



Situation Report	Incident	Operational Period	Reporting Unit	Form
External	COVID-19	04/21/2020	SAEMS	ICS-209 Short

Current Situation:

- Every county in the region has not reported at least one person with confirmed COVID - 19.

County	Confirmed Cases	Deaths	Case Rate /100,000
Bedford	16 (+1)	1	33.2
Blair	14(+0)		11.22
Cambria	20 (+1)	2	15.2
Fulton	2 (+0)		13.67
Huntingdon	13 (+0)		28.46
Somerset	19(+0)		25.13

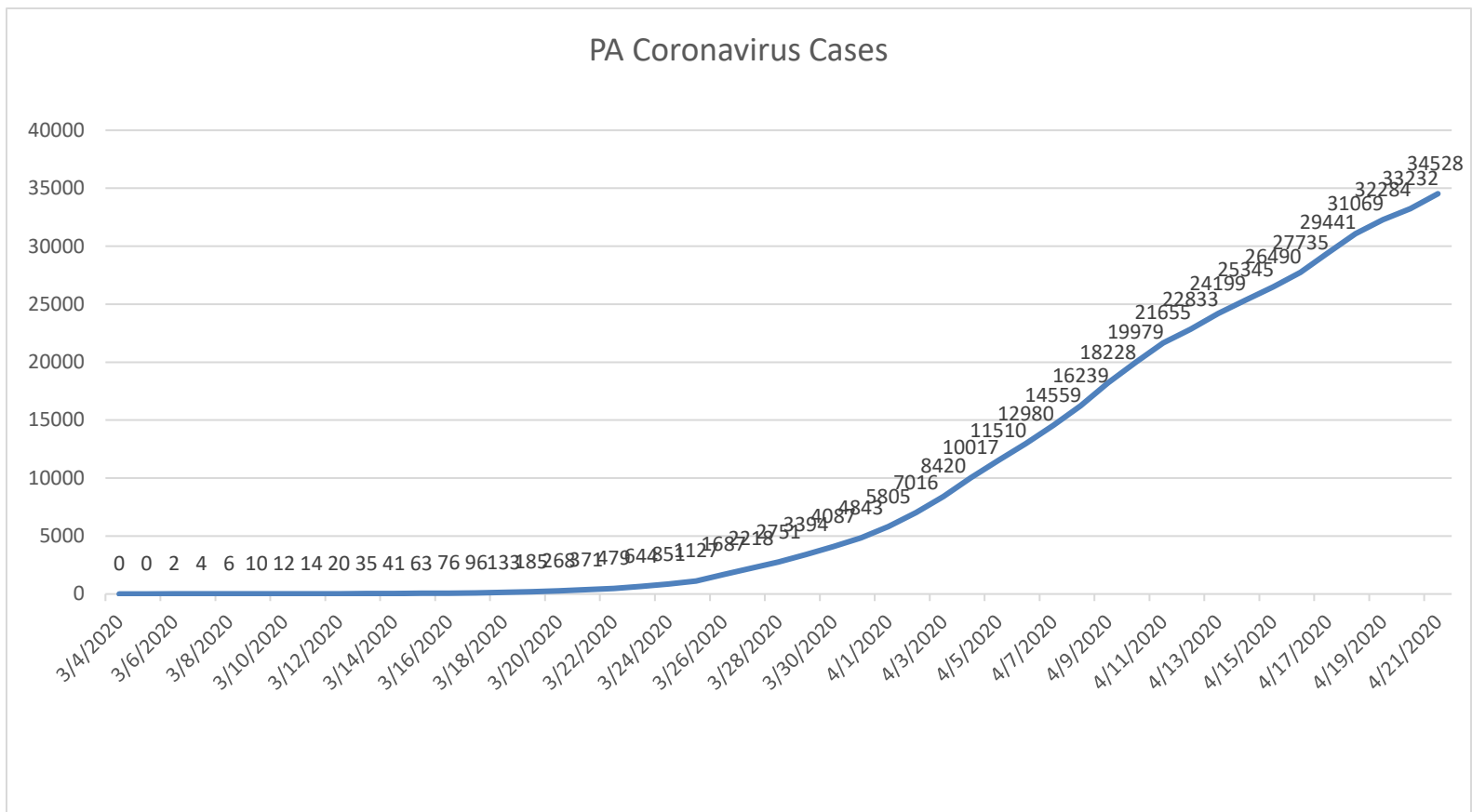
- There are currently no long-term care (LTC) facilities within our region with identified COVID-19 positive cases.

EMS call volume remains decreased.

- Governor Wolf and Secretary Levine issued order to address worker safety effective at 20:00 on April 19, 2020 that addresses actions that businesses must take to address issues related to COVID-19. The order can be found at [this link](#).
- All Pennsylvania schools will remain closed through the end of the academic year.
- The entire state of Pennsylvania is now under an indefinite "Stay at Home" order until at least April 30, 2020
- Pennsylvania is currently under an order that [masks should be worn in public](#).
- [Pennsylvania Department of Health Daily Situation Report can be found here](#).
- Every county in Pennsylvania is now reporting at least one (1) confirmed case of COVID-19
- SAEMS continues to monitor the rapidly developing situation and review and respond to questions and concerns, distribute new and updated information as it becomes available and communicate with the Pennsylvania Department of Health, Bureau of EMS (BEMS), Keystone Health Care Coalition (HCC) South West Health Care Coalition (SWHCC) and regional emergency management agency (EMA) coordinators.
- Daily situation reports will be distributed to all agencies, facilities, and county EMA Coordinators on weekdays, on weekends as the situation requires, and additional updates as needed.

