II MARINE EXPEDITIONARY FORCE POLICY LETTER 7-20

From: Commanding General, II Marine Expeditionary Force
To: Distribution List

Subj: II MARINE EXPEDITIONARY FORCE PROCEDURES FOR INBOUND PERSONNEL UNDER COVID-19 CONDITIONS

Ref: (a) MARADMIN 333/20 Transition to Conditions-Based Phased Approach to COVID-19 Personnel Movement and Travel Restrictions Update dtd 5 Jun 20
(b) MARADMIN 236/20 Guidance for COVID-19 Protecting Personnel in Workplaces dtd 15 Apr 20
(c) II MEF 6000.2 COVID-19 Medical Support Services Order dtd 7 May 20
(d) MARADMIN 264/20 Update 1: COVID-19 Supplemental Personnel Guidance
(e) Joint Travel Regulations (JTR)
(f) II MEF Policy Letter 4-20 Health Safety Screening During Household Goods Moves dtd 19 May 20
(g) MARADMIN 285/20 Supplemental Guidance to Permanent Change of Station Assignments due to COVID-19 dtd 11 May 20
(h) II MEF COVID-19 Daily Information Messages

Encl: (1) Personnel Check-In COVID-19 Screening Form
(2) Restriction of Movement Order

1. Purpose. This policy letter summarizes procedures for inbound personnel in a Novel Coronavirus 2019 (COVID-19) environment.

2. Scope. This policy applies to all personnel inbound to II Marine Expeditionary Force (MEF).

3. Action

   a. Gaining commands must contact personnel on their inbound rosters to confirm travel itinerary and potential restriction of movement (ROM) requirements. Inbound personnel must contact gaining commands per ref (a).

   b. Unit commanders will ensure all personnel arriving at II MEF commands from outside the local area are medically screened the first work day after arrival at the command per refs (b) and (c) to determine whether assignment to ROM is recommended. II MEF medical staff will use Enclosure (1) to perform screening and inform personnel of ROM expectations. This screening is mandatory, regardless of any previous screening aboard the installation.

   c. If required, unit commanders will assign personnel to a ROM status. Determination of whether ROM is required or not is based on the latest Centers for Disease Control and Department of Defense guidelines per refs (b) and (c). Commanders will use Enclosure (2) to assign personnel to a ROM status.
d. ROM may be conducted at any suitable location (barracks, hotel, residence, etc.). Marines/Sailors should defer daily in room housekeeping if using a hotel for ROM.

e. Following initial screening, accompanied personnel and those who rate Basic Allowance for Housing and require ROM will be issued a reporting endorsement by their command’s S-1, extending their orders 14 days to accommodate for the ROM period. Members and their dependents (if applicable) will remain in a travel status (awaiting transportation) and will continue to be entitled to travel allowances per paragraph 4.k of reference (d). Per paragraph 050603 of reference (e), members will not be entitled to Temporary Living Expenses (TLE) until after ROM has been completed. If lodging or meals are provided in kind, then per diem is not payable. Per diem is only paid to dependents while dependents are in ROM. If dependents refuse to ROM, then per diem is not authorized.

f. At the completion of the ROM period, personnel will report to their work site to continue the check-in process.

g. Gaining commands are responsible for supporting new join personnel while in a ROM status.

4. Information

a. ROM Conditions. Marines/Sailors under ROM are to be restricted to their barracks or appropriate domicile.

(1) Individuals in ROM require a single room that does not share a bathroom with anyone. Families may share living spaces during ROM.

(2) Command medical personnel will contact personnel in ROM status daily to review presence of COVID-19 symptoms. If symptoms are present, the individual may be referred for further evaluation and possible testing.

(3) Personnel on ROM may PT outside but must maintain at least six feet from others while running or performing exercise. They may not use any gym / High Intensity Tactical Training box equipment, pull up bars, or other commonly touched exercise items.

