

Ed Comeau: This is Ed Comeau, the producer of CRR Radio. Fire departments across the nation are facing unprecedented challenges in responding to the COVID-19 pandemic and dramatic changes are being made in how they operate. To help, CRR Radio is launching its series of conversations with people and departments large and small, to learn what they are doing to plan, prepare and respond. We appreciate everyone taking the time to talk with us and share their experiences.

In addition, Vision 2020 has created a coronavirus shared resources library that contains a wealth of information contributed by departments. This site includes policies, procedures, response checklists and a lot more and our goal is to help departments avoid having to reinvent the wheel. It's available at [strategicfire.org/coronavirus](http://strategicfire.org/coronavirus) and if you have anything that you want to contribute, you can also do it through that page as well. Again, the URL is [strategicfire.org/coronavirus](http://strategicfire.org/coronavirus). And with that, let's get into our show.

And we're talking with chief Tom Jenkins from the Rogers Arkansas Fire Department about what they're doing out there in Rogers to prepare for the COVID-19 pandemic coming through. Tom, appreciate you taking the time to chat with us. And so what's going on out there in Rogers?

Tom Jenkins: Well I think Rogers would be, it's a good example I suppose of what's going on all across the country. We're kind of in a unique area here in which, we have a national airport that hosts major airlines and we also have the city's executive airport as an international airport because we have Walmart's air fleet. And so early on, we get flights from China, from Walmart and some of its vendors. And so we were really sensitive to what was going on early on, back in certainly the early parts of February and mid-January. And so we've been watching it. And so, this is at least been something that we've been able to forecast was coming and much like everybody else, we're trying to make sure that we're really paying attention to our firefighters. That's our most valued resource in many ways. But it's also the denominator that's going to allow us to take care of our citizens. And so lots of conversation, lots of problems to overcome quite frankly. Just a lot of conversation going on.

Ed Comeau: Specifically what kind of changes have you made so far when it comes to things? Are you screening calls differently? Have you locked down your stations? Are there differences in response protocols that you've implemented?

Tom Jenkins: Well, yes. All across the board I think, starting with the origin of the call, we began much like everybody else following the medical priority dispatch systems recommended screening for COVID-19, trying to determine if medical patients in particular could be likely candidates for carrying the virus. And that proved to be a good investment in time to get our dispatchers doing that. But as we continued to watch what's going on across the country unfold, we also have felt that we really need to be screening all of our calls. And so when we're notified of a smoke detector going off with no indicators or if we have some other calls, children locked in vehicles that we might be running on, any call, especially if it's especially those medical calls.

But nonmedical related calls, we're screening those people as best we can. Some of them are time sensitive, some of them are third parties calling it in. But we're trying to do everything we can in call origin to make sure that we don't put our firefighters in a position where they're now next to somebody who's got some flu like symptoms, which certainly mimic COVID-19 symptoms and a lot of ways. We're also just trying to educate our firefighters that there's the biggest threat here in a lot of ways, both with our communities and with the women and men in the ranks, is just the fear of the unknown. You can't see it. It's hard. Everybody wants to fight, wants to be tough. But it's hard to be tough against something you can't see. There's not a little green light bulb that goes, that clicks on above people that have a COVID-19 and are asymptomatic.

And so you just had this healthy amount of paranoia and we try to make sure we take that healthy paranoia and turn it into action that our firefighters understand that they need to socially distance, not just when they're in the community making calls, but even in the stations. We're fortunate that all of our firehouses have private bedrooms, so we're naturally a little bit more logistically set up to keep people away from each other. Wasn't that long ago we kind of criticized firefighters, especially millennial firefighters, for being in their bedrooms on their devices instead of at the kitchen table. And heck now that's what we're encouraging them to do is to not congregate with each other and to certainly not be out in the community. We've restricted all visitors, including family of firefighters, including firefighters who might be off duty coming into exercise or workout potentially in our fire stations.

