



PSVOA

PURSE SEINE VESSEL OWNERS' ASSOCIATION

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This checklist is intended to make preparation and compliance easier but should not be considered a comprehensive summary and is subject to change without notice. Vessel owners must read, understand and comply with all state and local mandates impacting their fishery. Contact local authorities for additional guidance. State mandates can be found at <https://covid19.alaska.gov/health-mandates/>.

PLANNING:

- ☐ Sign [Mandate 17 Acknowledgement Form](#). Copy to processor, copy on board vessel.
- ☐ Read, understand and comply with state/local ordinances and protocols. **Contact:** fuel dock, fleet manager, harbor master at all ports of call for updated local information.
- ☐ Prepare Essential Worker Letter for crew traveling to Alaska. Crew must carry a copy of their Essential Worker Letter. Template attached and found [here](#).
- ☐ All travelers from outside the state of Alaska must complete the Mandatory Declaration Form for Interstate travelers. Form included in this packet and found online [here](#).
- ☐ Create Quarantine plan for crew traveling to Alaska. Crew must wear a face mask throughout travel. Crew must travel directly to established lodging or worksite/vessel upon arrival.
- ☐ Complete initial health screening with incoming crew. If crew demonstrates symptoms that cannot be attributed to another condition (i.e. allergies), do not allow them to board.
- ☐ Maintain Captains Log. Take temperature twice daily during quarantine. Seek Covid-19 testing if signs of fever. Verbal and Physical screening suggestions can be found in Health Mandate 017 Appendix I (IV). Template for screening is included in this packet.
- ☐ Fly a "Lima" flag or similar yellow/black flag if crew is still under quarantine.
- ☐ If person on vessel becomes ill with suspected or confirmed COVID19, contact local public health nursing for further guidance:
 - i. Dillingham Public Health Center: 842-5981
 - ii. Homer Public Health Center: 235-8857
 - iii. Ketchikan Public Health Center: 225-4350
 - iv. Kodiak Public Health Center: 486-3319
 - v. Nome Public Health Center: 443-3221
 - vi. Petersburg Public Health Center: 772-4611
 - vii. Sitka Public Health Center: 747-3255
 - viii. Valdez Public Health Center: 835-4612
 - ix. <http://dhss.alaska.gov/dph/Nursing/Pages/locations.aspx>
 - a. For a person ill or injured and not suspected of COVID-19 follow established process to evaluate for establishing healthcare.
- ☐ In the event you become sick, the Alaska Protective Plan requires you to provide information to the nearest CDC Quarantine Station <https://www.cdc.gov/quarantine/quarantinestationcontactlistfull.html>.



STATE OF ALASKA
DEPARTMENT OF HEALTH AND SOCIAL SERVICES
INDEPENDENT FISHING VESSEL AND
SHORE-BASED FISHING OPERATION PROTECTIVE MEASURES
ACKNOWLEDGMENT FORM – HEALTH MANDATE 017 APPENDIX 02



The State of Alaska acknowledges the importance of our commercial fishing fleets to our economy and our lifestyle as Alaskans. In order to ensure a safe and productive fishing season this year while protecting Alaskan communities to the maximum extent possible from the spread of the coronavirus, protective measures are necessary for independent commercial fishing vessels and shore-based harvesting operations operating within Alaskan waters and ports in order to prevent, slow, and disrupt the spread of the virus that causes COVID-19.

Vessel Name		USCG or ADFG #	
Home Port			
Shore-based Location		CFEC/Setnet Number(s)	
Vessel Captain or Site Manager Name(s)			
Total Onboard / On Site			

I, _____, have read and understand all of the requirements of Mandate 017 and applicable appendices. As the person responsible for the above-named vessel or shore-based fishing operation, I hereby acknowledge and agree to: (initial one)

____ Comply with the protective plan in Appendix 01 of Mandate 017 for my vessel for the 2020 fishing season.

____ Comply with the fleet or association protective plan submitted by _____ for the 2020 fishing season.

____ Comply with the protective plan in Appendix 03 of Mandate 017 for my harvesting operation for the 2020 fishing season.

I agree to comply with all other Mandates and health advisories issued by the State of Alaska and any local community mandates, ordinances, or directives that are not in direct conflict with this Mandate. I agree to keep a copy of this form and any other documentation required under this Mandate and the Appendixes for the entirety of the 2020 fishing season. I shall produce this form and any other required documentation upon request to the United States Coast Guard, the State of Alaska, Department of Fish and Game, Department of Health and Social Services, and/or the Alaska State Troopers.

CERTIFICATE: I swear or affirm, under penalty of perjury, that the above information I provided on this document is true and correct. I swear or affirm I will comply with all of the requirements set out in Health Mandate 017 and the Appendixes.

WARNING: If you provide false information on this form, you may be convicted of a Class B felony under AS 11.56.200 and/or a Class A misdemeanor under AS 11.56.210. Additionally, due to the imminent danger to the public by the spread of coronavirus, if you violate the self-quarantine regulations set forth in the Mandate, you may also be convicted of a class A misdemeanor which is punishable by a fine of up to \$25,000, or imprisonment of not more than one year, or both pursuant to AS 12.55.035 and AS 12.55.135.

SIGNATURE: _____

DATE: _____

PRINTED NAME: _____

CAPTAIN'S LOG

Captain Name: _____ Date of Arrival*: _____

Originating City/State/Zip Code: _____

☐ PASSED SCREENING? ☐ PASSED QUARANTINE? ☐ BECAME ILL (See Attached Sheet)

Crew Member: _____ Date of Arrival*: _____

Originating City/State/Zip Code: _____

☐ PASSED SCREENING? ☐ PASSED QUARANTINE? ☐ BECAME ILL (See Attached Sheet)

Crew Member: _____ Date of Arrival*: _____

Originating City/State/Zip Code: _____

☐ PASSED SCREENING? ☐ PASSED QUARANTINE? ☐ BECAME ILL (See Attached Sheet)

Crew Member: _____ Date of Arrival*: _____

Originating City/State/Zip Code: _____

☐ PASSED SCREENING? ☐ PASSED QUARANTINE? ☐ BECAME ILL (See Attached Sheet)

Crew Member: _____ Date of Arrival*: _____

Originating City/State/Zip Code: _____

☐ PASSED SCREENING? ☐ PASSED QUARANTINE? ☐ BECAME ILL (See Attached Sheet)

Crew Member: _____ Date of Arrival*: _____

Originating City/State/Zip Code: _____

☐ PASSED SCREENING? ☐ PASSED QUARANTINE? ☐ BECAME ILL (See Attached Sheet)

Crew Member: _____ Date of Arrival*: _____

Originating City/State/Zip Code: _____

☐ PASSED SCREENING? ☐ PASSED QUARANTINE? ☐ BECAME ILL (See Attached Sheet)

Crew Member: _____ Date of Arrival*: _____

Originating City/State/Zip Code: _____

☐ PASSED SCREENING? ☐ PASSED QUARANTINE? ☐ BECAME ILL (See Attached Sheet)

Crew Member: _____ Date of Arrival*: _____

Originating City/State/Zip Code: _____

☐ PASSED SCREENING? ☐ PASSED QUARANTINE? ☐ BECAME ILL (See Attached Sheet)

*Date of arrival at final destination. Attach additional sheet if you have more crew members.

