

# Denver Fire Department

## Incident Action Plan



<b>Incident Name</b>	<b>COVID-19 - DFD</b>
<b>Incident Type</b>	<b>Pandemic</b>
<b>Incident Location</b>	<b>Denver</b>
<b>Incident Commander</b>	<b>Deputy Chief Desmond Fulton</b>
<b>Deputy Incident Commander</b>	<b>Division Chief Ryan Nuanes</b>
<b>Operational Period Begin</b>	<b>March 19, 2020 0700 MST</b>
<b>Operational Period End</b>	<b>March 20, 2020 0700 MST</b>
<b>Operations Period Number</b>	<b>6</b>
<b>Conference Call #</b>	<b>720.547.5316</b>

# INCIDENT OBJECTIVES (ICS 202)

<b>1. Incident Name:</b> COVID - 19 DFD	<b>2. Operational Period:</b> Date From: 3/19/20 Time From: 0700	Date To: 3/120/20 Time To: 0700
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### 3. Objective(s):

1. Provide for protection from current and future risks of exposure to all Department uniform and non-uniform personnel.
2. Provide the most current treatment and isolation/quarantine procedures for potentially exposed uniform and non-uniform personnel.
3. Review, revise and strengthen Level 1, 2 and 3 Contingency Plans for maintaining Department Mission Essential Functions.
4. Maintain communication with City and County leadership for current situation status, objectives, and direction.
5. Ensure timely internal distribution of accurate information and direction to all Department uniform and non-uniform personnel.

### Objective 1: Key Messaging For Thursday, March 19, 2020

#### 1. Review critical procedural changes made to the ICS-208 Safety Plan.

2. Remember that nebulizing patients with flu-like symptoms should be limited to those with severe respiratory distress. Please make every attempt to protect yourself by providing this level of care for those truly in need.
3. Effective immediately any and all activities outside the firehouses are to be stopped with the exception of the following:
  - o Dispatched calls
  - o Official Department business
  - o Approved Department training
  - o Grocery shopping for firehouse meals adhering to the following:
    1. Rigs will continue to go
    2. Only 1 member will depart the rig to do the shopping
    3. All other members will remain with the rig.

### 4. Operational Period Command Emphasis:

1. Ensure critical PPE is distributed to all firehouses and standards for use are communicated.
2. Ensure timely distribution of the IAP and guidance documents to all uniform and non-uniform personnel daily.
3. Maintain established daily meeting schedule and transfer of information.
4. Evaluate the potential and logistics for providing isolation/quarantine facilities for exposed members with at-risk family members at home.
5. Refer all external requests to PIO Captain Pixley for coordinated messaging with the CCD leadership.
6. Make resources available to the membership for individual and family support as well as emotional wellness.

**7. Prepared by:** Name: J. Krugman \_\_\_\_\_ Position/Title: PSC \_\_\_\_\_ Signature: 

**8. Approved by Incident Commander:** Name: Desmond Fulton Signature: DGF (Verbal)

ICS 202

IAP Page 1

Date/Time: \_\_\_\_\_

## Objective 1 Key Messaging As of Wednesday, March 18, 2020

March 17, 2020

**Effective Immediately: On all medical calls that require a 6-foot distance breach, only one member will approach the patient with mandatory respiratory PPE of N-95, P-100, or SCBA on air.**

**EXCEPTION: If patient requires life-saving interventions, all members within the 6-foot breach are required to wear the above noted PPE as a minimum.**

**Dispatch will no longer be identifying Code19C calls. Dispatch will now only be asking the following questions in ProQA:**

- **Has the caller had a cough or fever in the last week (7 days)?**
  - **/SYMY, translates to >>>>>SYMPTOMS – YES: followed by cough or fever or both**
  - **/SYMN, translates to >>>>>SYMPTOMS - NO**

March 17, 2020

- A. All Fire Prevention inspections with the following exceptions are suspended indefinitely:
  - a. DEN inspections
  - b. Life Safety.
  - c. TCO/CO and Acceptance Testing
- B. Special Detail Program suspended
- C. Fire watch by uniformed FP personnel is suspended. Businesses will utilize Licensed and Insured personnel or on-site personnel
- D. Training Class 2020-1 will be on-line delivery only until March 30, 2020
- E. Training Class 2020-2 will be on a split schedule, with one morning and one afternoon class until further notice.

March 16, 2020

- A. No outside visitors including friends and family members are permitted in any firehouse or DFD facility or on or in any apparatus until further notice.
- B. Firehouse personnel will avoid all external public interaction to minimize the potential for exposure.

March 13-16, 2020

- A. Per City guidance, the Denver Fire Department is canceling community outreach to include fire trucks at community events, fire station tours, fire safety talks, safety trailers, and department ride-alongs until further notice.
- B. Effective immediately, all DFD Career Service personnel will be working within a modified schedule at the discretion of their Division through 3/27/2020. We will work to assure there are no work interruptions as the Department progresses through the event. All employees will retain access to e-mail and phone for communication.