(4) Units are responsible for ensuring availability of meals, either by delivery from or travel to chow halls. Any movement outside of the ROM area or delivery of food or other supplies must adhere to the requirement to maintain at least six feet of space between individuals and avoiding cross-contamination of surfaces (ROM and non-ROM personnel touching the same surface or item).

(5) Personnel executing ROM may order food or other supplies through pickup, take-out, or delivery services, but cannot break the six-foot social distancing requirement and will not hand cash or any other items to the person making the delivery. This includes signing receipts, paying with cash, debit card, or in person electronic pay methods.

(6) Marines/Sailors assigned to ROM in the barracks, can take out their own trash and use a smoking area designated by the command away from the main smoke area and away from others. A laundry room or washer and dryers must be designated for use during ROM.

(7) Marines/Sailors under ROM are NOT to enter the MCX, commissary, Minimart, or any other public venue.
b. Personnel under ROM may change locations during their inbound ROM period. For example, personnel may begin ROM and then move into government quarters if they become available during the ROM period.

c. Personnel under ROM may take delivery of household goods during their ROM period, but must use personal protective equipment and maintain the six-foot social distancing requirement. See reference (f) for more information on household goods moves under COVID-19 conditions.

d. Exceptions for Mission Essential Personnel

(1) Some mission-critical circumstances may require that individuals execute ROM but check in and begin working. Per reference (b), those personnel require written approval from the first General Officer (GO) after recommendation from the command surgeon.

(2) During the time that would otherwise constitute a ROM period, the individual performing mission essential work shall:

(a) Self-monitor for symptoms consistent with COVID-19 infection (fever/chills, sore throat, cough, or difficulty breathing) and notify medical if any symptoms develop.

(b) Perform as many steps of the check in process as possible remotely, either via computer or telephone.

(c) Maintain 6 feet of social distance from others as much as possible. When distance cannot be maintained, wear a face mask during interactions and check in procedures.

(d) Wipe down any computer keyboards and telephones/keypads with cleaning wipes after use.

(e) Abide by the ROM conditions above while outside of the workplace.

e. Exception to Policy (ETP) and Waivers

(1) Marines requesting changes to their PCSO no earlier departure date should submit their ETPs via their chain of command using a standard naval format to the first GO in their chain of command. Reference (g) provides for ETPs for the following reasons with requirements for coordination between gaining and losing commands:

(a) Necessary for Humanitarian Reasons or Warranted due to Extreme Hardships. The service member’s losing command is responsible for verifying requests meet the criteria and granting ETPs for “necessary for humanitarian reasons” or “warranted due to extreme hardships.” Per reference (g), these ETPs do not require concurrence between the first GO in both the gaining and losing commands. However, inbound personnel still must contact the gaining command per reference (a).

(b) Essential Personnel. The gaining command will make the determination that a Marine is mission essential. Per reference (g), in order to modify Marines’ orders MMEA/OA does not require two GO signatures (from both gaining and losing command). Either signature is sufficient for this type of ETP. However, coordination must happen and must be stated in the ETP letter indicating concurrence between the first GOs in both the
gaining and losing commands. Route ETPs for inbound personnel to the respective II MEF or MSC G-1 for gaining command GO concurrence.

f. Leave. Leave in conjunction with Permanent Change of Station Orders will be in accordance with reference (g). All other leave is in accordance with reference (a) and current II MEF Leave and Liberty restrictions (updated as required in reference (h)).

g. The latest updates on II MEF COVID-19 related policy and procedures can be found in reference (h).

