

# Georgia OEMS Update – COVID-19

David Newton / Friday, 4/24/2020



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## Agenda

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- Operations:
  - Reminders
  - COVID-19 Notifications to First Responders
  - Battelle Decontamination System
  - Scope of Practice for EMS Personnel
  - Considerations for Transport/Transfer of COVID-19 Patients
  - Data Reporting Requirements
  - EMSMDAC
  - Considerations for alternative care
  - Questions on Operations
- Education
  - New File Review Forms
  - Questions on Education

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## Reminders

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- OEMS Updates on our website – [www.ems.ga.gov](http://www.ems.ga.gov)
  - Not all updates are emailed out – some are posted on the OEMS COVID-19 page
- All licensed personnel need to log into LMS and put in their email address
- Agencies must update rosters and Key Personnel
- PPE
  - Requests
  - Conservation methods
  - Agencies should have a plan in place if SNS supplies are not available

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## COVID-19 Notifications to First Responders

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- Two parts
  - Prospective
    - Testing data is received by DPH
    - Daily cases are pulled and sent to 911 PSAPs (GEMA/HS)
    - 911 PSAPs create flag for address
    - 911 call at a flagged address
  - Retrospective
    - Hospitalized Patients vs. Non-hospitalized patients
    - Regional EMS Staff notifications to First Responder Agencies
- For this to work:
  - All EMS Agencies must submit data on ALL calls
  - MUST have the correct:
    - Patient First Name
    - Patient Last Name
    - Patient Date of Birth

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## Calculation of Onset Date

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- Updated to be Specimen Collection Date if reported to DPH – if not then Date of Report.
- Resulted in ~200 delayed notifications – out of 4645 total run notifications (as of 4/23/2020).

## Battelle Decontamination System

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- You should have received an email regarding this
- <https://dph.georgia.gov/EMS/oems-covid-19>

—————→ **Battelle Decontamination System (as of 4/13/2020)**



# Scope of Practice for EMS Personnel

- <https://dph.georgia.gov/EMS/protocols-and-scope-practice>



## Current Georgia Scope of Practice for EMS Personnel

- [PDF Scope of Practice for EMS Personnel \(SOP-2020-1\) - Last Updated 4/23/2020](#)
- [PDF Post-Licensure Skills for Paramedics \(PLS\)-2020-1\) - Last Updated 4/23/2020](#)
- Recent Changes:
  - 4/23/2020 - Extended the mandatory date of compliance with the Post-Licensure Skills for Paramedics to January 1, 2021. Also separated the Post-Licensure Skills for Paramedics from the main Scope of Practice.
  - 4/23/2020 - Added "Perform specimen collection for infectious diseases." to Assessment Skills. This was added to help the COVID-19 specimen collection and testing efforts in Georgia.
  - 4/23/2020 - Added "Administration or maintenance of high flow oxygen via nasal cannula." to Post-Licensure Skills.

## 2020 Georgia Scope of Practice for EMS Personnel Training:

- [PDF PowerPoint Presentation](#)
- [Recorded Webinar](#) from 12/27/2019. We are unable to offer CEUs for watching the recorded webinar.
- Note: The Training does not include the information related to high flow nasal cannulas or the specimen collection that were added on 4/23/2020.

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Assessment Skills		Levels					Interpretive Guidelines
3.	Specimen Collection						
	a. Perform specimen collection for infectious diseases.	E*	I	A	C	P	This includes the use of the following specimen collection types: oropharyngeal swab, nasal mid-turbinate swab, anterior nares swab, nasopharyngeal wash/aspirate, saliva collection, and nasal aspirate. This would also include any additional appropriate specimen collection types for diseases related to a declared public health emergency. Prior to performing specimen collections, EMS personnel must be trained on the correct specimen collection procedure and must have approval of a physician. EMTs are not permitted to perform venipuncture for specimen collection.