## ORGANIZATION ASSIGNMENT LIST (ICS 203)

<b>1. Incident Name:</b> COVID-19 DFD		<b>2. Operational Period:</b> Date From: 3/19/20 Time From: 0700		Date To: 3/20/20 Time To: 0700	
<b>3. Incident Commander(s) and Command Staff:</b>			<b>7. Operations Section:</b>		
IC/UCs	Fulton, Desmond	Chief	Murphy, Robert		
		Deputy			
Deputy	Nuanes, Ryan				
Safety/Medical	Buccieri, Scott/Miccio, Melissa	<b>Branch</b>	<b>Operations</b>		
Public Info. Officer	Pixley, Greg	Branch Director	Shift Commanders	Land Side	
Liaison Officer	Lara, Adriana	Deputy			
<b>4. Agency/Organization Representatives:</b>			Division/Group	Ryan Nuanes	Cadets
Agency/Organization	Name	Division/Group			
		Division/Group			
		Division/Group			
		Division/Group			
		<b>Branch</b>	<b>DEN</b>		
		Branch Director	Bray, Russ	Air Side	
		Deputy			
<b>5. Planning Section:</b>			Division/Group		
Chief	Krugman, Jim/Almaguer, Manny	Division/Group			
Deputy		Division/Group			
Resources Unit		Division/Group			
Situation Unit		Division/Group			
Documentation Unit	Adams, Marissa	<b>Branch</b>	<b>EOC</b>		
Demobilization Unit		Fire Branch	Buccieri, Scott		
Technical Specialists		Fire Branch	Linville, Jeff		
		Fire Branch	Mitchell, Warren		
		Division/Group			
		Division/Group			
<b>6. Logistics Section:</b>			Division/Group		
Chief	Vigil, Jeremy	Division/Group			
Deputy		<b>Branch</b>	<b>Human Resources</b>		
<b>Support Branch</b>		Career Service	Eberhard, David		
Director					
Supply Unit					
Facilities Unit					
Ground Support Unit					
<b>Service Branch</b>		<b>8. Finance/Administration Section:</b>			
Director		Chief	Moeder, Wendi		
Communications Unit		Deputy	Cummings, Chanee		
Medical Unit		Time Unit			
Food Unit		Procurement Unit			
		Comp/Claims Unit			
		Cost Unit			
<b>9. Prepared by:</b> Name: J. Krugman _____ Position/Title: PSC _____ Signature:					
ICS 203	IAP Page <u>  2  </u>	Date/Time: _____			

## ASSIGNMENT LIST (ICS 204)

<b>1. Incident Name:</b> COVID-19 DFD		<b>2. Operational Period:</b> Date From: 3/19/20      Date To: 3/20/20 Time From: 0700          Time To: 0700		<b>3.</b> Branch: Land Side										
<b>4. Operations Personnel: Name</b> <b>Contact Number(s)</b> Operations Section Chief: <b>Murphy, Robert</b> <b>303.884.6549</b>  Branch Director: <b>Shift Commanders</b>  Division/Group Supervisor: _____		<b>Division:</b>  <b>Group:</b>  <b>Staging Area:</b>												
<b>5. Resources Assigned:</b>				Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information										
Resource Identifier	Leader	# of Persons	Contact (e.g., phone, pager, radio frequency, etc.)											
Haberkorn, C.J.			303.709.1218											
Kmak, Bob			303.709.1218											
Morelli, Troy			303.709.1218											
Cadets	Ryan Nuanes		720.324.9468											
<b>6. Work Assignments:</b> <ul style="list-style-type: none"> <li>• Monitor day-to- day primary functions of the Operations Division</li> <li>• Assure critical PPE and procedures for potential COVID-19 patients is distributed and followed</li> <li>• Begin assessment of Contingency Plan activation trigger points as it relates to station closures.</li> <li>• Assign Cadets as needed to support the Operations Division and EOC.</li> </ul>														
<b>7. Special Instructions:</b> <p style="margin-left: 40px;">Effective immediately any and all activities outside the firehouses are to be <u>stopped</u> with the exception of the following:</p> <ul style="list-style-type: none"> <li>○ Dispatched calls</li> <li>○ Official <u>Department</u> business</li> <li>○ Approved Department training</li> <li>○ Grocery shopping for firehouse meals adhering to the following:                             <ol style="list-style-type: none"> <li>1. Rigs will continue to go</li> <li>2. Only 1 member will depart the rig to do the shopping</li> <li>3. All other members will remain with the rig.</li> </ol> </li> </ul>														
<b>8. Communications (radio and/or phone contact numbers needed for this assignment):</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%; border-bottom: 1px solid black;">Name/Function</td> <td style="width: 65%; border-bottom: 1px solid black;">Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</td> </tr> <tr> <td style="border-bottom: 1px solid black;">/</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">/</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">/</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">/</td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>					Name/Function	Primary Contact: indicate cell, pager, or radio (frequency/system/channel)	/		/		/		/	
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<b>9. Prepared by:</b> Name: J Krugman      Position/Title: PSC      Signature:														
ICS 204	IAP Page <u>  3  </u>	Date/Time: _____												



## ASSIGNMENT LIST (ICS 204)

<b>1. Incident Name:</b> COVID-19 DFD		<b>2. Operational Period:</b> Date From: 3/19/20      Date To: 3/20/20 Time From: 0700      Time To: 0700		<b>3.</b> Branch: EOC Fire
<b>4. Operations Personnel: Name</b>		<b>Contact Number(s)</b>		<b>Division:</b>
Operations Section Chief: <b>Murphy, Robert</b>		<b>303.884.6549</b>		<b>Group:</b>
Branch Director:				<b>Staging Area:</b>
Division/Group Supervisor:				
<b>5. Resources Assigned:</b>				<b>Reporting Location, Special Equipment and Supplies, Remarks, Notes, Information</b>
<b>Resource Identifier</b>	<b>Leader</b>	<b># of Persons</b>	<b>Contact (e.g., phone, pager, radio frequency, etc.)</b>	
Linville, Jeff			303.667.3232	EOC
Buccieri, Scott			720.232.0187	EOC
Mitchell, Warren			720.220.4436	EOC
<b>6. Work Assignments:</b>				
<b>Schedule:</b>				
<ul style="list-style-type: none"> <li>• Monday – Thursday: Jeff Linville</li> <li>• Friday: Scott Buccieri</li> <li>• Swing: Warren Mitchell</li> </ul>				
Serve as conduit between the EOC and Command and General Staff on issues related to purchasing, finance, 911, and resource mobilization if needed.				
<b>7. Special Instructions:</b>				
<b>8. Communications (radio and/or phone contact numbers needed for this assignment):</b>				
<b>Name/Function</b>		<b>Primary Contact: indicate cell, pager, or radio (frequency/system/channel)</b>		
/				
/				
/				
/				
<b>9. Prepared by: Name: J. Krugman</b> <b>Position/Title: PSC</b> <b>Signature:</b>				
<b>ICS 204</b>	<b>IAP Page</b> <u>  5  </u>	<b>Date/Time:</b> _____		