Current Testing Status:

Negative	Positive	Deaths
132,323	34,528	1,564
+2603	+1,296	+360



* At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications AND improvement in respiratory symptoms (e.g., cough, shortness of breath);

🔊 Anecdotal information indicates that EMS agencies are seeing an increase in cardiac arrests over expected levels and that patients may be delaying care due to concerns about seeking medical care related to COVID-19. Data is being evaluated to determine trend.

🔊 Discussed patient notification of COVID positive provider with Steve Wirth of PWW EMS Law who indicated that it does not appear that there is a legal requirement to notify a patient of a possible exposure to a COVID positive provider, it would be an appropriate action.

Daily Reminders:

🔊 Any EMS provider who tests positive for COVID-19 should receive the information contained in [PA HAN 493-04/06/20-ALT-ALERT Notification of COVID-19 Test Results to Patients](#) as well as [COVID-19 Close Contact Checklist](#) and [COVID-19 Patient Instructions for Self Isolation While Awaiting Lab Results](#).

🔊 Agencies and providers should be utilizing a minimum of a surgical/procedure mask, eye protection and gloves on every call, regardless of nature, and should be placing a surgical/procedure mask on any patient that can tolerate it immediately upon patient contact. Use of surgical or social cloth masks should be used while in station and at any time you reasonably expect to be within six (6) feet of another person for more than a few minutes.

🔊 Agencies with personnel considered exposed to a COVID-19 patient or employee directed to self-isolate for 14-day period should contact our office.

🔊 Agencies that implement any of the staffing exceptions contained in EMSIB 2020-11 must notify our office and their agency medical director within 24-hours of initiation.

🔊 Pennsylvania Bureau of EMS distributed EMS Information [Bulletin 2020-17 Temporary Statewide BLS Non-Transport of Patients with Suspected COVID-19 Protocol \(#932\)](#).

The protocol permits non-transport and home care for patients who meet certain criteria without contact with medical command for permission if and only if the patient agrees to non-transport. Agency medical directors must notify our office if they intend to permit their agencies to use this protocol, identify resources for patient follow-up and agree to 100% quality improvement review (Copy Attached).

🔊 All essential businesses (including EMS agencies) are required to follow the updated guidance from the Secretary of Health related to protection of personnel and customers, which included requirements that businesses must require their employees to wear a mask at all times while on premises.

🔊 All EMS providers should be documenting on their patient care reports (PCR's) the names of providers and other emergency responders on scene, the personal protective equipment (PPE) that was worn, and possible COVID-19 symptoms and any possible exposures to confirmed, presumptive or possible COVID-19 patients.

Prior Guidance and Information:

🔊 PA DOH distributed :[2020-PAHAN 498 - 04/19/20 - ALT ALERT- Interim Guideline for Exposed Life-Sustaining Business Workers](#). This guidance applies to critical infrastructure businesses. Additional guidance for healthcare providers, including EMS providers is forthcoming. Guidance for health care workers is different from that of critical infrastructure due to the nature of exposures as well as the potential to spread the disease to patients.

- Multiple organizations and EMA coordinators have indicated that they have been contacted by a company seeking to set up testing sites for first responders “according to the Governors order”. In consultation with the Department of Health, there is currently no such order and at this time, guidance remains that only those people who are symptomatic should be tested for COVID-19. The issue has been reported to state agencies for further investigation.
- Identified three (3) EMS providers with medium- to high-risk exposure to a COVID-19 positive patient. Based on CDC guidance in [CDC Healthcare Personnel with Potential Exposure Guidance](#) advised agency that providers should self-quarantine for 14 days with active monitoring and reporting of any fever or possible COVID-19 symptoms.
- Responded to reports of COVID positive provider with numerous high-risk exposures to emergency services personnel and provided guidance and direction on addressing exposures. Based on CDC and DOH guidance made recommendations for at least eight (8) EMS providers amongst six different agencies to quarantine for 14 days, actively monitor for signs and symptoms at least twice per day and report screening to agency infection control officer. At least two other exposed providers are symptomatic and seeking testing related to this situation. Discussed issue with six (6) impacted agencies and provided recommendations for mitigating risk.
- Contacted Somerset and Cambria counties EMA to discuss and update on above situation
- Discussed high risk patient related exposure with Bedford County EMA, contacted two (2) agencies and advised agencies that two providers experienced high-risk exposures and should quarantine for 14 days.
- Developed guidance and flowchart for agencies to utilize when faced with a COVID positive provider (Copy Attached).
- All EMS providers should be wearing at least surgical/procedure masks at all times when they are within six (6) feet of other people, including in vehicles, at stations, when watching TV etc.
- Discussed with Bedford, Cambria and Somerset counties about changes to their CAD systems related to COVID-19
- The Bureau of EMS distributed EMS Information Bulletin [EMSIB 2020-18 Cardiac Arrest Treatment by EMS in a Patient with Suspected COVID-19](#) (PDF) that provides additional guidance on treating cardiac arrest in patients that may be COVID-19 positive. (Copy Attached)
- DOH Webinar recording from Friday, April 10, 2020 has been posted to [Train PA](#) in the Announcements section. If you are unable to access the Train PA account the recording can also be found [here](#)
- Copy of Bureau of EMS COVID-19 update PowerPoint distributed to registrants on webinar and will be distributed via Facebook, email and webpage.
- Pennsylvania Bureau of EMS distributed [EMS Information Bulletin 2020-16 PPE Reminders](#) to ensure that EMS personnel are utilizing the appropriate level of PPE (Copy Attached)
- EMS agencies within the region have been notified about PPE available to pick up at our office beginning April 12, 2020.
- County EMA's have received push packs from PEMA/DOH with PPE designated for emergency responders
- Bureau of EMS held COVID-19 Update webinar. Copy of the PowerPoint of this program is attached. A recording will also be made available.
- Pennsylvania Bureau of EMS will be hosting an EMS information and update webinar on Friday, April 10, 2020 at 15:00 (3:00 pm). The webinar is limited to 1000 connections and registration is required. To register, use the following link:
https://zoom.us/webinar/register/WN_sn85RnnDSmuS8d88c6Z5gg

