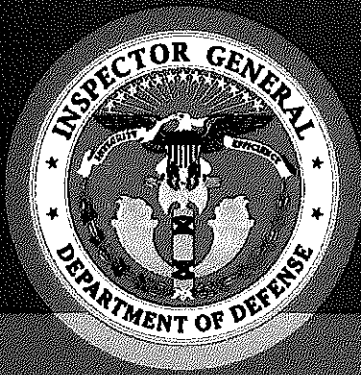


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Report No. DODIG-2021-068



INSPECTOR GENERAL

U.S. Department of Defense

March 31, 2021

Evaluation of the U.S. Southern Command's Response to the Coronavirus Disease—2019

Classified By: DoD OIG (b) (6)

Derived From: Multiple Sources

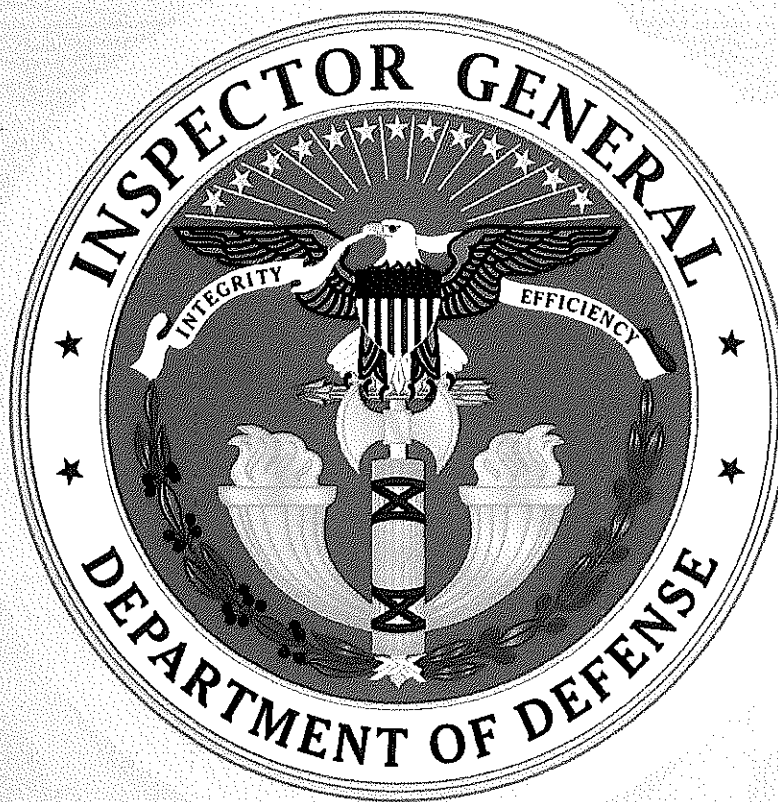
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INSPECTOR GENERAL
DEPARTMENT OF DEFENSE
4800 MARK CENTER DRIVE
ALEXANDRIA, VIRGINIA 22350-1500

March 31, 2021

MEMORANDUM FOR COMMANDER, U.S. SOUTHERN COMMAND

(U) **SUBJECT:** Evaluation of the U.S. Southern Command's Response to the Coronavirus Disease-2019 (Report No. DODIG 2021-068)

(U) On May 11, 2020, the Department of Defense Office of Inspector General (DoD OIG) began the subject evaluation to provide an assessment of the efforts undertaken by U.S. Africa Command, U.S. Central Command, U.S. European Command, U.S. Indo-Pacific Command, U.S. Southern Command (USSOUTHCOM), and the Joint Staff to maintain force, mission, and readiness while responding to the Coronavirus Disease-2019 (COVID-19) pandemic and the subsequent public health crisis. This memorandum provides the results on the USSOUTHCOM response to the COVID-19 pandemic; we address the other Combatant Commands and the Joint Staff portions of this work separately.

(U) As discussed in the Recommendations, Management Comments, and Our Response section of this report, we will close the recommendations when you provide us documentation that all recommended actions were completed. Therefore, please provide us your response concerning specific actions completed on the recommendations. Send your response to [DoD OIG (b) (6)] if unclassified or [DoD OIG (b) (6)] if classified SECRET.

(U) If you have questions, or would like to discuss this evaluation, please contact [DoD OIG (b) (6)] at [DoD OIG (b) (6)]. We appreciate the cooperation and assistance received during our review.