## ASSIGNMENT LIST (ICS 204)

<b>1. Incident Name:</b> COVID-19 DFD		<b>2. Operational Period:</b> Date From: 3/19/20      Date To: 3/20/20 Time From: 0700      Time To: 0700		<b>3.</b> <b>Branch:</b> Human Resources
<b>4. Operations Personnel:</b> <u>Name</u>		<u>Contact Number(s)</u>		<b>Division:</b>  <b>Group:</b>  <b>Staging Area:</b>
Operations Section Chief: <b>Murphy, Robert</b>		<b>303.884.6549</b>		
Branch Director: <b>David Eberhard</b>		<b>720.607.5878 (c)</b>  <b>720.913.3408 (w)</b>		
<b>5. Resources Assigned:</b>			<b># of Persons</b>	<b>Contact (e.g., phone, pager, radio frequency, etc.)</b>
<b>Resource Identifier</b>	<b>Leader</b>			
<b>6. Work Assignments:</b>				
<ul style="list-style-type: none"> <li>• Serve as the conduit for the Career Service employees to the C&amp;GS on issues related to modified work schedules, work-at-home, technology needs, pay, and other HR related topics.</li> </ul>				
<b>7. Special Instructions: Technology Bulletins concerning work from home:</b>				
<ul style="list-style-type: none"> <li>• <b>DFD Modified work schedules will be extended through 4/3/2020, Plan to start phasing back to a normal work schedule effective 4/6/2020. Please keep in communication with your chain of command for any questions</b></li> <li>• <b>MALWARE AWARENESS: Please use credible sources when searching for information concerning COVID-19 such as: CDC, Colorado Department of Public Health and Environment (CDPHE), Denver department of Public Health and Environment (DDPHE). Scammers are putting out false sites and information that is compromising city systems!</b></li> </ul> <p style="text-align: center; color: red; font-weight: bold; margin-top: 10px;">Please contact Division Chief Vigil regarding access to desk top computers for performing official work at home.</p> <p><b>During this time of work from home the following should be adhered to:</b></p> <ol style="list-style-type: none"> <li>1. Employees must read and respond to emails as they would if they were in the office.</li> <li>2. Employees are still expected to attend scheduled meetings, whether via phone or Skype</li> <li>3. Daily update to immediate supervisor of completed tasks, issues and barriers to task completion provided via email</li> <li>4. Any deviation from normal work schedule should be pre-approved by immediate supervisor</li> <li>5. Any time unavailable to perform work duties during normal business hours should be documented as PTO/VAC just as if you were missing time in the office</li> </ol>				
<b>9. Prepared by:</b> Name: J.Krugman _____ Position/Title: PSC _____ Signature:				
ICS 204	IAP Page <u>  6  </u>	Date/Time: _____		



## MEDICAL PLAN (ICS 206)

<b>1. Incident Name:</b> COVID -19 DFD	<b>2. Operational Period:</b> Date From: 03/19/2020 Date To: 03/20/2020 Time From: 0700 Time To: 0700
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3. Medical Aid Stations:			
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Transportation (indicate air or ground):			
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service
Denver Health Paramedics	777 Bannock St Denver	(303) 602-2566	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
Northglenn Ambulance	5650 Holly St Commerce City	(303) 451-6882	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
Action Care Ambulance	14854 E Hinsdale Ave Centennial	(720) 870-4700	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS
South Metro Fire/Rescue	9195 E Mineral Ave Centennial	(720) 989-2000	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> BLS

5. Hospitals:							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
Denver Health	777 Bannock St Denver	(303) 602-2566			<input checked="" type="checkbox"/> Yes Level: <u>1</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Swedish	601 E Hampden Ave Englewood	(303) 788-5000			<input checked="" type="checkbox"/> Yes Level: <u>1</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Saint Josephs	1375 E 19th Ave Denver	(303) 812-2000			<input checked="" type="checkbox"/> Yes Level: <u>4</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
UC Health	12605 E 16th Ave Denver	(720) 848-0000			<input checked="" type="checkbox"/> Yes Level: <u>1</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Childrens Hospital	13123 E 16th Ave Denver	(720) 777-1234			<input checked="" type="checkbox"/> Yes Level: <u>1</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>6. Special Medical Emergency Procedures:</b>
Denver Department of Public Health and Environment (DDPHE) 720-913-1311
Please see COVID-19 Non-Transport Protocol in Addendum.
<input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

<b>7. Prepared by (Medical Unit Leader):</b> Name: <u>Melissa Miccio</u>	Signature:
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<b>8. Approved by (Safety Officer):</b> Name: _____	Signature: _____
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ICS 206	IAP Page <u>7</u>	Date/Time: _____
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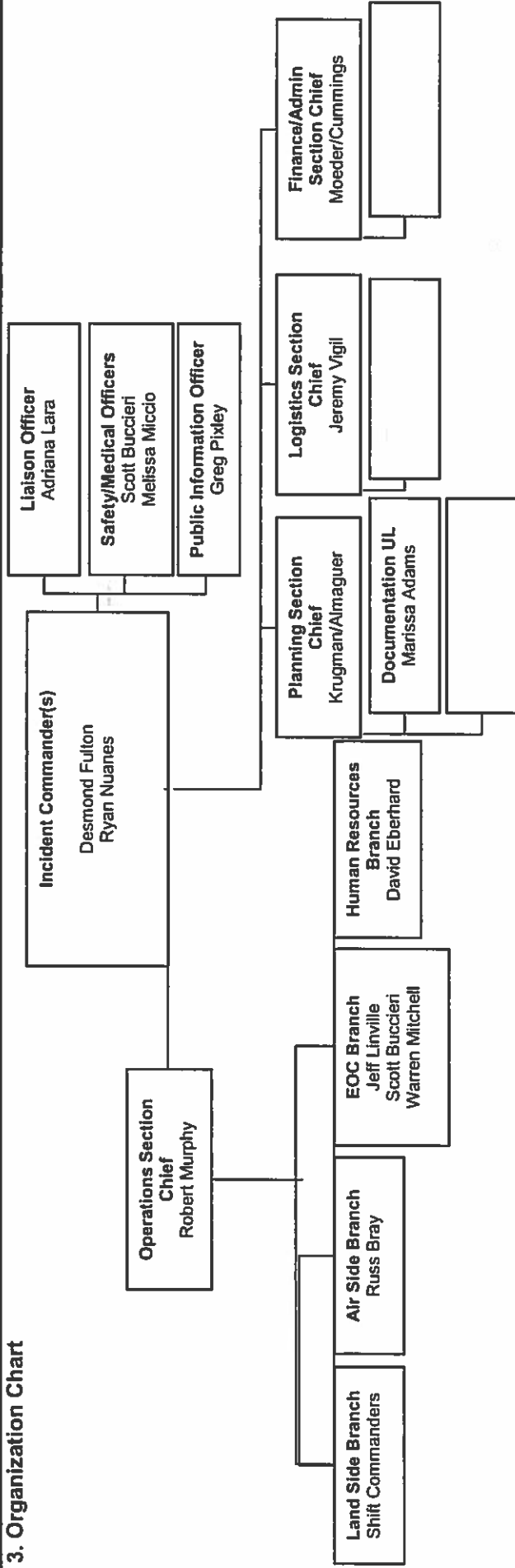
# INCIDENT ORGANIZATION CHART (ICS 207)

