

321 COVID - 19

1. This SOG is designed to provide members of the East Hants Fire service information on the COVID -19 virus.

321.1. INTRODUCTION

1. COVID-19 has been declared as a pandemic and has started to spread across Canada and the rate of confirmed cases is expected to increase. Municipal, Provincial and Federal agencies are currently focused on mitigation efforts through good hygiene to slow and decrease transmission. We anticipate COVID-19 exposures will initially grow, level off or decrease during the summer months, and then possibly increase again in the Fall.
2. COVID-19 infection is caused by a specific strain of the Corona Virus species. Other strains of the corona virus are responsible for the common cold every year and only cause minor illness. It is spread like influenza and common cold viruses through aerosolized droplets to another person's eyes, nose, or mouth or surfaces. Distance (staying 2 metres away) and shielding from coughs and sneezes are the keys to protection. Person to person spread is of great concern as people may be shedding virus with only mild flu-like illness. The incubation period is 2-10 days from exposure (average 5 days).
3. The corona virus usually causes mild illness that lasts an average of 5-7 days and most patients require only supportive aid (hydration, fever control, cough suppressants, cough drops). Individuals may communicate the virus 2-3 days prior to onset of fever and may be contagious for an unknown time after the fever has subsided (currently thought to be 72 hours after symptom resolution).
4. Individuals at highest risk for severe disease and death include people aged over 60 years and those with underlying conditions such as hypertension, diabetes, cardiovascular disease, chronic respiratory disease and cancer.

321.2 SIGNS & SYMPTOMS OF COVID-19

1. What should you be watching for? According the World Health Organization: fever (87.9%), dry cough (67.7%), fatigue (38.1%), sputum production (33.4%), shortness of breath (18.6%), sore throat (13.9%), headache (13.6%), myalgia or arthralgia (14.8%), chills (11.4%), nausea or vomiting (5.0%), nasal congestion (4.8%), diarrhea (3.7%), and hemoptysis (0.9%), and conjunctival congestion (0.8%). Again, the hallmark symptoms are fever and dry cough.

321.3 TREATMENT FOR COVID-19

1. For most patients, treatment consists of supportive aid: hydration, aspirin/ ibuprofen for fever, and cough medicine and throat lozenges for comfort. Those with other underlying medical problems may require transportation. Consider the age and other disease states. Elderly are at a greater risk from COVID-19.

321.4 RECOMMENDATIONS

1. The following recommendation plan will hopefully minimize exposure and risk to you, your family and the people we serve.
2. First and foremost, practice good handwashing, avoid touching your face and stay away from large gatherings to protect yourself.
3. Effective immediately until further notice, it is recommended to suspend regular fire department training sessions, non-essential meetings, events, hall rentals, and fundraising events.
4. For daily operations:
 - Firefighters and families who have traveled outside of Canada shall self quarantine for 14 days in accordance with Federal guidance

- Firefighters who are just not feeling well should not respond to calls for 14 days
- All members shall report to the hall for assignment on medical calls, no member shall respond direct
- Departments should limit the number of firefighters responding to alarm systems at nursing homes, special care homes, or places involving the elderly
- Apparatus should be disinfected after every call as well as have firefighters wash and clean personal clothing
- Clean Department lounges and exercise rooms more often
- Disinfect frequently touched areas like doorknobs, handles and countertops, and
- Access to the apparatus bay and operational areas of the fire hall shall be restricted to members and their immediate family members with no visiting groups until further notice.

321.4 EHS

1. The Medical Communications Centre (MCC) will be screening incoming 911 calls using International Academy of Emergency Dispatch (IAED) standards. The screening will consist of specific questions to determine if a patient has a high risk of having the coronavirus.
2. QUESTION 1: In the past 14 days, has the patient travelled outside Canada?
3. QUESTION 2: In the past 14 days, has the patient been in close contact (within 2 metres) with a confirmed case of covid-19?
4. QUESTION 3: In the past 14 days, has the patient been in close contact with a person with a fever OR a new onset (or exacerbation of chronic) cough who has travelled outside of Canada within 14 days prior to their illness?
5. If the patient answers NO to Question 1, 2, AND 3, triage/assess as per normal (this is a negative COVID-19 survey)
6. If the answer is YES to Question 1, 2 OR 3, ask Question 4.
7. QUESTION 4: Does the patient have a fever or symptoms of a fever (over 38 degrees C) OR new onset of (or exacerbation of chronic) cough?
8. If yes, this patient is considered a Person Who Meets Screening Criteria.
9. If a patient is suspected of having the coronavirus, MFRs will not be notified for the call.
10. Through patient surveys, the MCC and 811 Telecare are trying to avoid sending MFRs to a possible COVID-19 patient. Saying that, the screening process is not guaranteed to identify all patients infected by the virus.
11. It is recommended to practice the following on scene of every call:
 - Have only two MFRs assess the patient to minimize possible exposure, the remaining members can assist after the scene is determined to be safe
 - Stop, prior to approaching the patient (minimum 2M) and ask the COVID-19 screening questions to the patient. (1) Recent travel to where severe coronaviruses are known to occur in past 14 days, (2) Close contact to persons associate with COVID-19, and (3) SOB, fever, new onset of, or increased chronic cough
 - If the answer is YES to any of these questions then do not approach the patient, wait for paramedics and tell them you suspect the patient has COVID-19

321.5 TESTING FOR COVID-19

1. The Nova Scotia Health Authority has designated 9 testing sites in our province. No person should go to a testing site until they have called 811 and been evaluated by health professionals.
2. Currently COVID-19 testing is limited to high-risk patients who are Persons under Investigation (PUI).

321.6 INSURANCE

1. VFIS will cover those who have been exposed to the virus and need mandatory quarantine. Please keep in mind that they would have had to be performing an authorized activity of the fire department when exposed.
2. The onus will be on them... obviously to prove this occurred. For example, if a firefighter were to go to an MVA and the patient is known to have the Covid-19 and the firefighter needed to be quarantined, insurance will pay for that time off due to the quarantine.
3. The mandatory quarantine can not be self administered, or self diagnosed, and it would have to come from an official government official per say.
4. VFIS addresses this type of scenario in the actual policy wording:
 - Mandatory Quarantine - means period of isolation intended to limit the spread of an Infectious Disease. The Mandatory Quarantine of an Insured Person must be ordered by appropriate medical officials while acting under the authority of the local, provincial or federal government.
 - Illness(es) – means any disease, sickness, or infection of an Insured Person while coverage under this policy is in force as to the Insured Person.
 - The Illness must:
 - manifest itself during a specific Covered Activity with the result that the Insured Person interrupts their participation in such Covered Activity in order to receive immediate Medical Treatment.
 - directly result from participation in a Covered Activity and also result in the Insured Person receiving Medical Treatment within 48 hours of participation in such Covered Activity.
 - The requirement that Medical Treatment be received within 48 hours is waived for Infectious Diseases.
 - Illness also includes the Mandatory Quarantine of an Insured Person.
 - Off duty coverage is strictly accident only so there is nothing there.,