SCREENING & QUARANTINE LOG: VESSEL CAPTAIN

Vessel Name: _____ **USCG or ADF&G#:** _____
if applicable (write "setnet" if S04T)

Captain's Name: _____ **Permit#:** _____

Captain's Phone#: _____

Fishermen are required to be screened upon arrival to the vessel (in accordance with Paragraph III of Health Mandate #017) and to have completed a self-quarantine (in accordance with Paragraph IV of Health Mandate #017).

Captain's date of arrival at quarantine destination: _____

Temperature at time of vessel arrival (in Fahrenheit): _____

Quarantine Temperature Log Date of Quarantine Start: _____

Temperature should be taken and noted twice daily during self-quarantine.

Day 1: _____	Day 8: _____
Day 2: _____	Day 9: _____
Day 3: _____	Day 10: _____
Day 4: _____	Day 11: _____
Day 5: _____	Day 12: _____
Day 6: _____	Day 13: _____
Day 7: _____	Day 14: _____

If a new crew member joins the vessel, please repeat the 14-day quarantine procedures and temperature log on the back of this page.

☐ I have read and understand the approved protective plan and all supplemental materials for my fishing vessel.

In the event you become sick, the Alaska Protective Plan requires you to provide information to the nearest CDC Quarantine Station (www.cdc.gov/quarantine/quarantinestationcontactlistfull.html). If you become sick, provide information about the elements below on the back of this page.

1. List of signs and symptoms, including onset dates
2. Highest recorded temperature
3. Embarkation date and port
4. Ship's ports of call during the 14 days before you got sick
5. List of ports of call where you disembarked during the 14 days before you got sick

VESSEL CAPTAIN IS TO KEEP THIS ON FILE WITH THE CAPTAINS LOG

SCREENING & QUARANTINE LOG: CREW (PRINT ONE/CREW)

Vessel Name: _____ **USCG or ADF&G#:** _____
if applicable (write "setnet" if S04T)

Crew Member Name & Phone#: _____

Captain's Name & Phone#: _____

Fishermen are required to be screened upon arrival to the vessel (in accordance with Paragraph III of Health Mandate #017) and to have completed a self-quarantine (in accordance with Paragraph IV of Health Mandate #017).

Crew member's date of arrival at quarantine destination: _____

Temperature at time of vessel arrival (in Fahrenheit): _____

Quarantine Temperature Log Date of Quarantine Start: _____

Temperature should be taken and noted twice daily during self-quarantine.

Day 1: _____	Day 8: _____
Day 2: _____	Day 9: _____
Day 3: _____	Day 10: _____
Day 4: _____	Day 11: _____
Day 5: _____	Day 12: _____
Day 6: _____	Day 13: _____
Day 7: _____	Day 14: _____

If a new crew member joins the vessel, please repeat the 14-day quarantine procedures and temperature log on the back of this page.

☐ I have read and understand the approved protective plan and all supplemental materials for my fishing vessel.

In the event you become sick, the Alaska Protective Plan requires you to provide information to the nearest CDC Quarantine Station (www.cdc.gov/quarantine/quarantinestationcontactlistfull.html). If you become sick, provide information about the elements below on the back of this page.

1. List of signs and symptoms, including onset dates
2. Highest recorded temperature
3. Embarkation date and port
4. Ship's ports of call during the 14 days before you got sick
5. List of ports of call where you disembarked during the 14 days before you got sick

VESSEL CAPTAIN IS TO KEEP THIS ON FILE WITH THE CAPTAINS LOG

Vessel Name:
Company Name:
Address:

DATE:

CRITICAL INFRASTRUCTURE INDUSTRY ESSENTIAL EMPLOYEE VERIFICATION AND TRAVEL LETTER

This letter identifies, CREW MEMBER NAME HERE as an Essential Employee of VESSEL NAME/COMPANY NAME HERE, which is a Critical Infrastructure Industry under Alaska Governor Dunleavy's March COVID-19 Health Mandates and "Alaska Essential Services and Critical Workforce Infrastructure Order," specifically the fishing and fish processing industry identified in subsection II.e.ii.8, and under Washington Governor Inslee's "Stay Home-Stay Healthy" March 23, 2020 Proclamation 20-25 and Essential Critical Infrastructure Workers Appendix.

VESSEL NAME/COMPANY NAME HERE has submitted its Protective Plan for maintaining critical infrastructure to the Alaska Unified Command pursuant to COVID-19 Health Mandates 010, 011 and 012.

The individual named above should be considered authorized to travel under the mobility restrictions of Alaska Health Mandate 010 and Washington Proclamation 20-25. They are also authorized to work under the safety measures enacted by our Protective Plan during their 14-day self-quarantine period.

Please grant this Essential Employee entry into Alaska and/or permit him/her travel to and from work in Washington or Alaska so he/she can continue with their job in the interest of protecting public health and security.
his letter is valid from the above date for the duration of the national emergency related to the COVID-19 pandemic, the effective period of Alaska's COVID-19 Health Mandates, and/or Washington's Stay Home-Stay Healthy Proclamation 20-25.

Thank you for your cooperation. For validation purposes or questions, please contact the undersigned.

Sincerely,

VESSEL CAPTAIN NAME

VESSEL CAPTAIN EMAIL ADDRESS

STATE OF ALASKA
Department of Health & Social Services

MANDATORY DECLARATION FORM FOR INTERSTATE TRAVELERS

The State of Alaska actively screens and monitors all travelers for public health and safety. It is required that all travelers provide the information below.
Alaska Statutes 26.23 and 18.15.

TRAVELER IDENTIFICATION AND CONTACT INFORMATION

FULL NAME (PRINT): _____

HOME ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE NUMBER WHILE TRAVELING IN ALASKA _____ DATE OF ARRIVAL _____

PLEASE SELECT ONE OF THE FOLLOWING OPTIONS:

#1 TEST WITHIN 72 HOURS OF DEPARTURE

(a) ☐ **I was tested within 72 hours prior to departure and it was negative. Proof of the result is provided.**

I consent to take another test between 7-14 days after arrival in Alaska. I agree to minimize my interaction with others until my second test is back, 14 days has passed, or I leave the state, whichever is earlier.

