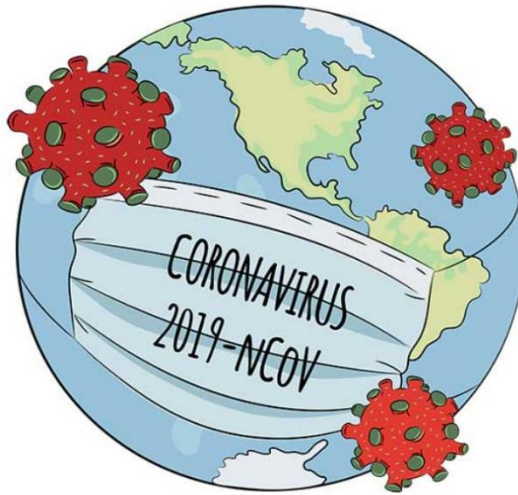




The Most Worshipful Prince Hall Grand Lodge
Free and Accepted Masons
Jurisdiction of Oklahoma



COVID -19 ACTION PLAN 2020

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PREAMBLE

We the People
We the People

WHEREAS, The Most Worshipful Prince Hall Grand Lodge, F & A. M., Jurisdiction of Oklahoma, reserves the right to form and propose rules and regulations for its government, as long as the same is not inconsistent with the Constitutions, Ordinances, Rules, and Regulations of any Local, State & Federal Government. Therefore, upon these principles, the said Organization do hereby ordain and establish these guidelines for its operation **including all concordant and appendant Bodies**, during this global pandemic – COVID 19.

The Most Worshipful Prince Hall Grand Lodge, Jurisdiction of Oklahoma, F & A. M., prohibit and condemn harassment, humiliation and or discrimination of any form under the guise or suspicion of any Member(s) and or Candidate(s) being affected, or suspected of being affected by any contagious disease. Only a licensed qualified Medical Doctor can make a determination on the health status of any individual. Members of this Organization who participates in such discriminatory practices or permits the same; in addition to civil charges and penalties, will also incur Masonic charges and penalties as the Most Worshipful Prince Hall Grand Lodge, Jurisdiction of Oklahoma, F & A. M., deems appropriate, to include but not limited to expulsion.

VISION

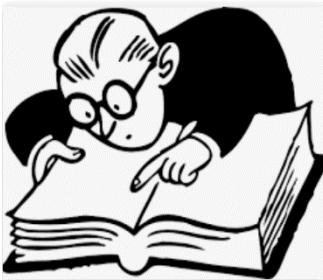
The Vision of the Most Worshipful Prince Hall Grand Lodge, F&AM Jurisdiction of Oklahoma is to prepare every member under the banner of Prince Hall Masonry to become a responsible, participating Member and Leader, who is guided by the Rules and Laws of the Most Worshipful Prince Hall Grand Lodge, F&AM Jurisdiction of Oklahoma. Challenging everyone to their full potential of Prince Hall Masonry – in Education, full participation in community — to drive a new era of development, growth, and productivity among members. We strive to make Oklahoma Masonry the most prestigious Body for our Membership and the community.

OBJECTIVES OF THIS COVID-19 ACTION PLAN



The objectives of this COVID-19 ACTION PLAN are to raise awareness, educate and provide guidelines that fosters and propagate the principles of a safe healthy environment conducive to the various activities of Freemasonry through the dissemination of **proven scientific methods** known to mitigate the transmission of contagious diseases.

DEFINITION



What is a virus?

A virus is a sub-microscopic infectious agent that replicates only inside the living cells of an organism. Viruses can infect all types of life forms, from **animals and plants** to micro-organisms, including bacteria and archaea. Since Dimitri Ivanovsky's 1892 article describing a non-bacterial pathogen infecting tobacco plants, and the discovery of the tobacco mosaic virus by Martinus Beijerinck in 1898, more than 6, 000 virus species have been described in detail.

Of the millions of types of viruses in the environment. Viruses are found in almost every ecosystem on Earth and are the most numerous type of biological entity. The study of viruses is known as virology, a sub-specialty of microbiology.

ORIGIN OF VIRUSES



The origins of viruses in the evolutionary history of life are unclear. The Most Recent Common Ancestor (MRCA) of all coronaviruses is estimated to have existed as recently as 8000 BCE.