1. Incident Name: COVID-19 DFD


2. Operational Period: Date From: 3/19/2020  
Time From: 0700

Date To: 3/20/2020  
Time To: 0700

## 3. Organization Chart

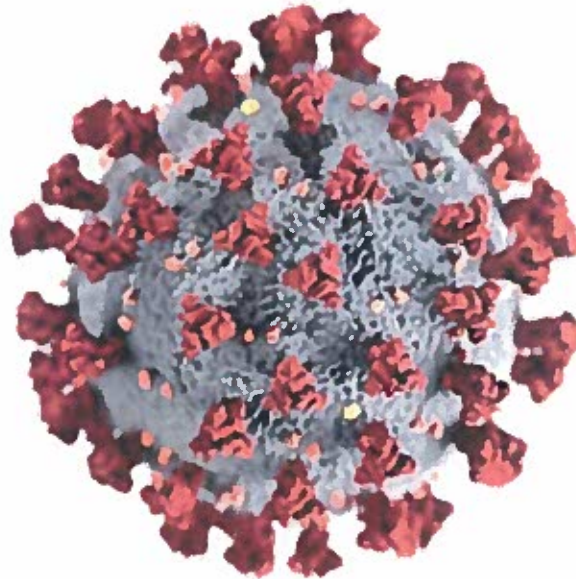


## SAFETY MESSAGE/PLAN (ICS 208)

<b>1. Incident Name:</b> COVID-19 DFD	<b>2. Operational Period:</b> Date From: 3/19/20 Time From: 0700	Date To: 3/20/20 Time To: 0700
<b>3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:</b>		
<ul style="list-style-type: none"><li>• <b>Dispatch will no longer be utilizing CODE19C.</b> Dispatch will now only be asking the following question in ProQA: <b>Has the caller had a cough or fever in the last week (7 days)?</b> /SYMY = SYMPTOMS – YES; <i>followed by cough or fever or both</i> /SYMN = SYMPTOMS - NO</li> <li>• Be extremely vigilant if a patient presents with signs of lower respiratory infections such as fever, cough, shortness of breath and breathing difficulties. <b>Do not solely rely on dispatch information; treat patients as potentially exposed until the following sample questions have been asked:</b><ul style="list-style-type: none"><li>○ Have you traveled recently?</li><li>○ Do you have respiratory issues?</li><li>○ Do you have a fever?</li></ul></li> <li>• If Denver Fire and Denver Health ALS arrives on scene together, Denver Health Paramedics will first go in to evaluate the patient and need for transport. If Denver Fire arrives first, <b>one member in full PPE at a distance</b> shall make patient contact to determine if there is any immediate life threats that need to be addressed. If no life threats interventions are needed, remain at a distance and wait for ALS.</li> <li>• Take the time to don the appropriate medical PPE which includes N-95, P-100 half masks, SCBAs, gowns, gloves, and eye protection. <b>The N-95 cannot be decontaminated. However both the N-95 and surgical masks can be re-used as needed for an entire shift if the mask can be doffed with clean hands and stored in a clean space such as a clean, dry plastic bag.</b></li> <li>• <b>Do not reuse N95 if they have been contaminated by a patient or the mask has degraded or broken down.</b> <b>Contaminated</b> is defined as a patient that coughed on person or an aerosolized procedure was done on scene. <b>Degraded or broken down</b> is defined as the mask is physically broken or torn, etc. Degraded Masks should be disposed of in the ambulance bio-hazard container if possible or placed in a department bio-hazard bag for disposal.</li> <li>• <b>Do not</b> bring the ESO tablets into contact with a potential patient. Unless medical interventions are needed, leave all medical bags and oxygen at the door.</li> <li>• Minimize the number of DFD members treating the patient (1 instead of 4) and maintain at least 6 feet of distance from the patient. Either hand or toss a surgical mask to the patient to minimize exposure.</li> <li>• <b>Remember</b> that nebulizing patients with flu-like symptoms should be limited to those with severe respiratory distress. Please make every attempt to protect yourself by providing this level of care for those truly in need.</li> <li>• For suspected COVID-19 patients, <b>do not</b> place them on a non-rebreather mask <b>unless</b> the patient is presenting hypoxic. If a non-rebreather is used, place a surgical mask over the non-rebreather.</li> <li>• Consider contacting the patient via a cell phone from the rig. This provides an additional opportunity to limit exposure while asking questions.</li></ul>		
<b>4. Prepared by:</b> Name: J. Krugman _____ Position/Title: PSC _____ Signature: 		
ICS 208	IAP Page <u>  9  </u>	Date/Time: _____