(b) ☐ **I was tested within 72 hours prior to departure but I am waiting for my test results.**

I agree to quarantine at the listed location until I receive test results, which I will email to traveler@alaska.gov. I will take another test between 7-14 days after arrival in Alaska. I agree to minimize my interaction with others until my second test is back, 14 days has passed, or I leave the state, whichever is earlier.

#2 TEST WITHIN 5 DAYS OF DEPARTURE

(a) ☐ **I was tested within 5 days prior to departure and it was negative. Proof of the result is provided.**

I consent to a test at the airport today and a third test between 7-14 days after arrival in Alaska. I will minimize my interaction with others until my third test is back, 14 days has passed, or I leave the state, whichever is earlier.

(b) ☐ **I was tested within 5 days prior to departure but I am waiting for test results.**

I agree to quarantine at the listed location until I receive test results, which I will email to traveler@alaska.gov. I will take another test between 7-14 days after arrival in Alaska. I agree to minimize my interaction with others until my second test is back, 14 days has passed, or I leave the state, whichever is earlier.

#3 NO QUALIFYING PRE-TRAVEL TEST

(a) ☐ **I have not received a pre-travel test within 5 days prior to departure. I request testing in Alaska.**

I consent to a test upon arrival in Alaska. I agree to quarantine at the listed location until I receive the results. I understand that testing is subject to availability, and I must quarantine for 14 days or until I can receive negative test results, whichever is shorter.

(b) ☐ **I have not received a pre-travel test within 5 days prior to departure. I will self-quarantine for 14 days at the listed quarantine location below. I will comply with these quarantine requirements:**

1. Proceed directly to your designated quarantine location. Remain in your designated quarantine location for a period of 14 days, or the duration of your stay in Alaska, whichever is shorter.
 - a. You may leave your designated quarantine location only for medical emergencies or to seek necessary medical care.
 - b. Do not visit any public spaces, including, but not limited to: pools, meeting rooms, fitness centers, or restaurants.
 - c. Do not allow visitors in or out of your designated quarantine location other than a physician, healthcare provider, or individual authorized to enter the designated quarantine location by Unified Command.
2. Comply with all rules or protocols related to your quarantine as set forth by your hotel or rented lodging.

(c) ☐ **I am an Alaska resident and was out-of-state for five days or less. I choose the following option:**

- ☐ I consent to a test upon return to Alaska. I will quarantine at the listed location until I receive the results of my test. I will obtain a second test between 7-14 days after arrival, and I agree to minimize interactions until the result from the second test shows that I am negative.
- ☐ I will self-quarantine for 14 days upon arrival and comply with the quarantine requirements as described in this document.
- ☐ I left Alaska for less than 24 hours (for instance, layover in another state), therefore I do not need to test or quarantine. I will self-monitor for the next 14 days for any symptoms, even mild ones.

STATE OF ALASKA
Department of Health & Social Services

#4 RECOVERED ASYMPTOMATIC

- ☐ I was previously positive for COVID-19. I am now recovered and can provide proof of the following:
- (1) Previously positive results of a molecular-based test (not an antibody test) for SARS-CoV2 that occurred at least three weeks prior to arrival in AK;
 - (2) I am currently asymptomatic; and
 - (3) I have a medical provider's note of recovery.

#5 CRITICAL INFRASTRUCTURE WORKFORCE

☐ I am travelling as part of critical infrastructure with a current COVID mitigation plan.

Employer: _____ Employee title/role _____

Does Employer require testing at arrival? ☐ YES ☐ NO ☐ UNKNOWN

QUARANTINE LOCATION INFORMATION

ADDRESS _____ CITY _____ STATE _____ ZIP _____

DATE OF ARRIVAL AT QUARANTINE LOCATION _____ NOTES: _____

MINOR CHILDREN OR WARDS

I have completed this form on behalf of a minor child in my custody and care, or on behalf of an individual over whom I have legal authority. I am authorized to consent to testing, if applicable, on their behalf.

CHILD/WARD'S FULL NAME (PRINT): _____

AUTHORIZED REPRESENTATIVE'S FULL NAME (PRINT): _____

RELATIONSHIP TO CHILD/WARD: _____

HOME ADDRESS: _____ PHONE NUMBER: _____

SYMPTOM VERIFICATION

Have you come in contact with any positive COVID case within the last 14 days? ☐ YES ☐ NO

Do you have any of the following symptoms:

- | | | |
|--|--|---|
| - Cough <input type="checkbox"/> YES <input type="checkbox"/> NO | - Sore throat <input type="checkbox"/> YES <input type="checkbox"/> NO | - New loss of taste or smell <input type="checkbox"/> YES <input type="checkbox"/> NO |
| - Shortness of Breath <input type="checkbox"/> YES <input type="checkbox"/> NO | - Fatigue <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| - Fever symptoms <input type="checkbox"/> YES <input type="checkbox"/> NO | - Body ache <input type="checkbox"/> YES <input type="checkbox"/> NO | |

**If you select yes to any of these, you agree to receive a test at the airport and quarantine till the results return, even if you have a negative test in hand. If you are completing this form before traveling to Alaska and have symptoms, consult with your doctor prior to travel.*

CERTIFICATE

Read and Sign: I swear or affirm, under penalty of perjury, that: the above information I provided on this document is true and correct. I swear I will comply with the requirements of Health Mandate 010, the requirements of my employer's protective plan (if applicable), and this Declaration Form.

WARNING: If you provide false information on this form, you may be convicted of a Class B felony under AS 11.56.200 and/or a Class A misdemeanor under AS 11.56.210. Additionally, due to the imminent danger to the public by the spread of Coronavirus, if you violate the self-quarantine regulations set forth in the mandate, you may also be convicted of a class A misdemeanor which is punishable by a fine of up to \$25,000, or imprisonment of not more than one year, or both pursuant to Alaska Statute 12.55.035 and Alaska Statute 12.55.135.

SIGNATURE: _____ DATE: _____

PRINTED NAME: _____

Disinfecting and Sanitizing with Bleach

Guidelines for Mixing Bleach Solutions for Child Care and Similar Environments

Preparation Tips

- **Prepare** a fresh bleach solution each day in a well-ventilated area that is separate from children.
- **Label** bottles of bleach solution with contents, ratio and date mixed.
- **Use cool water. Always add** bleach to cool water, **NOT** water to bleach.
- **Wear** gloves and eye protection.
- **Prepare** solution in an area with an eye wash.

