurement
		Share best practices with other implementing partners/organizations to improve community response efforts	COP/SSFP

Phase 3 — Curtailment of Operations			
Phase Description	Possible Indicators	Action	Responsible Personnel ³
<p>Phase 3 — Curtailment of Operations/ Mobilization</p> <p>This implies a high-risk level for the lives or welfare of [our organization] staff and assets and may include the shutdown of at least some [our organization] activities in an area or the country or mandatory remote work. This level signifies an acceptance that operations can no longer be conducted normally or for a sustained period during the uncertain prevailing conditions.</p> <p>COP suspends majority of normal operations.</p>	<p>[our organization] field staff reported positive for COVID-19.</p>	<p>Implement mandatory remote work/emergency WAH due to factors such as personal illness, mental health needs, family member illness, community containment measures and quarantines, school and/or office closures, and transportation closures</p>	<p>COP/DCOP/Ops</p>
	<p>Indicator of existence of a large cluster includes expansion of virus to other regions and confirmation by SMU-consulted Medical authorities.</p>	<p>Assess availability of medical advice, healthcare, prescription medications, mental health services, social services, and other support services (e.g., alternate transportation, meals, grief counseling) for employees during COVID-19.</p>	<p>COP/Ops</p>
	<p>Public health authorities are recommending social distancing</p>	<p>Continue to implement workplan to the extent practical in consultations with client and other stakeholders. Modify the workplan accordingly. Host nation guidance must be factored into project planning.</p>	<p>COP</p>
	<p>International and Public health official deploy more resources and personnel,</p>	<p>Remind employees that normal supply lines may be slowed or inoperable for an extended period and encourage them to make personal preparations for COVID-19 for up to 2 weeks – e.g., stockpiling food, water, and prescription drugs</p>	<p>SSFP</p>
	<p>Public education campaign conducted by international or national health officials in affected region.</p>	<p>Implement a security plan that includes staff, office, and residence protection during curtailment or mobilization. Coordinate with security subcontractor, if appropriate. Prepare for the possibility of social/security breakdown in region.</p>	<p>SSFP/COP</p>
	<p>Virus is characterized as having a high rate of transmission</p>	<p>Issue alerts (as needed) for restricting travel (domestic and international) to affected</p>	<p>COP/SD/SMU</p>

³ These are suggested personnel responsible. The actual responsibilities should be designated by the COP.

Phase 3 — Curtailment of Operations			
Phase Description	Possible Indicators	Action	Responsible Personnel³
	International warnings and passenger screening in various countries initiated for the virus.	areas and guidance for employees or visitors returning from affected areas	
	Border crossings, point of departure monitored for the virus (Project to refine indicators based on specific risks prevalent in country)	Issue guidelines to prevent COVID-19 spread at worksite or home, including cleaning and disinfection and social distancing methods to modify frequency and type of contact (e.g., reducing hand-shaking, limiting face-to-face meetings and shared workstations, promoting telecommuting, liberal leave policies etc...)	COP/Ops/SD
	Local public health recommending curtailment/cancelling of public activities	Implement system to account for employees (phone tree call ins) status.	SSFP
		Familiarize all project staff with the role of the local health authorities in COVID-19 response in the country, region, and locally.	COP/SD/SSFP
		Collaborate with local and national health officials and emergency responders for information and possible actions.	COP/SD/SSFP
		Implement 24/7 means for communicating COVID-19 status updates/actions to employees and determining employee health conditions.	Ops/SD/SSFP

Phase 4: Re-establishing normal operations			
Phase Description	Possible Indicators	Action	Responsible⁴
The situation in country is stabilizing and some	Number of new reported cases declining in country	Assess ability and criteria that need to be met to resume normal operations and provide notification of activation of the business continuity plan	COP/PMU/SVP

⁴ These are suggested personnel responsible. The actual responsibilities should be designated by the COP.

<p>or all project activities and operations are back to normal.</p>	<p>Decrease in country transmission and mortality rates</p>	<p>Re-assess availability of medical, mental health, and social services for employees after COVID-19</p>	<p>SD/SSFP</p>
	<p>Country risk level as defined by WHO/CDC lowered</p> <p>Travel advisory status decreased/changed</p> <p>Embassy staff returning, if they had previously departed.</p> <p>International SOS recommends return, if they previously recommended international staff</p> <p>(Project to refine indicators based on specific risks that has been prevalent in country)</p>	<p>Conduct post-COVID-19 review of response and revise plan as needed</p>	<p>SD/SSFP/SMU</p>

Corollary Section: Authorized or Ordered Departures

Description	Possible Indicators	Action	Responsible Personnel ⁵
<p>This section is relevant for projects with <i>international staff and their dependents fielded to country</i>.</p> <p>This level signifies extreme deterioration of conditions, with no signs of improvement in the near to medium future such that it will be necessary to close the office/s.</p>	<p>Widespread transmission of the disease in country</p> <p>Geographic spread of COVID-19 and loss of evacuation routes.</p> <p>US/UK/other international Embassy authorizing <i>or</i> ordering the departure of dependents, non-essential staff, or all staff.</p> <p>Local public health recommending curtailment /cancelling of public activities.</p> <p>International travel restrictions</p>	<p>See actions in EAP for international staff evacuation actions</p>	<p>COP</p>