# Denver Fire Department

## *Communications Plan Addendum to IAP*



<b>Incident Name</b>	<b>COVID-19-DFD</b>
<b>Incident Type</b>	<b>Pandemic</b>
<b>Incident Location</b>	<b>Denver</b>
<b>Incident Commander</b>	<b>Deputy Chief Desmond Fulton</b>
<b>Deputy Incident Commander</b>	<b>Division Chief Ryan Nuanes</b>
<b>Operational Period Begin</b>	<b>March 18<sup>th</sup>, 2020 0700 MST</b>
<b>Operational Period End</b>	<b>March 19<sup>th</sup>, 2020 0700 MST</b>
<b>Operations Period Number</b>	<b>6</b>

**DFD IAP**  
**Addendum Documents**  
(For March 18, 2020)

1. **Denver Fire Department Personnel Guidance – COVID 19 Response (Updated 3/18/20)**
2. **COVID-19 Non-Transport Protocol (New 3/16/2020)**
3. **COVID-19 Symptoms Decision Tree**
4. **CCD Risk Assessment and Public Health Decision Making Tree**
5. **DFD Behavioral Health Resources (New 3/17/2020)**

## **Denver Fire Department Personnel Guidance Response to Potential Cases of Coronavirus Disease 2019 (COVID-19 – DFD (updated 3/19/2020))**

**Coronavirus disease 2019 (COVID-19)** is a respiratory illness that can spread from person to person. Patients with COVID-19 have had mild to severe respiratory illness. The virus is thought to spread mainly from person-to-person via respiratory droplets among close contacts. Respiratory droplets are produced when an infected person coughs or sneezes and can land in the mouths or noses, or possibly be inhaled into the lungs, of people who are nearby.

For personnel performing **daily routine activities**, the immediate health risk is considered low.

**If you encounter an individual who you suspect to have COVID-19 or who self-identifies as having COVID-19, you should first:**

- **Try to maintain a distance of at least 6 feet, if possible.**
- Have them treated and transported by Emergency Medical Service/ambulance to a healthcare facility, if possible.

**If you must come into close contact with a suspected COVID-19 case, you MUST wear personal protective equipment (PPE).**

- Close contact is defined as being within approximately 6 feet, or Having direct contact with body fluids (e.g., blood, phlegm, or respiratory droplets)

**Minimum recommended PPE is:**

- A single pair of disposable nitrile gloves,
- Disposable isolation gown or single-use/disposable coveralls<sup>1</sup>,
- Any NIOSH-approved particulate respirator which includes N-95 P-100s, or SCBAs.
- Eye protection (*i.e.*, goggles or disposable face shield that fully covers the front and sides of the face)<sup>2</sup>.

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<sup>1</sup> If unable to wear a disposable gown or coveralls, ensure all gear is cleaned/disinfected after contact with individual.

<sup>2</sup> CDC recommends goggles or a face shield. If they are unavailable or interfere with vision, safety glasses with side shields will provide some protection.

# Denver Fire Department Personnel Guidance

## Response to Potential Cases of Coronavirus Disease 2019

### (COVID-19 – DFD (updated 3/19/2020))

#### After close contact:

#### DECON Procedures for Possible COVID-19 Exposures at the conclusion of a call:

- Prior to getting back on the rig doff mask, safety glasses, gown, and respirator (N95, P100, or SCBA) with gloves on.
- Take the time to donn the appropriate medical PPE which includes N-95, P-100 half masks, SCBAs, gowns, gloves, and eye protection.
- **The N-95 cannot be decontaminated. However both the N-95 and surgical masks can be re-used as needed for an entire shift if the mask can be doffed with clean hands and stored in a clean space such as a clean, dry plastic bag.**
- **Do not reuse N95 if they have been contaminated by a patient or the mask has degraded or broken down.** **Contaminated** is defined as a patient that coughed on person or an aerosolized procedure was done on scene. **Degraded or broken down** is defined as the mask is physically broken or torn, etc. Degraded masks should be disposed of in the ambulance bio-hazard container if possible or placed in a department bio-hazard bag for disposal.
- Safety glasses should be cleaned with disinfecting wipes (purple containers)
- Wash hands as soon as possible.
- Wash your face if you touched it with your hands
- If involved in an obvious transmission:
  - Avoid shaking clothes
  - Wash your clothes in hot water and dry with heat
  - Take a shower

#### Apparatus/Equipment

- Wear gloves while performing de-contamination duties.
- Washdown surfaces with Oxyverse 16 located in firehouse dispensers.
- Another option is to use a bleach solution
  1. 20:1 ratio of water to bleach,  $\frac{3}{4}$  cup to one gallon.
  2. Bleach solution has a shelf life of 24 hours.

#### Departing the Firehouse Recommendations

- Take a shower before departing the firehouse or going home.
- Wash and leave uniforms at the firehouse if applicable.
- Wear civilian clothing for travel to and from home

Contact the Department Quartermaster for the replacement of all sanitizing supplies.

