

# COVID19 Impact Mitigation Guide

## Fire Operations and Training

Prepared by:



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## Document Purpose and Format

This COVID19 impact mitigation guide has been assembled based on input received from:

- FCABC Return to Work Committee including Iridia Medical

The purpose of this document is to provide guidance to fire departments as it relates to the following:

- The resumption of full Fire Department activities in a staged, and responsible manner that aligns with expectations from public health.
- The provision of the services considering necessary COVID19 precautions
- Providing for a safe environment for members

The document is divided into functional sections as follows:

- An outline of the basic COVID19 Impact Mitigation Strategy, and its five component pillars
- An overview of general recommendations for fire departments in keeping with the basic strategy
- Specific fire-related commentary and feedback for infusion into the planning and preparation efforts.

## Disclaimer

While much effort has already been put into COVID19 planning, and more will come in the weeks and months ahead, it is important to note that it is not possible to create a zero-risk environment. More specifically, the risk of COVID19 infection cannot be 100% eliminated.

This notwithstanding, with appropriate measures in place, the risk of this occurring can be very much reduced, and the potential of its spreading, greatly minimized.

Note: The General Recommendations and Site-Specific feedback provided herein are meant to provide guidance, however, decisions related to implementation and enforcement of such measures will be the responsibility of the individual department itself.

# COVID19 Impact Mitigation Strategy – The Five Pillars

The fundamental approach to mitigating the spread of COVID19 is conceptually simple and consists of the following pillars.

## 1. Self Assess for Symptoms and Return When Healthy

The first pillar of the mitigation strategy will be to make efforts to prevent illness from arriving in the hall in the first place. The best approach to this end will be to screen incoming members on the basis of symptom presentation. This will not eliminate asymptomatic people but is key to reducing potential arrival of illness.

For anyone that do have COVID19 like symptoms, it will be important to determine when they are safe to return to the department.

## 2. Physical (Social) Distancing

Make best efforts to maintain a physical distance of at least 2 metres (6 feet) between people at all times. In doing so, it becomes difficult for anyone to become infected by someone else, whether they are symptomatic or asymptomatic.

## 3. Hand Hygiene

By focussing on keeping hands clean, you reduce the possibility of people infecting themselves when their hands come into contact with virus droplets on surfaces, and you also reduce the potential to spread the virus via common use objects (railings, door handles etc.).

Proper hand washing should occur regularly and should entail using soap and washing with warm water for at least 20 seconds.

## 4. Face Touching Avoidance (e.g. touching eyes, mouth, nose, etc.)

Another way to avoid getting infected is to encourage the avoidance of touching your eyes, nose, or mouth with hands. In lieu, suggest the use of one's shoulder, forearm, or a tissue if an itch must be addressed.

## 5. Enhanced Cleaning

Regularly cleaning all high-touch surfaces and common use objects is another key way to curtail the spread.

## The Fire Department as Part of a Broader Ecosystem

The mitigation strategy outlined above is simple by design, but it can be tricky applying it. One of the key challenges is that the workplace is part of the community, a community in which employees move about, perhaps a little less so in recent days.

This being the case, a robust workplace COVID19 plan will necessarily include support, education, and tools for employees to use when they are not in the workplace.

By embedding these directly into your workplace plan, it introduces consistency in all areas of your employees' lives. This is important as COVID19 doesn't distinguish between spreading at home, at work, or in the community, and neither should your approach to minimizing its spread.

The art of applying the strategy comes in finding effective ways to apply it in a way that appreciates the differences between the home, the community, and the workplace. With the focus of this guide being the workplace, guidance for the employees while at home, and in the community, has been included in Appendix A + B.

## The Operational Considerations

As operations resume, things will be different than they were before COVID19 emerged. That said, while we implement appropriate safety considerations, it is helpful to factor in how to replicate the best experience regarding training, fire prevention or other activities.