- 📧 Pennsylvania Department of Health added hospital status dashboard that includes number of beds, ICU beds and ventilators available in each county. [The dashboard can be viewed here.](#)
- 📧 EMS agencies within the region should ensure that they are monitoring their agency email for updates, requests for information and other COVID-19 related information on at least a daily basis.
- 📧 The Bureau of EMS distributed two EMS information bulletins
 - * [EMSIB 2020-14 COVID-2019 Lapse of Registration Regulatory Exception](#) (PDF) (Copy Attached)
 - * EMSIB 2020-15 Signatures on Transfer of Care Forms (Copy Attached)
- 📧 The Bureau of EMS distributed COVID-19 guidance from the Bureau of Prisons (Copy Attached)
- 📧 Personal Protective Equipment (PPE) survey distributed to all EMS agencies to determine current stock on hand and expected needs. All agencies should ensure that this survey is completed by one person at your EMS agency. Survey can be found at <https://www.surveymonkey.com/r/P926CX2>
 - * As of noon, 4/7/2020 only 29 of 85 agencies had responded to the PPE survey distributed on 4/6/2020 with a deadline of noon, 4/7/2020
 - * Agencies that did not respond are being contacted by phone and requested to submit their response before 8:00 a.m. April 8, 2020
- 📧 Governor Wolf announced that all Pennsylvanians should wear a cloth mask when going out in public. Surgical and N95 masks should be reserved for health care workers and first responders in health care environments.
- 📧 [FDA changes course and allows KN95 masks meeting certain criteria to be used in US healthcare organizations](#)
- 📧 PPE remains difficult to procure, especially N95 or comparable masks and gloves. Actively searching for alternate sources and other alternatives to standard PPE.
- 📧 Agencies beginning to report critical needs of PPE
- 📧 [EMS Information Bulletin 2020-13-Alternatives to Nebulized Bronchodilators During COVID-2019](#) addressing modifications to protocols for use of alternate medications to nebulized bronchodilators was distributed
- 📧 [EMS Information Bulletin 2020-12 PCR Data Collection for Exemptions Outlined in EMSIB 2020-11](#) related to documentation practices when utilizing staffing exemptions was distributed
- 📧 The Bureau of EMS has been in preparations to host a statewide EMS call for the last week. It is our hope to be able to convene a webinar like call next week to discuss the current situation related to COVID-19. We are currently investigating a variety of different options and platforms to be able to do a call of this scale this so additional information on meeting details will be forthcoming. In the meantime I would ask that for questions that you would like addressed in the call to please send them to the general PA EMS mailbox at PAEMSOoffice@pa.gov
- 📧 Any EMS agency willing to utilize full face respirators for COVID-19 response, please notify our office.
- 📧 Governor Wolf and Secretary of Health Dr. Levine issued a statewide "Stay at Home" order effective April 1, 2020 at 20:00 (8:00 p.m.).
- 📧 Bureau of EMS distributed [EMS Information Bulletin 2020-11 Level 1 Staffing Exceptions for Licensed EMS Agencies](#) addressing staffing exemptions that are available related to COVID-19. Agencies are required to provide notification to the regional council and their agency medical director within 24 hours of the first utilization of these exceptions. Patient care reports (PCR's) of incidents under which these exceptions are used are subject to 100% quality improvement review.

- 🔊 PPE survey distributed to all EMS agencies in the region to determine current availability and critical needs. Agencies should continue to request PPE through their county EMA unmet needs process.
- 🔊 Governor Tom Wolf and Secretary of Health Dr. Rachel Levine revised their “Stay at Home” orders to include Cameron, Crawford, Forest, Franklin, Lawrence, Lebanon and Somerset counties. The order now includes these 33 counties: Allegheny, Beaver, Berks, Bucks, Butler, Cameron, Carbon, Centre, Chester, Crawford, Cumberland, Dauphin, Delaware, Erie, Forest, Franklin, Lackawanna, Lancaster, Lawrence, Lebanon, Lehigh, Luzerne, Monroe, Montgomery, Northampton, Philadelphia, Pike, Schuylkill, Somerset, Washington, Wayne, Westmoreland and York counties.
- 🔊 First two (2) cases identified in Bedford County
- 🔊 Agencies and organizations are recommended to increase security at their facilities to deter theft of equipment and personal protective equipment (PPE). Cases of theft of PPE have been reported, including at an EMS agency in Clearfield County. Report any theft of PPE to your local law enforcement and notify our office.
- 🔊 Initiated distribution of hand sanitizer donated by Guy Chemicals in Somerset for use by emergency responders within the region.
- 🔊 [CMS Flexibility to Fight COVID-19 \(Including Alternate Destinations\) information](#)
- 🔊 [EMS Information Bulletin 2020-10: EMS Providers Obtaining Nasopharyngeal Swabs](#) was distributed by the Bureau of EMS, which indicates that it is within the scope of practice of providers at or above the level of AEMT to perform nasopharyngeal swab testing related to COVID-19, and requirements to be included in any such program..
- 🔊 Gastro-intestinal symptoms such as abdominal pain, nausea and diarrhea as well as loss of taste and smell are being identified as common symptoms of COVID-19 infection, EMS providers should consider these symptoms in assessment of patients to evaluate risk of COVID-19 infection.
- 🔊 After discussion with Dr. Karduck, Regional Medical Director, and incidents where providers were exposed to COVID-19 patients without PPE due to the nature of the call, it is recommended that all EMS agencies consider using at least minimal personal protective equipment (PPE) of a surgical/procedure mask, gloves and eye protection on every response if available.
- 🔊 Agencies with personnel directed to self-isolate due to exposure to confirmed COVID-19 patient should notify our office when that occurs to allow us to track the impact to EMS as well as to ensure that personnel are appropriately identified, tracked and reported through DOH channels
- 🔊 Agencies are encouraged to utilize the CDC Personal Protective Equipment (PPE) Burn Rate Calculator [available here](#) to evaluate their current PPE stocks and the expected time to exhaustion of those supplies. Please forward completed spreadsheets to our office for evaluation and prioritization of PPE needs within the region.
- 🔊 Receiving facilities should be notifying EMS agencies of ambulance transported patients that test positive for COVID-19. NIOSH and CDC have issued additional guidance indicating that COVID-19 is a reportable disease under the Ryan White Act as an airborne disease that requires notification as soon as possible, but no later than 48 hours after the determination. Request will be made to all agencies to update Designated Infection Control Officer and contact information.
 - * Office of Civil Rights Provides [Guidance on Sharing COVID-19 Patient Information with First Responders](#)
 - * PWW EMS Law provides [Guidance on Sharing COVID-19 Information and HIPPA](#)
 - * Agencies and personnel that believe they may have been exposed to a confirmed case of COVID-19 should contact 1-877-PA-Health for guidance on appropriate steps to manage possible exposures.