We're really just trying to find any opportunity to limit human to human interaction. And I think that that has to have some positive impact. We're a transport EMS agency, so we kind of have that as well where we are transporting people who most likely have COVID-19. We're having to work very closely with our healthcare community for surveillance and just reiterate to our firefighters that we need them to be healthy. That while we may not be for the most part an at risk population in terms of mortality, if we sicken 20 or 30% of this job, it will have a severe impact to our ability to perform for the city. Just lots of acute conversations going on about this big problem.

Ed Comeau: And we're recording this on Tuesday, March 24th and in all these conversations it's really important that I point that out because things are changing so quickly. What's kind of been the impact on Rogers as a community out there? Are you seeing many incidents of COVID-19 happening out there among the population?

Tom Jenkins: Well, very limited. I would say that we do have some confirmed in the greater region, in the two county region. It's a handful right now. Thankfully we were able to glean some lessons from the Washington State area. I know I had some email communication, with Chief Schaeffer out of Spokane and so we've been fortunate to learn from others and adapt. And I say that not just as firefighters, but I think also our community. When you see other communities going through some crisis, it's easier to prepare and to act. And so I think that has helped insulate us. We also have been very proactive with lessons learned from the

nursing home community. We have EMS officers on duty every day. And one of the things we started doing early on is just surveillance of each one of our skilled nursing, independent living, any of those nursing homes where older people can congregate.

We're checking on them twice a day, getting a report out so that we can see what they're doing. We know if they're having some people who are being tested, we just get some front end information so that we can hopefully react and help to prevent some of the nursing home spread that has been so disastrous in some states. But all in all, the community aside from clearly being shut down for the most part, there's a lot of things that do look normal day in and day out. But we're ready. We have a lot of plans in place. I'm specifically proud of a lot of the work we've done with some of our regional partners, other fire departments, the cops, school districts to communicate and just kind of have some contingencies in place.

Ed Comeau: Now you are a past president of the IFC. I'm going to kind of put you on the spot here a little bit maybe. From your perspective of having been involved with an international organization, what kind of impact, longterm impact do you think this is going to have on the fire service? Because I doubt that we're just going to go back to business as usual. What kind of changes do you think might be happening in the future?

Tom Jenkins: In full disclosure, I'm a bit of an optimist and I think with every crisis comes opportunity. And I hate this. I hate that what we're experiencing right now in the country, I don't like panic. I think that as a leader you either add to the calm of a situation or you add quite frankly to the calamity of it. And right now I think that, this is a galvanizing event for the fire service or kind of one part, the civilian in infantry of the country and we're one part, the front lines of healthcare. And so I think that what this will do more than anything else, when this is all said and done, what I do know is that eventually stocks will come back up. I also know that, there's 20 plus vaccines in the works. That we will beat COVID-19. COVID-19 in the course of human history is not, this is not a cataclysmic event.

A lot of the problems that seem like problems today won't be. They will go away, whether it takes weeks, months, even a year. I think that what we have to watch out for is this is a good lesson in, for our city governments, our fire districts, whatever fire service affiliation, those listeners have, it's a good lesson in why we have rainy day funds. It's a good lesson in why we have to be very frugal and prudent with how we expend money because we're all of our departments are just one phone call or one breaking news story away from being in a world of crisis just like we are today. And so we have to, I think it will be a good reminder of why we have to be fiscally conservative when we're government employees, especially so that we can continue to provide service, so that we can flex to acquire large quantities of equipment in this case, PPE if we need it.

I think the other thing that this will do is it's a stark reminder about all the things we can be doing to limit exposure to our self. The communication of this virus is elementary. It's generally person to person. It's being in that close proximity. And we're combating that with reminders about hygiene and we have firefighters that have never worn a N95 mask before, things that they should be really, every flu season we probably need to be a little bit more protective of our employees even though we just like to think of it as the normal seasonal flu. And so my hope is that when we come through this, that we won't get amnesia about the fiscal lessons here. And there's personal lessons, but certainly there's lessons at a governmental level.

