

Chad Blosser

From: Chad Blosser
Sent: Thursday, June 04, 2020 5:42 PM
To: 'chad.blosser@vdh.virginia.gov'
Cc: Gary Brown; 'Harrell, Adam'; 'Hunter, Jacqueline'; Deborah Akers; Karen Owens
Subject: COVID-19 Update #9 for EMS Educators
Attachments: Forward Virginia Phase-Two Guidelines.pdf

This is a blanket e mail message to all certified Education Coordinators and ALS Coordinators.

Dear Educator,

Good evening. Here are some updates for you as we move into Phase Two of the recovery.

Forward Virginia – Phase Two

Based on guidance we have received, it appears most of Virginia—with exception of Northern Virginia and the City of Richmond—will be moving into Phase Two of the recovery tomorrow, June 5, 2020.

Under Phase Two, the Commonwealth will maintain a Safer at Home strategy **with continued recommendations for social distancing, teleworking, and requiring individuals to wear face coverings in indoor public settings**. The maximum number of individuals permitted in a social gathering will increase from 10 to 50 people. Everyone is requested to still adhere to physical distancing guidelines, frequently clean and sanitize high contact surfaces, and continue enhanced workplace safety measures.

For those areas of the Commonwealth moving into Phase Two, this means that the grey sections of TPAM Policy 1445 are no longer mandated, **but are recommended**. Physical distancing guidelines are still in effect and use of appropriate PPE is encouraged.

Please see the attached excerpts of guidelines from the Commonwealth's Safer at Home: Phase Two documentation which pertain to EMS training programs.

Virginia EMS Portal Updates

On June 11, 2020 the Virginia EMS Portal is scheduled to receive several bug fixes and upgrades. One of those upgrades will be the ability for Education Coordinators to delete an uploaded CE file from the EMS Portal before it is processed overnight. Previously, if you made a mistake or uploaded a file in error, you had to reach out to an ACE Division staff member to have that file deleted. Once this new enhancement is implemented, you will have the ability to delete your own file if you uploaded it in error.

Meeting Cancellations

After much deliberation and careful consideration of the current public health climate as a result of the Coronavirus (COVID-19) pandemic, the Office of EMS Leadership Team has decided to cancel the July 2020 meetings of the Training & Certification and Medical Direction Committee scheduled to be held July 1 & 2, 2020 in Richmond, Virginia.

With so many unknown factors in the months ahead—to include social distancing requirements which will still in place across the Commonwealth—together with the amount of advanced planning and commitment required to hold a

meeting, we determined cancellation to be in the best interest of the health, safety and well-being of all participants. Further guidance about our scheduled October 2020 meeting will come at a later date.

Education Coordinator Certification Expiration Dates

Since we are not currently able to hold Education Coordinator Updates, we have extended the certification expiration date for all Education Coordinators (who have not met eligibility to recertify) between May 31, 2020 and December 31, 2020 until **June 30, 2021**. These changes have been applied to the database and your current EC expiration date can be viewed in the Virginia EMS Portal.

The current schedule of Education Coordinator Updates can be found on the OEMs website at: <https://www.vdh.virginia.gov/emergency-medical-services/ems-educator-update-schedule/>. It is not necessary to register to attend.

Welcoming a New ACE Division Staffer

Jackie Hunter has accepted a new position in the ACE Division and her working title will be *Accreditation & Scholarship Coordinator*. As most of you know, Jackie has been with the Office of EMS since 2007 and initially started her career many moons ago in the ACE Division when we were located in downtown Richmond. Jackie will be returning to the ACE Division following a nine year stint in the OEMS Administration & Finance Division. Jackie is excited to return to ACE and begin working directly with EMS providers again! Her new role is effective June 10, 2020.

