

Georgia OEMS Update – COVID-19

David Newton / Friday, 5/1/2020



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Agenda

- Operations:
 - Reminders
 - Data Reporting Requirements
 - PPE & Battelle Decontamination System
 - Considerations for Hospital/NH/LTCF
 - Provisional Licenses
 - Renewals
 - CDC Updates
 - Regional Council Meetings
 - Pearson Vue
 - Questions

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Reminders

- OEMS Updates on our website – www.ems.ga.gov
 - Not all updates are emailed out – some are posted on the OEMS COVID-19 page
 - <https://dph.georgia.gov/EMS/oems-covid-19>
- EMS Personnel → Put your email in LMS
- EMS Agencies → Update rosters and Key Personnel
- PPE → Conserve it, Reuse it (appropriately), Decontaminate, Have a plan

Data Reporting Requirements – State Reporting

- To clarify from last week:
 - **EMS Agency Licensed in Georgia only**
 - ◻ **All calls**, regardless of starting/ending location or dispatch origin MUST be reported to Georgia (GEMSIS Elite) within 24 hours of call completion
 - **EMS Agency Licensed in Georgia and another state**
 - ◻ **All calls** requested (originator) from a Georgia entity (911, hospital, NH/LTCF, etc) – MUST be reported to Georgia (GEMSIS Elite) within 24 hours of call completion, regardless of the destination
 - ◻ **All calls** requested (originator) from another state:
 - If call is completed in a vehicle licensed in both states (Georgia and the other state), report the call to the other state
 - If call is completed in a vehicle licensed only in Georgia – MUST be reported to Georgia (GEMSIS Elite) within 24 hours of call completion, regardless of starting/ending location
 - **NEW:** If call is being staffed by Georgia licensed personnel only in a Georgia licensed vehicle, then this call MUST be reported to Georgia (GEMSIS Elite) within 24 hours of call completion, regardless of starting/ending location

Data Reporting by the Numbers for EMS Agencies

- For each **Incident**:
 - There must be a unique **eResponse.03 - Incident Number**
 - ▣ This must be the same for ALL vehicles, ALL patients for THIS incident
 - ▣ *"This number can be used to associate multiple EMS responses, dispatch information, and other information to the same EMS event or patient."*
- For each **Vehicle**:
 - There must be a unique **eResponse.04 - EMS Response Number**
 - ▣ This must be the same for ALL patients for THIS vehicle for THIS incident
 - ▣ *"The internal EMS response number which is unique for each EMS Vehicle's (Unit) response to an incident within an EMS Agency."*
- For each **Patient**:
 - There must be a unique **eRecord.01 - Patient Care Report Number**
 - ▣ *"The unique number automatically assigned by the EMS agency for each Patient Care Report (PCR). This should be a unique number for the EMS agency for all of time."*

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Examples for an EMS Agency

- **Example 1:** One vehicle responds to one patient for a single 911 call:
 - 1 unique eResponse.03 - Incident Number
 - 1 unique eResponse.04 - EMS Response Number (can be the same as eResponse.03)
 - 1 unique eRecord.01 - Patient Care Report Number
- **Example 2:** Two vehicles (one MFR, one ambulance) responds to one patient for a single 911 call:
 - 1 unique eResponse.03 - Incident Number
 - 2 unique eResponse.04 - EMS Response Number
 - 2 unique eRecord.01 - Patient Care Report Number

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Examples for an EMS Agency (continued)

- **Example 3:** Two vehicles from **same** agency (one MFR = Engine 1, one ambulance = Med 1) – two car MVC, 4 patients – all refusals that are split between the two vehicles -
 - 1 unique eResponse.03 - Incident Number – same for E1 & M1
 - 2 unique eResponse.04 - EMS Response Number (one for E1, one for M1)
 - For Engine 1
 - 2 unique eRecord.01 - Patient Care Report Number (one for Pt 1, one for Pt 2)
 - For Med 1
 - 2 unique eRecord.01 - Patient Care Report Number (one for Pt 3, one for Pt 4)