And I hope that it leads to just a little better standard of hygiene and for the use of personal protective equipment for our responders. That how cool would it have been and why wouldn't we in 2020 anytime we have a patient who's experiencing some upper respiratory issue, why wouldn't we do some things naturally to protect our firefighters from the unknown? Or even if it is the unknown, what if it is a seasonal flu thing, why wouldn't we try to protect them a little better? And so I think there's some criticism that rests on the shoulders of fire chiefs like me today. But in the future, I hope that we do better. It's just, I don't know that anybody had a crystal ball and could see this coming. But anytime as a fire chief, as a leader, you look at the fact that we don't have enough masks or we don't have enough gowns.

And I just, I shake my head at myself thinking, why doesn't a fire department the size of mine, and I'm sure there's fire chiefs listening that will feel the same way, why didn't we see this coming? Why didn't this was predictable. And so there was something we could have done about it. And I hope that in the future, we're just better prepared, we're healthier and that our piggy bank for local government's a little bigger so that we can weather these storms without having to cut into the resources that take care of our citizens.

Ed Comeau: Well we've been talking to the chief Tom Jenkins from the Rogers Arkansas Fire Department about what they're doing out there and Tom, I really appreciate taking the time to chat with us today.

Tom Jenkins: Thanks Ed. It's always good to visit with you and good luck to all your listeners as they deal with this crisis.

Ed Comeau: And now we're talking with Captain Michael Sedlacek from the Madison Fire Department down there in Alabama and Mike, appreciate you joining us. I do have to mention that we're recording this on Wednesday, March 25th because things are just changing so rapidly between the time we record this and it airs. Who knows what's going to be happening. Thanks for joining us.

Mike Sedlacek: No problem. Thank you for having me.

Ed Comeau: What are you guys doing differently down there in Madison when it comes to response? Operationally, what kind of changes have you had to make? And how you protecting your firefighters when it comes to this new world we have of COVID-19?

Mike Sedlacek: Well some of the things that we're doing different is we are trying to limit the number of personnel that come in contact with a suspected COVID-19 patient. If we have triggers that let us know that someone potentially has it or they had been exposed to it previously, we're keeping that distance of six feet until we absolutely have to make a physical contact. We're limiting the number of personnel that are inside of the house, if at all possible, as well as keeping our equipment away as well until we absolutely have to have it for some kind of reason.

We've also done things like making sure that our guys are not, we don't have as many people in one specific station. Our chief has found other options for some personnel to relocate temporarily just to make sure that we're kind of keeping our numbers down at a station as most departments have. One of those big stations that has 10 to 15 people. We're just trying to take that 10 to 15 and reduce it down to about eight or nine. That way we kind of keep at least a subset away in case we did have an exposure. It doesn't take our whole department down.

Ed Comeau: And interestingly enough, we had to reschedule this call this morning because you had a working fire and I know the focus is on COVID-19 but life still goes on.

Mike Sedlacek: It still does.

Ed Comeau: Have you done anything different when it comes to decontamination of the equipment or the personnel in relation to COVID-19 or even after a working fire?

Mike Sedlacek: We haven't changed anything in terms of our working fires. We're already on the front lines of trying to make sure that our personnel are decontaminated on just a regular fire day without COVID-19 here. We're already doing a lot of things proactively there. When it comes to decon from COVID-19, of course we are using our standard PPE, our N95s and if they have to have a face mask or goggles or anything or glasses, they're using those. And then as soon as they return to the station, they are leaving their vehicle outside, leaving the doors open, kind of letting it air out. Just in case we're deconning any equipment that's been inside. The guys are immediately to go and change clothes and wash those clothes immediately and then as well as they're deconning boots and then deconning the vehicle itself if they did have an absolute confirmed COVID-19 case.