Bryan Clark

Bryan T. Clark
Acting Assistant Inspector General for
Evaluations, Programs, Combatant
Commands, and Overseas Contingency
Operations

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(U) Objective

(U) The objective of this evaluation was to determine whether U.S. Southern Command (USSOUTHCOM) and its Component Commands executed a Pandemic Response Plan (PRP); to identify the challenges encountered in implementing the PRP; and to identify the impact to operations resulting from the coronavirus disease-2019 (COVID-19) pandemic.¹

(U) Scope and Methodology

(U) We conducted this evaluation from May 2020 through March 2021 in accordance with the "Quality Standards for Inspections and Evaluations," published in January 2012 by the Council of the Inspectors General on Integrity and Efficiency. Those standards require that we plan and perform the evaluation to obtain sufficient and appropriate evidence to provide a reasonable basis for our findings and conclusion based on our evaluation objective. We believe that the evidence obtained provides a reasonable basis for our findings and conclusion based on our evaluation objective.

(U) To answer the evaluation objectives, we interviewed USSOUTHCOM personnel to gain an understanding of how USSOUTHCOM implemented its PRP and Continuity of Operations (COOP) plan; what actions were taken to respond to and mitigate the impact of the pandemic; and how the command communicated pandemic mitigation responsibilities to units in the USSOUTHCOM Area of Responsibility (AOR). In addition, we evaluated the impact of COVID-19 on USSOUTHCOM Directorates and the challenges they faced while responding to the pandemic.

(U) The team also obtained, reviewed, and analyzed documentation to understand USSOUTHCOM's pandemic response; challenges faced during its response; and the impacts of the pandemic on its operations, exercises, and mission-essential functions. Specifically, we reviewed the following documentation.

- (U) USSOUTHCOM's PRP and COOP Plan
- (U) USNORTHCOM's Global Campaign Plan
- (U) Command Guidance for Headquarters USSOUTHCOM Staff Regarding Force Health Protection and Coronavirus Disease-2019 (COVID-19)

¹ (U) In this report, we refer to USSOUTHCOM's Pandemic Influenza and Infectious Disease (PI&ID) Plan as its PRP. PI&IDs are contingency plans that provide a framework for responding to a pandemic influenza or infectious disease to contain and mitigate the effect of the pandemic outbreak.

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- (U) USSOUTHCOM's operational orders directing its response to the COVID-19 pandemic
- (U) USSOUTHCOM's input in the DoD's Joint Lessons Learned Information System
- (U) Additional documents provided by USSOUTHCOM in response to our detailed request for information

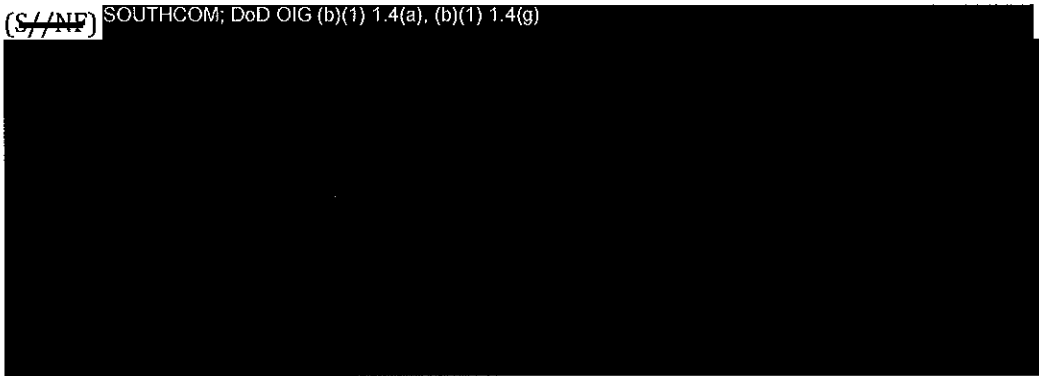
(U) Background

(U) DoD Preparedness Efforts

(U) COVID-19 is an infectious disease that can cause a wide spectrum of symptoms. On March 11, 2020, the World Health Organization declared the COVID-19 outbreak a pandemic, and on March 13, 2020, the President declared the COVID-19 pandemic a national emergency. Under the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) enacted on March 27, 2020, the Department of Defense (DoD) received \$10.5 billion to prevent, prepare for, and respond to COVID 19, domestically and internationally.

