

	Section 901 – AFD Safety & Health Program		Procedure & Instruction	
	<h2 style="margin: 0;">Risk Reduction During Epidemic or Pandemic Emergencies</h2>		Number	<b>901-4</b>
			Version	1.0
			Dated	06/15/06
			Page	1 of 7
Owner:	<i>Soren Threadgill, Chief of EMS</i>	Approval:	<i>Craig Goodrich, Fire Chief</i>	
Steward:	<i>F.X. Nolan, CMO</i>			

## I. Purpose

This document establishes declaration of emergency, training, work clearance, personal protective equipment use and patient care activities, infection control and decontamination procedures, housekeeping procedures, and off-duty instructions during an epidemic or pandemic emergency.

## II. Policy

It is policy of the Anchorage Fire Department to maintain operational efficiency and service delivery to our external customers while minimizing risk to our internal customers and their families in the event of epidemic or pandemic emergencies.

## III. Authorities

Centers for Disease Control and Prevention - Pandemic Influenza Information for Healthcare Professionals

U.S. Department of Health and Human Services – [www.pandemicflu.gov](http://www.pandemicflu.gov)

AFD P&I 901-2 Infectious Disease Control

## IV. Contents

1.0	Definitions.....	3
2.0	Declaration of Epidemic or Pandemic Emergency .....	3
3.0	Training .....	3
4.0	Work Clearance.....	3
5.0	Personnel Protective Equipment Use and Patient Care Activities .....	4
6.0	Infection Control and Decontamination Procedures .....	5
7.0	Housekeeping Procedures .....	6
8.0	Off-duty Instruction .....	6

**v. Version History**

Supersedes:		
PPI		
P&I		
Memo		
Revisions:		
Date:	Version #	Changes
06/15/06	1.0	New Procedure

## **VI. Procedure & Instruction**

This P&I is an adjunct to P&I 901-2 Infectious Disease Control.

### **1.0 Definitions**

- 1.1 Epidemic – A disease occurring suddenly in a community, region or country in numbers clearly in excess of normal.
- 1.2 Pandemic – The worldwide outbreak of a disease in numbers clearly in excess of normal.

### **2.0 Declaration of Epidemic or Pandemic Emergency**

- 2.1 A Declaration of Epidemic or Pandemic Emergency within the Municipality of Anchorage (MOA) will be made by the Mayor on the advice of the MOA Department of Health and Human Services (DHHS).
- 2.2 The Fire Chief will report the emergency to all Divisions of the AFD.
- 2.3 This Procedure and Instruction will be applied within the period of emergency until such time as the emergency is declared over pursuant to the communication path described in 2.1 and 2.2 of this document.

### **3.0 Training**

- 3.1 All personnel will be trained to this Procedure and Instruction.
- 3.2 Training will include, at a minimum, the following:
  - a) An overview of epidemic and pandemic illness.
  - b) A current risk assessment.
  - c) Disease transmission.
  - d) Vaccination and treatment.
  - e) MOA DHHS prophylaxis policy and plan.
  - f) Relevant AFD Procedure and Instructions.
  - g) Work clearance procedure.
  - h) Risk reduction and infection control in operational practice.
  - i) Risk reduction and infection control during off-duty time.

### **4.0 Work Clearance**

- 4.1 Upon declaration of a epidemic or pandemic emergency, all personnel will report to work as usual except in the following circumstances:
  - 4.1.1 Personnel who are experiencing influenza symptoms will call-in for relief. These symptoms may include fever, cough, sore throat, muscle ache, eye infections, pneumonia, and severe respiratory distress.
    - a) Other signs and symptoms identified with specific diseases will be communicated to all personnel.

- b) All personnel will be screened by their supervisor (or peer if supervisor is unavailable) for signs and symptoms before beginning each duty period.
  - c) Any person who is symptomatic will be immediately relieved of duty and sent home.
- 4.1.2 Personnel who are at high risk for complications associated with epidemic or pandemic illness (e.g., pregnant women, immunocompromised persons) will be informed about their medical risk and either temporarily reassigned away from patient care activities or placed on leave.
  - 4.1.3 Personnel who are required to care for family members who are suffering from the epidemic or pandemic illness will be placed on leave at their request.
- 4.2 Personnel who have suffered from and recovered from the epidemic or pandemic illness will be considered immune and may return to work only if:
    - a) They are completely free from signs and symptoms of the illness.
    - b) They are otherwise fit for duty.
  - 4.3 Work duty periods and practices may be altered as needed by the Fire Chief to achieve optimal operational effectiveness.
  - 4.4 This section applies to all Divisions within the AFD.