While we can't replicate the pre-COVID19 reality today, the manner in which we go about implementing elements of the mitigation strategy can certainly influence operations for the better as compared to an approach that focusses purely on the mitigating measures themselves.

As the operations resume, if there are areas of the experience that are notably compromised and/or trigger complaints from your members, ongoing engagement is necessary to see if they can be resolved.

## General Recommendations for Fire Department Operation

It is anticipated that most departments will resume operations in a phased-like approach, and the recommendations that follow may be best introduced in steps, wherein an opportunity to see everyone responds to the measures introduced, and how it can be achieved. If compliance is at a high level during initial stages of resuming operations, additional operations can also resume.

What follows below is a set of recommendations derived directly from the five pillars of the mitigation strategy outline above.

### Preventing Illness (Pillar #1)

- To the extent possible, continue to minimize the number of members onsite.
- Assess Members Prior to Their Arrival at the Hall
  - Educate everyone to prevent all symptomatic individuals from arriving at the department
    - Screen members
      - Recommend a self-screen at home prior to arriving onsite and a repeat with their peer group once onsite (while practicing physical distancing).
        - This approach introduces an element of accountability to the mix.
- Send anyone home if they have COVID19-like symptoms identified on arrival
  - While onsite, if any member develop symptoms, have them leave the hall immediately.
  - For members who are at home, follow up daily to track status and encourage testing
- For confirmed positive test results that come to light following their time at the department, follow a recommended infection control protocol that includes:
  - Gathering case background specifics
  - Delivering appropriate notifications
  - Conducting ongoing monitoring and screening
  - Invoking enhanced cleaning measures for primary work areas (if it was a worker)
  - Conducting case follow up including monitoring and liaison with Public Health
- Establish protocols for allowing department access following member illness
  - Set up protocols in keeping with public health recommendations for returning members following illness.

### Fire Hall Recommendations (Pillars #2-#5)

- Strategically position alcohol-based hand sanitizer dispensers/bottles near entrance doors, meeting rooms, etc. along with signage encouraging its use.
- Give thought to posting of Mitigation strategy and COVID19 efforts alongside posted policies (if applicable).
- To the extent possible, design traffic flow to be unidirectional to minimize close contact of members
- For traffic flows where this isn't possible, erect signage to encourage a "give way" approach.

- For blind corners, a simple convex mirror may be useful to see someone approaching in the opposite direction.
- Whenever possible, keep doors open to eliminate door handles and doors acting as high touch points.
- Consider leaving lights on for operational hours to reduce possibility of them acting as high touch points.
- Create a specific list of high touch points and use it to increase daily cleaning
  - Suggest doing so 3 times daily, ideally engage the staff in the process.
- Equip staff with the ability to sanitize their own personal workspace and encourage them to do so twice daily.
- Identify any movable objects that can act as infection vectors and implement a cleaning procedure for them, and/or eliminate them altogether.
- Position proper hand washing technique posters in all bathrooms.
  - Consider also notices about avoid touching of face.
- Locker Rooms
  - Wipe down bench/change areas
- Bathroom / Showers
  - Increase frequency of cleaning, in particular, sink areas

#### Training Activities (Pillars #2 - #5)

- Appendix A sample

#### Fire Prevention Activities (Pillars #2-#5)

- Appendix B in development

#### Other Activities (Pillars #1 - #5)

- Appendix C to be developed

#### Communicate Your COVID19 Mitigation Measures

The measures put in place as part of the COVID19 response will only function if all stakeholders are aware of them as well as of the expectations placed upon them as part of the strategy.

## APPENDIX A: Recruit Firefighter Training Risk Mitigation

### Planned Activity

- Completion of 2020 firefighter recruitment program

### Identified Risk

- Potential for a recruit firefighter to unknowingly infect a career firefighter with COVID, which could possibly lead to further departmental infections.