Disinfecting Solutions

For use on diaper change tables, hand washing sinks, bathrooms (including toilet bowls, toilet seats, training rings, soap dispensers, potty chairs), door and cabinet handles, etc.

Water	Bleach Strength* 2.75%	Bleach Strength* 5.25-6.25%	Bleach Strength* 8.25%
1 Gallon	1/3 Cup, plus 1 Tablespoon	3 Tablespoons	2 Tablespoons
1 Quart	1 1/2 Tablespoons	2 1/4 Teaspoons	1 1/2 Teaspoons

Sanitizing Solutions

For use on eating utensils, food use contact surfaces, mixed use tables, high chair trays, crib frames and mattresses, toys, pacifiers, floors, sleep mats, etc.

1 Gallon	1 Tablespoon	2 Teaspoons	1 Teaspoon
1 Quart	1 Teaspoon	1/2 Teaspoon	1/4 Teaspoon

Disinfection of non-porous non-food contact surfaces can be achieved with 600 parts per million (ppm) of chlorine bleach. To make measuring easier, the strengths listed in this table represent approximately 600-800 ppm of bleach for disinfecting, and approximately 100 ppm for sanitizing. Chlorine test strips with a measuring range of 0-800 ppm or higher can also be used to determine the strength of the solution.

Contact your local health jurisdiction for further instructions on cleaning and disinfecting if specific disease or organisms are identified as causing illness in your program.

***Use only plain unscented bleach** that lists the percent (%) strength on the manufacturer's label. Read the label on the bleach bottle to determine the bleach strength. For example, Sodium Hypochlorite...6.25% or 8.25%.

Steps to Follow

- **Clean** the surface with soap and water before disinfecting or sanitizing.
- **Rinse** with clean water and dry with paper towel.
- **Apply** chlorine bleach and water solution to the entire area to be disinfected or sanitized.
- **Air dry** for at least 2 minutes.

This chart was created by the Disinfection Workgroup led by the Washington State Department of Health. Workgroup members consist of staff from the Department of Early Learning, Snohomish Health District, Local Hazardous Waste Management Program in King County, Washington State Department of Ecology, the Coalition for Safety and Health in Early Learning, and the Washington State Department of Health.

For people with disabilities, this document is available on request in other formats.
To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).



Chlorine Bleach Disinfecting and Sanitizing Chart Companion Document

DOH 970-216 January 2015

Background: Sodium hypochlorite is the active ingredient in household bleach or chlorine bleach. It is economical, and is an effective disinfectant with a broad spectrum of antimicrobial activity. It has been the primary disinfectant used in early learning programs in Washington State for more than 30 years. During this time, most household chlorine bleach was available at strengths of 5.25-6.25%. The recommended concentration for disinfection has been 600-800 ppm of chlorine bleach and 50 to 200 parts per million (ppm) for sanitizing.

In 2012, some manufacturers changed their chlorine bleach formulation to a strength of 8.25% with a registered non-food contact surface disinfection level of 2400 ppm, the level often used in hospitals. Their sanitizing level is 200 ppm, the upper end of the range allowed by the Food and Drug Administration (FDA).

Problem: As of 2014, the most available household chlorine bleach used for disinfection in children's programs in many areas of Washington State is at a strength of 8.25%. Instructions for use of these products and other strength bleaches indicate 2400 ppm of chlorine bleach is needed for disinfection. This represents 3 to 4 times the levels previously recommended for Washington's child cares. This issue has raised the question of what guidance to give child care providers regarding the concentration of disinfection and sanitizing solutions for use in their programs.

Discussion: It is prudent to use as few chemicals as possible in a child's environment. We believe 2400 ppm is too strong to use in children's environments when they are present, especially since children's lungs are still developing, and are more vulnerable to exposures to toxic chemicals.

The U.S. Environmental Protection Agency (EPA) (2014) guidelines contain procedures for testing, and test organisms that products must be able to destroy at 99.9% in order to be labeled as disinfectants and receive EPA's approval. The Disinfection Workgroup found several products that received EPA approval for disinfection at a strength of 600 ppm. For example:

Name of Product	Strength of Sodium Hypochlorite	EPA's Approval date
Aqua Guard Bleach	12.5%	August 4, 2014
Clorox Ultra Bleach	6.15%	August 29, 2012
KA Steel	12.5%	February 25, 2014
KIK International –Pure Bright Disinfectant Bleach	5.25%	January 13, 2014
So White Brand Bleach and Disinfectant	5.25%	July 11, 2013
Vertex	5.25%	February 12, 2014

Prepared by: The Disinfection Workgroup led by the Washington State Department of Health. Workgroup members consist of staff from the Local Hazardous Waste Management Program in King County, Snohomish Health District, the Coalition for Safety and Health in Early Learning, Washington State Department of Early Learning, Washington State Department of Ecology, and the Washington State Department of Health.

Based on the information contained herein, careful review of the literature and correspondence with EPA, the Disinfection Workgroup recommends staying as close as possible to a 600 ppm disinfection level for general non-food contact surface disinfection.

A thorough review of evidence-based literature has shown that 600 ppm to be an effective disinfectant when used appropriately. The literature suggests that there are key advantages to using lower strength chlorine bleach as a disinfectant (CDC, 2009). Chlorine bleach:

- Does not leave a toxic residue that requires rinsing in children's areas.
- Is unaffected by water hardness.
- Is inexpensive and fast acting.

The Disinfection Workgroup created a chart titled *Disinfecting and Sanitizing with Bleach: Guidelines for Mixing Bleach Solutions for Child Care and Similar Environments* that lists recipes for creating disinfection and sanitizing solutions for the most common concentrations of chlorine bleach currently on the market. The chart uses a disinfection level of 600-800 ppm, and a sanitizing level at approximately 100 ppm. The chart also reminds providers to check with their local health department when disease or pathogenic organisms are present that require a higher level of disinfection to kill. For example, a norovirus outbreak, or dealing with a child with *Clostridium difficile*.

How to Determine Chlorine Bleach strength:

- Read the fine print on the label.
- The active ingredients may be listed on the back or front of the container's label, and listed in a similar manner to the example below showing the strength or percent of chlorine in a container of 8.25% bleach.

Active Ingredients	
Sodium Hypochlorite...	8.25%
Other ingredients.....	91.75%
Total.....	100%

References

Centers for Disease Control and Prevention (CDC). (2009, December 29). Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008. Retrieved from

http://www.cdc.gov/hicpac/disinfection_sterilization/6_0disinfection.html.

