OPNAVINST 3510.16
N3/N5

NOV 12 2009

OPNAV INSTRUCTION 3510.16

From: Chief of Naval Operations

Subj: NAVY HEADQUARTERS STAFF PANDEMIC PLAN

Ref: (a) National Strategy for Pandemic Influenza of Jul 07
        (b) DoD Implementation Plan for Pandemic Influenza of Aug 06
        (c) OSD memo, "Pandemic Influenza Preparedness for Pentagon Reservation and Facilities", of 10 Jun 09
        (d) OPNAVINST 3500.41
        (e) NORTHCOM CONPLAN 3551-09
        (f) United States Office of Personnel Management Policy Guidance, "Planning for Pandemic Influenza," of May 09

Encl: (1) DOD Pandemic Phases and the Stages for Federal Government and OPNAV Response
        (2) Pandemic Influenza Planning Checklist

1. <u>Purpose</u>. To issue Navy staff policy and responsibilities for the implementation of Pandemic Influenza (PI) planning per references (a) through (f).

2. <u>Applicability</u>. This directive applies to the Offices of the Chief of Naval Operations (OPNAV).

3. <u>Background</u>. The World Health Organization (WHO) highlights PI as one of the top twenty major health concerns for the world today.

    a. Reference (a) outlines how the U.S. Government (USG) intends to prepare, detect, and respond to a pandemic. It also identifies the important roles to be played not only by the Federal Government, but also by State and local governments, private industry, our international partners, and, most importantly, individual citizens.

    b. Reference (b) directs the Department to prepare for, detect, respond to, and contain the effect of a pandemic on

military forces, Department of Defense (DoD) civilians, DoD contractors, dependents, and beneficiaries. Reference (c) provides guidance for commands on the Pentagon reservation.

c. This instruction condenses references (a) through (d) and provides the OPNAV staff with tools to implement the policies identified in them. The tools, when instituted, are designed to ensure the staff continues to operate in a pandemic environment, completing missions, functions, and tasks.

d. Reference (e) uses a six phase construct to support the U.S. Government's effort to contain and, if necessary, mitigate the effects of PI. This instruction provides OPNAV HQ mitigation measures that are commensurate within the DOD Phase construct which is outlined in enclosure (1).

e. The Federal Government response stages for PI represents the DoD's approach to address the threat of PI.

f. This reference addresses civilian workforce policy and issues related to pandemic influenza.

4. <u>Policy</u>. The following paragraphs provide directorates a variety of tools to facilitate continued performance of assigned missions, functions, and tasks in a PI environment.

a. OPNAV will execute its PI plan using a three-staged approach with two major focused areas: force health protection and personnel accountability. Each directorate will tailor the plan to achieve the most efficient use of the available workforce. The three stages of OPNAV PI execution are:

(1) Stage 1: Pre-Pandemic (planning and preparation). All directorates will prepare plans by which personnel and social distancing policies may be implemented. Guidance on specific measures is provided in subparagraphs 4b and 4c below.

(2) Stage 2: Execution of Pandemic Plan. When directed by Director of Navy Staff (DNS), all directorates shall execute their plan. Specifically, directorates will:

(a) Review and/or activate pandemic and emergency plans.

(b) Implement "social distancing" (see subparagraph 4b(4) below).

(c) Conduct muster of personnel as directed by DNS.

(3) Stage 3: Post-Pandemic (recovery and reconstitution). When directed by DNS, all directorates will reconstitute their staffs and evaluate the effectiveness of their plan. Specifically, directorates will:

(a) Notify organizational staff that the threat from the pandemic has subsided.

(b) Conduct a muster of personnel to determine their overall health status and preparedness.

(c) Resume normal work schedules.

(d) Assess lessons learned and modify plan as required.

b. Force Health Protection.

(1) Vaccination. The primary method to protect our total force is through immunization. When a novel viral strain is detected, historically, new vaccine development begins immediately. OPNAV will follow the published guidance promulgated by the Office of the Assistant Secretary Defense, Health Affairs, in coordination with Bureau of Medicine and Surgery (BUMED).

(2) Personal Hygiene. Maintaining a clean work environment and good hygiene are the simplest methods to prevent the spread of disease at the workplace. Directorates are encouraged to provide training and supplies which promote good hygiene.

(a) Frequent hand washing.

(b) Sneezing/coughing into the elbow or tissue.