## COVID-19 NON-TRANSPORT PROTOCOL

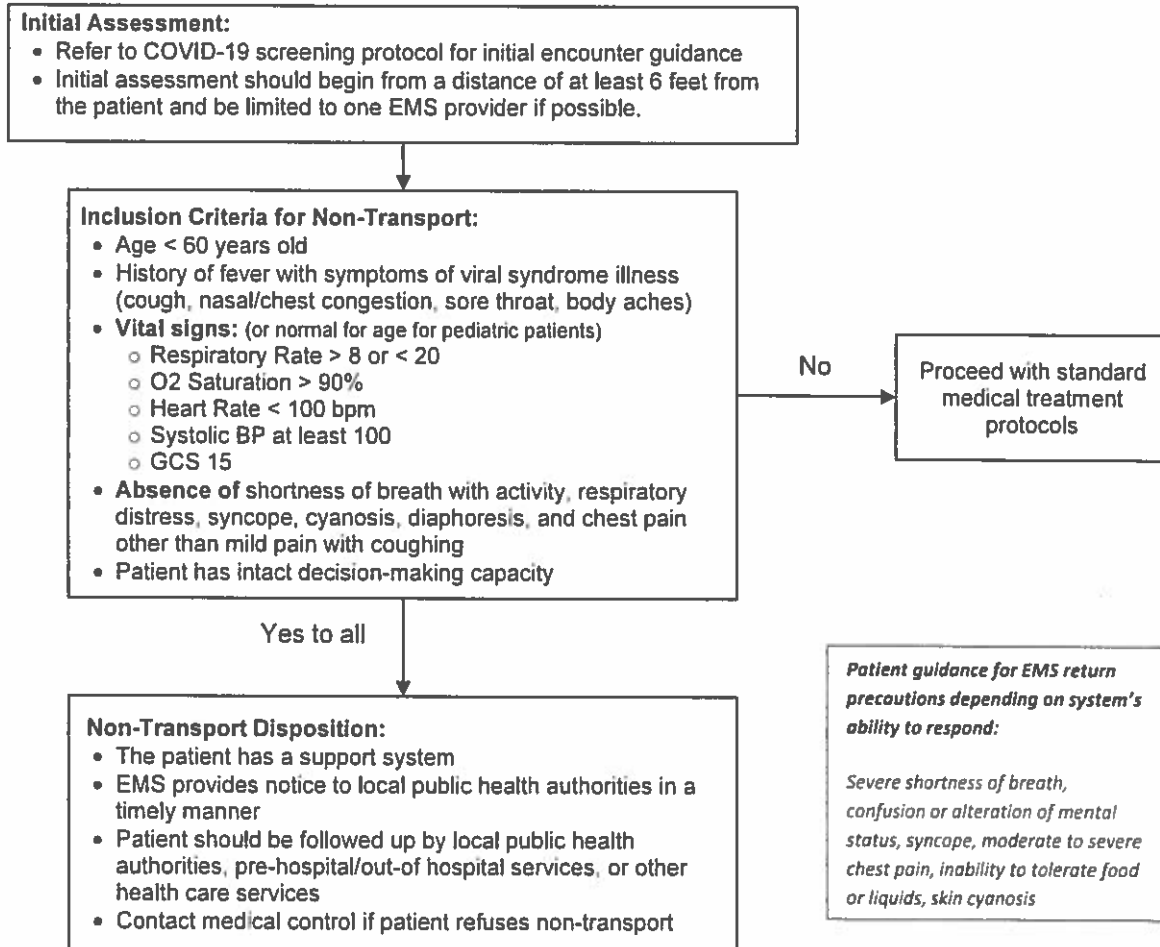
### Purpose

- A. Identify patients that are safe to not transport to a hospital during widespread cases of confirmed COVID-19 patients in order to accomplish the following:
- Minimize disease transmission to the community
  - Protect first responders and healthcare personnel
  - Preserve healthcare system functioning when the system is overwhelmed.

### Indications for Non-Transport

- A. EMS agency Medical Direction has decided to enact non-transport guidelines based on local indications that the healthcare system infrastructure is overwhelmed. This may include, but is not limited to, one of the following circumstances:
- Hospitals are exceeding maximum census
  - Hospitals and facilities are experiencing significant overcrowding
  - Hospitals and first response agencies have enacted surge plans
  - Healthcare providers are unable to obtain required personal protective equipment (PPE) to prevent transmission of disease.

### Assessment Algorithm for Non-Transport





## Decision Tree for symptoms

### **CORONAVIRUS**

- Fever
  - Cough
  - Shortness of Breath, or difficulty breathing
  - Symptoms appear 2-14 days after exposure
- 

### **FLU**

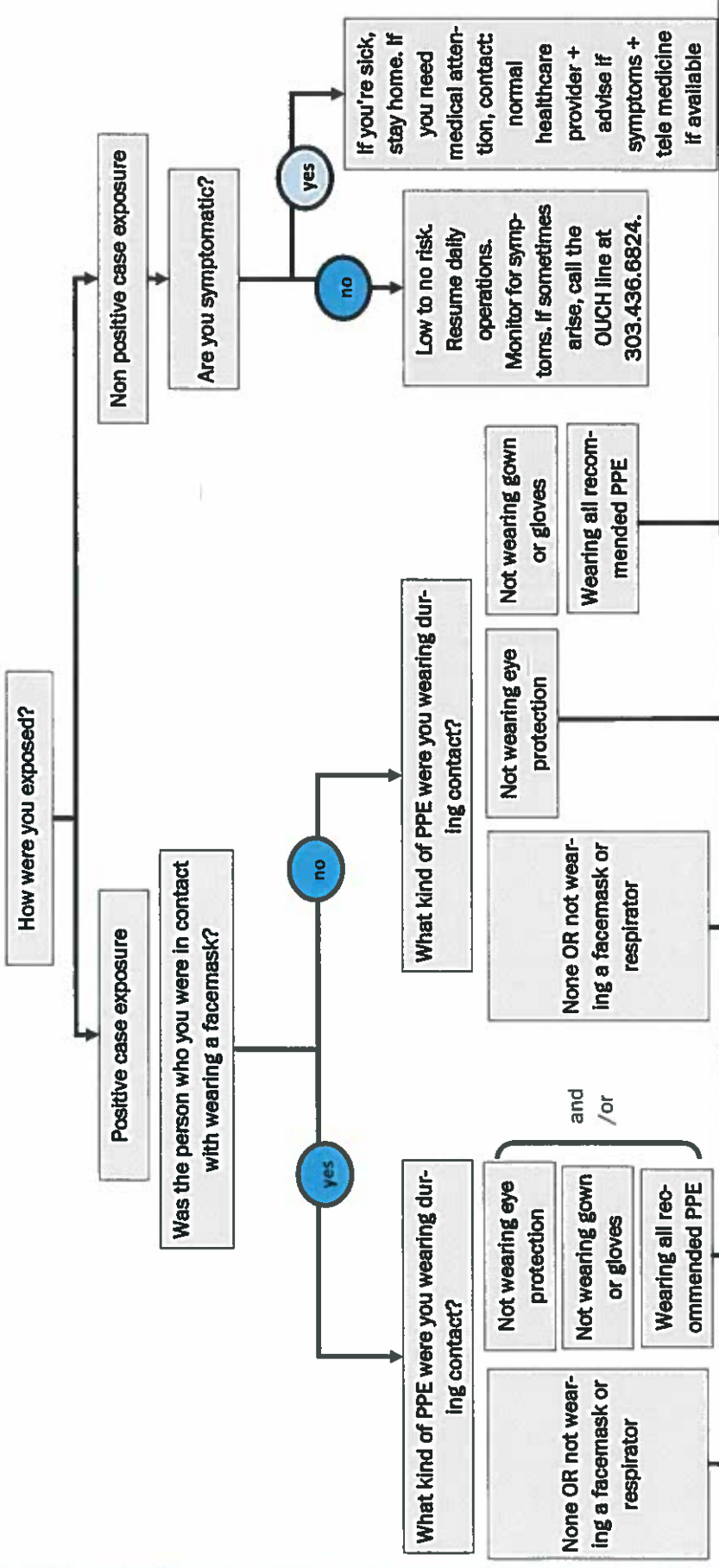
- Fever
  - Cough
  - Muscle aches
  - Fatigue & weakness
  - Chills & sweats
  - Congestion
  - Sore throat
- 