- All UPMC facilities are requiring that all employees, vendors and visitors to be screened and wear a minimum of a surgical type mask while in their facilities. Other facilities have initiated similar requirements for screening prior to entry into the facility. We have requested specific information from each facility in the region to provide a single summary.
- Any facility requiring EMS personnel to wear a mask to enter their facility is responsible to provide EMS personnel with a mask if the providers are not already wearing that level of PPE based on availability and the nature of the incident. This includes both hospitals and long-term care facilities.
- Agencies transporting confirmed or potential COVID-19 cases should continue to provide advanced notice of arrival to receiving emergency department ideally via phone for secure communications. If unable to utilize phone communication, agencies and facilities can utilize the phrase "Protocol 931" to identify these patients.
- Providers should use a high index of suspicion with all patients during this pandemic. There have been several incidents where EMS providers have responded to calls and not utilized full PPE (goggles, N95 mask, gown and gloves) due to the nature of dispatch or patients screening negative based on symptoms when asked by 911, yet the patient later tested positive for COVID-19. Providers with significant exposure that are not protected by full PPE are then being directed to self-isolate for 14 days.
- Agencies should consult with the Pennsylvania Department of Health and consider the CDC [CDC Healthcare Personnel with Potential Exposure Guidance](#) for determination of actions related to personnel potentially exposed to patients with confirmed or presumed COVID-19
- Agencies report receiving conflicting information from DOH and facility infection control practitioners when advised of positive COVID-19 test for providers that were not in full PPE. DOH advised providers should self-isolate for 14 days, facility indicated providers should continue to work, wear a surgical mask and monitor. Agency following DOH guidance
- Confirmed cases within Pennsylvania have passed 1,000
- National Highway and Transportation Safety Office of EMS resources available at their [website](#).
- Pennsylvania Bureau of EMS distributed [EMS Information Bulletin 2020-09 related to Out of State Licensed EMS Agencies](#) (Copy Attached)
- Somerset County modified 911 Emerging Infectious Disease (EID) questions to remove questions related to travel due to identification of cases in Somerset County.
- DOH distributed [2020-PAHAN-490-3-24-UPD: Interim Infection Prevention and Control Recommendations for Patients with Known or Patients Under Investigation for 2019 Novel Coronavirus in a Healthcare Setting](#) (Copy Attached)
- Guidance for EMS agencies remains that EMS providers, in consultation with medical command physicians, may discuss with possible COVID-19 patients with no life threatening symptoms to remain at home or to accept transport to an alternate destination than a hospital, but if the patient or their legal representative requests transportation, the patient must be transported. At this time, no EMS provider or EMS agency may refuse to transport a patient requesting transportation.
- To support certification of additional EMS providers, Southern Alleghenies EMS Council will reopen our Pearson Vue testing center for candidates to take the NREMT cognitive exam for Pennsylvania certification. Site will be restricted to a single candidate at a time, and candidates will be required to utilize a filtering mask and gloves for the duration of the time they are in the building. All candidates will be screened for possible COVID 19 related symptoms and possible exposures, including temperature prior to entering the testing site. Site is subject to closure at any point as situation develops and changes
- First confirmed case of COVID-19 is identified in Somerset County which is reporting one (1) case.
- Effective at noon on March 24, 2020, following identification of the first COVID-19 case in the county, Somerset County 911 instituted modified dispatch plan for quick response agencies (QRS) limiting their dispatch to only "Echo" or the highest level of response.