Virginia EMS Scholarship Program

The scholarship program will be closing for the fiscal year on June 4, 2020 at midnight. The Virginia Department of Health (VDH), as with all state agencies, have a fiscal year-end closing process which takes place during the months of June and July. In order for the Office of EMS to meet W-9 and payment processing timelines established by VDH, we are required to close the FY20 scholarship program on June 4th. The scholarship program website is: <https://www.vdh.virginia.gov/emergency-medical-services/education-certification/ems-scholarship/>

The Virginia EMS Portal scholarship module is set to begin the FY21 scholarship program on June 5, 2020. This should be a seamless process for the end user. If there are students in your program who are having difficulties with the Virginia EMS Scholarship Program application on or after June 5, 2020, please have them contact Jackie Hunter directly via email at: (jacqueline.hunter@vdh.virginia.gov).

Thank you again for all you continue to do for Virginia's EMS System. Stay safe.

Best,

Chad

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Please let us know how we are doing by [clicking here](#) to complete a short customer experience survey.

The Office of EMS continues to monitor the ongoing situation regarding the spread of COVID-19. For more information and updates on COVID-19 please visit the link below: <http://www.vdh.virginia.gov/emergency-medical-services/coronavirus-2019-covid-19/>

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Guidelines for Business and Social Gatherings



Safer at Home: Phase Two Guidelines for all Business Sectors

Physical Distancing Best Practices:

- ✓ Establish policies and practices for physical distancing between co-workers and between members of the public. (See sector-specific guidelines below for more detailed information on public engagement.)
- ✓ Provide clear communication and signage for physical distancing in areas where individuals may congregate, especially at entrances, in seating areas, and in check-out lines.
- ✓ Limit the occupancy of physical spaces to ensure that adequate physical distancing may be maintained. (See sector-specific guidelines for more detailed information.)
- ✓ Encourage telework whenever possible.
- ✓ For those businesses where telework is not feasible, temporarily move or stagger workstations to ensure six feet of separation between co-workers and between members of the public.
- ✓ Limit in-person work-related gatherings, including conferences, trade shows, and trainings.
- ✓ When in-person meetings need to occur, keep meetings as short as possible, limit the number of employees in attendance, and use physical distancing practices.

Enhanced Cleaning and Disinfection Best Practices:

- ✓ Practice routine cleaning and disinfection of high contact areas and hard surfaces, including check out stations and payment pads, store entrance push/pull pads, door knobs/handles, dining tables/chairs, light switches, handrails, restrooms, floors, and equipment. Follow [CDC Reopening Guidance for Cleaning and Disinfection](#) and use an [EPA-approved disinfectant](#) to clean. For high contact areas, routinely disinfect surfaces at least every 2 hours. Certain surfaces and objects in public spaces, such as shopping carts and point of sale keypads, should be cleaned and disinfected before each use.
- ✓ To the extent tools or equipment must be shared, provide access to and instruct workers to use an [EPA-approved disinfectant](#) to clean items before and after use.
- ✓ Provide a place for employees and customers to wash hands with soap and water, or provide alcohol-based hand sanitizers containing at least 60% alcohol. (See sector-specific guidelines for more detailed information.)
- ✓ When developing staff schedules, implement additional short breaks to increase the frequency with which staff can wash hands with soap and water. Alternatively, consider providing alcohol-based hand sanitizers with at least 60% alcohol so that workers can frequently sanitize their hands.
- ✓ Provide best hygiene practices to employees on a regular basis, including washing hands often with soap and water for at least 20 seconds and practicing respiratory etiquette protocols. A CDC training video is available here: <https://www.cdc.gov/handwashing/videos.html>.

Enhanced Workplace Safety Best Practices:

- ✓ Prior to a shift and on days employees are scheduled to work, employers should screen employees prior to starting work. Employees should also self-monitor their symptoms by self-taking of temperature to check for fever and utilizing the questions provided in the [VDH Interim Guidance for COVID-19 Daily Screening of Employees](#) before reporting to work. For employers with established occupational health programs, employers can consider measuring temperature and assessing symptoms of employees prior to starting work/before each shift. CDC considers a person to have a fever when he or she has a measured temperature of 100.4° F (38° C) or greater, feels warm to the touch, or gives a history of feeling feverish.