Environmental Protection Agency (EPA). (2014, June 12). Pesticides: Regulating Pesticides – Antimicrobial Policy & Guidance Documents. Retrieved from

<http://www.epa.gov/oppad001/regpolicy.htm>.

For people with disabilities, this document is available on request in other formats.
To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).

Steps to help prevent the spread of COVID-19 if you are sick

FOLLOW THE STEPS BELOW: If you are sick with COVID-19 or think you might have COVID-19, follow the steps below to help protect other people in your home and community.

Stay home except to get medical care

- **Stay home:** Most people with COVID-19 have mild illness and are able to recover at home without medical care. Do not leave your home, except to get medical care. Do not visit public areas.
- **Stay in touch with your doctor.** Call before you get medical care. Be sure to get care if you have trouble breathing, or have any other emergency warning signs, or if you think it is an emergency.
- **Avoid public transportation:** Avoid using public transportation, ride-sharing, or taxis.



Separate yourself from other people in your home, this is known as home isolation

- **Stay away from others:** As much as possible, stay away from others. You should stay in a specific “sick room” if possible, and away from other people in your home. Use a separate bathroom, if available.
 - See COVID-19 and Animals if you have questions about pets. <https://www.cdc.gov/coronavirus/2019-ncov/faq.html#COVID19animals>



Call ahead before visiting your doctor

- **Call ahead:** Many medical visits for routine care are being postponed or done by phone or telemedicine.
- If you have a medical appointment that cannot be postponed, call your doctor’s office, and tell them you have or may have COVID-19. This will help the office protect themselves and other patients.



If you are sick wear a facemask in the following situations, if available.



- **If you are sick:** You should wear a facemask, if available, when you are around other people (including before you enter a healthcare provider’s office).
- **If you are caring for others:** If the person who is sick is not able to wear a facemask (for example, because it causes trouble breathing), then as their caregiver, you should wear a facemask when in the same room with them. Visitors, other than caregivers, are not recommended.

Note: During a public health emergency, facemasks may be reserved for healthcare workers. You may need to improvise a facemask using a scarf or bandana.

Cover your coughs and sneezes

- **Cover:** Cover your mouth and nose with a tissue when you cough or sneeze.
- **Dispose:** Throw used tissues in a lined trash can.
- **Wash hands:** Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.



Clean your hands often

- **Wash hands:** Wash your hands often with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- **Hand sanitizer:** If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.
- **Soap and water:** Soap and water are the best option, especially if hands are visibly dirty.
- **Avoid touching:** Avoid touching your eyes, nose, and mouth with unwashed hands.



Avoid sharing personal household items

- **Do not share:** Do not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people in your home.
- **Wash thoroughly after use:** After using these items, wash them thoroughly with soap and water or put in the dishwasher.



cdc.gov/coronavirus

Clean all “high-touch” surfaces everyday

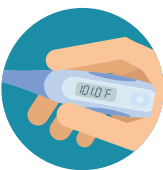
Clean high-touch surfaces in your isolation area (“sick room” and bathroom) every day; let a caregiver clean and disinfect high-touch surfaces in other areas of the home.



- **Clean and disinfect:** Routinely clean high-touch surfaces in your “sick room” and bathroom. Let someone else clean and disinfect surfaces in common areas, but not your bedroom and bathroom.
 - If a caregiver or other person needs to clean and disinfect a sick person’s bedroom or bathroom, they should do so on an as-needed basis. The caregiver/other person should wear a mask and wait as long as possible after the sick person has used the bathroom.
- High-touch surfaces include phones, remote controls, counters, tabletops, doorknobs, bathroom fixtures, toilets, keyboards, tablets, and bedside tables.
- **Clean and disinfect areas that may have blood, stool, or body fluids on them.**
- **Household cleaners and disinfectants:** Clean the area or item with soap and water or another detergent if it is dirty. Then, use a household disinfectant.
 - Be sure to follow the instructions on the label to ensure safe and effective use of the product. Many products recommend keeping the surface wet for several minutes to ensure germs are killed. Many also recommend precautions such as wearing gloves and making sure you have good ventilation during use of the product.
 - Most EPA-registered household disinfectants should be effective. A full list of disinfectants can be found [here](#).

Monitor your symptoms

- Common symptoms of COVID-19 include fever and cough. Trouble breathing is a more serious symptom that means you should get medical attention.
- **If you are having trouble breathing, seek medical attention, but call first.**
 - Call your doctor or emergency room before going in and tell them your symptoms. They will tell you what to do.
- **Wear a facemask:** If available, put on a facemask before you enter the building. If you can’t put on a facemask, cover your coughs and sneezes. Try to stay at least 6 feet away from other people. This will help protect the people in the office or waiting room.
- **Follow care instructions from your healthcare provider and local health department:** Your local health authorities will give instructions on checking your symptoms and reporting information.



If you develop **emergency warning signs** for COVID-19 get **medical attention immediately**.

Emergency warning signs include*:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

*This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning.

Call 911 if you have a medical emergency: If you have a medical emergency and need to call 911, notify the operator that you have or think you might have, COVID-19. If possible, put on a facemask before medical help arrives.

How to discontinue home isolation

- People **with COVID-19 who have stayed home (home isolated)** can stop home isolation under the following conditions:
 - **If you will not have a test** to determine if you are still contagious, you can leave home after these three things have happened:
 - You have had no fever for at least 72 hours (that is three full days of no fever without the use medicine that reduces fevers) AND
 - other symptoms have improved (for example, when your cough or shortness of breath have improved) AND
 - at least 7 days have passed since your symptoms first appeared
 - **If you will be tested** to determine if you are still contagious, you can leave home after these three things have happened:
 - You no longer have a fever (without the use medicine that reduces fevers) AND
 - other symptoms have improved (for example, when your cough or shortness of breath have improved) AND
 - you received two negative tests in a row, 24 hours apart. Your doctor will follow CDC guidelines.



In all cases, follow the guidance of your healthcare provider and local health department. The decision to stop home isolation should be made in consultation with your healthcare provider and state and local health departments. Local decisions depend on local circumstances.

More information is available <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>.

Additional information for healthcare providers: [Interim Healthcare Infection Prevention and Control Recommendations for Persons Under Investigation for 2019 Novel Coronavirus](#).