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## Considerations for Transfer of COVID-19 Patients

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- As EMS transfers of hospitalized COVID-19 positive patients is occurring with more frequency, it may be helpful to employ new strategies that consider PPE shortages and exposure concerns.
- The most important factor is having EMS and hospital agreement on what the transfer process will include. Please communicate with your partners and educate your staff on whatever protocols you establish for your facility or agency.
- A couple of strategies that may be considered include:
  - Have hospital staff transport the patient to a predetermined transfer room within the Emergency Department
    - This limits EMS contact within the facility, and ensures hospital staff have oversight of the patient until they exit the facility
  - Have EMS meet the patient at the doorway to the patient's room
    - This limits EMS contact inside the patient's room and ensures hospital staff assist with the patient's transition from the hospital bed to the EMS stretcher

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## Nursing Homes

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- The relationships on the local level are strongly encouraged therefore please continue to communicate with your NH/LTCFs on a preferred protocol
- If EMS agencies have available EMS stretchers to place at the NH/LTCF:
  - Leave a stretcher at the facility
  - The staff at the facility would transfer the patient to that stretcher, cover the patient with a clean sheet, and then bring the patient to the designated meeting place to meet the responding EMS crew.
  - The patient can then be transferred to the stretcher from the ambulance, and the EMS stretcher that stays at the facility can be decontaminated by the nursing home staff for use when the patient comes back or for another patient.

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## Issues with Nursing Homes and Hospitals

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- Let your Regional EMS Director know – they will forward up the chain

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## Data Reporting Requirements

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- If you have an EMS agency license in Georgia, you MUST report ALL EMS calls for each unit to GEMSIS Elite
- If the crew comes into contact with the patient at all, the ePCR must include the patient's demographics
- If your EMS agency is also licensed in another state – any call that starts OR ends in Georgia – you must submit to GEMSIS Elite
- Data must be submitted to GEMSIS Elite within 24 hours of call completion
- Medics must be the ones to enter the data into an ePCR system (paper PCRs are not acceptable on a routine basis). See *Emergency Rule 511-9-2-0.2-.20 Emergency Medical Services Rules for COVID-19 Response*
  - <https://dph.georgia.gov/media/58796/download>

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## EMSMDAC

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- EMSMDAC met on Tuesday, 4/21/2020 – with some great discussions about clinical and operational issues and best practices related to COVID-19
- During COVID-19, EMSMDAC will meet monthly – next one on Tuesday, May 19, 2020 at 11am
- <https://gdph.webex.com/gdph/j.php?MTID=m052492df6cff6291bf7236834bd6fcd0>

## Considerations for alternative care

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- Agencies should consider (**now**, don't wait on this):
  - Nebs vs MDI
  - Cardiac Arrest Response/Care (see latest AHA guidance)
  - Response modes to private residence/NH/LTCF/Hospitals

## COVID-19 CLINICAL ROUNDS

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- EMS – Mondays at Noon
- [https://echo.zoom.us/webinar/register/WN\\_if65a4x5SHmc92vGAu6BJA](https://echo.zoom.us/webinar/register/WN_if65a4x5SHmc92vGAu6BJA)
- Sign up to receive the latest news from the NHTSA Office of EMS, including webinars, newsletters and industry updates.
- <https://public.govdelivery.com/accounts/USDOTNHTSAEMS/subscriber/new>

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## Questions on Operations?

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- Stay healthy and stay safe!

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## EMS Education Programs

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**Information for EMS Initial Education Programs  
(Updated 4/17/2020)**



**Pearson VUE Testing Availability Search (Updated  
4/23/2020)**



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## Information for EMS Initial Education Programs (Updated 4/17/2020)

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- For the latest guidance on what modifications to EMS initial education programs are permitted during the COVID-19 Public Health Emergency, click [HERE](#). This document includes the information shared on the WebEx on Wednesday, 4/15/2020.
- **NOTE:** *Any cohort graduating on or after 5/1/2020 should use the 2020 version of the EMT, AEMT, or Paramedic File Review Forms, respectively. The new file review forms are required for all cohorts graduating on or after 6/1/2020. These new file review forms are also required for any cohorts that are modifying their requirements due to COVID-19.*

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## New File Review Forms

<https://dph.georgia.gov/EMS/ems-forms-and-related-documents>

- Changes:
  - Slight change to formatting
  - Excel instead of PDF – fillable- red boxes
  - Must complete one for each student, enter all values (they will total for you), and then print
    - Must be signed in wet ink by student and course coordinator/instructor
    - Is a legal document – do not falsify – ALL numbers must be backed up by evidence of those numbers
  - Scan the signed document into a PDF format, and this will be uploaded into SENDSS (soon to be LMS)
  - Will change slightly after COVID