### **ALLERGIES**

- Sneezing
- Itchy nose, eyes or roof of the mouth
- Runny, stuffy nose
- Watery, red or swollen eyes

# Coronavirus Disease 2019 (COVID-19) Risk Assessment and Public Health Management Decision Making

**You are a HEALTH CARE PROVIDER or FIRST RESPONDER**



Recommended monitoring for COVID-19 (until 14 days after last potential exposure)	Work restrictions for asymptomatic individual	Exposure category
Active monitoring	Exclude from work for 14 days after exposure	medium
Self monitoring with delegated supervision	none	low
Active monitoring	Exclude from work for 14 days after exposure	high
Active monitoring	Exclude from work for 14 days after exposure	medium
Self monitoring with delegated supervision	none	low

# Coronavirus Disease 2019 (COVID-19) Risk Assessment and Public Health Management Definitions

\*definitions taken from CCD

**Self-monitoring:** individual should monitor themselves for fever by taking their temperature twice a day and remain alert for respiratory symptoms (e.g., cough, shortness of breath, sore throat)-. Anyone on self-monitoring should be provided a plan for whom to contact if they develop fever or respiratory symptoms during the self-monitoring period to determine whether medical evaluation is needed.

**Active monitoring** means that the state or local public health authority assumes responsibility for establishing regular communication with potentially exposed people to assess for the presence of fever or respiratory symptoms (e.g., cough, shortness of breath, sore throat)-. For HCP with *high-* or *medium-risk* exposures, CDC recommends this communication occurs at least once each day. The mode of communication can be determined by the state or local public health authority and may include telephone calls or any electronic or internet-based means of communication.

**Self-Monitoring with delegated supervision** in a healthcare setting means HCP perform self-monitoring with oversight by their healthcare facility's occupational health or infection control program in coordination with the health department of jurisdiction, if both the health department and the facility are in agreement. On days HCP are scheduled to work, healthcare facilities could consider measuring temperature and assessing symptoms prior to starting work. Alternatively, a facility may consider having HCP report temperature and absence of symptoms to occupational health prior to starting work. Modes of communication may include telephone calls or any electronic or internet-based means of communication.

**Close contact** for healthcare exposures is defined as follows: a) being within approximately 6 feet (2 meters), of a person with COVID-19 for a prolonged period of time (such as caring for or visiting the patient; or sitting within 6 feet of the patient in a healthcare waiting area or room); or b) having unprotected direct contact with infectious secretions or excretions of the patient (e.g., being coughed on, touching used tissues with a bare hand).

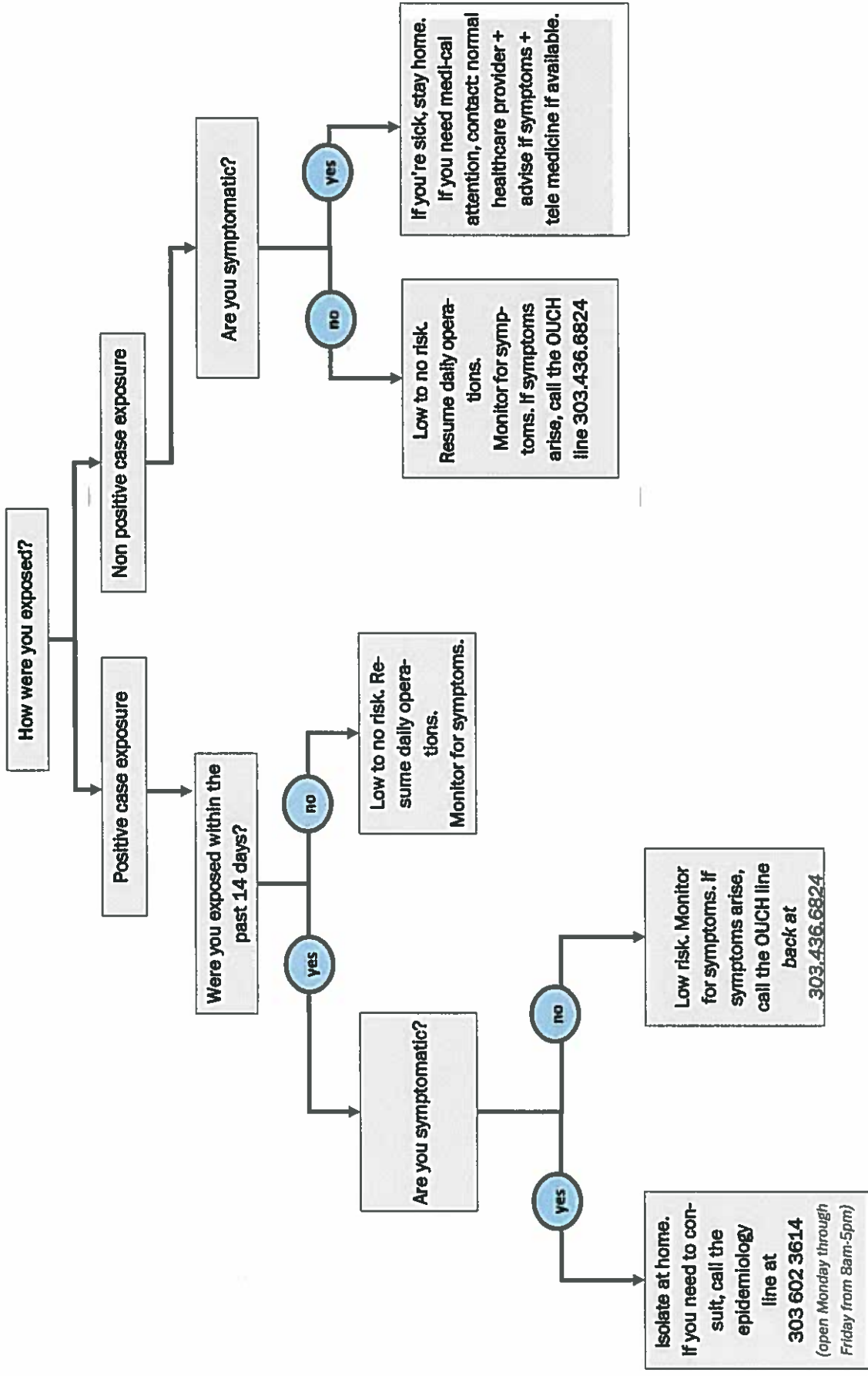
Data are limited for definitions of close contact. Factors for consideration include the duration of exposure (e.g., longer exposure time likely increases exposure risk), clinical symptoms of the patient (e.g., coughing likely increases exposure risk) and whether the patient was wearing a facemask (which can efficiently block respiratory secretions from contaminating others and the environment), PPE used by personnel, and whether aerosol-generating procedures were performed.