B. D. BEAUDREault

Distribution: A, B
Arrival / Return COVID-19 Screening Form

**DEMOGRAPHICS**

Last Name: ___________________ First Name: ________________ MI: __ Today's Date: __________

Rate: _______ Rank: _______ Age: _____ Sex: M F DOD ID #: __________________

If PCSing, Previous Unit: ___________________ Location: __________________

Unit Attaching To: ___________________ Section (if known): __________________

**TRAVEL**

Type of Travel: Leave / TAD / PCS Date(s) of travel: __________________________

Mode: POV / Mil Air / Comm Air / Other_____ If PCS, date you left your last duty station: __________________

Destination and/or stops along the way (include date, locations, duration, interactions):

____________________________________________________

____________________________________________________

**HISTORY**

*Have you ever been tested for COVID-19?* Yes No Date of test: __________ Result: Pos Neg

*Have you been diagnosed with COVID-19 infection?* Yes No

Date of infection: __________ Date of positive test: __________ Date permitted to return to work: __________

Do you have any work/activity restrictions? Yes No __________________________

*Have you been in close contact with anyone with known or suspected COVID-19 infection in the last 30 days?*

If yes, complete the following:

Date of contact: __________ Were you placed in isolation, quarantine, or ROM? Yes No

Dates of ROM: __________ Did you become ill? Yes No

**SYMPTOMS**

**DIRECTIONS:** Have you had any of the following symptoms in the last 14 days? Check all that apply.

- [ ] Fever
- [ ] Sore Throat
- [ ] Nausea / Vomiting
- [ ] Headache
- [ ] Chills / Rigors
- [ ] Cough
- [ ] Diarrhea
- [ ] Body Aches
- [ ] Fatigue
- [ ] Shortness of Breath
- [ ] Abdominal Pain
- [ ] Loss of Smell / Taste

Other symptoms: __________________________

Date any symptoms began: __________ List any meds you are taking: __________________________

**ASSESSMENT**

- [ ] Low risk travel
- [ ] Travel to or through a red / high risk area
- [ ] Exposed to COVID-19 infection
- [ ] Has symptoms concerning for COVID-19

**DISPOSITION**

- [ ] No restriction
- [ ] 14 days of ROM recommended
- [ ] 14 days quarantine recommended, consider testing
- [ ] Refer for medical evaluation

Medical Department Representative Signature __________________________ Date __________

Enclosure (1)
RESTRICTION OF MOVEMENT ORDER

This is a direct, lawful order and applies to all personnel. Military personnel are subject to disciplinary action under the Uniform Code of Military Justice (UCMJ), and administrative actions/sanctions, if they knowingly, willfully, or negligently violate the provisions of this order.

For the next 14 days:
☐ You are restricted to your barracks or residence.
☐ You shall not travel, visit public or crowded areas, or use public transportation.
☐ You shall avoid prolonged close contact (within 6 feet) with others.
☐ Wash your hands regularly for at least 20 seconds. Utilize hand sanitizer when washing is not practical.
☐ Avoid sharing cups, plates, and utensils.
☐ If you have to cough/sneeze, do so into a tissue and then dispose of it – or into your sleeve.
☐ You may go outside, for example to run or PT. Avoid times when many people are outside, and maintain a distance of at least 6 feet from others. Do not use outdoor gym equipment.
☐ Do not go inside restaurants, gyms, stores, or other public areas. You may purchase delivery or carry-out items provided you maintain 6 feet of distance from other people.
☐ Monitor yourself for COVID-19 symptoms:
  - If you have or can get a thermometer, check your temperature twice daily for fever greater than 100.4°F,
  - Monitor for chills, cough, and/or difficulty breathing.
☐ Contact medical provider and notify your chain of command if you develop symptoms.
☐ A medical representative will contact you daily to review your symptoms.

If you have been designated as mission essential and are reporting to work, the following also applies:
☐ You are to wear a face covering in the workplace.
☐ Complete as many steps of check-in as possible remotely (via phone or computer/email)
☐ Whenever possible, stay in a private office or separate desk that is at least 6 feet from other people.
☐ Use hand sanitizer frequently throughout the workday
☐ Wipe down all surfaces (computer keyboards/mice, telephone handsets/keypads, doorknobs) after use.
☐ Clean your workspace at the end of each day.

I acknowledge receipt of these instructions.

Member Signature ___________________________ Date ___________________________