

COVID-19 CONTINGENCY PLANNING GUIDE FOR TOWING VESSEL AND BARGE OPERATORS



AWO has created this resource – drawing on information provided by the Centers for Disease Control and other sources – to assist tugboat, towboat and barge companies in developing and implementing a contingency plan to protect their workforce while ensuring continuity of operations during the ongoing outbreak of the respiratory disease “Coronavirus Disease 2019,” or COVID-19.

GENERAL INFORMATION ABOUT COVID-19

- **How does the novel coronavirus spread?** Like the common cold and flu, the virus is believed to be spread by respiratory droplets produced when an infected person coughs or sneezes that land in the mouths or noses of uninfected people who are nearby or land on nearby surfaces or objects that uninfected people may touch.
- **What are the symptoms of COVID-19?** Symptoms of COVID-19 may appear 2-14 days after exposure and may include fever, cough, and shortness of breath or difficulty breathing. Some people are at higher risk for severe illness, including older adults and those with chronic medical conditions such as asthma, diabetes and heart disease.

Source: CDC [COVID-19 Situation Summary](#)

DEVELOPING A COVID-19 CONTINGENCY PLAN STRATEGIES FOR TOWING VESSEL CREWMEMBERS

BEFORE BOARDING THE VESSEL:

- **Encourage crewmembers to monitor their health and report fit for duty.**
 - Develop and deploy a questionnaire for crewmembers prior to embarkation. Questions may include:
 - Do you have a fever (100.4° F/37.8° C or above), feel feverish, or have any other signs or symptoms of acute respiratory illness (cough, difficulty breathing or shortness of breath)?
 - Have you traveled to [an area experiencing ongoing community spread of COVID-19?](#)
 - Have you had close contact with (provided direct care to, worked in close proximity to, shared a room with, traveled with, lived in the same household as) a person confirmed or suspected to have COVID-19?
 - Crewmembers who answer questions affirmatively or show signs or symptoms of acute respiratory illness should be told to remain at home or be sent home.
- **Take steps to minimize crewmembers’ exposure when traveling to and from crew changes.**
 - If possible, facilitate crewmember travel by car as opposed to plane or train.
 - If travel by plane or train is necessary, encourage crewmembers to practice frequent hand hygiene, and if possible, maintain a distance of 3 feet from other travelers and 6 feet from people showing signs of sickness.
 - Consider providing ditty bags with hand sanitizer, disposable wipes and other products useful when traveling.

ON BOARD THE VESSEL:

- **Educate crewmembers about the signs, symptoms and transmission of COVID-19.**
 - Inform crewmembers of the procedures to be followed when an individual on board displays signs and symptoms of acute respiratory illness.
- **Instruct crewmembers on respiratory etiquette, hand hygiene and frequent cleaning of high-touch surfaces.**
 - Remind crewmembers to wash their hands often with soap and water for at least 20 seconds, especially after coughing or sneezing. If soap and water are not available, use an alcohol-based hand sanitizer.
 - Advise crewmembers of the importance of covering coughs and sneezes with a tissue and disposing used tissues immediately. If no tissue is available, use your elbow or shoulder.
 - In addition to routine cleaning, frequently clean commonly touched surfaces such as handrails, countertops and doorknobs.
- **If possible, defer non-essential boarding by non-crewmembers or consider phone or videoconference communications as alternatives. If boarding is necessary, establish a procedure for screening non-crewmembers boarding the vessel.**
 - Develop and deploy a questionnaire for non-crewmembers prior to embarkation (see above).
 - While on board the vessel, request that non-crewmembers practice respiratory etiquette and hand hygiene and maintain a distance of 3 feet from crewmembers to the extent practicable.
 - The master has the authority to take or execute any decision which in their professional judgment is necessary to maintain the safety and security of the vessel, including denial of access to persons, except those identified as duly authorized by the cognizant government authority.
- **Develop a written outbreak management plan that includes the following:**
 - The definition of a suspected case of acute respiratory illness (developing a fever of 100.4° F/37.8° C or above, beginning to feel feverish, developing a cough, experiencing difficulty breathing or shortness of breath);

DISCLAIMER: While AWO has taken care to ensure that this guide accurately reflects WHO and CDC guidance, you retain responsibility for ensuring that you have fully implemented all applicable requirements.