(S//NF)

SOUTHCOM; DoD OIG (b)(1) 1.4(a), (b)(1) 1.4(g)



(U) DoD Response to COVID-19

(U) Following the World Health Organization's declaration of a global healthcare emergency on January 30, 2020, the DoD took action to ensure a coordinated global response to the COVID-19 pandemic. Specifically, on February 1, 2020, the Secretary of Defense approved a Chairman of the Joint Chiefs of Staff Execute Order directing the DoD response to the COVID-19 pandemic. The Execute Order directed U.S. Northern Command to execute its GCP for PI&ID and geographic combatant commands to execute

² (U) DoD GCP-PI&ID-355-13, "Global Campaign Plan for Pandemic Influenza and Infectious Disease," October 15, 2013.

³ (S//NF) Guidance for the Employment of the Force 2015-2017 and Chairman of the Joint Staff Instruction 3110.01J, "Joint Strategic Capabilities Plan," September 25, 2015.

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(~~CU~~) their supporting PRPs in response to COVID-19. By the end of March 2020, the Secretary of Defense issued Departmental travel restrictions and raised the health protection condition levels at all DoD installations to signify that the COVID-19 disease presented a substantial threat and to outline additional actions DoD employees should take to respond to the COVID-19 pandemic.

(U) U.S. Southern Command

(U) Headquartered in Doral, Florida, USSOUTHCOM is one of the DoD's six geographic Combatant Commands. USSOUTHCOM's AOR includes the land mass of Latin America south of Mexico, the waters adjacent to Central and South America, and the Caribbean Sea. USSOUTHCOM's mission is to deter aggression, defeat threats, rapidly respond to crises, and build regional capacity, working with U.S. allies, partner nations, and U.S. Government teams to enhance security and defend the U.S. homeland and national interests. USSOUTHCOM's mission is supported by the following Service component commands and task forces.

- (U) U.S. Army South
- (U) 12th Air Force (Air Forces Southern)
- (U) U.S. Marine Corps Forces, South
- (U) 4th Fleet (U.S. Naval Forces Southern)
- (U) Special Operations Command South
- (U) Joint Task Force Bravo
- (U) Joint Task Force Guantanamo
- (U) Joint Interagency Task Force South

(U) Implementation of USSOUTHCOM's Pandemic Response and Continuity of Operations Plans

(U) Prior to the COVID-19 pandemic, USSOUTHCOM prepared for a pandemic or other emergency situation in the USSOUTHCOM AOR by developing Concept Plan 6160-14

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(U) (Pandemic Response Plan or PRP) in April 2014 and a COOP plan in March 2019.⁴ However, according to USSOUTHCOM officials, USSOUTHCOM's PRP was designed and approved for use in the USSOUTHCOM geographic AOR and did not contain information about actions that personnel at USSOUTHCOM Headquarters (HQ) in Florida should take to respond to a pandemic.⁵ Additionally, USSOUTHCOM's COOP plan focused only on a physical relocation of headquarters staff to an alternate worksite and did not include the information necessary to respond to a pandemic, such as procedures for social distancing, telework, and alternative work schedules at USSOUTHCOM headquarters. Therefore, USSOUTHCOM used an operational approach to respond to the COVID-19 pandemic that included executing aspects of the PRP and providing direction to USSOUTHCOM staff through a series of orders and force health protection guidance.

(U) USSOUTHCOM's PRP Did Not Contain Required Planning Details

(U) The USSOUTHCOM PRP contains DoD and USSOUTHCOM policies and responsibilities for the use of military resources in support of pandemic preparation and response operations within the USSOUTHCOM AOR. The USSOUTHCOM PRP also outlines the USSOUTHCOM Commander's concept for containing and mitigating the effects of an operationally significant PI&ID outbreak in the USSOUTHCOM AOR.

(U//~~FOUO~~) USSOUTHCOM leadership reviewed the PRP and implemented only the parts of the plan they deemed applicable to USSOUTHCOM's response to the COVID-19 pandemic. For example, USSOUTHCOM determined that the section of the PRP addressing humanitarian responses did not apply because the United States Agency for International Development did not request USSOUTHCOM assistance for COVID-19-related humanitarian activities. USSOUTHCOM officials stated that the major parts of the PRP that were used to provide the framework for the COVID-19 response were:

- (U) Base Plan (Sections containing overall situation and general response)
- (U) Annex C (Sections containing Concept of Operation Plans and Commander's Critical Information Requirements)
- (U) Annex D (Sections containing equipping and reporting)

⁴ (S) U.S. Southern Command Concept Plan 6160-14, "Pandemic Influenza and Infectious Disease Plan," April 28, 2014, overall classification UNCLASSIFIED//FOUO. U.S. Southern Command, "Continuity of Operations (COOP) Plan," March 26, 2019, overall classification SECRET. Activation of the COOP plan commences with the identification of a threat or event that may initiate a COOP response. This phase may begin at any time and with little or no advanced warning. The level and severity of the event will determine the appropriate response.

