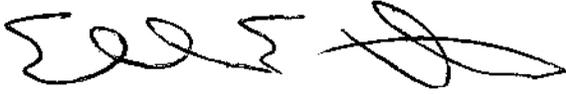




Central Whidbey Island Fire & Rescue General Orders

Title COVID-19 Pandemic Operations	GO # 20-2
Authorization 	Effective Date 3/20/2020

The COVID-19 situation continues to evolve. The World Health Organization (WHO) has declared a pandemic due to significant world wide spread. General Order (GO) 20-2 outlines changes in use of district facilities and district operations in light of the impact of the pandemic on members, their families and our community.

The district's mission is to reduce risk of fire, injury, and illness within our community. To support that mission in these challenging times, we are working closely with our emergency services partners, Island County Public Health, and Island County Emergency Management to maintain the highest level of service delivery while minimizing risk of exposure and illness.

Pre-Work Screening

All members (sworn and non-sworn) are required to complete pre-work screening (Appendix A) when reporting for work. Note that this does not apply to off-duty or volunteer response to emergency incidents. This screening asks if you have a fever, cough, or have had unprotected contact with a COVID-19 patient. After the pre-work screening form has been completed, it will be reviewed by the Command Duty Officer and forwarded to Deputy Chief Smith.

EMS Operations

As the COVID-19 pandemic is a public health emergency, one of the greatest impacts is on our delivery of emergency medical services in partnership with WhidbeyHealth EMS. Details on COVID-19 EMS dispatch and response procedures is provided in GO 20-1.

District Facilities

The district will continue to hold required meetings of the CWIFR Board of Fire Commissioners as necessary to conduct the business of the district. Risk to the commissioners, staff, and community participants will be reduced by maintaining a 6' spacing for seating. In addition, the district is exploring the feasibility of broadcasting meetings live over the web with Facebook Live from the districts Facebook page.

All training and other gatherings in CWIFR fire stations have been canceled. With two exceptions of in-station apparatus inspections (coordinated by station officers) and hands-on training related to the Island County Recruit Academy that is conducted outdoors (Academy use will be evaluated on an ongoing basis).

Title COVID-19 Pandemic Operations	GO # 20-2
---------------------------------------	--------------

The district administrative offices front door will be kept locked with signage explaining the need to minimize exposure to staff and including the station and shift phone numbers along with instruction to call 911 if there is an emergency.

Community Risk Reduction

Community risk reduction activities such as fire and life safety inspections and home safety surveys provide a significant benefit to the community. However, in light of the current pandemic, these activities have been significantly curtailed. The district will not conduct fire and life safety inspections with the exception of initial inspections for occupancy at the request of the Town of Coupeville or Island County Building Officials.

Home safety surveys will not be conducted with the exception of circumstances in which a home does not have working smoke alarms. In which case district staff will conduct a limited survey and install smoke alarms.

Personal Protective Equipment

Examining the similarity of risk of exposure related to emergency medical services (EMS) responses and other types of response and service activity, the following personal protective equipment requirements have been established for non-EMS response and service activity.

Personal protective equipment referred to in this GO is designated as Level II (Medium Precautions). Level II PPE is comprised of gloves, safety glasses, and an N95 respirator. EMS response may require a higher level of PPE, refer to GO 20-1 for additional detail.

Level II PPE shall be worn for all non-EMS responses and public contact services where members will not be wearing self-contained breathing apparatus (SCBA) with the facepiece in place and on air.

For incidents where SCBA are worn in the ready position (facepiece off) during investigation, members shall wear an N95 respirator and medical gloves. If structural PPE may have become contaminated during the response it is to be bagged and washed using the same procedure as post-fire.

Supplies of N95 respirators can become depleted during a pandemic. NIOSH has provided several recommendations to conserve supplies while safeguarding health care workers under these circumstances (NIOSH, 2018). The district will use two of these recommendations to manage limited supplies of N95 respirators:

- Minimize the number of individuals who need to use respiratory protection by limiting the number of requiring respiratory protection to the minimum necessary.
- Limited reuse of N95 respirators is permitted when used for non-EMS response and public contact activities, the respirator may be placed in a paper bag labeled with the member's name and reused for EMS response or other activity where a respirator is required.

Title COVID-19 Pandemic Operations	GO # 20-2
---------------------------------------	--------------

Risk Management

The basic principle of risk management is to minimize the potential for exposure by avoiding contact when possible, maintaining distance, not touching potentially contaminated surfaces, and using PPE based on potential risk of the activity being performed.

The district is not prohibiting members from shopping while on-duty or ordering take out food, but is encouraging shifts to plan ahead and minimize the need to do so.

As with EMS responses consider the following questions prior to engaging in response or public contact activities:

- Is the person suspected to have COVID-19?
- Does the facility have COVID-19 patients?
- Is this a cohorted (high risk) community such as a nursing home, care home, jail, etc.?

Conduct doorway triage, asking the following series of questions on all responses and other public contact activities:

- Does anyone here have a fever, cough, shortness of breath, or respiratory distress?
- Has anyone here had previous contact with a COVID-19 patient?

If the answer to any of these five questions is yes, determine if entry is necessary and if so, use caution to prevent close (within 6') contact with symptomatic or potentially symptomatic individuals. Note that these types of activities may be considerably different than an EMS response as there is generally no need for direct contact or close proximity with the individual being served. If this is not possible, and the service is essential, increased levels of PPE may be warranted.

Reported illnesses have ranged from mild symptoms to severe illness and death for confirmed coronavirus disease 2019 (COVID-19) cases. The following symptoms may appear 2-14 days after exposure:

- Fever
- Cough
- Shortness of breath

People may not be symptomatic before 14 days after exposure, but may still be contagious. Ask if the anyone has potentially been exposed to COVID-19. **Maintain a high index of suspicion!**

Continuing Developments

If you have any questions, please contact Deputy Chief Smith or Chief Ed Hartin.

Title COVID-19 Pandemic Operations	GO # 20-2
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References

Centers for Disease Control and Prevention (CDC). (2020). *Interim U.S. guidance for risk assessment and public health management of healthcare personnel with potential exposure in a healthcare setting to patients with Coronavirus Disease (COVID-19)*. Retrieved March 10, 2020 from <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>.

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