



STATE OF MICHIGAN

DEPARTMENT OF HEALTH AND HUMAN SERVICE  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ROBERT GORDON  
DIRECTOR

**COVID-19 Response EMS Conference Call**  
**Tuesday, March 17, 2020**  
**2:00 PM**

**MINUTES**

1. Introduction

Kathy Wahl, BS, MSN, RN

Director, Division of EMS and Trauma

- Kathy Wahl thanked everyone for joining the call today. She said we will go through the agenda and then questions will be taken at the end. A lot has happened in the Division of EMS and Trauma, MDHHS, and all areas in the state due to COVID-19 pandemic. Today is to inform you on what has been done so far, what is coming up and to get feedback, questions and concerns from you. Kathy reported the Community Health Emergency Coordination Center (CHECC) has been activated and the Division of EMS and Trauma (DET) plays an active role in the CHECC. We are trying stay ahead of what is necessary for or from EMS and to increase communications, as well as identify where there are gaps in the system. She spoke about the recent survey monkey and advised future surveys may be going out. She asked for assistance in gathering information when these go out. These are to try and assess the needs in the state so they can be addressed. This is an evolving situation and we need to be adaptable.
- In the EMS office, we are looking at changes in the inspection process for agencies, vehicles, and education programs. We will try to utilize available technology to limit unnecessary face to face contact but continue to meet the needs. Everyone needs to stay safe to meet the needs of the community.
- Emergency protocols have been developed and continue to be developed and dynamic. We will need to be adaptable and forward thinking.
- Education processes need to be changed so just in time CE credits can be done for COVID-19. We are waiving the 60-day notice for COVID-19 related education to expedite the process. Terrie Godde is working on a lesson plan that could be adapted by ICs across the state for implementation of issues related to COVID-19.
- We have also been aware of a shortage of N95 respirators and PPE. The strategic national stockpile (SNS) has made an allocation of PPE available. EMS agencies may request supplies through the [Regional Healthcare Coalitions](#). A COVID-19 website has been developed for EMS and is available on the EMS website at [www.michigan.gov/emsCOVID](http://www.michigan.gov/emsCOVID).

## 2. Education Update

Sabrina Kerr, BA, MPA, EMS Section Manager  
Bureau of EMS, Trauma & Preparedness

- Sabrina Kerr gave an update on education. The EMS office is trying to make things easier in the field. Several of the National Registry exam sites are closed. Refunds will be provided for those registered for the psychomotor exam. Pearson Vue sites have been closed throughout the United States. The 60-day time frame will be waived for COVID-19 related continuing education. Terrie Godde said the lesson plan will be available shortly. Kathy reminded programs that if they are going to have a face to face training in a small group setting to screen students, use PPE, use good handwashing and practice social distancing.

## 3. Medical Director Update

William Fales, M.D., FACEP  
State EMS & Trauma Medical Director

- Dr. Fales thanked everyone. He spoke about the importance of EMS in the healthcare system.
- Dr. Fales discussed EMS Workforce protection. Scene safety becomes an overarching theme for our response. Keeping healthcare workers, including EMS workers, as well as their families and close contacts, safe is our priority.
  - Dr. Fales spoke about the PPE distribution from the SNS through the healthcare collations, as mentioned above. Non licensed life support agencies' PPE concerns should be directed to local emergency management. The priority is for those working the front line with patient care.
  - Dr. Fales spoke about the importance of hand hygiene. He said this is probably the single most important thing to keep us all safe. If you see someone not practicing it, you need to tell them.
  - He spoke about the emergency protocols that have gone out and spoke about the guidelines. The big change in the protocols has been the N95 recommendation has been relaxed to a surgical mask for routine patient care in the context of a national shortage. Aerosolized procedures indicate a fit tested N95 mask. If EMS is transporting a confirmed COVID-19 patient or an identified person under investigation (PUI), or anyone deemed to be high risk, should also be using N95 masks. He went over the other PPE that should be used, as well, in addition to respiratory protection. The PPE ensemble for the driver of the vehicle should be limited to respiratory protection. Gowns and gloves should be doffed before entering the cab, along with hand hygiene being performed, before entering the cab with appropriate respiratory protection.
  - Dr. Fales reported that PPE supplies coming from the HCC and SNS may be past the expiration date, but the FDA has extended the shelf life but also advised any equipment that appears compromised should not be used. Dr. Fales addressed reuse of PPE. He said we are currently in conserving mode, but not in reuse mode, except in local situations where it may be reusable. Dr. Fales spoke about potential timelines for this response. This could be weeks or months. Breathable bags must be used for storage of PPE to be used.