(c) Disinfecting common work areas, to include computer terminals and telephones.

(d) Wearing personnel protective equipment if prescribed.

(3) Personnel Protective Equipment. Directorates are encouraged to procure the following 30-day supply of protective equipment:

(a) Hand sanitizer (at least 60 percent alcohol based).

(b) Facial masks (surgical or facemask).

(c) Disinfectant spray.

(d) Tissues.

(4) Social Distancing. During a pandemic, the frequency and duration of contact between staff members must be reduced. This approach is required because viruses tend to spread more quickly when people closely interact in the normal work environment and on a personal basis. Specific procedures must be developed at the directorate level to ensure efficient use of the workforce. Authorized techniques may include, but are not limited to:

(a) Reduction of gatherings. Medical guidance indicates that transmission of a virus during a pandemic event can be reduced by maintaining a distance of 6 feet or more from others. Group meetings can be minimized through the use of network capabilities, such as conference calling, computer-based conferencing, and video teleconferences.

(b) Telework procedures. Directorate-level telework programs should be implemented where applicable following the guidance in the forthcoming Deputy Chief of Naval Operations, Manpower, Training and Education (CNO (N1)) "Total Force Telecommuting (Telework) Program" instruction. To this end, each division should develop a data sharing and storage strategy which enables telework employees to access shared files and folders. Telework may not be an option for employees who require continuous access to classified information, but may be used effectively for personnel only requiring intermittent access. The following website, www.telework.gov, provides

additional guidance for employees and supervisors to implement a telework program.

(c) Alternating work days. Consistent with labor force guidelines, personnel can be split into two groups allowing each group to come to work on alternating days. This effectively reduces the workforce in the work area by half but may cause workflow to slow as well.

(d) Shift work. Consistent with labor force guidelines, personnel can be split into two or more groups allowing each group to work at different times during the day. The method reduces the workforce present in the space at one time but continues workflow at a rate closer to normal operations.

(e) Travel Restrictions. Some pandemic events may require policies restricting travel to and from affected geographic areas (both domestic and international). DNS will promulgate restricted areas to the staff.

(5) Civilian workforce guidance.

(a) The civilian workforce will be required to follow the intent of this instruction. However, there are many constraints and limitations with regard to leave, pay, and alternate work schedules that are unique to the civilian workforce. Reference (f) provides guidelines for the government civilian workforce outside the scope of this instruction. All supervisors and civilians are highly encouraged to familiarize yourself by downloading reference (f) at http://www.opm.gov/pandemic/opm-pandemic_allissuances.pdf. Per reference (f), civilian employees will be factored into the PI plan.

(b) Contractors should contact their contracting officer technical representative to address contractual issues and concerns about pandemic policy. Contracting officers should proactively establish telework and flexible time and location authorities in new or renewed contracts.

c. Personnel Accountability.

(1) Mustering Procedures. It is expected that higher headquarters will require accurate accounting of all workforce

personnel. Directorate recall rosters must be maintained to ensure each member of the staff can be contacted. In addition, at least three members of each staff should be trained on the Total Workforce Management System (TWMS) to facilitate mustering.

(2) Critical Personnel List. Assessment of personnel as "critical" based on the assigned missions, functions and tasks ensures priority is given for scarce resources. Critical personnel lists shall be maintained locally and used to allocate:

(a) Vaccine when supply is limited.

(b) Assets which provide remote computer access.

(c) Assets which provide secure voice connectivity.

(d) Access to the building when limited by higher authority.

(e) Assets which provide network meeting functionality.

(3) Key Leader Succession Plan. Identify and cross-train personnel to fulfill mission, functions, and tasks. Each division and each branch within each division shall identify a primary and two alternates (three people) for each leadership position and for other functions that are critical to support sustained operations during a pandemic event. Succession planning includes military, civilian and contractor personnel.

5. Action. To ensure continued operation and completion of assigned missions, functions, and tasks in a pandemic environment, the following responsibilities and actions for PI plans shall be implemented:

a. All OPNAV directorates shall:

(1) Develop and maintain an organization-specific PI plan that addresses the elements of subparagraphs 4b and 4c of this instruction. Directorate level plans are to be developed within one week from the release of this instruction. To assist in the development of the plan, a template has been provided and

can be located on HQWEB at:
https://ucstcdom02.ahf.nmci.navy.mil/dns/websec01.nsf/(vwDocsByID)/DL09110913 2034/$file/N3N5%20PI%20Plan_Ver%202.5.doc. Provide an electronic copy of the plan to Director, Operations and Plans (N31) annually, no later than 30 October. Enclosure (2) can be used to assist Continuity of Operations (OPNAV (N310E)) in conducting exercises and validating preparedness.

