THE IAFC CORONAVIRUS TASK FORCE PRESENTS

Coronavirus: What Fire Chiefs Need to Know

MONDAY, MARCH 16, 3 PM EST

www.iafc.org/elearning
Welcome

• Introduction of Presenters
  – Fire Chief Gary Ludwig, IAFC President
  – Dr. James Augustine, MD, FACEP
  – Fire Chief John Sinclair, COVID Task Force Chair
  – Mr. Ken LaSala, Director of Government Relations
  – Mr. Jeff Dulin, National Mutual Aid System
Overview of IAFC Actions

• Developed Coronavirus Resources Page
  – www.iafc.org/coronavirus

• Established a Coronavirus Task Force
  – Fire Chief’s Guide to Coronavirus Preparedness and Response
  – Coronavirus Impact Survey and Map
  – Frequent updates to resources page
Coronavirus Overview

- What is Coronavirus (COVID-19)?
- How does it spread?
- How do symptoms typically present?
Developing a Response

• Considerations when developing a plan:
  – Keeping our personnel safe
  – Using and protecting our places
  – Building the right processes
  – Eventually this will end

“What we can’t do during a battle is lose our forces.”
• Ask callers if they have COVID or a known exposure

• NO unique symptoms
  – Difficulty breathing
  – Running nose, dry cough, sore throat

• Community spread decreases value of travel history

• Advise crews of patient reports symptoms
PPE Recommendations

• **Immediately provide surgical mask to all patients**
• Minimize personnel contacting patient, use open air
• Proper PPE includes:
  – N95 (when available) or surgical mask for providers
  – Goggles/Face shield and gloves
• Aerosol-generating procedures (in open air if possible)
  – Utilize N95 over surgical mask, add gown/coveralls
• High ventilation in patient compartment
• Driver should doff PPE, except mask, before driving
• Hospitals Upgrading Defenses
  – Outdoor Triage
  – Protected Staff
  – *Universal Respiratory Precautions*
  – *Limited Admissions*
  – “Testing” is moving off-site
Decontamination

• Leave ambulance doors/windows while transferring patients and completing reports
• Use approved disinfectant on all surfaces inside ambulance
• Increase cleaning frequency of fire stations and non-transport vehicles
• If patient presents at a fire station, keep patient outside when possible
Quarantine Recommendations

- Quarantine vs. Isolation
- Pre-plan quarantines:
  - Quarantine/isolation location
  - Payment/Leave for individual
  - Logistics to support individual
  - Mental and behavioral health needs
- Quarantine is unlikely if patient wears mask and proper PPE used
Other Considerations

• Review with Elected Leaders:
  – Continuity of Operations Plan (COOP)
  – Continuity of Government Plan (COG)

• Supply Chain versus Burn Rate

• Innovative supply

• Mutual Aid/local, regional, state.
Supply Chain Considerations

- Personal Protective Equipment
- Testing
- Treatment
- Disinfection

Mr. Amit Kapoor
President & CEO, First Line Technology
• Emergency Declaration (March 13)
  – $50 billion available through Disaster Relief Fund
  – 75% federal cost share for personnel, tests/supplies, facilities
    securities, etc.
  – Contact state emergency managers for specific guidance
Congressional Actions

• Emergency Supplemental (March 6)
  – $10M for infection control training
  – PPE likely distributed by state health departments
  – Funds vaccine and treatment research

• House-passed Legislation (March 14)
  – Paid sick/family leave, food assistance, unemployment benefits, waives co-pays for COVID testing
  – House passed on Friday and will make minor edits today
• Prioritize PPE/Drugs for fire and EMS
• EMS Surge Capacity
  – Expansion of license portability
  – EMS inclusion in telehealth
• Funding to backfill positions
Impact Survey and Map
NMAS

• National Mutual Aid System
  – Developed by IAFC, esri, and Juvare
  – Helps locate and request resources
  – Working to upload federal resources

• Active in FL, TN, UT, MT, SC, VA