⁵ (U) USSOUTHCOM headquarters is not located in the USSOUTHCOM AOR, therefore, the USSOUTHCOM headquarters location did not use CONPLAN 6160-14 to respond to COVID-19.

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- (U) Annex E (Sections containing personnel reporting)
- (U) Annex Q (Sections containing Force Health Protection Actions)
- (U) Annex V (Sections containing Interagency Coordination)

(~~CUH~~) USSOUTHCOM's PRP outlined DoD and Federal level coordination efforts and addressed the protection of USSOUTHCOM forces, but it did not include information necessary to respond to a global pandemic. In developing its PRP, USSOUTHCOM noted historical examples of other PI&ID events and listed a number of assumptions that would likely impact USSOUTHCOM's AOR during such an event. Some of these assumptions included:

- (~~CUH~~) Pandemic Influenza or Infectious Disease outbreak will appear in both the continental United States and in the AOR;
- (~~CUH~~) sufficient amounts of vaccine or antivirals will not be available to ensure freedom of action for USSOUTHCOM forces; and
- (~~CUH~~) some nations will restrict transit of personnel.

(~~CUH~~) While many of the assumptions in the PRP proved true for the COVID-19 pandemic, the PRP did not include information necessary to respond to a PI&ID event that required social distancing, maximum telework, and alternative work schedules at the USSOUTHCOM headquarters, which is not located in the USSOUTHCOM AOR. For example, the PRP did not contain information on how to socially distance personnel at headquarters during "steady state" operations that did not require physical relocation of personnel. It also did not address procedures for split shifts, alternative work schedules, updates to the USSOUTHCOM command and control structure, or mass telework for USSOUTHCOM headquarters personnel for an extended period of time—including guidance regarding distribution of telework equipment and training personnel on policies regarding remote telework. USSOUTHCOM personnel told us that they did not have a plan to respond to a pandemic at USSOUTHCOM headquarters because their PRP was focused on responding in their AOR.

(~~CUH~~) Without the necessary PRP information to respond to a PI&ID event, USSOUTHCOM was not prepared to issue immediate, pre-planned implementing guidance to its headquarters staff to maintain "steady state" operations during the COVID-19 pandemic. USSOUTHCOM's PRP did not anticipate a PI&ID event on the scale of the COVID-19 pandemic, so USSOUTHCOM had to develop guidance in an ad hoc manner to respond to the situation. This resulted in confusion among USSOUTHCOM staff and inefficiency in continuity of

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(~~CONF~~) operations. Interviews with USSOUTHCOM staff revealed that the staff were confused about what PRP phase USSOUTHCOM was currently operating in. Some personnel stated USSOUTHCOM was in Phase 0 (Prepare) while others stated that it was Phase II (Mitigate). To mitigate shortfalls in the PRP, USSOUTHCOM relied upon planning orders and force health protection messages to issue guidance to its staff, Service component commands, Joint Task Forces, and Security Cooperation Organizations.

(U) USSOUTHCOM Did Not Implement Its COOP Plan Because the COOP Plan Was Primarily Intended To Address Natural Disasters Or Emergencies That Require Relocation of Personnel

(~~S//NF~~) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

(~~S//NF~~) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

(U) USSOUTHCOM Used an Operational Approach to Respond to the COVID-19 Pandemic

(~~S//NF~~) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

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(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

(~~CONF~~) USSOUTHCOM HQ had to develop and issue planning orders to implement an adequate response to COVID-19 because its PRP and COOP plan did not contain sufficient guidance.

(U) USSOUTHCOM's Primary Challenges During COVID-19

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

⁶ (U) A planning order is a planning directive providing essential planning guidance and directs the initiation of a plan development before the directing authority approves a military concept of operations.

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(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

(U) USSOUTHCOM Did Not Have an Adequate Telework Program or Capabilities

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

(U) Limited Equipment and Software for Telework

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

[REDACTED]

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(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

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(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

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(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