(2) Designate a pandemic coordinator (PC) and identify the individual to Director, Operations and Plans (OPNAV (N31)). The PC shall be familiar with organizational continuity planning and operations and shall be at a level in the organization where he/she is able to direct the staff in the event of a pandemic event.

(3) Procure all necessary materials to support staff health protection to include personnel protective equipment and information technology equipment required to support telework and other social distancing methods.

b. DNS shall establish Department of the Navy (DON) policy for PI.

c. CNO (N3/N5) is the Navy office of primary responsibility (OPR) for PI policy, execution, operations, exercises, and training. CNO (N3/N5) shall:

(1) Issue and review this instruction and all associated PI program guidance on a continuing basis to ensure adherence to references (a) through (c).

(2) Supervise implementation of the DON Headquarters (HQ) PI plan. OPNAV PI instructions will be reviewed bi-annually and updated as required.

(3) Coordinate the execution and training of the DON PI plan with senior Navy leadership.

(4) Coordinate with CNO Special Assistant for Safety Matters (N09F) to provide annual workplace safety training specific to PI for the entire staff.

(5) Coordinate with DNS on all policy and execution decisions that affect program funding.

(6) Conduct annual PI exercise training. To the greatest extent possible, this training should be coordinated with other planned events and must include telework.

    d. CNO (N1) is the Navy HQ OPR for telework procedures.
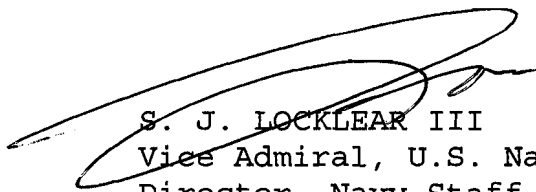
    e. DNS is the Navy HQ OPR for muster procedures and shall issue and maintain OPNAV muster procedures.

    f. Through consultation with BUMED, DNS will establish guidance on restricted travel areas affected by a pandemic event.

6. <u>Waiver</u>. Waiver authority for this instruction is held by DNS.

7. <u>Changes</u>. Submit change requests for this instruction to Chief of Naval Operations (CNO), Deputy Chief of Naval Operations for Information, Plans, and Strategy (N3/N5), 2000 Navy Pentagon, Washington, DC 20350-2000 (Attention: PI Coordinator (N31)).

8. <u>Records Management</u>. Records created as a result of this instruction, regardless of media and format, shall be managed per Secretary of the Navy Manual 5210.1 of November 2007.

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DoD Pandemic Phases and the Stages for
Federal Government and OPNAV Response

USNORTHCOM, as the executive agent for PI global synchronization, created a six-phase alert system to inform DOD of the seriousness of the threat and of the need to launch progressively more intense preparedness activities. Each phase of the alert system coincides with a series of recommended activities to be undertaken by DoD. Changes from one phase to another are triggered by several factors, including the epidemiological behavior of the disease and the characteristics of circulating viruses. This chart identifies the six DoD phases and aligns them with USG and OPNAV response.

DoD PHASES	FEDERAL GOVERNMENT RESPONSE STAGES	OPNAV RECOMMENDED ACTIONS
Phase 0: Shape Prepare DoD for continued operations pre-PI. Priority of effort is surveillance of virus outbreaks. Secondary effort is plan development and synchronization.	Strengthen influenza pandemic preparedness at the global, regional, national and sub national levels.	**Pre Pandemic:** Develop pandemic and telework plans, brief pandemic and telework plans to organizational staff, monitor the situation for an increased risk.
Phase 1: Prevent DoD supports USG efforts to prevent or inhibit the geographic spread of the virus. Priority of effort is to prepare and respond; surveillance, training, organizing, and equipping the force; education; continued planning; strategic communications. Secondary efforts are actions to maintain situational awareness and coordinate with interagency, state, tribal, local and international partners	Minimize the risk of transmission to humans; detect and report such transmission rapidly if it occurs.	**Pre Pandemic:** Cross train personnel to fulfill missions, functions, and tasks. Ensure organizational staff understands and tests pandemic and telework plans. Adjust plans as necessary.