### Identified Benefit

- In the event that a significant number of Squamish Firefighters are unavailable due to COVID related challenges, it would be helpful to have additional resources to draw on. The current recruit class of 11 people could supply this needed depth, but only if properly trained. As such, the department is planning on completing a modified version of 2020 recruitment program. This will ensure that each recruit has a provincially recognized level of training before being put into an active role.
- As the District of Squamish has no contiguous jurisdictions to draw mutual aid resources from, this added source of personnel could potentially be essential.

### Plan Development

1. Squamish Fire has developed a risk mitigation plan which is based on input from career staff, administration and students. It is based on the “Five Pillars” that the department’s medical director, Iridia Medical, has suggested for COVID mitigation.
  - I. Self Assess for Symptoms and Return When Healthy
  - II. Physical (Social) Distancing
  - III. Hand Hygiene
  - IV. Face Touching Avoidance (e.g. touching eyes, mouth, nose, etc.)
  - V. Enhanced Cleaning
2. Since this plan has been developed with the input of all involved stakeholders, it will be implemented as written.
3. If opportunities to *improve* the safety of members are presented, it is expected that those opportunities will be pursued but by no means will elements of this plan be omitted without input from all involved stakeholders.

## Risk Mitigation Plan

### 1. Self Assess for Symptoms and Return When Healthy

- **Anyone who is sick will stay home.**
  - This includes anyone who is displaying symptoms (e.g., fever, cough, sore throat, sneezing), whether or not the illness has been confirmed as COVID-19.
- While onsite, if any member develop symptoms they will be sent home immediately.

### 2. Physical (Social) Distancing

- A six foot distance will be maintained between firefighters where possible. In doing so, it becomes difficult for anyone to become infected by someone else, whether they are symptomatic or asymptomatic. When not possible, precautions will be taken (see below).
  - This will be enforced by instructors.
- “Graduate” two firefighters who already have received accreditation as professional firefighters.
- Split the remaining class of 9 into two separate groups. One group to practice on Saturday the other on Sunday.
- No classroom work. All instruction in the field or in the bays.
- No in-class lunch. Firefighters released to take lunch off site.
- When the 6 foot social isolation barrier needs to be breached for operational reasons, firefighters will utilize some level of respiratory protection.
  - SCBA
  - N-95, P100

### 3. Hand Hygiene

- Frequent handwashing will be practiced
- Hand sanitizing stations will be set up in the area where practices is taking place to ensure firefighters can practice hand hygiene throughout the day
- Hand sanitization will occur before an N95 or P100 respirator is donned, before it is doffed and after it is doffed.

### 4. Face Touching Avoidance (e.g. touching eyes, mouth, nose, etc.)

- Another way to avoid getting infected is to encourage the avoidance of touching your eyes, nose, or mouth with hands. In lieu, suggest the use of one’s shoulder, forearm, or a tissue if an itch must be addressed.
  - This will be enforced by instructors.

### 5. Enhanced Cleaning

- Facility decontamination performed at the end of practice
  - In accordance with SFR Hall Cleaning Procedures (Attached)
- Keep doors open to eliminate high touch points

- Firefighters will perform a post-structure fire decon of structural PPE at the end of each practice day
  - Instructors, who require PPE for their shift will not be required to perform this decon.
- Instructors will wear station issued coveralls while training
  - They can be easily doffed and cleaned at the end of the training day

#### 6. Additional Measures

- No sharing of SCBA or Radios during any given practice day
- Recruit firefighter PPE will be stored away from the gear of Company 41 firefighters

#### 7. Communications

- Each day's lesson will begin with a safety briefing, which will include an overview of COVID precautions to be taken during the session.
- Each day's lesson will conclude with a safety "wrap up" where all firefighters and instructors will have the opportunity to suggest improvements to this plan

#### 8. Continual Improvement

- This plan will be reviewed each week to ensure that lessons learned from the previous weekend's practices can be incorporated. Updated plans will be shared with both shifts.