(U) Mitigations for Hardware and Software Limitations

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

(U) Communication Outages With Partner Nation Personnel

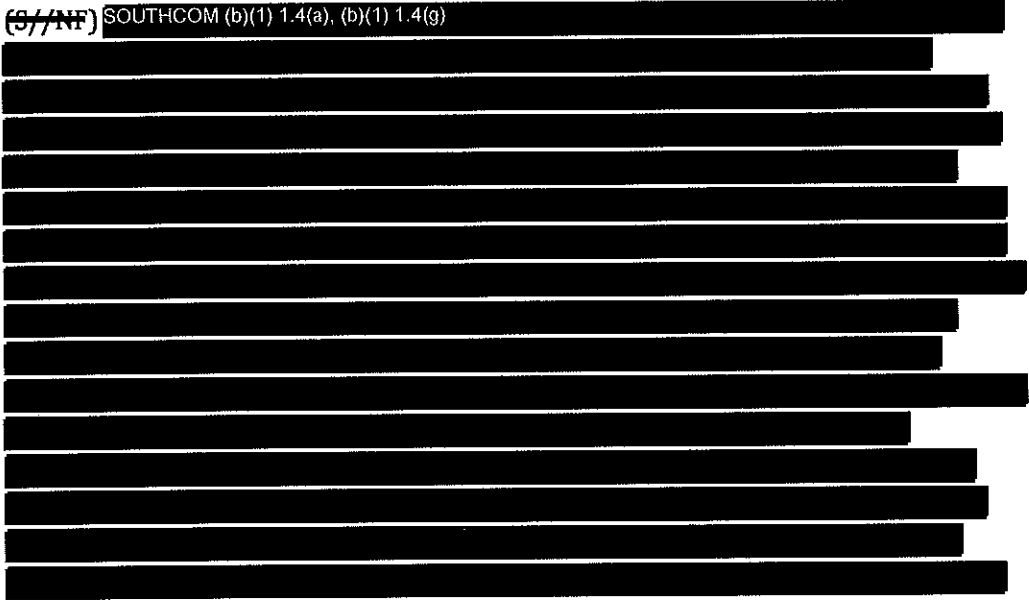
(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

⁷ (U) The J6 Communication Systems Directorate provides Command, Control, Communications, Computers, and Intelligence (C4I) architecture, governance, portfolio management, information technology investment strategy, and operational capabilities to enable joint, coalition, and interagency information dominance. Its mission is to develop, implement, operate, maintain, and secure communication systems to enable USSOUTHCOM and its subordinate elements to exercise full C4I capabilities in execution of their assigned missions.

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~~(S//NF)~~ SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)



(S//NF) Increased Security Challenges in the Telework Environment

~~(S//NF)~~ SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)



(U) USSOUTHCOM Did Not Establish Clear Guidance for COVID-19 Information Sharing and Reporting

~~(S//NF)~~ During the COVID-19 pandemic, USSOUTHCOM activated the Enhanced Joint Operations Center (EJOC), a task-organized, scalable entity that provides a greater planning, mission analysis, and coordination capability for USSOUTHCOM during crisis responses. USSOUTHCOM Regulation 32-02 contains USSOUTHCOM's procedures for activating and operating USSOUTHCOM's crisis response organizations, including the EJOC.⁸ According to USSOUTHCOM Regulation 32-02, USSOUTHCOM's EJOC provides strategic situational awareness to, among other groups, the Joint Staff. The Regulation further states that the EJOC is the central point of contact for all information flowing

⁸ (U//~~FOUO~~) SC Regulation 32-02, "United States Southern Command Staff Activation for Crisis Response," July 29, 2019.

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(~~CONF~~) into USSOUTHCOM's headquarters and is the clearing authority for all information leaving USSOUTHCOM headquarters, including information sent to the Joint Staff. However, USSOUTHCOM did not use the EJOc as the central clearing authority for information, as required by USSOUTHCOM Regulation 32-02.

(~~S//NF~~) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

(~~S//NF~~) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

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(~~CU~~) USSOUTHCOM experienced similar challenges with a lack of clear guidance for information sharing and reporting during its response to hurricanes in 2017. In an After-Action Report for the hurricane response, USSOUTHCOM's J6 Directorate noted that reporting guidance from the USSOUTHCOM Theater Network Coordination Center should have been better implemented within the USSOUTHCOM Direct Reporting Units to allow for better reporting during the crisis. Additionally, U.S. Army South noted that a standardized reporting template, timeline, and distribution list for reports due to USSOUTHCOM was needed, but was not available, during the hurricane response. The lack of standardized reporting guidance encountered in 2017 was also an issue during USSOUTHCOM's COVID-19 response.

(U) USSOUTHCOM Experienced Personnel Issues in COVID-19 Response Groups

(~~CU~~) USSOUTHCOM experienced personnel shortages in both USSOUTHCOM Components that took lead roles in the COVID-19 response and in organizations that were stood up specifically to respond to the pandemic. Specifically, a USSOUTHCOM lessons learned document indicated that shortfalls in personnel support for USSOUTHCOM's COVID-19 Joint Planning Group and EJOc limited the ability of these groups to effectively operate. Additionally, USSOUTHCOM experienced a critical personnel shortage in the Command Surgeon's Office.