DoD PHASES	FEDERAL GOVERNMENT RESPONSE STAGES	OPNAV RECOMMENDED ACTIONS
Phase 2: Contain DoD's decisive phase; containing the virus at this point may prevent or delay a PI, potentially alleviating the need for additional phases. Priority of effort is to support USG containment efforts; protect DoD key population, and maintain freedom of acition to conduct assigned missions within GCC AORs.	Ensure rapid characterization of the new virus subtype and early detection, notification and response to additional cases.	**Pre Pandemic:** Check common access card (CAC) and building pass expiration dates, acquire pandemic supplies, maintain situation awareness.
Phase 3: Interdict DoD supports USG efforts in delaying or halting the spread of the virus geographically. Priority of effort is on preparations to ensure freedom of action to conduct assigned missions in the face of an impending PI.	Contain the new virus within limited foci or delay spread to gain time to implement preparedness measures, including vaccine development.	**Execution:** Review and activate pandemic and teleworking plans. Implement travel restrictions to infected areas. Renew CAC and building passes that will expire in 60 days.
Phase 4: Stabilize DoD maintains continuity of operations. Priority of effort is the protection of Key Population while providing mission assurance of priority missions to protect vital national interest. Secondary	Maximize efforts to contain or delay spread, to possibly avert a pandemic, and to gain time to implement pandemic response measures.	**Execution:** Implement social distancing, if not already implemented. Conduct a daily accounting of personnel status.

DoD PHASES	FEDERAL GOVERNMENT RESPONSE STAGES	OPNAV RECOMMENDED ACTIONS
effort is support USG efforts.		
Phase 5: Recover DoD reconstitutes the force in preparation for the next wave or returns to the inter-pandemic period. Priority of effort is redeployment and reconstitution of the force. Secondary effort is support USG efforts to re-establish inter/pre-pandemic conditions.	Recovery and Preparation for Subsequent Waves. Return all sectors to a pre-pandemic level of functioning as soon as possible.	**Post Pandemic:** Directorates will reconstitute their staffs and evaluate the effectiveness of the their plan, notify organizational staff that the PI threat has subsided, conduct muster of personnel to determine their overall health status and preparedness, resume normal work schedules, assess lessons, learned and modify plan as required.

PANDEMIC INFLUENZA PLANNING CHECKLIST

The DoD Director, Administration and Management Division (DA&M) is delegated the responsibility for Pentagon Reservation facility operations and security. DA&M provided the Pandemic Influenza Planning Checklist contained in this enclosure to assist organizations with the development of pandemic response plans.

	Complete	In Progress	Not Started	Comments
Strategic Objective 1. Civilian personnel must be prepared to perform mission essential functions (MEFs) and services through a PI, including the initial threat or oncoming first wave, through an actual pandemic health crisis and, if necessary, to help reconstitute governmental functions. To accomplish this objective, the following elements and criteria should be evaluated:				

	Complete	In Progress	Not Started	Comments
A. Identification of MEFs: Essential organizational functions that will enable continuation of vital services and responsibilities must be identified. Employees must be identified and notified of their status as mission essential. To plan for an expected absenteeism rate of up to 40 percent, pre-establishment of delegations of authority and Orders of Succession are vital. Assessment should include:				
1. Identification of MEFs.				
a. Were MEFs identified?				
b. Were essential functions that cannot be performed from home or other locations identified?				
c. Were systems, functions or operations that could be performed from home or other locations identified?				
d. Can essential functions be performed beyond the existing 30-day requirement?				

	Complete	In Progress	Not Started	Comments
2. Assess identification of mission essential employees.				
a. Were mission essential employees aware they were designated mission essential?				
b. Did mission essential employees know which of their duties were deemed mission essential?				
c. Were lines of succession established in writing, with attendant authorities and responsibilities, and communicated to employees?				
d. How deep were lines of succession established, i.e., one, two or three person deep?				
e. Were delegations of authority in place?				
f. Were delegations of authority at least three deep and communicated to employees?				
g. Were designated employees trained to assume lead positions?				
h. Was geographic dispersion considered in establishing lines of succession and delegations of authority?				
i. If not, what plans were in place for conducting MEFs in areas where quarantine was in effect?				