- There have been inquiries for SCBA and Dr. Fales said that may be an extreme scenario and discussed.
- Dr. Fales addressed fit testing. It is important to make sure that the mask works. Individuals must be fit tested for N95 on the type of mask they will be using. NIOSH has suspended the requirement for annual fit testing in certain circumstances. More information can be found here. Mechanisms should be put in place to ensure fit. Guidance will be issued on this.
- Workforce protection is important. Dr. Fales said it starts with an educated and informed workforce. He said MCAs and Medical Directors should remain on top of these rapid changes, and he spoke about distribution channels for information.
  - He spoke about prescreening during dispatch. CDC guidelines are changing, and travel history is no longer as relevant due to community spread. Dr. Fales spoke further about dispatch. They are primarily looking for is fever, respiratory symptoms, cough and shortness of breath. Dr. Fales said these will probably get revised again, so it is important that revisions are implemented in a timely manner as they come out. Field providers must be vigilant, and he discussed tiered response.
  - For scene management, limiting personnel with close access to the patient is still necessary. He discussed the importance and said this should be in place regularly, not just in this response. Scene safety and being alert is necessary. Dr. Fales spoke about procedures to limit airborne particles and advised not to place N95 masks on the patients. He spoke about limiting of aerosolized procedures.
  - He spoke of the CDC guidelines on transport.
  - He reminded everyone again about hand hygiene and how important it is, and he spoke about decontamination of the patient compartment and driving compartment.
  - He spoke about workforce screening. Some model best practices and guidance will be developed for distribution. If EMS is in contact with a known coronavirus patient and they had appropriate PPE with no compromise of the PPE ensemble, business can go on as usual. If the PPE was compromised, there is a wide array of different meanings. There can be a variety of reasons this occurs, including unrelated dispatch information. Policies need to be developed for risk assessments. This will drive the need for removal and return to duty.
  - The last piece on workforce protection is mental health considerations.
- Emergency protocols that have been released can be adopted immediately. He referred everyone to [www.michigan.gov/emsCOVID](http://www.michigan.gov/emsCOVID), and also went over various communication avenues that should be frequently monitored. This is not a drill. New clinical protocols will be coming out that address various concerns. Breathing and ventilation were discussed.
  - He discussed the protocol that was released last night for telemedicine. Ebridge is a product that is getting ready to be rolled out statewide. It has been made available at no charge for six months. The DET is working on the implementation for this through the Regional MCA Networks. He suggested reviewing the protocols and think about how you can use it.

#### 4. Summary of Response

Emily Bergquist, EMT-P I/C, MSA  
Medical Control Authority Coordinator  
Division of EMS and Trauma

- Emily said Regional MCA Networks should send their three names for administrators to Krisy Kuhl at [kuhlk2@michigan.gov](mailto:kuhlk2@michigan.gov). There is a training scheduled for tomorrow.
- Surgical masks have not arrived from the SNS deployment yet. N95 masks and gowns have been received.
- Kathy reminded everyone to sign up for the health alert network ([MIHAN](#)).

#### 5. Q&A

All

- A participant asked about hospital responsibilities to advise EMS of a positive COVID-19. Dr. Fales said EMS personnel are considered the same as hospital personnel. Information should be pushed to the hospital and EMS. The local public health department is notified, as well as the hospital. The local public health department is primary, but hospitals also have the responsibility to notify. The MCA may also help. He then asked if there were thought in the field with replacing nebulized treatments with metered dose treatments and Dr. Fales addressed.
- A participant said they are being directed to countywide EOC instead of the regions and asked for guidance. Dr. Fales said medical request/healthcare resource, those should go through the HCCs. Non-life support agencies should be going through emergency management. Kathy said we strongly encourage the HCCs to work closely with the EOCs. This is unprecedented and everyone needs to stay in the loop.
- A participant asked about beard shaving and if there is guidance to support enforcement. Kathy addressed. Additional fit tests would need to be done for new facial hair, and other changes, such as gain or loss in weight. The agency has the ultimate responsibility for workplace safety. This is to keep the workforce safe.
- A participant said in the rural areas, they share employees, which could cause multiple agencies to go down at once. Kathy said suggested statutory language has been submitted to address things that have come up with this response. Staffing requirements are being looked at. The participant also asked about long distance transfers that aren't necessary. Dr. Fales addressed.
- A participant asked about waiving CE requirements. Emily addressed.
- A participant asked if the state has reduced requirements for fly cars. Emily said this is addressed in the conventional response protocols. Dr. Fales said to work with your local MCA.
- A participant asked about EMS providers not being able to get credits due to classes being cancelled and will there be any extensions. Kathy said this will be looked at but is not making any promises.

- A participant asked if this is being recorded and can it be shared. Emily said someone is taking notes and those will be posted.
- A participant asked about readdressing priority three calls and 30-minute timeline. Dr. Fales addressed. This was put in place to try and decrease risk to first responders. The situation brought up should be addressed by local medical control.
- A participant asked about surgical masks and Dr. Fales addressed.
- The meeting has run out of time. Questions should be sent to [MDHHS-MichiganEMS@michigan.gov](mailto:MDHHS-MichiganEMS@michigan.gov).

6. Future Calls

Statewide EMS COVID-19 Call

March 31, 2020 at 2:00pm

- Emily said these calls will continue every two weeks. Topic suggestions for items to address can be sent via email at [MDHHS-MichiganEMS@michigan.gov](mailto:MDHHS-MichiganEMS@michigan.gov).

Attendees:

Scott Minaudo, Krisy Kuhl, Colleen Nethaway, Alissa Stephens, Lacy Ryal, Kevin Putman, Nicole Babb, Emily Bergquist, Derek Flory, Kathy Wahl, Erika Hendy, Sabrina Kerr, Terrie Godde, Lee-ellen Bailey, Anthony Pantaleo, Samantha Mishra, Lynn Nelson, Angela Madden, Dr. Fales. A total of 436 people were on the call, with a peak of 363 attendees, per the report from the phone company.

The call was called to order at 2:00 p.m.

The call was closed at 3:17 p.m.