Viruses are found wherever there is life and have probably existed since living cells first evolved. The origin of viruses is unclear because they do not form fossils, so molecular techniques are used to investigate how they arose. In addition, viral genetic material occasionally integrates into the germline of the host organisms, by which then can be passed on vertically to the offspring of the host for many generations. This provides an invaluable source of information for paleo-virologists to trace back ancient viruses that have existed up to millions of years ago.

Viruses are considered by some biologists to be a life form, because they carry genetic material, reproduce, and evolve through natural selection, although they lack key characteristics (such as cell structure) that are generally considered necessary to count as life. Because they possess some but not all such qualities, viruses have been described as "organisms at the edge of life", and as replicators.

ENVIRONMENT



When infected, a host cell is forced to rapidly produce thousands of identical copies of the original virus; hence the worldwide lockdown. When not inside an infected cell or in the process of infecting a cell, viruses exist in the form of independent particles, or virions, consisting of:

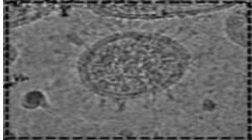
- i. The genetic material, i.e. long molecules of DNA or RNA that encode the structure of the proteins by which the virus acts
- ii. A protein coat, the capsid, which surrounds and protects the genetic material; and in some cases an outside envelope of lipids
- iii. The shapes of these virus sub-microscopic particles range from simple helical and icosahedral (polyhedron with 20 faces) forms to more complex structures. Most virus species have virions too small to be seen with an optical microscope as **they are one hundredth the size of most bacteria.**

DIFFERENCE BETWEEN BACTERIA & VIRUSES

BACTERIA UNDER MICROSCOPE

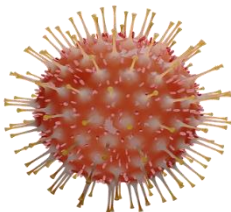


VIRUS UNDER MICROSCOPE



Viruses are smaller than bacteria. In fact, the largest virus is smaller than the smallest bacterium. All viruses have a protein coat and a core of genetic material, either RNA or DNA. Unlike bacteria, viruses can't survive without a host. They can only reproduce by attaching themselves to cells. In most cases, they reprogram the cells to make new viruses until the cells burst and die. In other cases, they turn normal cells into malignant or cancerous cells. Also, unlike bacteria, most viruses do cause disease, and they're quite specific about the cells they attack. For example, certain viruses attack cells in the liver, respiratory system, or blood. In some cases, viruses target bacteria.

TYPES OF HUMAN CORONAVIRUS



ARTIST RENDERING OF
A CORONAVIRUS

Coronaviruses are named for the crown-like spikes on their surface. There are four main sub-groupings of coronaviruses, known as **alpha**, **beta**, **gamma**, and **delta**.

Human coronaviruses were first identified by scientists in the mid-1960s. The seven coronaviruses that can infect people are listed below.

Common human coronaviruses:

1. 229E (alpha coronavirus)
2. NL63 (alpha coronavirus)
3. OC43 (beta coronavirus)
4. HKU1 (beta coronavirus)

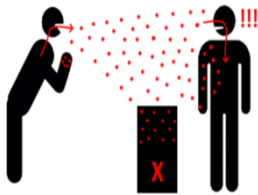
OTHER HUMAN CORONAVIRUSES

5. MERS-CoV (the beta coronavirus that causes **Middle East Respiratory Syndrome**, or **MERS**)
6. SARS-CoV (the beta coronavirus that causes **Severe Acute Respiratory Syndrome**, or **SARS**)
7. SARS-CoV-2 (the novel coronavirus that causes coronavirus disease 2019, or **COVID-19**)

WHAT IS COVID-19?

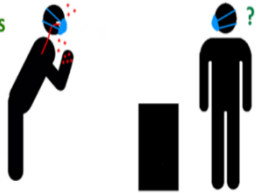
Coronavirus disease 2019 (COVID-19) is a respiratory illness that spreads from person to person.

No Masks



On February 11, 2020 the World Health Organization (WHO) announced an official name for the disease that has caused the 2019 novel coronavirus outbreak, first identified in Wuhan China. The new name of this disease is coronavirus disease 2019, abbreviated as COVID-19. In COVID-19, 'CO' stands for 'corona,' 'VI' for 'virus,' and 'D' for disease. Formerly, this disease was referred to as “2019 novel coronavirus” or “2019-nCoV”.