- 📎 FEMA document "[Information for First Responders on Maintaining Operational Capabilities During a Pandemic](#)" available for download.
- 📎 Reference sheets for EMS and 911 from above document attached to this report for consideration and planning. Required Disclaimer: The potential action steps listed here are not all inclusive and do not represent the official position of the federal government. The user should understand that laws, rules, regulations, standard operating procedures and standard operating guidelines, as well as limited resources, may exist, precluding emergency service organizations and providers from implementing some of the following ideas. Each emergency service organization must reference its own pandemic response plan and needs accordingly and seek applicable workaround alternatives for their respective jurisdiction. The possible consequences of a pandemic warrant attention to the possibilities associated with workforce depletion.
- 📎 Opening restricted Pearson Vue testing for NREMT certification effective March 25, 2020 to support certification of students that have completed program, but not yet tested. Candidates will be required to answer screening questions and have temperature taken and wear PPE upon entering and during testing in building. Testing will be available five (5) days per week.
- 📎 All EMS related certifications expiring either March 31 or April 1, 2020 have been extended to July 1, 2020. All CPR certification cards meeting BEMS requirements that expire after January 1, 2020 will be considered to be current until July 1, 2020. ([EMS Information Bulletin 2020-08: Issued Extension to EMS Certification Expiration Dates](#) Attached) Providers with expiration dates of March 31 or April 1, 2020 will not receive new certification cards indicating the extended date. Cards will be considered current until July 1, 2020 and new cards will then be issued with recertification unless extended further.
- 📎 Governor Wolf directed all non-life sustaining businesses in Pennsylvania to close with enforcement beginning at 08:00 March 23, 2020
- 📎 Governor Wolf and Secretary Levine issue "Stay at Home" orders for Allegheny, Bucks, Chester, Delaware, Monroe, Montgomery and Philadelphia counties. Northampton and Lehigh added on March 25, 2020
- 📎 Bureau of EMS issued EMS Information Bulletin 2020-07: Alternate Pathway for Psychomotor Testing that temporarily waives the requirement for completion of a psychomotor exam prior to certification. Candidates still need to successfully complete the cognitive exam. Additional information on the cognitive exam will be forthcoming. All psychomotor examinations are cancelled until further notice.
- 📎 Ambulance Association of Pennsylvania is collecting financial data related to COVID-19 emergency declaration at [their site](#).
 - * Agencies should begin to record and track additional costs related to COVID-19 for any potential reimbursable expenses under disaster declarations. Any additional costs directly related to COVID-19 preparedness or response may potentially be eligible for reimbursement down the road. See attached spreadsheet for sample tracking mechanism.
 - * There has been discussion on the impact of COVID-19 preparedness and response on EMS agency finances due to decreased non-emergency transport, cancelled fundraising or other issues. If your agency has financial projections indicating that the continued COVID-19 situation could have a significantly negative financial impact on your agency, please forward that information to our office for review and discussion with the Bureau of EMS.
- 📎 Continue to strongly recommend that agencies conserve N95 masks for only those situations where they are truly necessary and consider using surgical type mask in all other situations. Routine or excessive use of N95's will rapidly deplete availability and could have negative impacts as the situation worsens. See [CDC guidance on use of N95's versus alternatives](#).

- * Distributed guidance to agencies regarding process for requesting personal protective equipment (PPE), hand sanitizer and cleaning agents if unmet need at their agency. All unmet needs requests to go to county EMA coordinator for processing. Local agencies are unlikely to be provided with additional PPE from stockpiles unless they are in an area where there are a significant number of cases and/or community spread until supply pipelines improve.
- 🔊 All EMS agencies should begin to screen their personnel for fever, cough or other possible COVID-19 symptoms at the beginning and at least once more during their shift. Personnel that have fever or possible COVID-19 symptoms should not report to work or be immediately removed from duty and advised to self-isolate. Fever is either measured temperature >100.0F or subjective fever. Note that fever may be intermittent or may not be present in some patients, such as those who are elderly, immunosuppressed, or taking certain medications (e.g., NSAIDs). Clinical judgement should be used to guide testing of patients in such situations. Respiratory symptoms consistent with COVID-19 are cough, shortness of breath, and sore throat. Medical evaluation may be recommended for lower temperatures (<100.0F) or other symptoms (e.g., muscle aches, nausea, vomiting, diarrhea, abdominal pain headache, runny nose, fatigue) in consultation with your agency medical director.
- 🔊 Recommend that all public safety answering points (PSAP's) consider modification of the response modes in their respective dispatch systems to minimize the dispatch of QRS agencies by dispatch only to high priority (ECHO) incidents, and that the QRS agencies limit exposure by use of as few personnel as possible to assess and provide treatment for the patient, and to utilize appropriate personal protective equipment (PPE) and social distancing when responding and providing care.
- 🔊 Southern Alleghenies EMS Council remains operational but has restricted access to our building to essential personnel. Please do not come to office. To contact us please call 814.201.2265 or email our regular emails or saems@saems.com.

Activities:

- 🔊 Monitored daily DOH and Federal press briefings
- 🔊 Updated Daily Situation Report
- 🔊 Continued to receive information and monitor EMS exposure issues.
- 🔊 Participated in Blair County health leadership group conference call
- 🔊 Participated in weekly HAP/DOH update conference call
- 🔊 Contacted DOH in regard to EMS notification of possible exposures
- 🔊 Requested additional information on requirements for EMS agencies to report healthcare associated exposures.
- 🔊 Participated in COVID-19 EMS Grand Rounds webinar
- 🔊 Participated in conference call with Somerset County Commissioners and EMA regarding exposures, notification, and processes
- 🔊 Provided support to Center for Independent Living (CILS) sheltering and feeding program for individuals with disabilities. (ESF-6) by assisting with food distribution
- 🔊 Met with Center for Independent Living to discuss support for ESF 8 and 14 related issues
- 🔊 Participated in Blair County COVID-19 task force conference call
- 🔊 Participated in webinar related to legal issues for EMS related to COVID-19
- 🔊 Distributed request for information from National EMS Management Association on behalf of National Highway and Traffic Safety Office
- 🔊 Receive notification that PPP application submitted April 10 was not processed prior to the allocation of all funds