## **5.0 Personal Protective Equipment Use and Patient Care Activities**

- 5.1 Personal Protective Equipment Use during patient care activities will be consistent with or exceed those standards specified in P&I 901-2 Infectious Disease Control.
- 5.2 All patients requiring transport will be screened for signs and symptoms of the epidemic or pandemic illness.
  - 5.2.1 If a patient has signs or symptoms of the epidemic or pandemic illness, the receiving facility will be so informed prior to arrival.
- 5.3 A single use disposable surgical or procedure mask will be worn during all patient contacts. This is a mask that can provide droplet protection.
  - 5.3.1 An N-95 or N-100 respirator mask will be worn by attending personnel when performing aerosol generating procedures such as a nebulizer treatment, mechanical ventilation, suctioning, and advanced airway procedures.
  - 5.3.2 Personnel will use an N-95 or N-100 respirator mask during all patient contacts with reported or observed signs and symptoms of epidemic or pandemic illness.
  - 5.3.3 N-95 or N-100 respirator masks will be worn during all patient contacts during a MOA-declared epidemic or pandemic emergency.
  - 5.3.4 If it does not compromise patient care, place a surgical or procedure mask on the patient to contain any droplets generated by coughing. Otherwise have the patient cover their mouth and nose when coughing with a tissue or other alternative that prevents droplet spread.
  - 5.3.5 Surgical and procedure masks and disposable N-95 or N-100 respirator masks will be disposed of as biohazard waste after a single use.

- 5.4 Single use disposable nitrile gloves will be worn for all patient care and equipment decontamination activities.
- 5.4.1 Gloves will be disposed of as biohazard waste after a single use.
- 5.5 Single use disposable paper gowns will be worn.
- 5.5.1 Gowns will be disposed of as biohazard waste after a single use.
- 5.6 Eye protection that provides droplet and splash protection will be worn during all patient encounters.
- 5.6.1 Eye protection will be cleaned with a suitable disposable lens cleaning wipe after each encounter.
- 5.6.2 Lens cleaning wipes will be disposed of as biohazard waste after use.

## **6.0 Infection Control and Decontamination Procedures**

- 6.1 The following procedures will be followed during MICU patient transport:
- 6.1.1 The climate control fan in the cab will be kept on.
- 6.1.2 The ventilation exhaust fan in the patient care compartment will be kept on at the maximum level.
- 6.2 Disinfection with Cavicide® and paper towels or Cavicide® wipes will be performed following all EMS responses which result in a patient encounter with a person suffering from, or potentially suffering from, an epidemic or pandemic illness.
- 6.2.1 Fire, command, and other non-patient transport apparatus where the operator and occupants have been exposed, or potentially exposed, to an infected patient will have the following areas/items disinfected:
- Door handles and cabinet latches.
  - Steering wheel, gear shift lever, and any other control surfaces contacted during the response.
  - Radio microphone and mobile phone handset.
  - Any kits or equipment used during the response.
- 6.2.2 MICU transport apparatus where the operator and occupants have been exposed, or potentially exposed, to an infected patient will have the following areas/items disinfected:
- Door handles and cabinet latches.
  - Steering wheel, gear shift lever, and any other control surfaces contacted during the response.
  - Radio microphones and mobile phone handset.
  - Exposed interior surface areas of the patient care compartment.
  - Exposed surfaces of the cot.
  - Any kits or equipment used during the response.
- 6.3 Disinfection of the computer keyboard and mouse located in the medic report rooms at the hospitals will be done after each use.

- 6.4 Particular awareness will be maintained in recognizing and mitigating actions that may result in cross-contamination of any surfaces.
- 6.5 All paper towels and wipes used during disinfection will be disposed of as hazardous waste.

## **7.0 Housekeeping Procedures**

- 7.1 Daily disinfection using Cavicide® and paper towels or Cavicide® wipes of the following surfaces will be carried out in addition to the normal cleaning routine:
  - a) All door latches, door knobs, and panic bars.
  - b) Faucet and toilet handles.
  - c) Soap and lotion dispenser levers.
  - d) Soda and snack machine controls and coin/bill slots.
  - e) Computer keyboards.
  - f) Telephones.
  - g) Television and other remote controls.
  - h) Switches.
  - i) Fixed radio controls and microphones.
  - j) Handheld radios.
- 7.2 No employee may access a refrigerator or freezer unit without a thorough hand sanitizing.
  - 7.2.1 Special attention is necessary prior to retrieving ice from in-freezer ice makers.
- 7.3 A minimum of 6' of separation will be maintained between any beds in shared sleeping areas and a physical barrier such as lockers will be used where feasible.
- 7.4 Dishwashing will be done on the hot "Pot Scrubber" or similar cycle and special attention will be given to hand-wash items such as wooden utensils and knife handles.
- 7.5 The sharing of communal "finger-food" food sources such as open candy bowls and bowls of chips will be discontinued.
- 7.6 Social distancing will be practiced by cancellation of non-operational group activities.
- 7.7 Special emphasis will be placed on frequent hand washing and cough etiquette.

## **8.0 Off-duty Instruction**

- 8.1 Vaccination and pharmaceutical prophylaxis or treatment for personnel and/or their family members will be at the advisement of the MOA DHHS Medical Officer.
- 8.2 Personnel will be advised of the benefits provided by social distancing and strongly encouraged to avoid group events and congregations of people for both themselves and their family members.
- 8.3 Personnel will be given informational guidelines and encouraged to instruct their family members in the following topics:
  - a) Importance of frequent hand washing and good hand washing technique.

- b) Proper cough etiquette and immediate disposal of used tissues.
- c) Concept and practice of social distancing.
- d) Home disinfection practices.
- e) Use of personal antiseptic wipes or solutions for hand cleansing when in public.