With Masks



There are many types of human coronaviruses including some that commonly cause mild upper-respiratory tract illnesses. COVID-19 is a new disease, because it is a novel (or new) coronavirus that has not previously been seen in humans. The name of this disease was selected by the World Health Organization. **COVID-19 is caused by a coronavirus called SARS-CoV-2.**

WHO IS/ARE AT RISK?



The virus that causes **COVID-19 infects people of all ages**. However, evidence to date suggests that two groups of people are at a higher risk of getting severe COVID-19 disease. These are older people (that is people over 60 years old); and those with underlying medical conditions (such as cardiovascular disease, diabetes, chronic respiratory disease, and cancer). The risk of severe disease gradually increases with age starting from around 40 years. It's important that adults in this age range protect themselves and in turn protect others that may be more vulnerable.

The World Health Organization (WHO) has issued advice for these two groups and for community support to ensure that they are protected from COVID-19 without being isolated, stigmatized, left in a position of increased vulnerability or unable to access basic provisions and social care.

HOW IS THE CORONAVIRUS SPREAD?



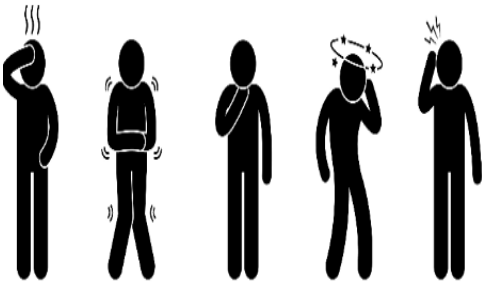
COVID-19 is mainly spread from person to person through coughing or sneezing. Virus-carrying airborne droplets can remain in the air or on surfaces even after the ill person is no longer near. These droplets can land in the faces of people who are nearby or possibly be inhaled into the lungs. Spread is more likely when people are in close contact with one another (within about 6 feet). It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes. This is not thought to be the main way the virus spreads, but we are still learning more about this virus.

SYMPTOMS

Symptoms of COVID-19 include but not limited to the following:



- Mild to severe respiratory illness
- Fever
- Cough
- Constant sneezing
- Runny nose
- Headache
- Shortness of breath/difficulty breathing
- Chills
- Muscle pain
- Sore throat
- Loss of taste or smell
- Travelled internationally in less than 14 days
- If you know you were exposed in less than 14 days



Be aware that some individuals are a-symptomatic, i.e. they show no symptoms even-though infected.

EMERGENCY SIGNS OF COVID-19

- Trouble breathing
- Persistent pain or pressure in the chest
- Confusion
- Inability to wake or stay awake
- Bluish lips or face

Call 911 immediately!



INCUBATION PERIOD



The **incubation period** for COVID 19 is **2 -14 days after exposure**. This means; Persons who are infected or have come in contact with the virus may show symptoms within 2 – 14 days.

The virus that causes COVID-19 is a novel (new) coronavirus. It is not the same as other types of coronaviruses that commonly circulate among people and cause mild illness, like the common cold. **Severe complications due to COVID 19 can result in pneumonia.**

COMMON CONTAMINATED SURFACES



Current evidence suggests that the novel coronavirus may remain viable from hours to days on surfaces made from a variety of materials. Cleaning of visibly dirty surfaces and commonly used surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in households, community and meeting settings.

Surface contamination include, but not limited to:

- Unclean or overused face masks
- Tables, desks & counters
- Hard-backed chairs, benches, stools
- Computer keyboards
- Utensils, containers for liquid
- Public shopping carts/baskets
- Light switches
- Door handles/knobs
- Toilets & sinks

CLEANING AGENTS/DISINFECTANTS FOR USE AGAINST COVID-19



While surface disinfectant products listed below have not been tested specifically against SARS-CoV-2, the cause of COVID-19, the **EPA** expects them to kill the virus because they:

1. Demonstrate efficacy against a harder-to-kill virus; or
2. Demonstrate efficacy against another type of human coronavirus similar to SARS-CoV-2.

All surface disinfectants in **List A** below can be used to kill viruses on surfaces such as counters and doorknobs.

Because SARS-CoV-2 is a new virus, this pathogen is not readily available for use in commercial laboratory testing to see if a certain disinfectant product is effective at killing the virus.