- Participated in [COVID-19 Legal and Documentation Issues for EMS Practitioners](#) webinar offered by Lexipol, EMS1 and PWW EMS Law. Webinar recording and materials available [here](#).
- Addressed multiple telephone calls related to provider exposure to COVID-19 positive patient and recommendation for 14-day self-quarantine.
- Discussed response issue between ALS and BLS agency-BLS agency to approach local PSAP to request no BLS ambulance dispatch for ALS level calls.
- Responded to National EMS Management Association (NEMSMA) request for information on COVID impact on agency response levels and financial impact
- Addressed agency question regarding a contact from an organization that indicated that the Governor had ordered testing for first responders. Information was not accurate, and no such directive had been issued. Received same question independently from Cambria County EMA.
- Received additional information on additional EMS providers reporting that they are symptomatic with COVID-19 like symptoms, following exposure.
- Provided information and guidance as per Key Points and Updates
- Participated in SCMTF EMS Committee conference call
- Participated in Keystone HCC Health and Medical Committee conference call
- Distributed PPE push packs to 15 EMS agencies
- Participated in Tableau webinar related to COVID-19 data.
- Participated in Blair County EMS COVID-19 conference call.
- HAP and DOH update conference call was cancelled
- Distributed PPE to 28 EMS agencies
- Hosted Bureau of EMS COVID-19 webinar with 421 attendees. Webinar recording will be made available for those unable to attend as soon as recording becomes available
- Participated in Blair County COVID-19 taskforce conference call.
- Discussed PPE distribution with Cambria EMA
- Distributed EMS Information Bulletin 2020-016 and 2020-017 (Copies Attached)
- Evaluated and planned distribution of on-hand PPE and notified agencies of their allotment and pick-up arrangements
- Sorted PPE for distribution to EMS agencies
- Participated in Region 13 hospital conference call
- Provided guidance to agency regarding transport of COVID positive patient over extended period (3 hours)
- Discussed PEMA/DOH PPE push pack distribution with EMA coordinators
- Participated in South Central Mountains Task Force Executive Committee meeting.
- Participated in PPE webinar
- Evaluated survey responses regarding PPE and made plans for distribution of on-hand PPE. Information will be distributed to agencies beginning tomorrow on available PPE.
- Received notification from EMA of first responder PPE that was being shipped to county EMA's for distribution
- Contacted county EMA coordinators to determine PPE distribution to EMS agencies to date.
- Deployed MSEC trailer to EMS West staging.
- Discussed availability of N95 or equivalent masks for purchase with local vendor
- Evaluate and inventory access to PPE and expected agency burn rates
- Participated in HAP/DOH weekly healthcare conference call.(04/06/20)
- Participated in Blair County EMS Conference call (04/06/20)
- Participated in Blair County COVID-19 Task Force webinar (4/3/20)
- Contacted several sources of PPE or alternatives to PPE to determine availability, quantities and pricing and coordinated purchasing (4/3/20)
- Provided information to Huntingdon County EMA regarding use of cloth masks (4/3/20)
- Received equipment from BEMS
- Placed link and information related to Mental Health Warmline on CISM webpage

- ☞ Monitored daily DOH and Governor press briefing
- ☞ Participated in SCMTF EMS Committee conference call
- ☞ Participated in DOH/HAP acute care facility conference call
- ☞ Inventory of MSEC trailer for possible deployment
- ☞ Contacted multiple vendors and local organization regarding availability of PPE
- ☞ Provided information to BEMS on agencies willing to utilize APR's for COVID-19 protection
- ☞ Developing inventory of sources and availability of PPE
- ☞ Participated in Region 13 hospital committee weekly COVID-19 conference call
- ☞ Connected to WHITE HOUSE COVID-19 BRIEFING WITH STATE conference call
- ☞ Distributed EMSIB 2020-11 Level 1 Staffing Exceptions for Licensed EMS Vehicles
- ☞ Assisted agency with critical PPE need. Anticipating distribution of APR to support agency
- ☞ Any EMS agency willing to utilize full face respirators for COVID-19 response, please notify our office.
- ☞ Distributed EMS PPE survey to determine current assets and needs. All EMS agencies should complete and return
- ☞ Agencies with personnel considered exposed to a COVID-19 patient or employee directed to self-isolate for 14-day period should contact our office.
- ☞ Participated in Bureau of EMS conference call.
- ☞ Participated in Blair County Healthcare Leadership conference call to discuss alternate care sites.
- ☞ Working to identify battery source for ILC Dover Sentinel XL PAPR. EMS agency has 15 units with single use non-rechargeable batteries that are expired. Looking for source for rechargeable batteries or alkaline adapter/battery pack.
- ☞ Continued distribution of donated hand sanitizer to emergency response agencies.
- ☞ Contacted alternate sources of PPE for availability and possible distributions/donations.
- ☞ Participated in Keystone HCC long term care facility conference call.
- ☞ Monitored daily briefing from PA Department of Health
- ☞ Participated in DOH/HAP weekly COVID-19 update conference call
- ☞ Received hand sanitizer for distribution to EMS agencies and emergency responders. Distribution information will be forthcoming.
- ☞ Contacted regional EMA coordinators for status of PPE requests for EMS agencies.
- ☞ Distributed information to regional EMA coordinators relative to possible federal activation of national ambulance contract through AMR.
- ☞ Received advanced warning notice of possible deployment of MSEC to support alternate care sites. No activation at this time. Readiness assessed and provided to Bureau of EMS
- ☞ Discussion with agency manager related to provider exposures, self-isolation and notification to EMS agencies of positive COVID-19 test results.
- ☞ Discussion with 911 center related to expanding emerging infectious disease questioning by PSAPS to all calls and possible additional questions.
- ☞ Participated in Blair County COVID-19 Task Force webinar.
- ☞ Discussion with Somerset County EMA regarding community support
- ☞ Received three calls from agencies with concerns about potential exposure to confirmed COVID-19 patients and required notification and potential isolation for personnel
- ☞ Requested COVID-19 screening procedures from all receiving facilities.
- ☞ Participated in conference call with UPMC Altoona and Blair County EMS agencies and county EMA director
- ☞ Participated in NHTSA Crisis Standards of Care for EMS webinar.
- ☞ Participated in acute care facility conference call with HAP and DOH
- ☞ Consulted with DOH and affected parties related to possible COVID-19 exposure.
- ☞ Participated in conference call with EMA agency related to possibility of PPE availability.
- ☞ Participated in CDC COCA webinar related to sustaining PPE utilization
- ☞ Participated in Bureau of EMS conference call related to COVID-19 pandemic.

