



PERSONNEL AND  
READINESS

**UNDER SECRETARY OF DEFENSE**  
4000 DEFENSE PENTAGON  
WASHINGTON, D.C. 20301-4000

**JUL 09 2020**

The Honorable Thomas R. Carper  
United States Senate  
Washington, DC 20510

Dear Senator Carper:

Thank you for your May 27, 2020 letter to Secretary Esper regarding the Department of Defense's (DoD) efforts to prevent the spread of the coronavirus disease 2019 (COVID-19) at U.S. Naval Station Guantanamo Bay, Cuba. We provided an interim reply on June 9, 2020, and are now providing the enclosed final response to your questions.

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Sincerely,

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Matthew P. Donovan

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**JUL 09 2020**

The Honorable Benjamin L. Cardin  
United States Senate  
Washington, DC 20510

Dear Senator Cardin:

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The Honorable Ron Wyden  
United States Senate  
Washington, DC 20510

Dear Senator Wyden:

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**JUL 09 2020**

The Honorable Jeffrey A. Merkley  
United States Senate  
Washington, DC 20510

Dear Senator Merkley:

Thank you for your May 27, 2020 letter to Secretary Esper regarding the Department of Defense's (DoD) efforts to prevent the spread of the coronavirus disease 2019 (COVID-19) at U.S. Naval Station Guantanamo Bay, Cuba. We provided an interim reply on June 9, 2020, and are now providing the enclosed final response to your questions.

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**JUL 09 2020**

The Honorable Christopher A. Coons  
United States Senate  
Washington, DC 20510

Dear Senator Coons:

Thank you for your May 27, 2020 letter to Secretary Esper regarding the Department of Defense's (DoD) efforts to prevent the spread of the coronavirus disease 2019 (COVID-19) at U.S. Naval Station Guantanamo Bay, Cuba. We provided an interim reply on June 9, 2020, and are now providing the enclosed final response to your questions.

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**JUL 09 2020**

The Honorable Patrick Leahy  
United States Senate  
Washington, DC 20510

Dear Senator Leahy:

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**JUL 09 2020**

The Honorable Cory A. Booker  
United States Senate  
Washington, DC 20510

Dear Senator Booker:

Thank you for your May 27, 2020 letter to Secretary Esper regarding the Department of Defense's (DoD) efforts to prevent the spread of the coronavirus disease 2019 (COVID-19) at U.S. Naval Station Guantanamo Bay, Cuba. We provided an interim reply on June 9, 2020, and are now providing the enclosed final response to your questions.

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**JUL 09 2020**

The Honorable Tammy Baldwin  
United States Senate  
Washington, DC 20510

Dear Senator Baldwin:

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The Honorable Richard J. Durbin  
United States Senate  
Washington, DC 20510

**JUL 09 2020**

Dear Senator Durbin:

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The Honorable Sherrod Brown  
United States Senate  
Washington, DC 20510

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**JUL 09 2020**

The Honorable Dianne Feinstein  
United States Senate  
Washington, DC 20510

Dear Senator Feinstein:

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**JUL 09 2020**

The Honorable Edward J. Markey  
United States Senate  
Washington, DC 20510

Dear Senator Markey:

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**JUL 09 2020**

The Honorable Bernard Sanders  
United States Senate  
Washington, DC 20510

Dear Senator Sanders:

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The Honorable Jack Reed  
United States Senate  
Washington, DC 20510

Dear Senator Reed:

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**JUL 09 2020**

The Honorable Elizabeth Warren  
United States Senate  
Washington, DC 20510

Dear Senator Warren:

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1. *What procedures are in place to address a confirmed or presumed positive case of COVID-19 among detainees or military personnel involved in detainee operations? Please include a discussion of the capacity of medical care available at the facility. Are prevention and treatment options at the base consistent with applicable Centers for Disease Control and Prevention (CDC) standards?*

Joint Task Force Guantanamo (JTF-GTMO) is a U.S. military joint task force based at U.S. Naval Station Guantanamo Bay, Cuba on the southeastern end of the base. JTF-GTMO falls under U.S. Southern Command. Since January 2002 the command has operated the Guantanamo Bay detention camps. JTF-GTMO has been following a detailed coronavirus disease 2019 (COVID-19) contingency and mitigation plan since the beginning of the COVID-19 pandemic. On January 30, 2020 the Under Secretary for Personnel and Readiness (USD(P&R)) issued the initial Force Health Protection Guidance for COVID-19. Additionally, a high-quality and detailed COVID-19 patient care clinical protocol is in place dealing with all aspects of COVID-19 patient care, including the following: triage procedures, testing, isolation of Patients Under Investigation, as well as outpatient, inpatient, and ICU care with ventilator support. The COVID-19 clinical care standards are based on Centers for Disease Control and Prevention, Department of Defense (DoD), and World Health Organization guidelines. JTF-GTMO personnel are well-trained and well-informed on COVID-19 care through multiple training sessions and clinical drills. A more detailed listing of capabilities is included in the attached reference.

