

## 12/3/20 Municipal & First Responder Call Notes

### I. **Welcome and Introduction:** VEM Director Erica Bornemann

- This is the weekly call for first responders, EMDs, RPCs, and municipal officials.
- The next call will be on Thursday, December 10<sup>th</sup> at 2PM. The invitation will go out on Monday, December 7<sup>th</sup>.
- The meeting invitations include a link to a survey we use to guide our talking points. The survey will only capture one question per response. To ask multiple questions, fill out the survey multiple times. The survey link will not change week to week.
- On today's call we will hear from DEPRIP Director Dan Batsie, and Vermont State Police Captains Mike Manley and Lance Burnham. In addition, we have Department of Public Safety Commissioner Michael Schirling, Vermont League of Cities and Towns Public Policy and Advocacy Director Karen Horn, and Fire Academy Chief Peter Lynch available to answer questions. We will be providing you all an overview of the State's response to COVID-19 and we will have time for additional questions at the end of the call.
- FAQs will be updated as needed and can be found at: <https://vem.vermont.gov/coronavirus>
- From this site you can also click on the "[Call Notes](#)" section on the left-hand side where we will post notes from this call. It will be added to the list of First Responder Notes.

### **AGENDA:**

- I. **Intro/call format**
- II. **COVID-19/VDH Overview**
- III. **SEOC Overview/VEM Comments**
- IV. **VSP Comments**
- V. **Q&A with participants**

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### II. **COVID-19 Overview/VDH Comments:** HOC Incident Commander and DEPRIP Director Dan Batsie

- Overall update on COVID-19 in Vermont
  - Vermont just recorded 178 cases of COVID-19 for yesterday, another record-breaking figure. This count has somewhat artificially inflated through the new addition of probable cases and the inclusion of a backlog of cases reported through UVM (after resolving technical difficulties). Despite these caveats, it's still a high number, and could be the beginning of a post-Thanksgiving case bump.
  - A total of 716 COVID-19 cases were reported in the last week.
  - The COVID-19 death rate in Vermont is increasing. There have been 75 deaths so far, 17 of which were in the last 30 days and 11 of which were in the last week. This new growth is largely attributable to outbreaks at long-term care facilities.
  - There has also been an uptick in hospitalizations. 24 people are hospitalized with COVID-19 today, 4 of whom are in intensive care. However, none are on ventilators.
  - For a bit of good news, case counts in Washington County are going down a bit.
  - For a point of comparison, Wyoming has a slightly smaller population than Vermont and less population density, yet is experiencing many times more COVID-19 infections and deaths.
- There are 35 current COVID-19 outbreaks and 161 situations. These are spread across worksites, healthcare facilities, schools, etc. However, keep in mind that an outbreak can have as few as 2 cases and a situation can have as few as 1.
- Testing/tracing updates
  - In addition to ongoing COVID-19 testing efforts at pop-up sites, pharmacies, and hospitals, the State is implementing on-demand, 7-day-a-week testing locations around Vermont, to provide consistent, accessible COVID-19 testing to everyone. There are currently 14 such sites, with the goal of making testing available within a 30-minute drive of every Vermonter.
  - The Department of Health is working with the SEOC on plans to provide surveillance testing to first responders. The details are still being worked out. Possibilities include blocking off time at on-demand