- 🔊 Monitoring daily EMS patient care report volumes and 911 provided EMS call volumes for trends and identification of increases related to COVID-19.
- 🔊 Coordinated with county EMA's to ensure that appropriate and consistent messaging and information is distributed as appropriate and necessary.
- 🔊 Discussed appropriate action with EMS agency for possible exposure and provided CDC guidance.
- 🔊 Monitored daily DOH briefing for updates on current situation
- 🔊 Updated website www.saems.com to add and maintain current COVID-19 information and guidance
- 🔊 Participated in conference call with Regional Medical Director and Somerset County EMA regarding modification of dispatch protocols.
- 🔊 Participated in discussion of possible hand sanitizer availability.
- 🔊 Requested regional 911 centers to provide daily report of EMS call volume for tracking and trending-Reports received from Bedford and Somerset Counties.
- 🔊 Monitoring PCR data on daily basis for tracking and trending of response levels.
- 🔊 Provided additional guidance to Huntingdon County QRS agency on dispatch of QRS agencies related to COVID-19.
- 🔊 Contacted local sources for PPE to determine availability.

Challenges:

- 🔊 Guidance from CDC and PA DOH remains non-specific for guidance to EMS agencies, referencing critical infrastructure or healthcare workers, but failing to clearly identify EMS specific information and guidance. Guidance such as *"Returning HCP must wear a facemask at all times and be restricted from caring for severely immunocompromised patients for 14 days after symptom onset, as well as adhere to strict hand and respiratory hygiene and monitor for symptoms."* May be difficult if not impossible to adhere to due to the nature of dispatch and response.
- 🔊 Receiving anecdotal information from multiple agencies of dwindling PPE and possibly running out this weekend. Following up on that information to determine criticality of need and possible sources.
- 🔊 Distribution of PPE to EMS agencies appears minimal. LTC's and hospitals have indicated that they have received push-packs, but agencies are indicating that many of their requests remain unfilled.
- 🔊 Agencies beginning to receive requests for transports of COVID-19 positive patients to tertiary care centers but are concerned on available PPE for long distance (3 hr) transports.
- 🔊 Receiving several questions and concerns on potential shortages of hand sanitizer and PPE should the need for either dramatically increase
- 🔊 Receiving concerns on the distribution of PPE, especially N95's to agencies and organization that do not need that level of protection, raising concerns of depletion of minimal available stock
- 🔊 Reports that PPE and cleaning agents will be backordered for extended time
- 🔊 Expect that restrictions and modifications may last an extended period of time and that additional cases are expected to be reported.
- 🔊 Rapidity and fluidity of information.

Planned Activities:

- 🔊 Develop and distribute additional guidance on PPE use and requirements to enforce the need for EMS agencies to utilize at least a mask, eye protection and gloves on every call, and that masks should be worn at any time close contact with another provider or coworker is expected.

- 🔊 Evaluate mechanisms to streamline daily status reports.
- 🔊 Develop and distribute simplified guidance on exposure risk and post exposure actions for EMS agencies and providers
- 🔊 Distribute hand sanitizer expected to be available early next week.to EMS agencies within the region
- 🔊 Develop and distribute guidance to assist agencies and providers to identify stable patients possibly infected with COVID-19 that can reasonably remain at home if and only if the patient agrees to that course of action.
- 🔊 Update screening questions for 911 centers to include GI symptoms
- 🔊 Continued monitoring of information updates at local, state and national level
- 🔊 Continue distribution of guidance and information as available to support EMS and healthcare operations
- 🔊 Distribution of daily status updates
- 🔊 Continued coordination with DOH, BEMS EMS agencies, hospitals and EMA's

Additional Information:

CDC Guidance:

- 🔊 [CDC Guidance for EMS](#)
- 🔊 [CDC Healthcare Personnel with Potential Exposure Guidance](#)
- 🔊 [CDC Strategies for Optimizing the Supply of N95 Respirators](#) UPDATED 4/3/20
- 🔊 [CDC Strategies for Optimizing the Supply of N95 Respirators: Crisis/Alternate Strategies](#)
- 🔊 [CDC Interim Guidance for EMS Systems and 911 Public Safety Answering Points \(PSAPS\) for COVID-19](#)
- 🔊 [CDC What Healthcare Personnel Should Know about Caring for Patients with Confirmed or Possible COVID-19 Infection](#)

PA Bureau of EMS Guidance and Information Bulletins:

- 🔊 [Pennsylvania BLS Protocols Protocol 931-Suspected Influenza Like Illness](#)
- 🔊 [EMSIB 2020-01: Novel Coronavirus 2019-nCoV](#)
- 🔊 [EMSIB-2020-02 Infection Control](#)
- 🔊 [EMS Information Bulletin 2020-06: COVID -19 Policy and Protocol Updates](#)
- 🔊 [EMS IB 2020-07: Alternate Pathway for Psychomotor Testing](#)
- 🔊 [EMSIB-2020-08 Issued Extension to EMS Certification Dates](#)
- 🔊 [EMSIB-2020-09 Out of State EMS Agencies](#)
- 🔊 [EMSIB 2020-10 EMS Providers Obtaining Nasopharyngeal Swabs](#) (PDF)
- 🔊 [EMSIB 2020-11 Level I EMS Staffing Exceptions](#) (PDF)
- 🔊 [EMSIB 2020-12 PCR Data Collection for Exemptions Outlined in EMSIB 2020-11](#) (PDF)
- 🔊 [EMSIB 2020-13 Alternatives to Nebulized Bronchodilators During COVID-2019](#) (PDF)
- 🔊 [EMSIB 2020-14 COVID-2019 Lapse of Registration Regulatory Exception](#) (PDF)
- 🔊 [EMSIB 2020-16 PPE Reminders](#) (PDF)
- 🔊 [EMSIB 2020-17 Temporary Statewide BLS Non-transport of Patients with Suspected COVID-19 Protocol \(#932\)](#) (PDF)
- 🔊 [EMSIB 2020-18 Cardiac Arrest Treatment by EMS in a Patient with Suspected COVID-19](#) (PDF)