## Forms Related to EMS Initial Education Programs

- [T-04-A EMS Education Program Application](#)
- Initial Education File Review Forms - updated 4/22/2020 for COVID-19
  - [EMT](#)
  - [AEMT](#)
  - [Paramedic](#)
- [EMT Psychomotor Exam Report](#)
- Psychomotor Exam Skills Verification Sheets - [EMR](#) | [EMT](#)

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**DPH** Office of EMS and Trauma  
**EMT File Review**

Student Name: \_\_\_\_\_  
 OEMS Course Approval Number: \_\_\_\_\_  
 Course Program Name (Location): \_\_\_\_\_  
 Course NREMT Site Code: \_\_\_\_\_  
 Course Coordinator (Name/License #): \_\_\_\_\_

Course Completion: \_\_\_\_\_  
 File Review: \_\_\_\_\_  
 Psychomotor Exam: \_\_\_\_\_

Course Dates: \_\_\_\_\_  
 Not CBT Exam: \_\_\_\_\_  
 BLS HCP Exp. Date: \_\_\_\_\_  
 TBM Training Date: \_\_\_\_\_

Sim = Simulation, NMS = Not State-Specific, Tral = Traditional (Non-simulation)

Clinical/Field Area	OEMS		COMPLETED		Total
	Tral	Sim	Tral	Sim	
Clinical/Emergency Room	NMS	NMS	0	0	0
Clinical/ Urgent Care Clinic	NMS	NMS	0	0	0
Clinical/ Nursing Home	NMS	NMS	0	0	0
Clinical/ Doctor's Office	NMS	NMS	0	0	0
Clinical/ Other	NMS	NMS	0	0	0
Field- Med. First Responder	NMS	NMS	0	0	0
Field- Ambulance	NMS	NMS	0	0	0
Clinical TOTAL	NMS	NMS	0	0	0
Field TOTAL	NMS	NMS	0	0	0
<b>TOTAL NMS (Clinical + Field)</b>	NMS	NMS	0	0	0

Need to verify in SENDSS if you did not verify in a clinical/field portfolio available at the stated program location, and that I understand that falsification of this record may be grounds for denial from the program or sanction of a EMS Provider license that may be issued to me following the completion of this program, or that I may already possess.

**PATIENT ASSESSMENTS BY AGE**

Age Group	OEMS		COMPLETED		Total
	Tral	Sim	Tral	Sim	
Peds: Newborn (0-1 month)	NMS	NMS	0	0	0
Peds: Infant (1 month - 1 yr)	NMS	NMS	0	0	0
Peds: Toddler (1-3 yr)	NMS	NMS	0	0	0
Peds: Preschooler (4-5 yr)	NMS	NMS	0	0	0
Peds: School age (6-12 yr)	NMS	NMS	0	0	0
Peds: Adolescent (13-17)	NMS	NMS	0	0	0
Peds: Total	NMS	NMS	0	0	0
Adult (18-64 yr)	NMS	NMS	0	0	0
Adult (65+)	NMS	NMS	0	0	0
<b>TOTAL ASSESSMENTS</b>	NMS	NMS	0	0	0

**PT ASSESSMENTS BY PATHOLOGY**

Pathology	OEMS		COMPLETED		Total
	Tral	Sim	Tral	Sim	
Obstetrics	NMS	NMS	0	0	0
Trauma	NMS	NMS	0	0	0
Psychiatric	NMS	NMS	0	0	0
Cardiac	NMS	NMS	0	0	0
Cardiac Arrest	NMS	NMS	0	0	0
CVA	NMS	NMS	0	0	0
Respiratory	NMS	NMS	0	0	0
Neuro	NMS	NMS	0	0	0
Other	NMS	NMS	0	0	0
<b>TOTAL PT ASSESSMENTS</b>	NMS	NMS	0	0	0

**SKILLS COMPLETED**

Skill	OEMS		COMPLETED		Total
	Tral	Sim	Tral	Sim	
Supplemental O <sub>2</sub>	NMS	NMS	0	0	0
Basic Airway	NMS	NMS	0	0	0
Respiratory	NMS	NMS	0	0	0
Vital Signs	NMS	NMS	0	0	0
Manual Ventilation*	NMS	NMS	0	0	0
Manual Suction (if O2 must be in Scope)	NMS	NMS	0	0	0
CPR	NMS	NMS	0	0	0
Resuscitation Control	NMS	NMS	0	0	0

As the **instructor/course coordinator** named above, I hereby attest that this student has completed the above hours, skills, and patient assessments during the field/clinical portion of their EMT program, all numbers listed above may be verified in a clinical/field portfolio available at the stated program location, and that I understand that falsification of this record may be grounds for denial from the program or sanction of a EMS Provider license that may be issued to me following the completion of this program, or that I may already possess.