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- testing sites for first responders, or more formalized testing at stations themselves. More information will be available in the coming weeks.
- The Department of Health has resources available to fire, EMS, and law enforcement agencies whose operations are impeded by quarantining staff. We want to make sure departments have access to someone with expertise to talk through the situation with. More information will be available soon. Any department with COVID-19 exposures or quarantines impacting operational capacity should reach out to the Department of Health or the SEOC.
  - Vaccination planning updates
    - It's looking like the first doses of COVID-19 vaccine will arrive in Vermont in mid-December, but there is no specific date yet.
    - The State is working on a strategy to prioritize distribution, taking cues from the CDC and working with stakeholders. The vaccine will go to those at the highest risk first. First responders are included in Phase 1A.
    - Distribution and administration will be through different partners, including hospitals, primary care clinics, and pharmacies. Also central to the effort will be EMS agencies, which can contract with the State to administer the vaccine (ALS providers only). EMS agency heads that want to be involved should reach out to Dan Batsie.
    - In the first 8 hours after requesting vaccine help from EMS agencies, 18 departments offered help. And that figure since climbed to 24 agencies. This willingness to help is a testament to Vermont EMS's commitment to public service. More information is forthcoming.
    - Information on the specifics of the vaccines received by Vermont will be published when available.
    - We received a question about whether the COVID-19 vaccine will be mandatory for EMS providers, and how that would impact PPE guidance.
      - I don't anticipate a state-level COVID-19 vaccination mandate for EMS providers, just a strong recommendation. Individual EMS agencies may decide to require it, however. No formal decisions on this topic have been made yet.
  - We received a question about updating the town-by-town case map more regularly and notifying town officials of local outbreaks.
    - The town-by-town map cannot be updated more regularly, because the Department of Health simply does not have the resources to do so. Data need to go through a cleaning and review process before being posted.
    - The Department of Health will look into communicating with towns more efficiently. The Department's district offices are the entities responsible for local outreach. The district offices work closely with towns during larger outbreaks. However, most outbreaks and situations are limited in scope and do not warrant town attention, a change in guidance, or other local action items.
  - EMS updates
    - In last 7 days, 4 EMS agencies had to quarantine personnel, sometimes many at once, because of a failure to follow PPE guidance during an exposure. Please take the time to understand the guidance and follow it. It's hard, it's tiresome, we're all sick of it. But now more than ever, we must take responsibility. If you have questions, ask. Wear masks in any gathering. Wear eye protection, gloves, and a surgical mask during every patient encounter. High-risk situations require an N95 mask, a gown, eye protection, and gloves.
    - As a reminder, please look over the new [EMS education](#) and [non-emergency activity](#) guidance released in mid-November.
    - Agency stabilization grant funding is currently being distributed. This grant is for EMS agencies that lost call volume during the spring.

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- This week, the Office of EMS is issuing workforce stabilization grant payments, which go to EMS agencies to in turn give to their providers, similar to hazard pay. The Office of EMS is working on answers to frequently asked questions about this program. For instance, EMS agencies that already provided hazard pay to their employees through the state hazard pay program or the Local Government Expense Recovery (LGER) program are ineligible.
  - Vermont's new EMS chief, Will Moran (previously of Essex Rescue Inc.) will start on December 28<sup>th</sup>. He is already attending transition meetings, so he can hit the ground running.
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### III. SEOC Overview/VEM Comments: VEM Director Erica Bornemann

- As Director Batsie mentioned, COVID-19 cases are spiking in Vermont. The latest modeling anticipates further increases due to Thanksgiving travel and gatherings. We're monitoring the situation closely. Just because Thanksgiving is behind us doesn't mean we can disregard COVID-19 guidance. Rather, we must mind the guidance and the restrictions throughout the holiday season. We must be models to those watching us. We have to make these sacrifices for all of us to pull through.
- **SEOC status:** The SEOC remains activated every weekday in support of the COVID-19 response from 0800 until 1600. On the weekends, the SEOC is in monitoring status, meaning the watch officer is the point of contact for any resource needs that arise. The SEOC is entirely virtual.
- **Weather update:**
  - We are monitoring the potential for a coastal storm system to bring accumulating snow to portions of Vermont and northern New York Saturday night into Sunday. The exact timing and storm track remain uncertain at this time which will be an important factor in determining snowfall amounts across the North Country.
  - Hazardous Weather Outlook has been issued in Bennington and Windham counties, and in several other neighboring states/counties. We will continue to monitor the situation and we urge you all to do that same, as this storm has the potential to have significant impacts to Vermont if it tracks further inland (per the European Model).
- **Recent policy updates:**
  - Back on November 20<sup>th</sup>, the day after our last call, Governor Scott updated [addendum 8 to the executive order](#), clarifying when people from different households can interact, despite the ongoing ban on multi-household gatherings:
    - Those in dangerous or unsafe situations can leave their household and seek shelter with another.
    - Those living alone can interact with one other household.
    - 2 people from different households can do outdoor activities together, as long as they maintain 6 feet of distance and wear masks.
- **SEOC active missions that have been progressing this week:**
  - The Farmers-to-Families food box program, run by the Vermont Foodbank, is ongoing through December 31<sup>st</sup>. Reservations through the 11<sup>th</sup> are available on [www.dhr.vermont.gov/food-help](http://www.dhr.vermont.gov/food-help).