Ed Comeau: How about the stations? Have you started locking those down when it comes to public access?

- Mike Sedlacek: Absolutely. Unfortunately it's one of these things where especially if you are a CRR focus department that this is a worst case scenario for us. Because then we have to cancel all station tours and cancel all the public events that we would normally go to. Then now this is a pain for us because it hurts. We're not able to come in contact with the kids. We've locked down stations, we're not accepting, people always bring food and bring gifts to the station for the firefighters and stuff and we're having to lock that down and turn people away. That's definitely something that we've had to do is lock our stations down. But we're cleaning our stations more thoroughly than we already were in terms of doorknobs and all that kind of stuff. Doing all of those things daily that we normally would not have done in the past. Just trying to do anything that we possibly can. In all reality, it's probably just something that makes us feel better, even though it might not actually help with the spread, but at least it makes us feel better while we're here.
- Ed Comeau: How about personnel? Are you evaluating personnel on a regular basis? And kind of what steps are you trying to do to avoid transmission from one to another?
- Mike Sedlacek: What we are doing is daily when the guys come in, we're taking their temperature in the morning, we're logging that in our reporting system and then in the evening before we bunk down for the night, we're also taking their temperature also or again and that way we're able to catch anybody that might have any symptoms quickly. If we have anyone that needed to go home and quarantine with their family due to family exposure or anything like that, of course we're working with anybody that has any issues there. But we are definitely trying to make sure that we are limiting exposure to our people from another personnel or member of our department if they were exposed as well.
- Ed Comeau: Have you had any exposures yet?
- Mike Sedlacek: No, we have not had any exposures yet from our personnel. We have had a city employee who did test positive and of course they immediately shut down the whole department and really took proactive measures to make sure that they were limiting any further contact. And luckily that person did what everyone is recommending. They were sick, they were fine one day, then the very, very next day they woke up, did not feel well and stayed at home. And when they stayed at home, that absolutely completely limited the contact that they had with any other employees. And then the city came in and brought in a really good deep clean company that was able to really get that whole area decontaminated as well as our city infrastructure as well.
- Ed Comeau: And as I mentioned, this is, today's March 25th. What's kind of the situation there in Madison right now, community wide when it comes to the presence of COVID?
- Mike Sedlacek: Well, we have only 21 cases as of yesterday afternoon here in our county as a whole. I know they're continuing to test. Of course, as with everybody seeing

these numbers could change drastically. We have a little over 200 in the state, I think 240ish as of last night as well. Of course at any point in time these numbers could skyrocket. Our call volume's actually gone down a little bit surprisingly. That's something that's quite interesting to see in terms of the data. But we have not run a ton of suspected COVID cases at all. It's something that we're very grateful for and blessed to have.

Ed Comeau: Yeah, but you like everybody else, ramping up for the worst here because who knows what's going to be coming.

Mike Sedlacek: Absolutely. We definitely are ramping up. We're of course trying to get, we've got all the supplies ordered and as well as we're working with our local ambulance service to try to get as much equipment for our guys as possible to make sure that we can limit exposure. We're here, we're preparing and we are prepared to make sure that we are ready to serve our community in any way we possibly can.

Ed Comeau: Okay. Mike, you certainly have had to lock down the stations and stop your outreach efforts. Are you doing something as an alternative to that where you can't be meeting in person right now? Are you doing something virtually?

Mike Sedlacek: Absolutely. We are using the power of the internet and social media, so we are doing a Facebook Live a lot. We've done our series of workbooks that we've created over the last few days and over the next part of the week we'll be doing truck shows virtually via Facebook Live and station tours by Facebook Live. And of course with that comes a whole myriad of things that you can do and explore. We definitely have a whole plan in place of how we can still interact with the community even though we can't have face to face contact, but we still can reach the kids. And especially with the parents being home and I guess for lack of a better word, kind of stuck with their kids for a little while, especially if they're working from home, we want to try to alleviate as much of that as possible. As much of the not friction but parents not always knowing what to do with their kids when they have them for three or four weeks at a time. We're just trying to help out any way we possibly can.