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By: Governor Mike Dunleavy 
Commissioner Adam Crum  Alaska Department of Health and Social Services
Dr. Anne Zink  Chief Medical Officer, State of Alaska

- I. Documentation.** Vessel captains are required to maintain a ship's log as a written or time-stamped electronic document covering, at a minimum, the following information:
- a. An acknowledgement of the requirements of this Mandate and an explicit description of which protective plan (State Mandate 017 or fleet-wide plan) they are enacting and enforcing on the vessel.
 - b. Certification that crew members have been screened upon arrival in accordance with Paragraph III.
 - c. Certification when crewmembers have completed self-quarantine in accordance with Paragraph IV.
 - d. In the event of a sick crewmember, documentation of the information required in Paragraph VII.c.iii.

For the 2020 season, each independent vessel captain must sign the Health Mandate 017 Acknowledgement Form (Appendix 02) prior to actively participating in the 2020 commercial fishing season. This form will indicate that the captain and owner will comply with the Mandate.

Prior to accepting any fish, or making any payment for fish to an independent fishing vessel, a tender or processor must receive and confirm a signed copy of the vessel's Acknowledgement Form. The vessel captain must submit a copy of the Acknowledgement Form the first time they sell fish to a tender or processor. Subsequent sales to the same tender or processor do not require submission of another copy of the Acknowledgement Form (*e.g.*, the form only needs to be submitted once, per fishing season, per tender or processor), but every tender or processor that an independent commercial fishing vessel sells to must have, and retain until December 31, 2020, a signed copy of the Acknowledgement Form. This form shall be provided to the Alaska Department of Fish and Game upon request.

By accepting the Acknowledgement Form, the tender or processor may rely upon the submission of the Acknowledgement Form as proof of compliance of Health Mandate 017 and Appendix 01. The tender or processor is not required to confirm compliance with

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Health Mandate 017 and Appendix 01, other than to collect the Acknowledgment Form, and assumes no liability for any failure to comply by any independent commercial fishing vessels.

II. Travel Procedures.

- a. All crewmembers in transit on commercial or chartered aircraft must wear a cloth face covering that meets the recommendations contained in Health Alert 010. This face covering must be worn while transiting air terminals (to be temporarily removed for security screening), while on the plane, and any follow-on ground transportation until they reach their self-quarantine facility (*e.g.*, bunkhouse, vessel or private lodging). Crewmembers shall clean or dispose of face coverings in accordance with Health Alert 010.
- b. Crewmembers in transit shall carry documentation from the vessel or company indicating that they are an essential Critical Infrastructure Worker as defined under State Health Mandates.
- c. Arriving crewmembers must proceed directly to the vessel or their designated self-quarantine location, must practice social distancing and avoid interaction with the community, and may not stop at any location between arrival at the local airport and transport to the vessel or self-quarantine location.

III. Self-Quarantine. The requirements of Health Mandate 010 remain in effect. All people arriving in Alaska, whether resident, worker, or visitor, are required to self-quarantine for 14 days after arriving in the State and monitor for illness. To the greatest extent possible, arriving people should self-quarantine at their final destination in Alaska.

- a. Arriving crewmembers should be aware that some local communities, boatyards, or harbor masters may have enacted additional protective measures, and must comply with those measures.
- b. Crewmembers' temperature shall be taken twice daily during self-quarantine. Should fever symptoms develop during quarantine, follow the **Identification** protocol in Paragraph VII (a), seek testing and medical treatment immediately if symptoms are suspected to be caused by COVID-19.
- c. If it is necessary for a crewmember to board the vessel before their 14-day quarantine ends (to work or because the vessel must get underway), the time on the vessel may count toward the 14 days.
- d. If a new crewmember joins a worksite or vessel prior to completing the 14-day self-quarantine after arrival at their final destination, they must complete their quarantine at the worksite or vessel. If it is not possible to fully quarantine in a

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separate room, the 14-day self-quarantine period must be restarted for the entire crew.

- e. For crewmembers who live locally, or return to port daily, crewmembers and families or roommates shall practice social distancing for the duration of the season.
- f. Workers living on shore during their 14- day self-quarantine period, may only travel directly between their designated self-quarantine lodging and worksite. They must observe self-quarantine restrictions when not on the worksite.
- g. The time spent in transit from the final out-of-state port to Alaska on a vessel, demonstrated through a ship's log or equivalent record, will count towards the in-state, 14-day mandatory self-quarantine period if all protective measures are followed.
- h. The vessel must report that it is undergoing self-quarantine, or has a self-quarantined crewmember on board, if it has any contact with another vessel, a processor, or a harbormaster. Vessels are required to fly a "Lima" flag or similar yellow and black pennant if they have any crew on board still under self-quarantine.
- i. Once the initial self-quarantine period after arriving in the State has been observed, there is no requirement to repeat the self-quarantine period when moving between Alaskan communities.

IV. Screening of Personnel. All crewmembers will be screened upon arrival to the vessel, using the following procedures, or an equivalent medically- vetted procedure. Vessel captains may wish to arrange for dedicated spaces to conduct private arrival screening.

- a. Verbal Screening Questions
 - i. Have you experienced any cough, difficulty breathing, shortness of breath, loss of smell or taste, sore throat, unusual fatigue or symptoms of acute respiratory illness in the last 72 hours?
 - ii. Have you experienced a fever (100.4° F [38° C] or greater using an oral thermometer) within the last 72 hours?
 - iii. Have you experienced signs of a fever such as chills, aches and pains, etc. within the last 72 hours?
 - iv. In the past 14 days, have you traveled in an area or country with widespread COVID-19 transmission without practicing social distancing?
 - v. Have you had contact, within the past 14 days, with a lab-confirmed or suspected COVID-19 case patient? (Contact defined as being within six feet of a COVID-19 case patient for a prolonged period of time (ten

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minutes or more) or having direct contact with infectious secretions of a COVID-19 case patient)?

- b. Physical Screening
 - i. Each crewmember shall demonstrate a measured temperature < 100.4°F. (This reference is for oral temperature, a forehead (temporal) scanner is usually 0.5°F (0.3°C) to 1°F (0.6°C) lower than an oral temperature. An ear (tympanic) temperature is 0.5°F (0.3°C) to 1°F (0.6°C) higher than an oral temperature.)
 - ii. Anyone performing a physical screening shall wear appropriate personal protective equipment (PPE). If PPE is not available, the crewmember may take their own temperature.
 - iii. Each crewmember must be free of fever or respiratory symptoms. A possible exception would be if a crewmember has mild symptoms that are clearly attributable to another source (i.e., allergies).
- c. If a crewmember fails verbal or physical screening, or is displaying viral symptoms, they will not be allowed to board.
- d. Additionally, vessel captains should assess each crewmember's individual risk factors (*e.g.*, older age; presence of chronic medical conditions, including immunocompromising conditions) and enact additional protective measures as needed to minimize their risk.

