

COVID-19 Mitigation Plan – Kodiak, Alaska

CONTACT INFORMATION:

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PURPOSE:	<p>The purpose of this COVID-19 Worker Mitigation Plan (WMP) is to meet the mitigation plan requirement identified in <i>Health Mandate 16 and Attachments</i>, issued by the Governor of the State of Alaska under the Public Health Disaster Emergency Declaration.</p> <p>Mandate 16 seeks to balance the ongoing need to maintain diligent efforts to slow and disrupt the rate of infection with the corresponding critical need to resume economic activity in a reasonable and safe manner.</p> <p>This WMP is a proposed plan of action to continue supporting critical infrastructure in the State of Alaska, and outlines how the spread of COVID-19 will be avoided within specific operations, starting with its workforce, so as to not endanger the lives in the communities in which they operate.</p> <p>The key objectives of the WMP are aimed at:</p> <ul style="list-style-type: none"> • reducing transmission among employees, • maintaining healthy business operations, and • maintaining a healthy work environment.
SCOPE:	<p>The Island Trails Network (ITN) is a nonprofit organization with a mission to promote sustainable trails, waterways, shorelines and access to those resources throughout the Kodiak archipelago through action, advocacy, and education. As part of the stewardship of water trails, we conduct vessel-based cleanups of the coast, removing and recycling the marine debris we find.</p> <p>In order to meet these objectives ITN contracted the marine vessel R/V Island C in 2020 to serve as equipment, fuel, and personnel transport, lodging and accommodation for staff, and as a mobile base for marine debris operations. The Island C is a 80-foot research vessel that at full capacity the Island C can accommodate 11 client/volunteers in 4 cabins and provides separate quarters for 4 ship’s crewmembers.</p>

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ITN fieldwork primarily occurs in the Kodiak archipelago. R/V Island C-based fieldwork in 2020 is planned for Afognak and Kodiak islands.

**RESOURCES &
REFERENCES:**

State of Alaska Health Mandate 16 and Attachments, visit the Reopen Alaska Responsibly page: <https://covid19.alaska.gov/reopen/>.

The following resources are guidance documents published by the U.S. Centers for Disease Control and Prevention (CDC) which are relevant:

- [Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 \(COVID-19\)](#) - Guidance to help prevent workplace exposures to acute respiratory illnesses, including COVID-19, in non-healthcare settings.
- [Travelers Returning from International Travel](#) - Information for travelers returning from countries with level 3 travel health notices. Depending on your travel history, you will be asked to stay home for a period of 14 days from the time you left an area with widespread or ongoing community spread (Level 3 Travel Health Notice).
- [Interim Guidance for Ships on Managing Suspected Coronavirus Disease 2019](#) - Resources for ships originating from, or stopping in, the United States to help prevent, detect, and medically manage suspected COVID-19 infections.
- [Get Your Home Ready](#) - This interim guidance is to help household members plan for community transmission of coronavirus disease 2019 (COVID-19) in the United States. The Centers for Disease Control and Prevention (CDC) encourages household members to prepare for the possibility of a COVID-19 outbreak in their community.

The following resources are guidance documents published by the U.S. Occupational Safety and Health Administration (OSHA):

- [Prevent Worker Exposure to Coronavirus \(COVID-19\)](#) – General practices that employers and workers should follow to help prevent exposure to coronavirus.
- [Guidance on Preparing Workplaces for COVID-19](#) - Recommendations as well as descriptions of mandatory safety and health standards. The recommendations are advisory in nature, informational in content, and are intended to assist employers in providing a safe and healthful workplace.

The following resource contains mandates and guidance documents published by the Alaska Department of Military and Veterans Affairs (ADMV), Division of

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	<p>Homeland Security & Emergency Management and the Department of Health and Social Services:</p> <ul style="list-style-type: none">• Coronavirus (COVID-19) – Contains health mandates, press releases, public notices and other coronavirus relevant documents.• COVID-19 Resources – the COVID-19 website of Alaska DHHS
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DEFINITIONS:

SARS-CoV-2 and COVID-19:

Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) is the contagious virus that is the cause of the ongoing pandemic of Coronavirus Disease (COVID-19).