**High-risk** exposures refer to individuals who have had prolonged close contact with patients with COVID-19 who were not wearing a facemask while HCP nose and mouth were exposed to material potentially infectious with the virus causing COVID-19. Being present in the room for procedures that generate aerosols or during which respiratory secretions are likely to be poorly controlled (e.g., cardiopulmonary resuscitation, intubation, extubation, bronchoscopy, nebulizer therapy, sputum induction) on patients with COVID-19 when the healthcare providers' eyes, nose, or mouth were not protected, is also considered *high-risk*.

**Medium-risk** exposures generally include HCP who had prolonged close contact with patients with COVID-19 who were wearing a facemask while HCP nose and mouth were exposed to material potentially infectious with the virus causing COVID-19. Some *low-risk* exposures are considered *medium-risk* depending on the type of care activity performed. For example, HCP who were wearing a gown, gloves, eye protection and a facemask (instead of a respirator) during an aerosol-generating procedure would be considered to have a *medium-risk* exposure. If an aerosol-generating procedure had not been performed, they would have been considered *low-risk*. See [Table 1](#) for additional examples.

**Low-risk** exposures generally refer to brief interactions with patients with COVID-19 or prolonged close contact with patients who were wearing a facemask for source control while HCP were wearing a facemask or respirator. Use of eye protection, in addition to a facemask or respirator would further lower the risk of exposure.

You are a CCD employee  
NOT a first responder or health care worker







## Wellness Resources



**DENVER CITY EMPLOYEE ASSISTANCE PROGRAM (ComPsych)** (free, 6 sessions per issue)  
Phone: 877-327-3854 Website: [www.guidanceresources.com](http://www.guidanceresources.com) (company ID: DENVEREAP)

**NICOLETTI-FLATER & ASSOCIATES** (public safety industries specialization; free, unlimited sessions)  
Appointment Line: 303-989-1617 Crisis Line: 720-675-9502  
Website: <http://traumathreatandpublicsafetypsychology.com/>

**DR. KAREN JACKSON** (fire services specialization; free, unlimited sessions)  
Appointment Line: 303-257-0377 Email: [kiackson52@msn.com](mailto:kiackson52@msn.com)

**INSURANCE PROVIDER RESOURCES:** (co-pay may apply based on plan)

**Kaiser Permanente Behavioral Health**  
Phone: 303-471-7700 Website: [www.kaiserpermanente.org](http://www.kaiserpermanente.org)

**Denver Health Behavioral Health**  
Phone: 303-602-2146 Website: [www.denverhealth.org](http://www.denverhealth.org)

**United Healthcare Care24**  
Phone: 800-828-1120 Website: [www.uhctools.com/services/care24](http://www.uhctools.com/services/care24)

**CONFIDENTIAL SUICIDE/CRISIS RESOURCES** (external to the City)

24/7 national and local crisis resources:

- Colorado Crisis Services/Community Crisis Connection: 844-493-TALK (8255)
- National Suicide Prevention Lifeline: 1-800-273-8255

24/7 resources specifically for Public Safety professionals:

- Colorado Emergency Responder Crisis Text Line: Text "BADGE" to 741741
- Safe Call Now: 206-459-3020
- Cop Line: 1-800-267-5463

### PEER SUPPORT

Denver 911

Jodi Marzano  
Desk: 720-913-2012  
Cell: 303-210-6938

DFD

Captain Greg Pixley  
Cell: (303)-503-7490  
Roster at: [DFD Peer Support](#)

DPD

Sergeant Robert Waidler  
Desk: 720-913-1373  
Cell: 303-435-0702  
Roster at: [DPD Peer Support](#)

DSD

Major Sonya Gillespie-Carter  
Cell: 720-641-1190  
Roster at: [DSD Peer Support](#)

DPD Resiliency Program

Sergeant Robert Waidler  
Desk: 720-913-1373  
Cell: 720-641-1190

DSD

Employee Outreach Program (EOP)  
Captain Paul Oliva 720-865-0477  
Jacob Matthews 720-865-0476  
[eop@denvergov.org](mailto:eop@denvergov.org) or [DSD EOP](#)

### CHAPLAINS' UNITS

- DFD: Chaplain Ron Biegler: 720-839-9537 [ron@ronbiegler.com](mailto:ron@ronbiegler.com)
- DPD: On-Call Chaplain Phone: 720-641-0791
- DSD: Chaplain Jonathan Knott: 303-435-2028