V. Protecting the Public. It is anticipated that catcher and tender vessels may have local community contact for the following reasons: offload, resupply, and maintenance; planned shipyard work at the beginning of the season; vessels that return to port daily or frequently as part of their fishery; medical or other unforeseen emergencies. Vessel captains and crewmembers must use the following procedures to limit contact with members of the public to the greatest extent possible:

- a. For crewmembers who live locally or return to port daily, crewmembers and families or roommates must comply with Health Mandate 011 on social distancing.
- b. Other crew may not disembark the vessel while in port for non-essential purposes.
- c. All face-to-face interaction between crew and shore-based workers will be kept to an absolute minimum, such as receiving for supplies, off-loading catch, fish tickets, and refueling. Those interactions that cannot be conducted remotely must follow social distancing guidelines.
- d. When contracting for services, vessel captains shall ensure that vendors providing services to, or onboard, vessels in port use the following procedures:

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- i. If possible, any deliveries shall be made without a vendor boarding a vessel. The delivery shall be disinfected, if possible, before bringing it on board.
- ii. In the event that a vendor must board a vessel, they must undergo the same screening as a crewmember boarding a vessel and be denied boarding if they have a fever, respiratory symptoms, or a high-risk COVID-19 exposure in the prior 14 days.
- iii. Vendors shall wear a mask and face shield on board and shall wash their hands or use hand sanitizer prior to boarding and after leaving.
- iv. Vendors and crew must practice social distancing and remain six feet apart, if possible.
- v. Where feasible, use methods of communication that minimize yelling (such as radios or microphones).
- vi. If working in an engine room, keep ventilation fans running for circulation, even at the dock.
- vii. Try to allow vendors to work alone and use only the absolute minimum required number of workers in a space.
- viii. Carefully control the ingress and egress of vendors from the vessel.
- ix. If vendors must use onboard tools they must be disinfected prior to and after use.
- x. After a vendor leaves, the ship shall be disinfected and all crew shall wash hands.
- e. Vessel captains shall check in with the harbor master prior to any port of call, and follow the directives of harbor masters while in their ports.
- f. Private sector businesses such as retailers, hotels, and air carriers may also enact additional measures as a part of their protective plans, which must be followed in order to obtain their services.

VI. On Board Protective Measures. All crewmembers must receive training on the requirements of this Mandate, including Appendix 01. Vessel captains shall enact protective measures as appropriate to their vessel size and design in order to limit proximity of persons while onboard or underway.

- a. Vessel captains should consider limiting the number of crewmembers allowed in operational spaces such as the wheelhouse and engine room. These social distancing measures are not required if the entire vessel crew is comprised of members of a single-family unit. These social distancing measures may not be possible on smaller vessels.

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- b. Best practices for galleys and mess areas are:
 - i. Ensure all crew wash hands before eating or touching any food items or utensils.
 - ii. Any crew with cough or respiratory symptoms must eat separately. Galley shall be prepared to send individual meals to sick crew and clean dishes separately.
 - iii. Eliminate buffet or family-style dining and any common serving dishes. Identify one crewmember to handle food and to prepare a plate for each crew. Do not allow serving utensils to be shared.
 - iv. Consider having a galley crewmember prepare individual snacks for the day and distribute to each crewmember. Eliminate common bowls of snacks or opportunities for multiple people to touch food or packaged food products.
 - v. Galley crew shall practice meticulous hand and cough hygiene and shall wear a mask and gloves while serving food.
 - vi. Some additional protective measures may include:
 - 1. Self-service utensils – to reduce the opportunity for items to be touched by multiple people, set up trays with utensils on them and hand them out or set table before service.
 - 2. Use of single- use cups/plates/etc.
 - 3. Aggressive sanitizing of push button/lever beverage dispensers, condiments, etc. – areas that people may be touching during the meal service.
 - 4. Stagger meal breaks to reduce the number of people in the galley at one time or reducing the seating capacity in the galley so people are spaced farther apart.
 - 5. Ensure people sanitize their hands on the way to and from the galley.
- c. Best practices for cleaning and sanitation of PPE, surfaces, and spaces are:
 - i. Dedicated person(s) shall be assigned to the tasks of cleaning, sanitizing, and disinfecting. After tasks are completed, they shall spray disinfectant chemical on the soles of their shoes, to prevent any cross-contamination. They shall also change out of their uniform, send to laundry in sealed bag, and take a shower. Consider the use of “dissolvable laundry bags” for contaminated linen and clothing.

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- ii. 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.
 - iii. Surfaces that people touch a lot (door handles, railings, light switches, chairs and tables) and bathroom and kitchen surfaces shall be cleaned, sanitized, and disinfected at least three times a day.
 - iv. Vessels must have in place a detailed procedure for cleaning, sanitizing, and disinfecting a vessel and disposing of PPE.
- d. Vessel captains shall encourage basic common hygiene practices, such as: frequent and thorough hand washing; respiratory etiquette, including covering coughs and sneezes; discouraging crewmembers from using others' personal property, work tools, and equipment.
- e. Crewmembers are required to stay in their assigned accommodations if they are sick.
- f. For any material (e.g., lines, fish tickets) that must be passed between vessels or to shore, crewmembers shall wear gloves and face coverings when handling material and perform hand hygiene after transfer. Crewmembers must disinfect any new supplies that arrive on board. After handling material, crew shall remove and discard or wash gloves, immediately wash hands with soap and water or use hand sanitizer, and then disinfect any personal items they may have touched, such as radios.
- g. If the crew will be completing the 14-day self-quarantine on board, it is acceptable to continue to fish during this time. Restrict contact with tenders or shore-personnel as much as possible. If contact with other vessels or personnel must occur, adhere to the safety plans set up by tender or port facilities, and utilize the following precautions:
- i. Restrict personnel from boarding the vessel, any communication shall be done by phone or radio instead of in person if possible
 - ii. Wipe down rails, door handles, and surfaces frequently with disinfecting wipes.
 - iii. Vessels are required to fly a "Lima" flag or similar yellow and black pennant if they have any crew on board under quarantine.

