Q&A: COVID prompts Charlottesville Fire Department adjustments written by Newspack Team | April 27, 2020



It's been more than a month since SARS-CoV-2, the coronavirus that causes COVID-19, began raging through Virginia. It has disrupted virtually all types of human activity, including fire departments. In keeping with social distancing requirements, Charlottesville Fire Chief Andrew Baxter answered several questions via email from Reporter Charlotte Rene Woods and News Editor Elliott Robinson about changes the department has made because of the pandemic. This interview has been edited for length and clarity.

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Q: How have things changed to keep fire and EMS crews protected? A: We have made many changes in how we operate in the pandemic environment, and we are continually evaluating our protocols based on the latest available guidance from the Centers for Disease Control and the Virginia Department of Health. Each emergency response begins with a call to the Regional Emergency Communications Center, where the communications officers ask a series of questions designed to help identify possible COVID-19 patients. For each response, all of our units carry a supply of personal protective equipment and we utilize a "scout" model for each incident. In this model, one firefighter-EMT makes initial patient

contact to determine the right level of [personal protective equipment] and the correct resources for each patient. We have also changed our patient transfer process at the emergency department to limit provider exposure, limit the amount of PPE used on each incident, and have a more efficient return to service. All of our equipment and apparatus is thoroughly disinfected after each incident, and our highcontact areas in the fire stations are cleaned and disinfected multiple times during each shift. We have also collaborated with the University of Virginia to provide access to rapid testing at the UVa COVID Clinic for first-responders. In addition, all of our firefighters take and record their temperature at the start of each tour of duty and detailed post-exposure protocols are in place.Q: What happens when close contact is necessary, like a rescue that requires CPR?A: All of our EMS providers in the region are utilizing the same COVID-19 protocols, which include specific guidelines for how to safely care for all patients, including those experiencing a critical illness or injury. Since the coronavirus spreads primarily by respiratory routes, the biggest risk for our providers are Aerosol Generating Procedures (AGPs), including nebulizer treatments for asthma, CPAP, CPR and any airway procedure. For these patients, our providers wear a full PPE ensemble including an N-95 respirator, face shield, eye protection, gown and gloves. We also encourage our providers to move the patient to an outside area if feasible and if time allows.

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Charlottesville Fire Chief Andrew Baxter. Credit: Credit: City of Charlottesville

Q: Are surrounding police and fire departments doing any enhanced coordination? A: During a declared state of emergency, the city, the University of Virginia, and Albemarle County operate within the framework of our Regional Emergency Operations Plan. The regional partners coordinate activities at our Emergency Operations Center, where staff from each entity establish an Incident Action Plan (IAP) for the region. The Regional IAP grows out and supports the specific plans that are developed by each jurisdiction. In the fire and EMS world, the city and county and our volunteer agency partners are fully coordinated and operate from a continually updated set of COVID-19 protocols. Q: Has there been a notable change in the number of calls? A" We have seen a consistent drop in the number of 911 calls for all reasons since the start of the pandemic. In the city, this has translated to a drop of roughly 30% in our EMS call volume. Many people have obviously taken heed of our request to avoid calling 911 for non-emergencies to allow our scarce EMS resources to be utilized for the most seriously ill or injured patients. However, we are also seeing a drop in calls for some very serious conditions such as chest pain, which could be a sign of a heart attack. We want to encourage our residents to call 911 if they experience chest pain, difficulty breathing, sudden onset of anxiety or confusion or severe nausea and vomiting. Q: Now that the city has to go back to the drawing board with the 2021 budget, what is the department anticipating? A: Based on information from the City Manager [Tarron Richardson] and the Budget Office, we are making plans to operate based on [fiscal year 2020] funding. It will take some creativity and flexibility, but we believe that we can maintain our current service levels at this funding level. We have received some funding from the federal government to assist in offsetting some COVIDrelated costs, and we are hopeful that additional state and federal funding will be available in the coming weeks and months.