Social Distancing:

Includes maintaining at least six-foot social distancing from other individuals, washing hands with soap and water for at least twenty seconds as frequently as possible or using hand sanitizer containing at least 70% alcohol, covering coughs or sneezes (into the sleeve or elbow, not hands), regularly cleaning high-touch surfaces, and not shaking hands

Confirmed/Suspect COVID-19:

A person who has tested positive for COVID-19 or a person who satisfies epidemiological and clinical criteria.

Close Contact:

Greater than 15 minutes face-to-face contact in any setting with a confirmed case in the period extending from 24 hours before onset of symptoms in the confirmed case, or sharing of a closed space with a confirmed case for a prolonged period (e.g. more than 2 hours) in the period extending from 24 hours before onset of symptoms in the confirmed case.

A close contact includes a person meeting any of the following criteria:
Living in the same household or household-like setting (e.g. in a boarding school or hostel).

Isolation:

Separates sick people with a contagious disease from people who are not sick.

Quarantine:

Separates and restricts the movement of people who were exposed or potentially exposed to a contagious disease to see if they become sick.

Signs & Symptoms:

Fever, sore throat, cough, shortness of breath, chills, body aches, headache, abdominal pain, diarrhea, vomiting,

**CLASSIFICATION OF
WORKER EXPOSURE**

Worker risk of occupational exposure to COVID-19 may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in part on the industry type, need for contact within 6 ft, contact with individuals suspected of being infected with COVID-19, or requirement for repeated or extended contact with persons known to be, or suspected of being, infected with COVID-19.

To help workers determine appropriate precautions, job tasks can be divided into four risk exposure levels: very high, high, medium, and lower risk. The Occupational Risk Pyramid shows the four exposure risk levels in the shape of a pyramid to represent probable distribution of risk.

Most workers will likely fall in the lower exposure risk (caution) or medium exposure risk levels.

○ **High to Very High Exposure Risk**

High and Very High exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19 during specific workplace requirements. These are mainly health professionals and outside of the logging occupations.

○ **Medium Exposure Risk**

Medium exposure risk jobs include those that require frequent and/or close prolonged contact with people who may be infected with COVID-19, but who are not known or suspected COVID-19 patients. In areas without ongoing community transmission, workers in this risk group may have frequent contact with travelers who may return from international locations with widespread COVID-19 transmission. In areas where there is ongoing community transmission, workers in this category may have contact with the general public (e.g., in schools, high-population-density work environments, and some high-volume retail settings).

○ **Lower Exposure Risk (Caution)**

Lower exposure risk (caution) jobs are those that do not require contact with people known to be, or suspected of being, infected with COVID-19, nor frequent close prolonged contact with the general public. Workers in this category have minimal occupational contact with the public and other coworkers.

**WORKPLACE CONTROL
METHODS**

Occupational safety and health professionals use a framework called the “hierarchy of controls” to select ways of controlling workplace hazards. When dealing with COVID-19 exposures, it may not be possible to eliminate the hazard completely and usually a combination of control measures will be necessary for protection.

Engineering Controls

Engineering controls involve isolating employees from work-related hazards. In workplaces where they are appropriate, these types of controls reduce exposure to hazards without relying on worker behavior and can be the most cost-effective solution to implement. Engineering controls for infectious diseases include:

- Installing high-efficiency air filters.
- Increasing ventilation rates in the work environment.
- Installing physical barriers, such as clear plastic sneeze guards.
- Installing a drive-through window for customer service.
- Specialized negative pressure ventilation in some settings, such as for aerosol generating procedures

Administrative Controls

Administrative controls require action by the worker or employer. Typically, administrative controls are changes in work policy or procedures to reduce or minimize exposure to a hazard. Examples of administrative controls include:

- Encouraging sick workers to stay at home.
- Minimizing contact among workers, clients, and customers by replacing face-to-face meetings with virtual communications and implementing telework if feasible.
- Establishing alternating days or extra shifts that reduce the total number of employees in a facility at a given time, allowing them to maintain distance from one another while maintaining a full onsite work week.
- Discontinuing nonessential travel to locations with ongoing COVID-19 outbreaks. Regularly check CDC travel warning levels at: www.cdc.gov/coronavirus/2019-ncov/travelers.
- Developing emergency communications plans, including a forum for answering workers’ concerns and internet-based communications, if feasible.
- Providing workers with up-to-date education and training on COVID-19 risk factors and protective behaviors (e.g., cough etiquette and care of PPE).