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- The SEOC established a centralized Vaccine Depot as a component of the Medical Countermeasures response. The facility has ample cold chain storage capacity for proper vaccine storage and other infrastructure needed to receive, store, and re-distribute COVID-19 vaccines and ancillary supplies as they arrive into Vermont.
- There are several ongoing missions related to staffing:
  - Emergency service organizations with service interruptions due to COVID-19 should reach out to the SEOC. Our Safety and Security Branch is focused on helping with exactly these sorts of requests. The SEOC can be reached 24/7 at: 800-347-0488.
  - Towns that anticipate local and neighboring road crew resources will be inadequate for route-clearing during snowstorms should reach out to the SEOC preemptively. Mutual aid may be unavailable during a large storm. It can be more challenging to send help during a storm than staging resources before a storm based on anticipated needs.
    - Preparedness is key. Review mutual aid agreements, research private contractors. For many small towns, one or two quarantining employees can have a significant impact on operations.
    - Pre-identify priority routes, so if you bring in additional support, you can let them know what roads are most important.
    - It could be the situation this winter that staffing shortages prevent your town from accomplishing route clearing promptly. Develop a messaging plan now to manage the public's expectations.
    - Plan ahead for storms. If your town is concerned about its ability to keep roads clear and maintain emergency access, reach out to the SEOC (we will ask what measures you've already taken). It's much harder for the State to support towns during a storm than before a storm. The SEOC will coordinate with the Agency of Transportation and others to support towns, though there are only so many drivers and so many plows.
  - There is an ongoing mission to aid long-term care facilities with critical staffing needs through contingency planning and developing a staffing pool. There is particular focus on assisting facilities during the first 48 hours after a reported outbreak. The SEOC is working closely with the Department of Disabilities, Aging, and Independent Living and the Department of Human Resources to establish a contingency staffing pool, and other supports such as Vermont National Guard personnel.
  - The SEOC's Mass Feeding Group continues to support school meals programs when schools rapidly shift to remote learning or kitchens are impacted due to quarantining staff.

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#### IV. Vermont State Police: Captain Mike Manley and Captain Lance Burnham

- We received a question about how the COVID-19 screening questions asked by 911 call takers miss seemingly obvious positive cases.
  - These are the COVID-19 screening questions asked for every call:
    1. "Does the patient have fever, trouble breathing, or cough?"
    2. "Has the patient traveled outside Vermont in the past 14 days? If so, where?"

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3. “Is the patient under evaluation for, or has the patient been diagnosed with, COVID-19, or has the patient been in close contact with someone being evaluated for, or diagnosed with, COVID-19 in the last 14 days?”
    - The call-taker asks these questions, then transfers the call to dispatch, which then asks the questions again. Any “yes” leads to notification of first responders.
    - 911 calls are rarely textbook; there’s anxiety and emotions run high, making it difficult for call-takers to get an accurate understanding of the situation. If first responders arrive on scene and feel that screening questions were skipped, reach out to Captain Burnham directly. He can retrieve the recordings of the call and follow up.
    - Miscommunications do happen; 911 call centers (public safety answering points) are busy. However, the screening questions hang right in the face of call-takers, and Vermont State Police is not aware of cases where the questions weren’t asked.
  - Director Batsie added that first responders should assume everyone on an emergency scene has COVID-19. Dispatch screening is a helpful tool, but please assume everyone is infected and act accordingly. That is the only way to keep yourself safe.
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### II. Questions from Call Participants

- Congregate sheltering is still discouraged due to social distancing requirements. Hotels are preferred. The SEOC will work with the American Red Cross during any storm to coordinate sheltering. If a town elects to open its shelter, the CDC has [guidance on how to do so safely](#).
- The Department of Health discourages in-person first responder training as much as possible. However, some training must be in person to maintain operations and credentials, so State guidance has provisions for in-person training when there is no other choice:
  - [Guidance on fire/EMS non-emergency activities, including training](#)
  - [Guidance specific to EMS education](#)
- Guidance is coming for 2021 town meetings. The Secretary of State’s Office is assessing the situation, and is working with the state legislature and the Vermont League of Cities and Towns (VLCT) to put more flexible provisions in place. Proposals include allowing hybrid meetings and authorizing local governments to delay their town meeting. The VLCT website has [current guidance for town meetings](#), and more is coming.
- A recent incident where an ambulance crew did not receive requested support from Vermont State Police (VSP) was due to a communication issue, not VSP’s modified response posture. VSP is currently operating as it did in the Spring: handling matters remotely as feasible, and altering proactive enforcement and investigations. Local law enforcement agencies with questions about this approach should reach out to VSP.
- Last night, the Deputy Commissioner of the Department of Health was talking about prioritizing COVID-19 testing for first responders. It’s an important topic and the Department is working on it.
- Director Batsie will distribute a white paper on the hazards of dry ice to EMS agencies.