

CORONAVIRUS OUTBREAK



10 Things Your Local Should Be Doing for COVID-19 Response

The current COVID-19 pandemic is unprecedented, and it can be easy for affiliate leaders to become overwhelmed. This document will assist affiliate leaders in identifying the most important issues facing our members and provide the informational resources needed to lobby local, state and provincial officials to ensure best practices are in place. If you have additional questions or need further assistance, contact your District Vice President.

1. Tracking

- Enter data for your members affected by COVID-19 in the [IAFF survey tracker](#) so that we have a clearer picture of the impact of COVID-19 on our members and affiliates across the United States and Canada.

2. Personal Protective Equipment (PPE)

- Does your department have an appropriate stock of recommended PPE to include N-95 or P-100 masks, gloves, gowns that are long-sleeved and fluid-resistant, and eye protection?
 - If no, review the following resources:
 - [Strategies for Optimizing the Supply of N95 Respirators](#)
 - [COVID-19 Frequently Asked Questions \(FAQs\)](#)
 - [Extending the Life of Respiratory Protection](#)

3. Dispatch Protocols

- Has your 9-1-1 agency modified caller queries to add questions regarding COVID-19?
 - If no, review [Interim Guidance for EMS Systems and 911 Public Safety Answering Points for COVID-19 in the United States](#)

4. Response Protocols

- Has your department updated response protocols to reflect best practices and guidance from the IAFF and CDC? This includes the following actions:
 - Don N-95 mask, gown, gloves and eye protection when responding to symptomatic or confirmed COVID-19 patients
 - When possible, limit the number of personnel performing patient care
 - Minimize patient contact in poorly ventilated areas (if possible and appropriate, conduct patient assessment outside the home)
 - When possible, patient assessment should be conducted 6 feet from patient
 - If possible and tolerated, place a surgical mask on patients to minimize exposure
 - If no, review [What Healthcare Personnel Should Know about Caring for Patients with Confirmed or Possible COVID-19 Infection](#)

5. Training

- Has your department conducted training/refreshers on the following items?
 - Updated response protocols
 - [Proper methods for donning and doffing PPE](#)
 - Decontaminating apparatus, PPE and fire fighter/paramedic living quarters
 - Reuse of PPE
 - If no, review <https://www.iaff.org/coronavirus/>

6. Exposure Protocols

- Does your department have a protocol in place for a COVID-19 exposure? Do your members have access to a department-supported quarantine facility? Do your members have access to testing? Is there a process in place to notify members if there is an exposure that is determined after patient transfer of care?
 - If no, review the following:
 - [Risk Assessment for Potential Exposure](#)
 - [Post-Exposure/Quarantine Symptom Monitoring Tracker](#)
 - [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease \(COVID-19\)](#)
 - [Ryan White Act Sample Letter](#)
 - Review the IAFF [Return to Work](#) guidelines.

7. Leave Time/Workers' Compensation Coverage

- Collective Bargaining: Have you reviewed your collective bargaining agreement to determine if quarantine is covered? Affiliate leaders in collective bargaining states should review the collective bargaining agreement and state labor laws to determine what is permissible.
- Non-collective bargaining states should meet with their employer and other decision makers to ensure members are afforded administrative leave if quarantined and awarded workers' compensability if infected with COVID-19.

8. Communications

- Internal Communications: Are you communicating with your members regularly to provide them with COVID-19 resources developed by the IAFF?
 - If no, use IAFF [infographics](#), [podcast](#) and other information resources on IAFF Coronavirus page
- External Communications: There is currently a great deal of anxiety and uncertainty in our communities. By providing timely and pertinent information to the public through your social media, you can build your local's brand as a trusted source of information during a difficult time.
 - Start by using [A COVID-19 Message from Your Firefighters and Paramedics](#)

9. Self-Screening

- The IAFF recommends all fire fighters/emergency medical personnel be vigilant about [symptom monitoring](#) twice daily (both on shift and off shift) to identify symptoms early and prevent exposures. These recommendations should be followed whether or not you have been exposed to a positive COVID-19 patient. See the IAFF's [video on symptom monitoring](#).

10. State and Federal Resources

- The \$8.3 billion supplemental appropriation to fund the response to coronavirus includes a variety of resources available to fire departments for personal protective equipment (PPE) and medical supplies, and to meet overtime and backfill needs. Included in this package are:
 - \$950 million to support states and localities in carrying out a variety of activities related to the response to the virus.
 - Approximately \$500 million for medical supplies, including PPE.
 - \$300 million in contingency funding for the procurement of vaccines, therapeutics and diagnostics.

The most important action that you can take to ensure that these resources are secured to assist our members and their departments is to contact your governor to ensure fire and EMS agencies are given priority as resources are distributed.



Remember to follow up with your District Vice President and continue to review the IAFF COVID-19 resource page regularly: www.iaff.org/coronavirus.