2. *Are independent medical experts currently available, either in person or remotely, to all the 40 detainees currently held at Guantanamo, if requested by them or their legal counsel? If so, please state how many experts are currently available and the hours and days during which those medical experts are available to examine and treat detainees.*

All 40 detainees have 24/7 access to Government-provided, board certified medical professionals of the U.S. military exercising independent medical judgement and following DoD and medical guidelines. Detainee health care is provided solely by the Federal Government, either by uniformed military members, civilian employees, or care providers under personal services contracts.

However, several detainees have medical expert consultants for the purposes of litigation. Appointment or retention of a medical expert consultant for the purposes of litigation is governed by the matters at issue in the case, including determinations of the parties or the judge in the case, or, in the case of military commissions prosecution, the convening authority, that participation of a medical expert consultant is appropriate. These medical expert consultants are not retained or appointed to treat detainees; rather, they assist the defense teams with medical matters related to the litigation.

In the last 2 years, JTF-GTMO has approved and scheduled several hundred legal meetings with detainees' medical experts, typically accompanied by detainee legal counsel.



- 3. If detainees provide their informed consent, are their counsel, independent medical experts, and any other authorized parties provided full, unredacted copies of their medical records, as well as updates to those records?*

For detainees that have had charges sworn against them under the Military Commissions Act, the detainees' medical records are disclosed to the detainees' defense counsel through the discovery process in accordance with Rule for Military Commissions 701. In the habeas litigation, medical records are produced for the purposes of litigation when appropriate based on the matters at issue in the case, including determinations of the parties or the judge in the case. Medical records produced in litigation are redacted in accordance with the governing court orders. For all detainees, in accordance with Department of Defense Instruction (DoDI) 2310.08, paragraph 3.3.d, if a detainee executes a medical privacy waiver, DoD will typically release under the Freedom of Information Act the following information to authorized parties: treatments received, diagnoses, tests, imaging, health status and other related health information. However, DoD does not publically release classified or sensitive information such as the names or other personally identifying information of JTF-GTMO personnel, including medical health care providers.

- 4. What is the status of DoD's appointment of a Chief Medical Officer at the U.S. Naval Station Guantanamo Bay, as required by the FY 2020 NDAA?*

Deputy Secretary of Defense Memorandum, "Implementation of Section 1046 of the National Defense Authorization Act for Fiscal Year 2020 Concerning the Chief Medical Officer at United States Naval Station, Guantanamo Bay, Cuba," April 1, 2020, delegated authority and assigned responsibility to the USD(P&R) to implement the requirements of section 1046 of the National Defense Authorization Act for Fiscal Year 2020. To that end, I am working through the DoD staffing process to fill the position and revise DoDI 2310.08, "Medical Program Support for Detainee Operations," to incorporate the Chief Medical Officer position and detail the requirements of the role. In the meantime, there is an O-6 Nurse Corps Commanding Officer and an O-6 Medical Corps Chief Medical Officer assigned to and onsite at Naval Hospital Guantanamo Bay, Cuba.

## COVID-19 Related Capabilities and Prevention Measures

### **Patient Care Clinical Protocol**

- Triage procedures, testing, isolation of Patients Under Investigation (PUIs), as well as outpatient, inpatient and ICU care with ventilator support

### **Detainee Care Facilities**

- 2 negative pressure airborne infection isolation rooms
- 2 ICU rooms
- 4 regular inpatient rooms
- 48 single rooms for quarantine and isolation

### **COVID-19 Care Team**

- 3 board certified physicians
- 4 ICU nurses
- 4 medical-surgical nurses
- 6 Navy corpsmen

### **Detainee Medical Center Existing Functional Capacity<sup>1</sup>**

- 6 ventilators; 4 COVID-19 ICU patients on ventilators at the same time
- Large number of oxygen tanks available (with a portable oxygen generator ordered)
- 4 regular ward patients
- 48 mild or PUI patients

### **Additional Measures**

- Rapid testing for SARS-CoV-2 is available on-island
- High-volume, high-sensitivity SARS-CoV-2 testing is available at a military reference laboratory.
- Triage, quarantine, isolation and clinical care protocols in place for Service members working at the detention center.
  - An isolated building is designated for COVID-19 triage and facilities are available for quarantine and isolation.
  - The medical team caring for warfighters is different from the detainee medical care team, to mitigate any inadvertent cross-contamination.
  - There is 24/7 clinical and psychological support for affected personnel.
- Joint Task Force (JTF)-wide mitigation plans have been implemented since early in the pandemic, based on Centers for Disease Control and Prevention (CDC) and DoD guidelines, as well as JTF command directives, which often exceed the CDC and DoD guidelines.
  - Examples of the command directives include temperature checks for all personnel entering the camps and special precautions for those more susceptible to severe COVID-19 infections.

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<sup>1</sup> The current capacity for COVID-19 care exceeds estimated worst case scenario of 2 ward patients, 1 ICU patient and 1 patient on ventilator based on the CDC's COVID-19 Pandemic Planning Scenarios.