Course Coordinator Name (printed): \_\_\_\_\_  
 Course Coordinator Signature: \_\_\_\_\_  
 Date Signed: \_\_\_\_\_

One copy of this document should be given to the student, with the original retained by the Course Coordinator. The Course Coordinator/Program Director will enter the data from this form into the SENDSS system prior to the student being allowed to take the NREMT EMT level exam. This document will be made available to the regional EMT office upon request.

**DPH** Office of EMS and Trauma  
**Advanced EMT File Review**

Student Name: \_\_\_\_\_  
 NREMT/USA EMT # and Exp Date: \_\_\_\_\_  
 OEMS Course Approval Number: \_\_\_\_\_  
 Course Program Name (Location): \_\_\_\_\_  
 Course NREMT Site Code: \_\_\_\_\_  
 Course Coordinator (Name/License #): \_\_\_\_\_

Course Completion: \_\_\_\_\_  
 File Review: \_\_\_\_\_  
 Psychomotor Exam: \_\_\_\_\_

Course Dates: \_\_\_\_\_  
 Not CBT Exam: \_\_\_\_\_  
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Sim = Simulation, NMS = Not State-Specific, Tral = Traditional (Non-simulation)

Clinical/Field Area	OEMS		COMPLETED		Total
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Clinical/ Nursing Home	NMS	NMS	0	0	0
Clinical/ Doctor's Office	NMS	NMS	0	0	0
Clinical/ Other	NMS	NMS	0	0	0
Field- Med. First Responder	NMS	NMS	0	0	0
Field- Ambulance	NMS	NMS	0	0	0
Clinical TOTAL	NMS	NMS	0	0	0
Field TOTAL	NMS	NMS	0	0	0
<b>TOTAL NMS (Clinical + Field)</b>	NMS	NMS	0	0	0

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Peds: Preschooler (4-5 yr)	NMS	NMS	0	0	0
Peds: School age (6-12 yr)	NMS	NMS	0	0	0
Peds: Adolescent (13-17)	NMS	NMS	0	0	0
Peds: Total	NMS	NMS	0	0	0
Adult (18-64 yr)	NMS	NMS	0	0	0
Adult (65+)	NMS	NMS	0	0	0
<b>TOTAL ASSESSMENTS</b>	NMS	NMS	0	0	0

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Psychiatric	NMS	NMS	0	0	0
Cardiac	NMS	NMS	0	0	0
Cardiac Arrest	NMS	NMS	0	0	0
Medical	NMS	NMS	0	0	0
Respiratory	NMS	NMS	0	0	0
Neuro	NMS	NMS	0	0	0
Other	NMS	NMS	0	0	0
<b>TOTAL PT ASSESSMENTS</b>	NMS	NMS	0	0	0

**SKILLS COMPLETED**

Skill	OEMS		COMPLETED		Total
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Respiratory	NMS	NMS	0	0	0
Vital Signs	NMS	NMS	0	0	0
Manual Ventilation*	NMS	NMS	0	0	0
Manual Suction (if O2 must be in Scope)	NMS	NMS	0	0	0
CPR	NMS	NMS	0	0	0
Resuscitation Control	NMS	NMS	0	0	0
Field Triage Level (TL)	NMS	NMS	0	0	0
Non-marked assessment for preceptor	NMS	NMS	0	0	0

As the **instructor/course coordinator** named above, I hereby attest that this student has completed the above hours, skills, and patient assessments during the field/clinical portion of their AEMT program, all numbers listed above may be verified in a clinical/field portfolio available at the stated program location, and that I understand that falsification of this record may be grounds for denial from the program or sanction of a EMS Provider license that may be issued to me following the completion of this program, or that I may already possess.

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## Questions on Education?

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- Stay healthy and stay safe!