Enclosure (2)

	Complete	In Progress	Not Started	Comments
j. Were plans for redundant operations made, e.g., Navy supporting Army for benefits processing?				
k. Were essential contractor services identified?				
l. Were provisions in these contracts that would facilitate continuity of essential contractor functions?				
m. Were contracting officer representatives (CORs) consulted and notified?				
n. Were contractor's firms notified by CORs?				
o. Was bargaining done in advance to address relevant issues or actions taken to notify unions of emergency?				
B. Interoperable Communications: Continued operations during an emergency, including PI, depend upon the availability and redundancy of critical communication systems. Employee knowledge and awareness of report-in procedures, as well as their familiarity with contact procedures during an emergency situation, are also critical and must be addressed prior to the occurrence of a crisis				

	Complete	In Progress	Not Started	Comments
3. Assess effectiveness of employee report-in and organization emergency contact information to employees.				
a. Did employees know the appropriate toll free number to call in and report their status?				
b. Was the toll-free phone adequately staffed?				
c. Was employee data accurately captured, i.e., employee name, organization, status?				
d. Was accountability data transmitted to appropriate supervisor(s)?				
e. Could employees be contacted using the organization's phone tree system?				
f. How long did it take to notify all employees?				
g. Were periodic status updates provided based on exercise scenario, e.g., quarantine still in effect; didn't report to work, etc. Were the updates timely and did they reach all personnel?				

	Complete	In Progress	Not Started	Comments
4. Assess effectiveness of critical communications.				
a. Were supervisors and their mission essential employees able to talk on essential matters via the telephone or other means as needed to accomplish mission essential work?				
b. Were mission essential employees able to talk/communicate with colleagues?				
c. Were mission essential employees able to talk/communicate with non-DoD associates, e.g., Office of Personnel Management/Health and Human Services?				

	Complete	In Progress	Not Started	Comments
C. Support for Essential Functions and Alternative Work Site Capabilities: Employees, especially those performing essential functions, must be able to have access to electronic and hardcopy documents, references, records and information systems needed to support essential functions during an emergency situation. Review of capabilities and planning must include identification and maintenance of vital systems that rely on periodic physical intervention by essential individuals. Planning must also include identification of records needed to sustain operations for 30 days or longer and ways to access those records from an alternative work site.				
1. Were mission essential employees able to work from home?				
a. Was remote access to classified and non-classified materials available?				
- Computer available?				
- Virtual private network access available?				
- CAC reader installed?				
- Needed files accessible?				

	Complete	In Progress	Not Started	Comments
- Files transmitted from home reached the work site in readable format?				
- Mission essential employees able to access the Web for research?				
- Server capacity sufficient ?				
- If server capacity not sufficient, were shifts assigned?				
- Employees knew in advance what shift to use for server access?				
- Server master identified for file download?				
b. Did mission essential employees have a "Go Pack" ready (hard copy/hard disc drives) (Go Pack - files necessary to perform work at an alternative work site, e.g., work/telephone numbers for those in and outside the organization, including emergency contact information; regulations needed for research or for mission accomplishment, etc.)?				
c. Were mission essential employees aware of parameters governing work at home, i.e., those found in a telework agreement, such as safeguarding security of data and information technology files?				

Enclosure (2)

	Complete	In Progress	Not Started	Comments
d. If mission essential employees were provided laptops, were they aware of how to use them, including obtaining access to systems at regular work site; was any training provided?				
e. Were mission essential employees able to perform work using only a blackberry?				
f. Were files and data available on a shared drive?				
g. Were mission essential employees able to communicate from home or alternative work site via phone using either				
- Home phone?				
- Cell phone?				
- Blackberry?				
h. How were "at home" employee costs captured; e.g., use of home phone for long distance, and was a policy established regarding reimbursement?				
i. Did employees have the supplies at home needed to do, work (normal office supplies)?				
j. Were "at home" childcare requirements addressed?				

	Complete	In Progress	Not Started	Comments
2. Assess availability of work for non-mission essential employees.				
a. Were non-essential employees cross trained to support mission essential employees (either through performance of mission essential or mission essential support functions)?				
b. Was necessary but non-essential work identified (important consideration if time away from regular work site is extensive)?				
3. Assess effectiveness of work at home.				
a. Were assignments made that could be done at home, i.e., deliverables, with timelines, identified?				
b. Were work measurements considered and agreed upon?				
c. How were timekeeping records obtained and maintained?				
4. Assess effectiveness of identification of work assignments that could be temporarily suspended.				
a. Were non-essential functions identified that could be completed at a later date?				