- ✓ Implement practices such as those described in [VDH Interim Guidance for COVID-19 Daily Screening of Employees](#) for examples of a screening questionnaire. A sample symptom monitoring log is available in this Interim Guidance.
- ✓ Instruct employees who are sick to stay at home and not report to work. If an employee becomes ill or presents signs of illness, follow [CDC What to Do if You Are Sick guidance](#). Employers should post signage in the common languages of the employees telling employees not to come to work when sick.
- ✓ Develop or adopt flexible sick leave policies to ensure that sick employees do not report to work. Policies should allow employees to stay home if they are sick with COVID-19, if they need to self-quarantine due to exposure, and if they need to care for a sick family member. Employers should recommend that employees follow [CDC guidance on If You Are Sick or Caring For Someone](#).
- ✓ Some employees are at [higher risk for severe illness](#) from COVID-19. These vulnerable employees include individuals over age 65 and those with underlying medical conditions. Vulnerable employees should be encouraged to self-identify and employers should take particular care to reduce their risk of exposure, while making sure to be compliant with relevant Americans with Disabilities Act (ADA) and Age Discrimination in Employment Act (ADEA) regulations.
 1. Consider offering vulnerable employees duties that minimize their contact with customers and other employees (e.g., restocking shelves rather than working as a cashier), if agreed to by the employee.
 2. Protect employees at [higher risk for severe illness](#) by supporting and encouraging options to telework.
 3. If implementing health checks, conduct them safely and respectfully, and in accordance with any applicable privacy laws and regulations. Confidentiality should be respected.
 4. Other information on civil rights protections for workers related to COVID-19 is available [here](#).
- ✓ Designate a staff person to be responsible for responding to COVID-19 concerns. Employees should know who this person is and how to contact them.

- ✓ Implement staggered shifts for both work periods and break periods. Consider cohort scheduling where groups of employees only work with employees in their group.
- ✓ Limit the number of employees in break rooms and stagger breaks to discourage gatherings.
- ✓ Use messaging boards or digital messaging for pre-shift meeting information.
- ✓ If the building has not been occupied for the last 7 days, there are additional public health considerations that should be considered, such as taking measures to ensure the [safety of your building water system](#). However, it is not necessary to clean ventilation systems other than routine maintenance as part of reducing the risk of coronavirus transmission.
- ✓ Establish a relationship with your local health department and know who to contact for questions.

For healthcare facilities, additional guidance is provided on [CDC's Guidelines for Environmental Infection Control in Health-Care Facilities](#).

Resources to print and display:

[CDC Symptoms English](#)

[Spanish CDC Symptoms](#)

[CDC Printable Flyer English](#)

[CDC Printable Flyer Spanish](#)

[CDC Printable Flyer Chinese](#)

[CDC Printable Flyer Korean](#)

[CDC Printable Flyer Vietnamese](#)

[FDA information](#)

[CDC Re-Opening America Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes](#)

[CDC What You Need to Know About Handwashing VIDEO](#)

Safer at Home: Phase Two

Guidelines for all Social Gatherings

Best practices:

In addition to the best practices in the “Guidelines for All Business Sectors” document, social gatherings should consider the following best practices:

- ✓ Post signage at the entrance that states that no one with a fever or symptoms of COVID-19, or known exposure to a COVID-19 case in the prior 14 days, is permitted in the establishment.
- ✓ Post signage to provide public health reminders regarding physical distancing, gatherings, options for [high-risk individuals](#), and staying home if sick (samples at bottom of this document).
- ✓ Social gatherings should be limited to 50% occupancy of the event space, if applicable, or 50 participants, whichever is less.
- ✓ Limit the occupancy of spaces to ensure that six feet of physical distance can be maintained between all organizers, staff, volunteers, and attendees who are not members of the same household.
- ✓ Reconfigure seating areas to allow six feet of physical distance between individuals by eliminating or closing select tables or seating areas, or by spreading them out to allow for adequate spacing.
- ✓ Ensure exits are configured to reduce the occurrence of bottlenecks at the conclusion of the event.
- ✓ Practice routine cleaning and disinfection of high contact areas and hard surfaces, including check out stations and payment pads, store entrance push and pull pads, door knobs and handles, dining tables and chairs, light switches, handrails, restrooms, guest lockers, floors, and equipment. Follow [CDC Reopening Guidance for Cleaning and Disinfection](#) and use an [EPA-approved disinfectant](#) to clean. For high contact areas (e.g., in both public and staff areas), routinely disinfect surfaces at least every 2 hours. Certain surfaces and objects in public spaces, such as point of sale keypads, should be cleaned and disinfected before each use.