VII. Procedures for Crewmembers who Become Ill. Vessels must follow the following procedures for identification, isolation and assessment of crewmembers who begin to show symptoms of infection:

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- a. **Identification.** Observe crew daily for:
- i. New signs of fever, cough, difficulty breathing, loss of smell or taste, unusual fatigue, or shortness of breath.
 - ii. If there is a respiratory illness identified on board, take temperature twice daily of each crewmember.
 - iii. If there are symptoms presenting, repeat the screening from Paragraph IV.
 - iv. If a crewmember screens “yes” to any of the verbal symptom questions (1-3), place a surgical mask on, if tolerated.
 - v. If a crewmember screens “yes” to BOTH: (1) any of the verbal symptom questions (1-3); AND (2) an epidemiological risk factor questions (4 or 5), place a surgical mask on crewmember. if tolerated. and isolate per the **Isolation** protocol below. If an isolation room is not available, the entire vessel will be considered under isolation.
 - vi. Evaluating provider must don appropriate PPE and begin to document who has had exposure to the crewmember within the last two days.
 - vii. If a crewmember screens “yes” to fever and respiratory symptoms, but does not clearly have an exposure that would qualify for a COVID-19 suspect case, seek medical evaluation and, at a minimum, recommend isolation. The crewmember shall wait to return to work until 72 hours AFTER the fever ends without the use of fever-reducing medications AND an improvement in initial symptoms (i.e. cough, shortness of breath).
- b. **Isolation.** Isolation separates sick people with a contagious disease from people who are not sick. When possible, isolate sick crewmembers in a separate stateroom and designate a head that is only for isolated crew. In vessels that cannot accommodate individual isolation, consider the entire vessel under isolation for 14 days.
- i. If a crewmember is identified as a potential COVID-19 case, immediately ask them to wear a facemask (a surgical mask, not N-95), if tolerated. If there are no facemasks available, a cloth face covering may be used as a last resort.
 - ii. Place the crewmember in a private room with the door closed, ideally an airborne infection isolation room if available. Place a label on the door indicating no one is to enter the room without proper PPE. This room shall have separate toilet and bathing facilities.
 - iii. Any staff entering the room shall use Standard Precautions, Contact Precautions, and Airborne Precautions, and use eye protection such as

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goggles or a face shield. If N-95 masks are not available, a surgical mask may be considered an acceptable alternative at this time.

- iv. Access to the room shall be limited to personnel involved in direct care. Meals shall be delivered to the room and dishes and utensils cleaned separately. Anyone with exposure to the crewmember shall document the date and time of exposure, nature of exposure (close contact, same room, secretions), and PPE worn. Meticulous hand hygiene **MUST** be performed immediately after removing PPE.
- v. Maintain a distance of six feet from the sick crewmember and keep interactions with them as brief as possible.
- vi. Limit the number of people who interact with sick people. To the extent possible, have a single person give care and meals to the sick person.
- vii. Avoid touching your eyes, nose, and mouth.
- viii. Wash your hands often with sudsy soap and warm/hot water and wash your hands immediately after leaving the presence of the sick crewmember. If soap and water are not available, and if hands are not visibly soiled, use a hand sanitizer containing at least 60% alcohol.
- ix. Provide tissues and access to soap and water, and ask the sick crewmembers to cover their mouth and nose with a tissue (or facemask) when coughing or sneezing.

c. **Notification.** If person on vessel becomes ill with suspected or confirmed COVID-19, contact local public health nursing for further guidance:

- i. Dillingham Public Health Center: 842-5981
- ii. Homer Public Health Center: 235-8857
- iii. Ketchikan Public Health Center: 225-4350
- iv. Kodiak Public Health Center: 486-3319
- v. Nome Public Health Center: 443-3221
- vi. Petersburg Public Health Center: 772-4611
- vii. Sitka Public Health Center: 747-3255
- viii. Valdez Public Health Center: 835-4612
- ix. <http://dhss.alaska.gov/dph/Nursing/Pages/locations.aspx>

(a) For a person ill or injured and not suspected of COVID-19 follow established process to evaluate for establishing healthcare.

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(b) If the vessel containing an ill crewmember is not directed to shore-side medical attention, the vessel may continue to fish and complete a 14-day quarantine at sea. If unloading to a tender/processor is necessary during this time, the vessel must tell the tender/processor it has a sick crewmember on board. During the unloading, all crew must wear gloves and face coverings, and follow the procedures in Paragraph VI.g.

d. **Transportation.**

- i. Procedure on transportation of suspected COVID-19 cases at disembarkation.
- ii. For the crewmember with suspected COVID-19: A facemask shall be worn by the patient for source control. Follow guidance from Public Health Centers listed in IV.c. Notification.
- iii. If general medical issue, contact and seek medical care from local clinic.

e. **Quarantine.** Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick. If separate staterooms with designated bathrooms are available, this procedure may be considered for individual crew. Otherwise, consider the entire vessel under quarantine.

- i. Passengers and crew members who have had high-risk exposures to a person suspected of having COVID-19 shall be quarantined in their cabins. All potentially exposed passengers, ship medical staff, and crewmembers shall avoid leaving the vessel and self-monitor under supervision of ship medical staff or telemedicine providers until 14 days after the last possible exposure (if the ill crewmember remained on the vessel and could not be fully separated from healthy crew, consider the entire vessel under quarantine for 14 days after the case is determined by public health to no longer need isolation). If an entire vessel is under quarantine, they may continue to work.
- ii. A high-risk exposure could occur through close contact with the suspected case without PPE. Close contact is defined as:
 - 1. being within approximately six feet (two meters) of a COVID-19 case for a prolonged period of time (ten minutes or longer); (close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case);

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2. having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).
- iii. For a catcher or tender vessel with a suspected case, consider the entire crew to have had a high-risk exposure.
- iv. If personnel develop fever, cough, difficulty breathing, or other symptoms of COVID-19 while in quarantine, they shall be isolated and undergo medical assessment, reporting and transportation as per the other relevant sections of this Mandate.
- v. Vessel management and telemedicine providers shall remain in contact with personnel through the self-monitoring period to oversee self-monitoring activities.
- vi. If the vessel returns to port with a sick crewmember, remaining crewmembers are not permitted to leave the vessel except to receive medical care or to move directly to a suitable quarantine location. No off-vessel work is permitted. The vessel must coordinate delivery of food or other necessities. Vessels are required to fly a “Lima” flag or similar yellow and black pennant if they have any crew on board under quarantine.
- vii. The remaining exposed crewmembers must complete a 14-day quarantine period, from the time the sick crewmember is transported, on the vessel or in a suitable quarantine location.

VIII. Continuity of Fisheries Operations.

- a. Vessel captains shall consider the impact that this pandemic will have on the fishing industry as a whole, their suppliers and wrap-around services such as fuel, groceries, and lodging.
- b. Vessel captains shall consider the potential impact to their operations that may arise as a result of outbreaks or increased rates of crewmember absenteeism, and enact plans for cross-training crewmembers to the greatest extent possible.
- c. Vessel captains must cease operations and return to port if they do not have enough healthy crewmembers remaining to safely operate the vessel.