(S//NF) Personnel Shortages in the EJOc

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

(S//NF) Roles and Responsibilities in the JPG Were Not Clear

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

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(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

(U) Personnel Shortages in the Office of the Command Surgeon

(~~CS~~) USSOUTHCOM officials stated that the four staff members of the USSOUTHCOM Office of the Command Surgeon were constantly in demand for their medical planning and general clinical expertise. Organizations requesting support from the Office of the Command Surgeon included the USSOUTHCOM COVID-19 Joint Planning Group, the Office of the Secretary of Defense, the Joint Chiefs of Staff, and various USSOUTHCOM directorates. This resulted in the staff working very long hours and experiencing challenges in being available for all staff and meeting requirements.

(~~CS~~) According to USSOUTHCOM officials, the U.S. Army Manpower Analysis Agency concluded in 2019 that the USSOUTHCOM Command Surgeon's four authorized positions were insufficient to support USSOUTHCOM's mission and validated a requirement for two additional positions, resulting in a total of six validated Command Surgeon medical positions. To provide more support for the Office of the Command Surgeon during its COVID-19 response, USSOUTHCOM hired two Public Health Fellows, two Healthcare Administration Interns, and received two Air Force Global Health Engagement personnel, temporarily more than doubling the capacity of the office. USSOUTHCOM personnel stated that the COVID-19 pandemic further validated the need for the additional two Command Surgeon positions to meet the Command Surgeon's staffing challenges.

(U) USSOUTHCOM Mission Priorities During COVID-19 Response

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

[REDACTED]

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(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

(U) COVID-19 Impacted USSOUTHCOM Security Cooperation Activities

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

(U) Medical Readiness Training Exercises Were Canceled

(~~CONF~~) According to USSOUTHCOM J7/J9 personnel, 33 medical readiness training exercises were canceled as a result of the COVID-19 pandemic. Medical readiness training exercises help U.S. personnel maintain readiness by allowing them to train on preventative medicine education, primary medical care, and dental activities, such as dental extractions and oral hygiene education, in austere locations. In addition, medical readiness training exercises enhance relations through medical training with regional military forces and local civilian organizations while supporting the host nation's Ministry of Health efforts to provide medical care to the population. The canceled exercises would have provided medical care to the following partner nations: Honduras, Guatemala, Belize, El Salvador, Panama, and the Dominican Republic.

(U) Civil Affairs Operations Were Restricted


(~~CONF~~) Since 2011, USSOUTHCOM has used the Civil Affairs Persistent Engagement (CAPE) initiative to support its Civil Military Engagement program. The initiative employs U.S. Army and United States Marine Corps (USMC) Active and Reserve civil affairs forces to support USSOUTHCOM's Security Cooperation mission. Through the use of section 12304b, title 10, United States Code, Army and USMC Reserve Civil Affairs forces are mobilized and deployed between 6 and 9 months to partner nations—primarily to Honduras, Guatemala, and El Salvador—to conduct Civil Affairs

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(~~CONF~~) operations.⁹ As a result of COVID-19 Force Protection concerns, health restrictions, travel restrictions, and the reprioritization of partner nations forces, Civil Affairs forces under the CAPE initiative were required to depart from those partner nations. According to USSOUTHCOM J7/J9, the biggest impact to the CAPE initiative was the restrictions due to COVID-19 because Civil Affairs operations requires continuous engagement with partner nation government entities as well as nongovernmental organizations.

(S) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)




(U) COVID-19 Impacted USSOUTHCOM Intelligence Operations

(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)



(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)



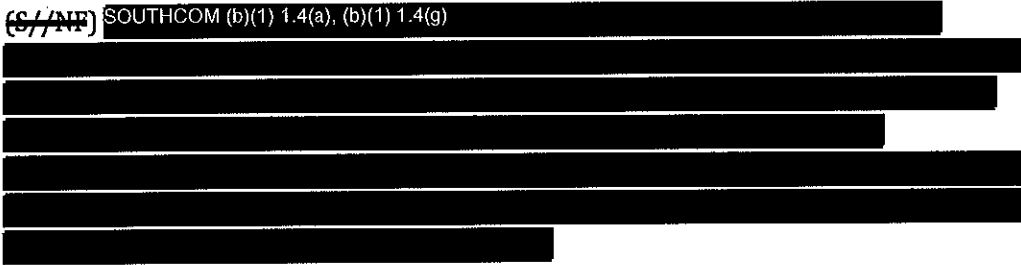
⁹ (U) 10.U.S.C. § 12304b. "Selected Reserve: order to active duty for preplanned missions in support of the combatant commands," December 31, 2011.