- ✓ Social gatherings should not include close contact between gathering organizers, staff, and attendees not from the same household. Discontinue activities such as face-painting, temporary tattoo application, or audience participation with performers.
- ✓ Events that cannot restrict access to the general public should not take place.
- ✓ Where applicable, organizers must create a participant flow plan of modified queue lines to and within the mass gathering. Determine areas likely to become bottlenecks or pinch points and adjust participant flow accordingly.
- ✓ Where applicable, install visible markers for queue lines that separate people by six feet of physical distance. Provide physical guides to seating areas including floor decals, colored tape, or signs to indicate where attendees should not sit, stand, or congregate. Sample markers are available in the VDH Business Toolkit.
- ✓ Do not include side events as part of the gathering. These are events associated with but located outside of the formal gathering location, such as souvenir vending stations, gaming areas, petting zoos, and designated food truck areas.
- ✓ Designate a coordinator who will be responsible for identifying COVID-19 related issues and their impact on the gathering, including coordinating health preparedness for the event and emergency response planning.
- ✓ Develop an emergency and medical response plan for COVID-19. This plan should include information about how attendees should interface with the local healthcare system (who to speak with or call if they feel sick) and procedures for isolating sick attendees and reporting illnesses to event organizers. The response plan must also include a plan for organizers to notify the local health department and all participants if any exposure to COVID-19 occurs at the event.
- ✓ Develop a mitigation plan for COVID-19, to include how all requirements listed here will be met, and how guidelines and requirements will be enforced at the gathering.
- ✓ Consider limiting the duration of the gathering, especially for indoor gatherings and gatherings involving activities that would increase respiration (e.g., cheering, singing).
- ✓ Consider delaying gatherings where the target demographic is persons in high risk populations.

- ✓ Use technology solutions where possible to reduce person-to-person interaction, including contactless payment and ticket scanning.
- ✓ Install physical barriers, such as sneeze guards and partitions, at staffed kiosks.
- ✓ All bathrooms, hand-washing stations, and portable toilets should be placed in a convenient location for use by attendees but away from congregate areas and arranged in a configuration that maintains at least six feet of physical distance.
- ✓ Provide a place for staff and attendees to wash hands with soap and water, or provide alcohol-based hand sanitizers containing at least 60% alcohol.
- ✓ Where applicable, provide best hygiene practices to employees on a regular basis, including washing hands often with soap and water for at least 20 seconds and practicing respiratory etiquette protocols. A CDC training video is available here: <https://www.cdc.gov/handwashing/videos.html>.
- ✓ Close off areas used by a sick person and do not use them until after cleaning and disinfection. Wait 24 hours before cleaning and disinfecting. If it is not possible to wait 24 hours, wait as long as possible. Ensure safe and correct application of disinfectants and keep disinfectant products away from children.
- ✓ Attendees should leave as quickly as possible following the event in order to limit contact and exposure to themselves and other attendees.
- ✓ Establish relationships with key community partners and stakeholders, such as the local health department, community leaders, hospitals, and law enforcement. Collaborate and coordinate with them on broader planning efforts for the gathering.
- ✓ Identify actions to take if the event needs to be postponed or cancelled.
- ✓ Private events may be held at venues provided they can comply with these guidelines.

Resources to print and display:

[CDC Symptoms English](#)

[CDC Symptoms Spanish](#)

[CDC Printable Flyer English](#)

[CDC Printable Flyer Spanish](#)