Ed Comeau: Oh that's absolutely great. Kudos to you guys for thinking of that and being on the cutting edge because you are on the cutting edge of so many things as we saw at the Vision 2020 symposium.

Mike Sedlacek: It takes just a little bit of creativity. Anybody can do it. If you have a Facebook page, and I definitely want to encourage every department or any member that's listening here to use the power that the internet gives you. If your department has a Facebook page, use the live feature. People want to know what's going on. It could be something as simple as what do you guys eat? You could do a 10 minute video of what you got, how you guys are preparing your food. That might give you an opportunity to talk about how maybe you purchase your own food and the city doesn't even purchase it for you. That's the one thing that we all know. People don't even realize. But it could just be a good

way to educate your community, give them something to do and to watch. To give them an inside view into your everyday lives.

And now they're interested. We got kids that will watch videos of kids playing video games. They'll watch videos of just vehicles just going up and down the road. Make your vehicles one of those vehicles that they watch. Just put it in front of them. Make sure you invite them out there and let them have at it.

Ed Comeau: Well we've been talking with Captain Michael Sedlacek down there in the Madison Fire Department in Alabama about what preparations they're making for COVID-19 and Mike, really appreciate you taking the time to chat with us today.

Mike Sedlacek: Well appreciate you having us on, Ed. Really appreciate it.

Ed Comeau: We're talking with Chief Nate Trauernicht with the UC Davis Fire Department who is also the incoming president of the Institution of Fire Engineers. Nate, really appreciate you taking the time to chat with us today.

Nate Trauernicht: Thanks for having me, Ed. Glad to be here.

Ed Comeau: And I should mention that we are recording this on Tuesday, March 24th because things are changing at light speed. Hopefully what you're going to be telling me you won't be that far out of date by the time this airs. UC Davis, you're a little bit different. You have in that the campus has its own fire department and things have probably quieted a down a little bit with the students gone out there, but I'm sure you have a whole set of challenges you're facing out there. Can you just kind of give us an overview of what you have done differently there at your department in terms of operations, protecting the firefighters, responding to incidents, all that sort of thing.

Nate Trauernicht: Absolutely. And appreciate the opportunity to share kind of not only what we're doing but also through IFEUSA and the variety of other organizations some of the things that are being talked about nationally as well. Within our local area, and one thing that I think is really important as people listen to these podcasts and as people read information on how different places in our country and around the world are responding to this, while the enemy, if we to call it that, is the same, the situation is very different from locality to locality, from country to country. And so one thing that I want to emphasize as we start talking is that people as they listen to all these resources or look at these resources, that they look at them from the perspective of how can I take what makes the most sense here and apply it to my operation?

And also to encourage people to look at the overarching guidance. Things from the Centers for Disease Control, things from the World Health Organization. One of the things that really got us moving at UC Davis was when the World Health Organization really started ramping up its assessment of the spread of COVID-19

and started putting out guidance, that because our university has a major medical center as part of it, we started getting some information really early in the US spread. One county west of us, Solano County, was where the first patient who was believed to have been community spread in the US and that person was actually treated at our UC Davis Medical Center. And so because of that, we really from the last week of February, first week of March, started putting into place actions in our own organization, knowing that our region was going to be impacted.

One of the first things that we did is took information from across all these different areas. We were getting advice from state health, we were getting advice from our county health. We are getting advice from our county EMS agency. We were getting guidance from the CDC and the WHO and all these other places and they were all living in separate documents. One of the things that we did that first week of March was we consolidated everything into a single document. And California and Washington really were kind of on the front end of this in the US, followed closely, if not in tandem with the state of New York. And as this was unfolding around us, we started listening to the challenges that not just first responders were having, but in particular we were listening to the challenges that were happening inside the healthcare setting. Again, at our medical center, they were experiencing challenges around PPE decisions to quarantine those kinds of things before the first responder agencies, where before law and fire and EMS were.