Another Twist

- **Example 4:** Two vehicles from **different** agencies (one MFR = Engine 1, one ambulance = Unit 222) – two car MVC, 4 patients – all refusals that are split between the two vehicles -
 - MFR Agency (E1):
 - 1 unique eResponse.03 - Incident Number
 - 1 unique eResponse.04 - EMS Response Number
 - Patients that they come into contact with:
 - Patient 1 = 1 unique eRecord.01 - Patient Care Report Number
 - Patient 2 = 1 unique eRecord.01 - Patient Care Report Number
 - Ambulance Agency (Unit 222):
 - 1 unique eResponse.03 - Incident Number
 - 1 unique eResponse.04 - EMS Response Number
 - Patients that they come into contact with:
 - Patient 3 = 1 unique eRecord.01 - Patient Care Report Number
 - Patient 4 = 1 unique eRecord.01 - Patient Care Report Number

Data Reporting Requirements

- If the crew comes into contact with the patient at all, the ePCR ***must*** include the patient's demographics (minimum = First Name, Last Name, DOB)
 - We can't notify you of possible exposure to COVID-19 patient if you don't give us the basic information
- 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>

Accuracy and Timeliness of Data

- Data must be submitted to GEMSIS Elite within 24 hours of call completion

PPE and Battelle

- PPE is Extremely limited
 - Gowns are extremely limited **Nationally**
 - We are receiving PPE from Federal Procurement
- Battelle Decontamination System – HIGHLY Encouraged
 - You should have received an email regarding this regarding N95 mask decontamination
 - <https://dph.georgia.gov/EMS/oems-covid-19>

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



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Considerations for Hospital/NH/LTCF

- Communicate, Plan, Prepare, Perform
 - Work out with your hospitals/NH/LTCF NOW on best way to facilitate picking up/dropping off patients
 - NOT recommended for EMS to expend multiple PPE sets to just pick up the patient from a hospital
 - For NH/LTCF – work out how to meet outside of patient's room (designated meeting place)



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Issues

- Issues with Nursing Homes and Hospitals
 - Let your Regional EMS Director know – they will forward up the chain
- Other
 - Remember that people may be scared during this time...but they are our patients, our coworkers, our stakeholders, our customers...
 - ▣ Be understanding
 - ▣ Be helpful
 - ▣ If something seems amiss, say something

Provisional Licenses

- Now that there are some Psychomotor Exams being held, we will have a transition application soon to move from a Provisional License to a Standard License
 - No fee
 - No new background check
 - Expiration date moves from 12/31/2021 → 3/31/2022

Renewals

- For those expiring on 6/30/2020
 - Expiration dates will **NOT** be extended again – this was a ONE time thing
 - 1268 medics
- Late Renewals (for those who expired on 3/31/2020)
 - Late Renewal fee is waived until 6/30/2020
 - 869 medics
- Other numbers
 - Total reinstatements = 63
 - Total temporary = 55
 - Total provisional = 80
 - Total medics = 23,145

CDC Updates

- CDC – Coronavirus:
 - **What's New Link:** <https://www.cdc.gov/coronavirus/2019-ncov/whats-new-all.html>
- CDC Symptom updates
 - Several printable flyers are included that your communications team may find useful.
 - <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>
- Criteria for return to work by healthcare personnel updated
 - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>
- Discontinuation of Transmission-Based Precautions and Dispositions of Patients with COVID-19 in Healthcare Settings (Interim Guidance)
 - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>
- Ten Clinical Tips on COVID-19 for Healthcare Providers Involved in Patient Care
 - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-tips-for-healthcare-providers.html>
- As referenced in the Ten Clinical Tips document, the NIH has developed treatment guidelines for COVID-19 that are regularly updated
 - <https://covid19treatmentguidelines.nih.gov/introduction/>
- First Responders and Law Enforcement
 - <https://www.cdc.gov/coronavirus/2019-ncov/community/first-responders.html>

Regional Council Meetings

- Should continue to meet virtually
- OEMS will setup the WebEx for you (up to 1000 people)
- Must comply with Open Meetings

Pearson Vue/NREMT

- More Pearson Vue sites opening up today
- Not just EMS and Nursing
- NREMT is instituting remote proctoring EMT and AEMT

Questions?

- Stay healthy and stay safe!