- Training workers who need to use protecting clothing and equipment how to put it on, use/wear it, and take it off correctly, including in the context of their current and potential duties. Training material should be easy to understand and available in the appropriate language and literacy level for all workers.

Personal Protective Equipment (PPE)

While engineering and administrative controls are considered more effective in minimizing exposure infectious agents, PPE may also be needed to prevent certain exposures. Examples of PPE include gloves, goggles, face shields, face masks, and respiratory protection, when appropriate.

During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of COVID-19. Check the OSHA and CDC websites regularly for updates about recommended PPE. All types of PPE must be:

- Selected based upon the hazard to the worker.
- Properly fitted and periodically refitted, as applicable (e.g., N95 respirators).
- Consistently and properly worn when required.
- Regularly inspected, maintained, and replaced, as necessary.
- Properly removed, cleaned, and stored or disposed of, as applicable, to avoid contamination of self, others, or the environment.

**BASIC INFECTION
PREVENTION MEASURES
AND OPERATIONAL
CONTROLS**

Protecting workers will depend on emphasizing basic infection prevention measures. As appropriate, all workers should implement good hygiene and infection control practices, including:

- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue (or the sleeve or elbow, not hands), then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.
- Wash your hands often with soap and water for at least 20 seconds. Use at least a 70% alcohol-based hand sanitizer if soap and water are not available.

Island Trails Network have undertaken the following precautions and social distancing requirements:

- Restrictions on worker gatherings and business travel
- Increased sanitization of high contact common areas
- Provided extra hand sanitization stations
- Provided messaging to our partners (e.g. contractors, agency staff, and visitors) regarding expectations for protecting our safety
- Preparing further actions for localized or pandemic scenarios
- Maintain at least six-foot social distancing from other individuals
- When feasible, prohibit congregations of no more than 10 people in the business at a time (including employees).
- No shaking hands
- All employees have been advised of the importance of washing hands.
- All employees have been advised until further notice they are required to stay in camp and all off island trips are not allowed at this time.
- No employee visitors are allowed to visit camp.

PREVENTATIVE CONTROLS

We recommend screening of employees for signs and symptoms at least 14 days in advance of arrival to camp, if possible. If a 14-day window is not feasible, screening should begin as soon as possible prior to departure, following these steps:

- 14-day Pre-departure screening and testing
- 14-day At-home monitoring
- ~~Day before~~ departure screening and testing (up to 96 hrs prior to ensure results)
- Worksite arrival screening

Employees must be free of fever or respiratory symptoms. A possible exception would be if employee has mild symptoms that are clearly attributable to another source (i.e. allergies).

Ensure employees are aware of the:

- Risk of COVID-19 during travel and remote camp areas;
- Transmission of COVID-19 - it is thought to spread via droplet transmission, mainly from person-to-person, between persons who are in close contact with one another (within about 6 feet), or through

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respiratory droplets produced when an infected person coughs or sneezes;

- Signs and symptoms that may indicate a sick person has COVID-19;
- Importance of not working while sick to prevent the spread to others;
- Current employee sick leave policies and procedures.

MANDATED CONTROLS

Sanitation and Disposal

Clean, sanitize, and disinfect common areas daily:

- Daily disinfection of surfaces that people touch frequently can help decrease the spread of germs. When illness has been identified on board consider disinfecting surfaces multiple times per day.
- Cleaning uses soap or detergent to remove dirt and debris from surfaces.
- Sanitizing is meant to reduce, but not kill, the occurrence and growth of germs from surfaces.
- Disinfection uses a chemical to kill germs on surfaces that are likely to harbor germs. Disinfectants work best on a clean surface and usually require a longer surface contact period (between 1 - 10 minutes) to work.
- Surfaces that people touch a lot (door handles, railings, light switches, chairs, tables) and bathroom and kitchen surfaces should be cleaned, sanitized, and disinfected routinely.

**ADDITIONAL GUIDANCE
AND PROTOCOLS:**

Describe additional guidelines and protocols when situations arise that are not covered by this plan.