- The location where the sick crewmember will be isolated until disembarkation and transfer to a healthcare facility;
- What communications between the vessel and shoreside personnel are necessary and how they will be managed;
- How meals and other essential services will be provided to the sick crewmember;
- How close contacts of the sick crewmember will be managed; and
- Cleaning and disinfection procedures for potentially contaminated areas, including the isolation room.
- **Provide guidance for identifying suspected cases of acute respiratory illness.**
 - The master should monitor the crew for any symptoms and report them to shoreside personnel immediately.
 - Crewmembers should inform the master immediately if they experience any symptoms.
 - Crewmembers with symptoms should be screened by a telehealth service if available. If not, a company-designated medical point of contact should be made available for consultation and to render remote clinician services.
- **When a suspected case of acute respiratory illness is identified, activate the outbreak management plan.**
 - Immediately instruct the sick crewmember to wear a mask (if available) and practice respiratory etiquette and hand hygiene.
 - Place the sick crewmember in the pre-identified isolation room and keep the door closed.
 - Immediately inform shoreside personnel and the cognizant Coast Guard COTP.
 - With the cooperation of the cognizant Coast Guard COTP and local or state health officials, arrange the disembarkation and transfer of the sick crewmember to a healthcare facility as soon as possible.
 - While the sick crewmember remains on board the vessel in isolation:
 - Limit the number of people who interact with the sick crewmember, and to the extent possible, have a single person give care and meals to the sick crewmember.
 - Instruct people who interact with the sick crewmember to use and properly dispose of PPE, including mask (if available), eye protection and gloves, and wash or sanitize hands before and after removing gloves.
 - Keep interactions with the sick crewmember as brief as possible, and if possible, maintain a distance of 6 feet.
 - Limit the movement of the sick crewmember from the isolation room for essential purposes only.
 - During the disembarkation of the sick crewmember, make every effort to minimize the exposure of other individuals.
 - Individuals who must come within 3 feet of the crewmember to assist their disembarkation or transport to a healthcare facility should use and properly dispose of PPE, including a mask (if available), eye protection and gloves, and wash or sanitize hands before and after removing gloves.
 - Transport vehicles should open the windows to maximize the volume of air exchange, and should be cleaned and disinfected, with particular attention paid to areas in contact with the sick crewmember.
 - Immediately assess the remaining crewmembers for their risk of exposure without waiting for laboratory results. The definition of a close contact (person considered to have high-risk exposure) is someone who stayed in the same stateroom as the sick crewmember, was within 3 feet of the sick crewmember, or gave care and meals to the sick crewmember in isolation.
 - Close contacts of the sick crewmember should be sent home with instructions to self-isolate and monitor themselves for fever and other symptoms of acute respiratory illness until the laboratory results are known.
 - If the laboratory result is positive for COVID-19, close contacts should be notified with instructions to immediately inform the personnel department and health services if they develop any symptom within 14 days of their last exposure to the sick crewmember. If no symptoms appear within 14 days of their last contact with the sick crewmember, the contact is no longer considered to be at risk of developing COVID-19.
 - Following the disembarkation of the sick crewmember and their close contacts, the vessel should be thoroughly cleaned and disinfected, with particular attention paid to the rooms they occupied.
 - Restrict access to the isolation room for two hours after the sick crewmember has left.
 - Wear gloves during cleaning, and wash or sanitize hands before and after removing and disposing of gloves.
 - Laundry, utensils and waste from the rooms of the sick crewmember and their close contacts should be handled as if infectious.
- **Ensure the following supplies are consistently available on board the vessel:** conveniently located dispensers of alcohol-based hand sanitizer (at least 60% alcohol); handwashing supplies (soap and disposable hand towels) at each sink; tissues; no-touch trash cans; surface cleaning and disinfection supplies; disposable wipes; a forehead or oral thermometer; medical supplies to meet day-to-day needs; and PPE, including masks (if available), eye protection and disposable gloves.
- **Report signs or symptoms of acute respiratory illness to the Coast Guard and CDC as required.**
 - The Coast Guard has [issued an MSIB](#) providing guidance and reminding vessel operators that illness of a person on board a vessel that may adversely affect the safety of a vessel or port facility is a hazardous condition per 33 CFR 160.216 and must be immediately reported to the U.S. Coast Guard COTP under 33 CFR 160.216.
 - Vessels that have visited a foreign port and are returning to a U.S. port [are required to report to the CDC](#) any illnesses or deaths among the vessel's crewmembers per 42 CFR 71.21.