And so we started cobbling together all this guidance and those legal documents to make it easier for our folks to have one place to go to get all the information they needed. And we very quickly put together guidance that's now been shared nationally through a variety of sources including Vision 2020, the IFC, Cal Fire and a number of other groups that walks people through. And again it's a document that's specific to us but can be extrapolated out to others that talks about, what considerations should you have in route to the call? As you're approaching the patient, how many responders need to make initial contact? Patient care, if someone doesn't have or isn't presenting with symptoms that are in need of immediate intervention, how many people need to actually contact? How many people need to come within six feet? And then after the call, how do we make sure people are properly taking off their PPE? How do we make sure that PPE goes with the ambulance to the transport destination? And then what type of workforce monitoring and surveillance do we put in place with that?

And one thing that's been really important to me, and I think many others during this is that we separate fact from fiction and hype. And so our document is based off of national and international guidance from scientific organizations. We do have components of it that are local policy. For example, we wrote a policy 10 years ago that says if we get below minimum staffing and we only have X number of people, here's how we staff each piece of apparatus and here's how, if we only have two people on an engine and you go to this type of call, here's the augmented request you make from a mutual aid or automatic aid

partner. And that was stuff that fortunately we'd done years ago not ever thinking we would use it for something like this.

We were thinking natural disaster, we were thinking earthquake, those sort of things. But that have become very applicable in today's circumstance and today's situation. And we update this document right now at least once a week. For a while it felt like we were updating about every three or four days and that's starting to slow a little bit. Really, I think where we're seeing some of the challenges right now, and I mean this with all due respect to our friends and in the PPE manufacturing field, but it seems to be a little bit of a slowdown getting information out about how we take care of our PPE, how we potentially reuse our PPE, how we decon our PPE and I understand there's a learning curve for the manufacturers but it's never been more important for them to step forward and partner with groups like Vision 2020 and IFE and IFC and IFF and all the other players out there to get responders information.

They need to get things decontaminated to reuse them when possible and safe and to maybe, relook at testing of products when it comes to decontamination because some of the things if you go in and you use manufacturer recommendations, you have to wonder how long it's going to be before things are completely worn out because you never would have used those decontamination procedures as frequently as you may use them now. But really, just kind of locally, we are automatic aid group of chiefs. There's six of us who meet by video conference every Monday and Friday with our EMS director to do a situational update. We're all sharing documents back and forth with one another. We last Wednesday moved our entire administrative and command staff to remote work.

That's one of the important messages we sent to our responders when we did that was, we're not abandoning you. We are doing this because if you look at how this spreads, the fewer contacts you have, the fewer exposures you have, the better the likelihood is that you're going to stay healthy. And while it's great to look across the way and see our command staff's pickups parked there, those face to face interactions can happen through technology. And we have to make decisions today based on the mission, on the core mission. Which is life safety and CRR, in all aspects. We're practicing CRR by modeling social distancing and minimizing risk and exposure even amongst employees.

Ed Comeau: I take it you've probably locked down the stations, haven't you by now?

Nate Trauernicht: Yeah, we did. We canceled station tours, ride alongs, we run an EMT certification program that our staff was able to convert from a 100% in person to totally online within three days, thanks to one of one of the book and in content manufacturers out there. We've temporarily suspended our CPR classes and are looking to create some online content for around hands only CPR so that we're still continuing to get that messaging out to the world, when it comes to our programs can't completely stop. We're looking at ways of putting content online, videotaping it, putting it on social media, things that people can do to

stay healthy, stay entertained and stay educated to about what's going on right now.