This plan supersedes the Island Trails Network mitigation plan K-096 dated 05/21/2020 and is involves an increased level of risk than procedures in that plan, due to the difficulty in social distancing onboard a vessel. For the September 2020 marine debris removal cruises, ITN will require of all personnel onboard, whether crew or volunteer (1) test for COVID-19 two weeks prior to departure (2) prohibit out of state travel for two weeks prior to departure (3) perform a second test for COVID-19 no more than 4 days prior to departure with (5) proof of negative results in hand prior to boarding.

Pre-boarding measures outlined above are in place so that the entire crew will operate as a closed community. Thus, if the community remains closed, then strict social distancing protocols, including wearing face masks, is not required during Island C operations. However, any crewmember or volunteer who feels more comfortable wearing PPE are encouraged to do so. Note that if the closed community is in any way broken, then social distancing protocols will be necessary.

Under normal, closed-community operations some mitigation strategies are still applicable:

- Disinfection and sanitization. There will be an emphasis on cleaning and disinfecting the vessel before, during, and after each workday. The ship's crew may consider more frequent cleaning of commonly touched surfaces such as handrails, countertops, and doorknobs.
- ITN shall ensure there are adequate PPE for all personnel should they want or need them, including cloth and disposable masks. In addition, disposable medical gloves, at least one set each of a disposable long-sleeved gown or coveralls, and goggles or face shield will be available for use in case of a sick crewmember (see Appendix II).
- As per normal galley hygiene, food should be cooked or washed prior to consumption.
- All crewmembers should minimize the use of shared objects like pens, pencils, keyboards, tools, etc. to prevent the spread of COVID-19. ITN and the R/V Island C will provide ample supplies of equipment to minimize the need for sharing to reduce risk of cross contamination.

Managing Sick Personnel Onboard

In case of an undiagnosed illness onboard, complete an onboard symptom assessment is recommended by the CDC and Discovery Health (Figure 1) to determine whether the illness may be COVID-19. This shall guide all downstream decisions regarding care for the patient and the safety of other personnel onboard.

Island C Berthing Contingencies in the case of an Outbreak:

Island C has four guest rooms with a total of 11 berths. In aft berthing two rooms have two beds each and a third room has three beds. These three rooms share a bathroom (head). In forward berthing one room has four beds and is equipped with its own head. In addition to guest berths three crewmembers sleep in the forecabin forward and the Captain normally sleeps in the wheelhouse (see Island C berthing diagram, Figure 2).

For the September cruise we will allow a maximum of 2 people per guest room, for a total of 8 volunteers. The following scenarios, in order of increasing risk of exposure, will be used for assigning berthing to those onboard. The level of risk to others onboard will be determined using the Close Contact Management Flowchart published by Discovery Health (Figure 3).

Scenario A: *No symptomatic persons onboard.*

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Under this scenario, the original berthing assignments will remain intact, with daily sanitizing of the vessel occurring as planned.

Scenario B: *One or more personnel from Island C crew or conservation personnel become symptomatic.*

Patient(s) remains isolated in stateroom, which becomes sick bay. Forced air circulation will be secured to prevent airborne spread throughout the ship, but bathroom fan nearest the affected space will be activated and left on, creating negative ventilation pressure to sick bay and still ensuring fresh air to the space. If multiple patients in different rooms become symptomatic, they may be placed in a common sickbay. Lesser exposed personnel (anyone not roommates with a symptomatic patient) are assigned new berthing as required to free up one or more rooms for isolation. This room is then sanitized by the departing occupants, with linens bagged and sealed. Once the isolation room has been sanitized, the patient's roommate, who is at high risk for exposure to the virus, then moves into the isolation room.

From that point on in the cruise, no Island C crew will contact anyone in isolation or in sick bay. All meals will be delivered by the Island C crew to the door of sick bay and the isolation room. No food, dish ware or linens are to leave sickbay or isolation room once onboard isolation begins, until the vessel's arrival in port.

Island C will don the necessary PPE and facilitate welfare checks on the patient and/or those in isolation.

Scenario C: *Captain and/or multiple Island C crew symptomatic.*

All efforts will be made to safely navigate the vessel into port. If health or environmental conditions preclude this, Island C will be anchored in protected waters and all efforts will be made to either evacuate conservation personnel or bring additional crew members onboard to ensure continued safe navigation and operation of the vessel.

KEY PERSONNEL

List the points of contact for this plan and any other important contact information.

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CRITICAL WORK ORDERS