Austin – Travis County Emergency Medical Service Response to COVID-19

Department Operation Center

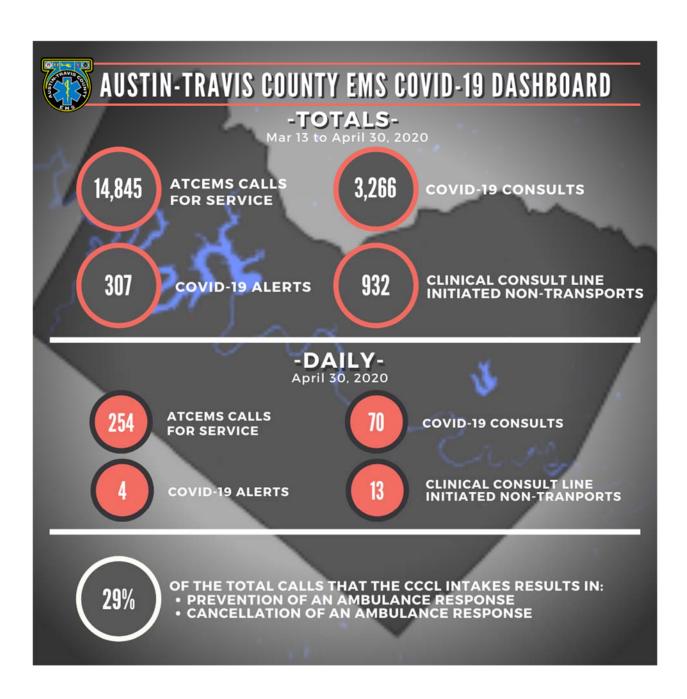
- Opened before EOC
- Dept Logistics and Pre Planning
- Scheduling
- Information

Communications Center

- ILI since the beginning of the event
 - o Alert Responders
- Updated screening protocol (Card 36) Pandemic

COVID Clinical Consult Line (C3L)

- EMS staff: 12 (organized into shifts)
- 911 calls conferenced into active 911 calls to triage risk to responders and to attempt to rightsize the response to potentially infectious patients. This can include navigation to alternate care
 options which decreases exposure to responders, the healthcare system as a whole, and to the
 patient. This also includes consultation for on-scene resources regarding level of PPE to use,
 correct facility to transport to, or clarification of interim guidance regarding COVID operations
 (in other words subject matter expert on pandemic response)
- Consultation and risk stratification of first responders (exposure pathway) all agencies in RAC contact us for post exposure risk stratification and determination of if quarantine is necessary
- Sick call and return to work navigation of ill providers to testing; coordination with Public Safety Wellness Center for testing and results; tracking of sick employees with reporting to HR/Wellness/Scheduling/Supervisors and Chain of Command and all associated issues (i.e. exposure paperwork packets, RTW documents, Telework or LD options/placement)
- COVID Positive patient contact tracing receive notifications from ME, OMD, hospitals, and APH. Perform contract tracing from destination back to caller to determine all agencies/responders involved and ensure notifications and risk stratification
- EMS has been contacted by other cities in Texas as well as NAEMSP statewide, other states (Colorado, Florida, Maryland to name a few) and the DoD for our protocols as we are currently considered a "best practice" in this area of medicine.



Isolation Facility (ISOFAC)

- EMS staff: 9 employees
 - EMS functions: Incident Command, Operations, Safety, Logistics, Care Coordination & Planning
 - Also have limited staff from AFD and APD
- Facility dedicated to housing individuals that have either been exposed, developed COVID-19-like symptoms or have been confirmed to be COVID-19 positive.
- Current facility has a capacity of 204 people (currently have 21 people)
- Available to public safety/critical infrastructure employees and the general public that cannot safely isolate.

Mobile Testing

- EMS staff: 5
- Provides mobile testing for situations that require the resource comes to them (i.e. nursing homes, group homes, congregate living situations)
- Works with APH on coordinating testing and specimen collection
- Provides training & guidance on PPE to locations that need additional information, training, etc

Alternate Care Site (ACS)

- EMS staff: 3
- Assisting with planning & set up of alternate care sites (ACS)
- Alternate Care Sites (ACS) are field hospitals that would be set up to take care of COVID-19
 patients when the hospitals are saturated.

Direct Care Staffing Task Force

- EMS staff: 1
- Identifying personnel resources to staff the ACS
- Developing staffing plan for the ACS locations, such as nurses, physicians, respiratory therapists, pharmacy staff, etc.

Long Term Care Task Force

- EMS staff: 1
- Leading the long term care task force group to coordinate efforts and address needs at the skilled nursing facilities (SNF)
- SNF are especially vulnerable and pose a significant threat to staff and residents.

Capital Area Medical Operations Center (CA-MOC)

- EMS staff: 2
- Assisting with filling requests for PPE and other needs from providers in the area.
- Searching for PPE and other supplies for various providers in the area.

PPE Task Force

- EMS staff: 2
- Assisting with the management and delivery of PPE to various services that have requested PPE through the CA-MOC and other channels.