¹⁰ (~~CONF~~) A Force Protection Detachment is a joint counterintelligence office staffed by DoD counterintelligence special agents. The Force Protection Detachment's primary mission is to support the CDR through detection and warning of threats to DoD personnel and resources in-transit at overseas locations.

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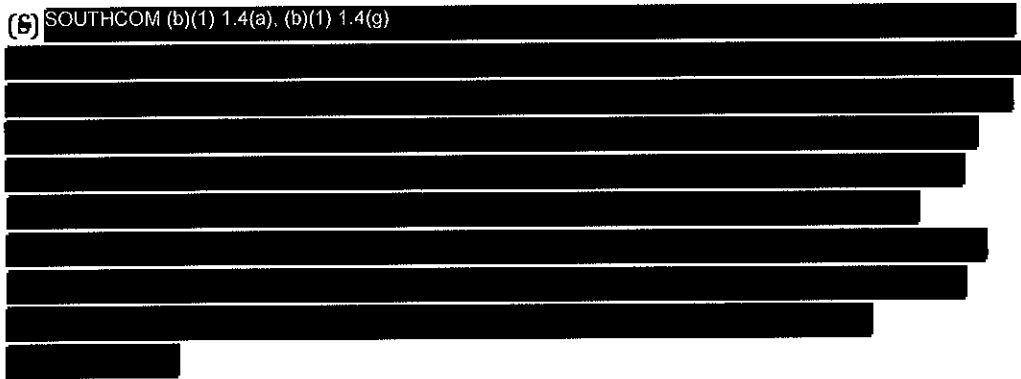
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(U) COVID-19 Significantly Impacted USSOUTHCOM Exercises

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(U) Recommendations

(U) Recommendation 1


1. (U) We recommend that the Commander of United States Southern Command:

- a. (U) Update the United States Southern Command, "Continuity of Operations (COOP) Plan," March 26, 2019, and incorporate the policies, procedures, and responsibilities for executing mission essential functions in socially distanced or telework environment, including situations of mass telework and alternative work schedules.**
- b. (U) Develop a detailed mass telework policy and a plan to identify and distribute any necessary software and equipment to support mass telework scenarios, including identifying resources to conduct classified operations.**
- c. (U) Update the United States Southern Command Concept Plan 6160-14, "Pandemic Influenza and Infectious Disease Plan," April 28, 2014, to:**
 - i. ~~(S//NF)~~ Establish an Enhanced Joint Operations Center in an emergency response to serve as the single interface with the Joint Staff and subordinate components during the crisis, in accordance with SC Regulation 32-02.**
 - ii. ~~(S//NF)~~ Include distinct communication roles and responsibilities for the Joint Planning Group, Enhanced Joint Operations Center, and directorates during a pandemic response.**
 - iii. ~~(S//NF)~~ Include a plan to implement cross directorate manning for personnel tasked to the Enhanced Joint Operations Center.**

(U) U.S. Southern Command's Comments

(U) USSOUTHCOM J35 - Future Operations and J53 - Future Plans, personnel responded to a Discussion Draft of this report on behalf of the Commander, and agreed with the recommendations.

~~(S//NF)~~ SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)



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(S//NF) SOUTHCOM (b)(1) 1.4(a), (b)(1) 1.4(g)

(U) In response to Recommendation 1.b, USSOUTHCOM J35 - Future Operations and J53 - Future Plans, personnel stated that the Command was working on telework policy and that the Chief of Staff disseminated guidance on teleworking and mission essential functions to USSOUTHCOM personnel in August 2020.

(U) In response to Recommendation 1.c.i, 1.c.ii, and 1.c.iii, USSOUTHCOM J35 - Future Operations and J53 - Future Plans, stated that, after the Joint Staff and U.S. Northern Command complete the COVID-19 lessons learned review and provide the results to the Commands and the Department, the Command will update the United States Southern Command Concept Plan 6160-14, "Pandemic Influenza and Infectious Disease Plan," April 28, 2014, to include pandemic influenza and infectious disease guidance for USSOUTHCOM headquarters and actions taken to address the recommendations from this report.