The active ingredients in cleaning/disinfecting products expected to kill the SARS-CoV-2 virus, includes but not limited to the following:

- | | |
|-------------------------|--|
| a) Alcohol | i) Hydrogen-peroxide |
| b) Ammonium bicarbonate | j) Glycolic acid |
| c) Ammonium carbonate | k) Isopropanol (Isopropyl alcohol) |
| d) Chlorine dioxide | l) L-Lactic Acid |
| e) Citric acid | m) peroxymonosulfate |
| f) Ethanol | n) Quaternary ammonium |
| g) Hydrochloric acid | o) Sodium chloride |
| h) Hypochlorous acid | p) Sodium hypochlorite (Bleach disinfectant) |

The table below provides more information on the abovementioned active ingredients, familiar house hold brands containing the ingredients and efficacies. More comprehensive Tables and information are available via the CDC including other Government authorities.

LIST A (Cleaning/Disinfecting Agents)

EPA REGISTRATION NUMBER	ACTIVE INGREDIENTS	PRODUCT NAME	FOLLOW DIRECTION FOR USE	CONTACT TIME IN MINUTES
3573-54	Citric acid	Comet	Feline, calicivirus; noronavirus	10
777-81	Hydrochloric	Lysol Brand Lime & Rust Toilet Bowl	Poliovirus Type I; Hepatitis A virus	10
95337-1	Citric acid	Arm & Hammer Disinfecting Wipes	Rhinovirus	5
777-136	Ethanol (Ethyl alcohol)	Lysol® Neutra 2 in 1	Human coronavirus	0.5 – 30 seconds
84150-2	Ethanol (Ethyl alcohol)	Gojo	Feline	0.5 seconds
5813-86	Glycolic acid	Clorox	Human coronavirus	10
4822-614	Hydrochloric acid	Scrubbing Bubbles	Rotavirus	10
4822-593	L-Lactic Acid	Windex	Rhinovirus	5

HYGIENE

Practice good personal and social hygiene including official guidelines:



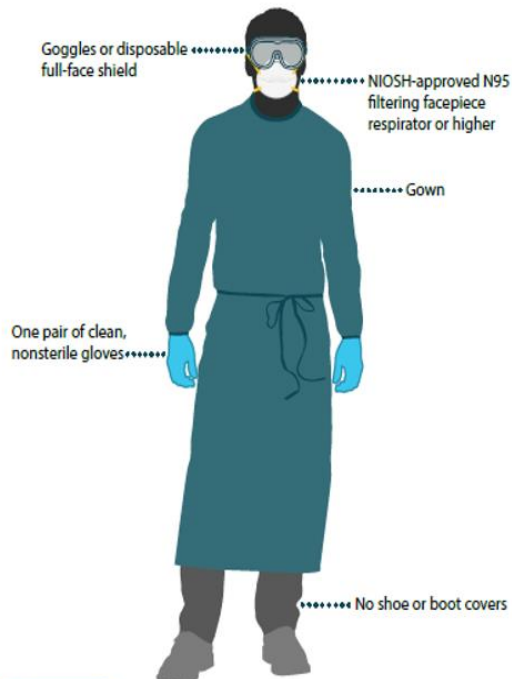
- i. Wash your hands regularly throughout the day for at least 20 seconds at a time.
- ii. Use hand sanitizers with at least 70% alcohol.
- iii. Avoid touching your face – especially eyes, nose, and mouth – with your hands.
- iv. Open windows & doors regularly to ensure regular fresh air flow.
- v. Cover your cough or sneeze with a tissue, then dispose after use or cover your mouth with your upper arm or elbow when you cough or sneeze.