Ed Comeau: I'm kind of curious in your role as the incoming president of the Institution of Fire Engineers, you talk to a lot of people, you visit a lot of fire departments across the country. In about six months, 12 years, when we look back on this, what kind of changes do you think this is all going to have on both society but also in the fire service? This is a pretty, this is a watershed moment really.

Nate Trauernicht: I would agree and I think more and more people are arriving at that same conclusion in recent days and weeks. It's becoming harder and harder to not recognize the long-term implications of what's happening. In my conversations, I think probably the most poignant thing that has come out of this for me is comments that it wasn't a matter of if but when. That there would be another pandemic. You look back in the history of our world, this is not new and that we became very complacent with the common cold and influenza. And so when I look at this COVID-19 guidelines document right now that we put together for our department and we titled it, Responding to a Patient with Signs or Symptoms of Respiratory Infection. Respiratory infection isn't just COVID-19 and I think one of the long lasting pieces of this in the timeframe you discuss, this is probably time for us as people and as a profession to take the flu as seriously.

When you look at the mortality morbidity rates around the flu, our folks wearing this PPE that we're wearing today when they're responding on flu like symptoms calls outside of a COVID-19 situation. We talk about wanting to have longterm impacts and implications to health and wellness. Think about the number of people who die from the flu every year and what a tremendous impact we could have if we just practice even a handful of the things that we're talking about doing for COVID-19 and think about how much easier it becomes to ingrain in responders, whether it's on a fire truck, an ambulance or a law enforcement officer, that when they hear the term flu like symptoms or ill male, ill female, that we instead of leaving our gloves and gowns and masks in our fanny packs for five or 10 years, that we actually practice this. When, not if the next pandemic hits, we aren't having to rewrite the playbook again.

We are, and to many people's credit, I think we're doing it well, we're building the plane as we fly it. Folks had continuity plans, sure. I'll tell you what, my business continuity plan didn't cover all this. It's going to now and for folks who remember SARS, MERS and all the other iterations of illnesses like those in recent years, Ebola, H1N1, we all did planning around that and it may have not been enough because we got to a point where we no longer felt threatened and we stopped. And I think probably the biggest piece of this that I hear from folks nationally is we need to make these plans that we have today permanent and they need to be regularly addressed and upkeep managed.

And I think the other thing that is coming out is just the really significant gaps in the supply chain around PPE. And just last week, CDC, NIOSH released guidelines on reuse of N95s. Maybe that existed somewhere before last week.

But I really encourage everybody right now to ask themselves, you're living in the current moment, but please think weeks and months ahead and start asking the questions of how we're going to potentially have to repurpose, reuse or stand up production of things that we're going to need to ride through this bell curve and then not forget when it's over what happens so that we're ready for the next one.

Ed Comeau: Well, we've been talking with Chief Nate Trauernicht from the UC Davis Fire Department about what they're doing out there in California, but also as incoming president of the Institution of Fire Engineers, getting his perspective on a longterm and a more national perspective. And also the document you mentioned Nate, Responding to a Patient With Signs or Symptoms of a Respiratory Infection, that's now available on the Vision 2020 coronavirus shared resources library, which you can find at [strategicfire.org/coronavirus](http://strategicfire.org/coronavirus). Nate, I really appreciate you taking the time and chatting with us today.

Nate Trauernicht: Thank you Ed and hope everybody stays healthy.

Ed Comeau: You have been listening to a special edition of CRR Radio, focusing on what departments across the country are doing in response to the COVID-19 pandemic. I also want to remind you of the coronavirus shared resources library that contains a wealth of information relating to policies and procedures that you might find helpful. Or if you have something you want to contribute, you can do it all that [strategicfire.org/coronavirus](http://strategicfire.org/coronavirus). CRR Radio is a production of Vision 2020 and it's produced by me, Ed Comeau and edited by Rich Palmer. Be sure to subscribe and follow us on Twitter and Facebook @StrategicFire. Thank you for listening.