Sources: World Health Organization [Operational considerations for managing COVID-19 cases and outbreaks on board ships](#)
Centers for Disease Control [Interim Guidance for Ships on Managing Suspected COVID-19](#)

AT THE MANAGEMENT LEVEL

- **Identify and communicate your contingency plan objectives**, which may include reducing transmission among staff, maintaining business operations, and minimizing adverse effects on other entities in your supply chains.
- **Identify essential business functions, essential roles, and critical elements within your supply chains required to maintain business operations.**
 - Prepare for increased numbers of employee absences. Plan to monitor and respond to absenteeism. Cross-train personnel to perform essential business functions in case you experience higher than usual absenteeism.
 - Prepare to change your operations if needed to maintain essential business functions (e.g., identify alternative suppliers, prioritize customers, or temporarily suspend operations in affected areas).
- **Plan to minimize exposure between employees if public health officials call for social distancing.**
 - Explore whether you can establish practices like telecommuting and staggered shifts to increase the physical distance among employees if social distancing is recommended.
 - Ensure that the information technology and infrastructure is in place to support telecommuting.
- **Review human resources policies to ensure they are consistent with public health guidance.**
 - Prepare to institute flexible leave policies for sick employees, those who stay home to care for sick family members, and those who stay home with their children if schools and childcare programs are dismissed.
 - Do not require a healthcare provider's note from sick employees to validate their illness or to return to work, as healthcare providers may be extremely busy and unable to provide such documentation in a timely way.
- **Conduct a focused discussion or exercise using your plan** to identify gaps or problems that need to be corrected.
- **Establish a process to communicate your plan and other COVID-19 information to employees and business partners.**
 - Share your plan with employees and explain what human resources policies, workplace and leave flexibilities, and pay and benefits will be available to them. Anticipate employee fear and rumors and plan communications accordingly.
 - Share your plan with other companies in your supply chain and community to improve preparedness and response.
- **Designate an individual within the personnel department with whom employees can confidentially communicate concerns related to health conditions that place them at higher risk for getting very sick from COVID-19.**
- **Coordinate with [state](#) and [local](#) health officials** to guide appropriate responses in each area where you have operations.
- **If an employee is confirmed to have COVID-19**, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act. Fellow employees should refer to CDC guidance for [how to conduct a risk assessment](#) of their potential exposure.
 - Employees who have had close contact with anyone confirmed to have COVID-19 should notify their supervisor.
 - Source: Centers for Disease Control [Interim Guidance for Businesses and Employers to Plan and Respond to COVID-19](#)

STRATEGIES FOR ALL EMPLOYEES

- **Emphasize respiratory etiquette and hand hygiene by all employees.**
 - Place posters that encourage [cough and sneeze etiquette](#) and [hand hygiene](#) in highly trafficked workplace areas.
 - Advise employees to wash their hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer if no soap and water is available. Provide soap and water and alcohol-based hand sanitizers (at least 60% alcohol) in the workplace.
 - Advise employees to cover their noses and mouths with a tissue when coughing or sneezing, or use their elbow or shoulder if no tissue is available. Dispose of used tissues immediately. Provide tissues and no-touch trash cans in the workplace.
- **Routinely clean all frequently touched surfaces in the workplace.** These may include doorknobs, workstations and countertops. Provide disposable wipes so that commonly used surfaces can be wiped down by employees before each use.
- **Actively encourage sick employees to stay home, and separate and send home sick employees.**
 - Employees who have symptoms of acute respiratory illness should notify their supervisor and stay home until they are free of fever (100.4° F/37.8° C or above), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines.
 - Employees who appear to have acute respiratory illness symptoms (i.e., cough, shortness of breath) upon arrival to work or who appear to become sick during the day should be separated from other employees and be sent home immediately.
- **Advise employees to consider COVID-19 risks when conducting business or personal travel.**
 - Ask employees to defer nonessential travel to areas for which the CDC has issued [Travel Health Notices](#).
 - Advise employees to check themselves for symptoms of acute respiratory illness before starting business travel and notify their supervisor and stay home if they are sick.
 - Ensure employees who become sick while traveling on business understand that they should notify their supervisor and promptly call a healthcare provider for advice if needed.

Source: Centers for Disease Control [Interim Guidance for Businesses and Employers to Plan and Respond to COVID-19](#)

Other Resources: [World Health Organization COVID-19 Information](#), [International Maritime Organization COVID-19 Information](#)