PROTOCOL PRIOR TO MEETING/ACTIVITIES

Once the Local, State and Federal Governments have declared that businesses, organization and the public can resume “normal” activities; several precautions must be observed. **If the circumstances of the case permits, virtual meetings should be the first consideration.**

In the case of indoor meetings, the following **minimum** guidelines must be observed which may be supplemented by more stringent measures:

COVID-19 Personal Protective Equipment (PPE) for Healthcare Personnel



For more information: www.cdc.gov/COVID19

Prior to entering the meeting space:

- Close all doors/windows
- Knowledgeable (persons who have read these or other guidelines) volunteer(s) with the appropriate PPE (Personal Protective Equipment) i.e. disposable protective clothing, disposable footwear or covering, disposable gloves, face shield or goggles, should clean door handles/knobs and points of entry.
- On entering the space, use aerosol sprays with the ingredients listed in the section captioned “**Cleaning Agents/Disinfectants for use Against Covid-19**” to completely cover the entire aerial portion of the room for **airborne contaminants**.
- Clean all surfaces within the room
- Clean all areas intended for use during the meeting, e.g. restrooms, kitchen, computer stations etc.
- Wait 30 minutes before use
- Alternatively, hire a professional to do the work

SCREENING MEETING/ACTIVITY PARTICIPANTS

In order to maintain a safe healthy environment conducive to the various activities of Freemasonry, it is imperative that basic health criteria be met – **self-screening**.

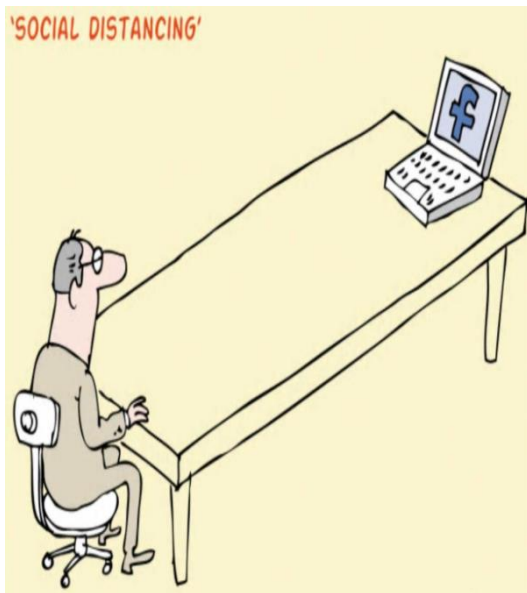
Intended meeting participants who have been declared unwell by a **Medical Professional** should gracefully excuse themselves. In addition, Members who know themselves to be unwell, are not feeling well or display any of the following signs and symptoms, they should also excuse themselves:

- Mild to severe respiratory illness
- Fever
- Cough
- Constant sneezing
- Runny nose
- Headache
- Shortness of breath/difficulty breathing
- Chills
- Muscle pain
- Sore throat
- Loss of taste or smell
- Travelled internationally in less than 14 days
- If you know you were exposed in less than 14 days

In addition, one Member with the requisite courtesy, compassion and diplomatic skills should be assigned as an observer to **assist** anyone displaying signs and symptoms of illness.

MINIMUM HEALTH GUIDELINES FOR MEETINGS

Taking cognizance of the “**Protocols Prior to Activities**” (page 8); During meetings, gatherings and any activities associated with the Organization, these **minimum** guidelines are to be observed:



- **Be practical, reasonable, and respectful**
 - Respectfully maintain a minimum 6 ft distance without being offensive/defensive
 - Do not make un-necessary physical contact with others
 - Wear a respiratory mask that covers your nose and mouth
 - Disposable gloves as circumstances warrant
 - Avoid touching your mouth, eyes & nose
 - Cover your cough or sneeze with a tissue, then throw the tissue in the trash or cover your mouth with your upper arm or elbow when you cough or sneeze
 - Wash your hands for at least 20 seconds or use hand sanitizer with at least 70% alcohol
- Where possible, open windows regularly to ensure regular fresh air flow
 - Avoid un-necessary touching of objects, surfaces or furniture

SELF-HELP APPROACH

Practical self-help approach (Not intended as medical advice):

- Consult your Health Care Professional
- Avoid crowds
- Build & maintain your immune system
- Exercise regularly
- Maintain a healthy diet
- Get enough rest, sunlight & fresh air
- Stay properly hydrated
- Stay Positive

More detailed information is available at all Local, State & Federal Government Agencies and websites.

STOP

COVID-19

SOURCES AND REFERENCES

Center for Diseases Control (CDC); www.cdc.gov; et al

Environment Protection Agency (EPA); www.epa.gov; et al

Wikipedia; <https://www.wikipedia.org>; et al

MOST WORSHIPFUL PRINCE HALL GRAND LODGE F & A. M., JURISDICTION OF OKLAHOMA; COVID-19 ACTION PLAN 2020

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