(U) Our Response

(U) The USSOUTHCOM response to a Discussion Draft of this report addressed the specifics of the Recommendation. Therefore, the Recommendation is resolved but will remain open. We will close the Recommendation when we receive the updated Continuity of Operations Plan, the updated Concept Plan, documentation of a detailed mass telework policy, and a plan to identify and distribute telework-ready mission essential software and equipment.

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(U) List of Classified Sources

(U) Source 1: (U) Guidance for the Employment of the Force 2015-2017

(~~SECRET//NOFORN~~)

Declassification Date: February 3, 2040

Date of Source: February 3, 2015.

(U) Source 2: (U) United States Southern Command Continuity of Operations (COOP)

Plan (~~SECRET~~)

Declassification Date: March 26, 2044

Date of Source: March 26, 2019.

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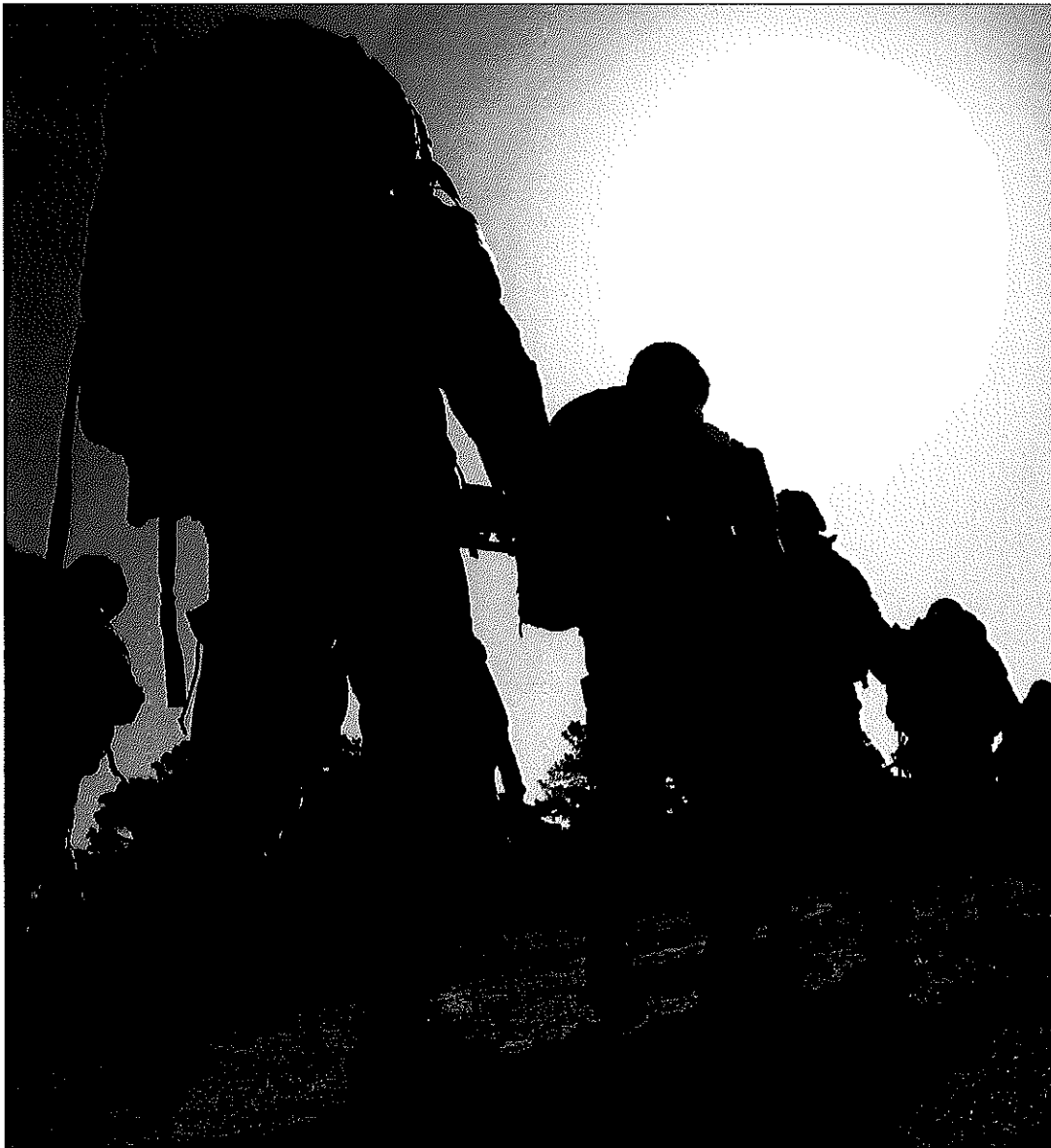
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