Other Guidance:

- 🔊 [Information for First Responders on Maintaining Operational Capabilities During a Pandemic](#)
- 🔊 [IAFF Interim Guidance for EMS for COVID-19](#)

Continuing Updates:

[PA DOH Coronavirus Updates](#)

[PA 2020 Health Alerts, Advisories and Updates](#)

[CDC Coronavirus Updates](#)

[World Health Organization WHO Coronavirus Updates](#)

[Johns Hopkins COVID-19 Dashboard](#)

If you know of someone who should be receiving this report, please forward name and email address to ldriscoll@saems.com.

Current and historical status reports are posted on our website at www.saems.com.

Alert: Interim Guidance on Discontinuing Home Isolation/Quarantine and Returning to Work Criteria for Healthcare Providers with COVID-19

DATE:	3/17/2020
TO:	Health Alert Network
FROM:	Rachel Levine, MD, Secretary of Health
SUBJECT:	Interim Guidance on Discontinuing Home Isolation/Quarantine and Returning to Work Criteria for Healthcare Providers with COVID-19
DISTRIBUTION:	Statewide
LOCATION:	n/a
STREET ADDRESS:	n/a
COUNTY:	n/a
MUNICIPALITY:	n/a
ZIP CODE:	n/a

This transmission is a “Health Alert”, conveys the highest level of importance; warrants immediate action or attention.

HOSPITALS: PLEASE SHARE WITH ALL MEDICAL, PEDIATRIC, NURSING AND LABORATORY STAFF IN YOUR HOSPITAL; **EMS COUNCILS:** PLEASE DISTRIBUTE AS APPROPRIATE; **FQHCs:** PLEASE DISTRIBUTE AS APPROPRIATE **LOCAL HEALTH JURISDICTIONS:** PLEASE DISTRIBUTE AS APPROPRIATE; **PROFESSIONAL ORGANIZATIONS:** PLEASE DISTRIBUTE TO YOUR MEMBERSHIP; **LONG-TERM CARE FACILITIES:** PLEASE SHARE WITH ALL MEDICAL, INFECTION CONTROL, AND NURSING STAFF IN YOUR FACILITY

The Pennsylvania Department of Health (DOH) is releasing the following updates based on guidance released by the Centers of Disease Control and Prevention (CDC) on March 16, 2020, for discontinuation of home isolation for persons with COVID-19.

- DOH is recommending that persons with COVID-19 under home isolation be released from isolation after a minimum of 7 days after symptom onset and after 72 hours of being afebrile and feeling well.
- Household contacts of persons with COVID-19 must be quarantined for 7 days after their last household exposure. For most, this will be 7 days after the person with COVID-19 is released from isolation.
- Healthcare providers diagnosed with COVID-19 must be isolated for a minimum of 7 days after symptom onset and after 72 hours of being afebrile and feeling well.
- Returning HCP must wear a facemask at all times and be restricted from caring for severely immunocompromised patients for 14 days after symptom onset, as well as adhere to strict hand and respiratory hygiene and monitor for symptoms.
- If you have a patient under isolation and would like to consult with DOH, please call your local health department or **1-877-PA-HEALTH (1-877-724-3258)**.

This guidance is based on available information about COVID-19 and subject to change as additional information becomes available.

These recommendations will prevent most but may not prevent all instances of secondary spread. The risk of transmission after recovery, is likely very substantially less than that during illness.

For Persons with COVID-19 Under Home Isolation:

Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:

1. At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications AND improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
2. At least 7 days have passed since symptoms first appeared.

For example, if day 0 is the onset of illness, persons with COVID-19 that are well on day 3 and afebrile and feeling well for 72 hours must remain isolated until day 7. Someone with COVID-19 who is still symptomatic on day 7, and has symptoms until day 10, cannot be released until day 13.

Household contacts of persons with COVID-19 must be quarantined for 7 days after the person with COVID-19 has been released from isolation. This means the household contacts will need to remain at home longer than the initial case.

For example, if the person with COVID-19 is afebrile and feeling well starting on day 7, the person with COVID-19 can be released from isolation on day 10, and the household contacts can be released from quarantine on day 17.

For Healthcare Providers (HCP) Diagnosed with COVID-19:

HCP MUST be excluded from work until:

1. At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications AND improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
2. At least 7 days have passed since symptoms first appeared.

After returning to work, HCP should:

- Wear a facemask at all times while in the healthcare facility until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer.
- Be restricted from contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until 14 days after illness onset.
- Adhere to hand hygiene, respiratory hygiene, and cough etiquette in CDC's interim infection control guidance (e.g., cover nose and mouth when coughing or sneezing, dispose of tissues in waste receptacles).
- Self-monitor for symptoms, and seek re-evaluation from occupational health if respiratory symptoms recur or worsen.

If you have a patient under isolation and would like to consult with DOH, please call **1-877-PA-HEALTH (1-877-724-3258)**.

Categories of Health Alert messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action.

This information is current as of March 17, 2020 but may be modified in the future. We will continue to post updated information regarding the most common questions about this subject.