Enclosure (2)

	Complete	In Progress	Not Started	Comments
b. Were plans in place for performing these functions following the emergency, e.g., corrected timecards, missed report suspense dates?				
Strategic Objective 2: People accomplish the mission of Federal agencies, and a potential PI outbreak that could potentially affect up to 40 percent of the workforce, could compromise the ability of the Federal agencies to accomplish their mission. The Department must plan to deal with the potential human capital implications. Federal employees, and or their family members, may be infected, exposed or incapacitated. There may also be a need to limit potential exposure. Planning for mission continuity includes the ability of an organization to provide for the well being and care for employees prior to, during and following a PI.				

	Complete	In Progress	Not Started	Comments
A. Communication to the Workforce: Education of the workforce regarding health, safety, human resource issues, employee responsibilities and actions prior to a pandemic health crisis is critical. Every media available should be utilized to pre-position information and keep the workforce up-to-date on plans and help them understand their rights and responsibilities.				
1. Assess the availability of human resource information to the workforce.				
a. Were employees able to identify the types of leave available to them in the event they or their family members are infected, exposed or incapacitated, requiring the employee to stay away from the regular work site?				
b. Did essential employees have telework agreements?				
c. Were non essential employees aware of "safe haven" or telework capabilities during a pandemic health crisis?				

	Complete	In Progress	Not Started	Comments
d. Did employees know how to communicate with their supervisors and supervisors to employees, to check the status, well being and availability of employees for work?				
e. Were employees aware of potential benefits issues and assistance available to them during such an event?				
f. Were employees aware of where they should seek medical treatment and information?				
2. Asses the ability of management to obtain and communicate official information regarding the onset and end of a catastrophic event necessary to put pandemic plans in place and then allow return to a normal functions.				
a. Is management aware of how they will be notified that a pandemic health crisis has occurred or is expected to occur and to put PI continuity of operations plans in action?				
b. How will social distancing techniques be put in place and communicated to the workforce?				

	Complete	In Progress	Not Started	Comments
B. Actions to Protect and Safeguard: Employees will look to management for guidance and assistance regarding protecting themselves and their co-workers from the spread of germs. Supervisors should be prepared to plan for and deal with these issues.				
1. Assess management's ability to handle staff who become ill in the workplace for their own and other's well being.				
a. Were plans in place to mitigate further infection control to prevent the spread of the virus, e.g., has information been communicated regarding methods to prevent the spread of germs?				
b. Does management have a plan to identify other staff members that may have potentially been in contact with staff members who became ill?				
c. Are supplies available or employees aware of methods to decontaminate/clean areas the staff member may have infected that may be used by other employees?				

Enclosure (2)

	Complete	In Progress	Not Started	Comments
d. Is management aware of steps to take to remove a potentially infected employee from the work site and to ensure the employee is well and not-contagious before returning to the work site?				
e. Has consideration been given to the potential for using installation medical treatment facilities or employee assistance programs to provide trained health care provider assistance in diagnosing and verifying potential influenza in an employee at the work site who appears ill?				
f. Are sufficient and available infection control supplies (e.g., hand sanitizers, environmental cleaning supplies and educational materials) available?				
g. Have contracts been evaluated to determine if a modification will be required for housekeeping to clean facilities and equipment?				
h. Is the human resources staff able to provide adequate, proper advice on how to handle employees who become ill in the workplace?				

Enclosure (2)

	Complete	In Progress	Not Started	Comments
i. Does management know how to respond to employee questions on availability of vaccines for civilian employees? Does he or she know where to find those answers?				
2. Some work must be accomplished at the regular work site. Additionally, some employees may become ill or be exposed prior to official notification of the onset of a pandemic health crisis. Management should be prepared to socially distance employees at the regular work site in either event.				
a. For work that had to be done in the office, were alternative plans made for accomplishing that work?				
b. Was consideration given to spacing employees sufficiently apart to promote and support social distancing?				
c. If employees are socially distanced at the work site, can they access their files on a shared drive or otherwise have access to their work files if not located at their regular desk or site?				

	Complete	In Progress	Not Started	Comments
d. Was consideration given to shift work to preclude all employees being at the regular work site at the same time?				
e. Was consideration given to adjusting parking or making other arrangements for essential employees to commute to work using personal rather than public transportation?				

Enclosure (2)