

COVID-19 Lessons from the Williams Fork and Cameron Peak Fires



Sign of the Times – These instructions greet all personnel entering the ICP on the Williams Fork Fire.

The content of this Rapid Lesson Sharing (RLS) report is derived from both the Williams Fork and Cameron Peak fires. There were several COVID-19 related incidents on these two fires, which provided an opportunity to learn valuable insights. The lessons shared in this RLS were provided by members of these fire's Incident Management Teams (IMT).

A Facilitated Learning Analysis (FLA) has also been initiated to explore in more detail the learning opportunities from the positive COVID-19 cases that occurred on the Cameron Peak Fire.

***“Establish local contacts immediately. Who can you call at 2 a.m.?
Who will act as a Duty Officer for the health department?”***

Medical Unit Leader

Starting Off Right

Provide Consistency in Expectations

There is a crucial need for a unified message from fire leadership nationwide regarding Leader's Intent. What is expected of fire resources regarding COVID-19 protocols, policies and procedures? With such a wide variance of protocols among agencies and Incident Management Teams, it is difficult for firefighters to know what is expected of them from one incident to the next.

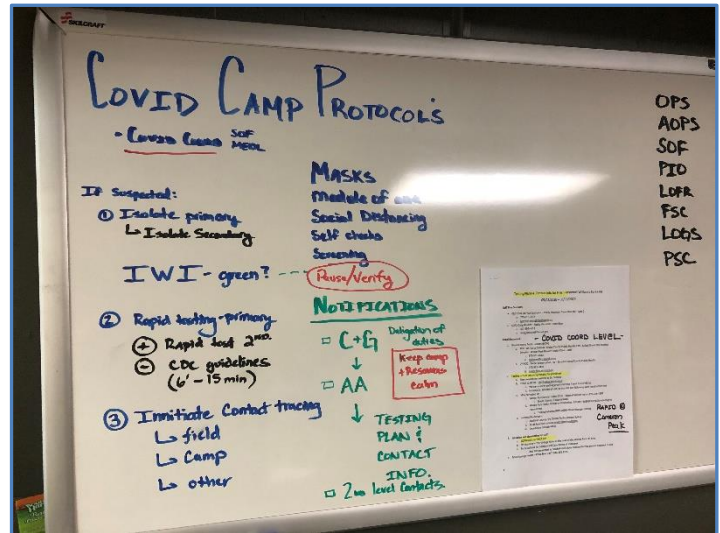
Unified expectations can lessen confusion and help promote safety measures, thereby reducing the potential for illness and the need to test and/or quarantine.

Issues with Partial Manifests in the IROC System

The new IROC (Interagency Resource Ordering Capability) system which replaced ROSS (Resource Order Status System) allows an option to manifest a crew with only one name. Example: "Rodriguez+19". This creates issues in relation to knowing who is on an incident, especially when it comes to contact tracing. Additionally, due to virtual check-ins in 2020, copies of Red Cards have not consistently been taken.

What information should you include in IROC?

1. Full Names.
2. Emergency Contact Info.
3. Point of Contact for Home Unit.



COVID Camp Protocols outlined by the IC on the Williams Fork Fire.

"On Day 1 set expectations for COVID-19 protocols."

Safety Officer

Establish COVID-19 Positions on the IMT and at the Local Unit

1. Ensure that a COVID-19 Coordinator (Medical Unit Leader from an IMT is a good choice) has been established. Someone with a medical background/education is strongly recommended. This person is responsible for developing and maintaining a relationship with the local health department's Health Officer, as well as tracking individuals through the different stages and communicating that information to all necessary parties.
2. Designating a COVID-19 Liaison will help to ensure prompt and fluid communication between those who are in quarantine, the IMT, and the local unit.
3. Assigning a "runner" is strongly recommended. When individuals are placed in quarantine a runner could deliver food, essential items, etc. It is also advisable that the runner have the capacity to make purchases.
4. Create additional positions on the local unit and/or IMT as needed to promote a fluid and functional system.

"There is no standard. Every county, every state does it differently."

Medical Unit Leader and Safety Officer
Williams Fork Fire

Developing a Strategic Plan with the Health Department and Local Unit

It is imperative to develop a strategic plan with the health department and local unit upon arrival to the geographic area. Utilizing a ["quick sheet"](#) to capture pertinent information can prove to be invaluable.

Tests, Tests, Tests

To Test or Not to Test?

COVID symptoms mirror “the crud,” altitude sickness, cardiac issues, allergies, etc. So how do you know when to get tested?

How to Assess

1. Use the [COVID Screening Tool](#) daily among your crew. Many IMTs have placed a Screening Tool QR code on the cover of their IAPs, which submits responses to the Medical Unit Leader.
2. Know what the “Major” and “Minor” COVID-19 symptoms are, and take the appropriate action.

Major Symptoms

Having even one of the major symptoms warrants getting tested immediately.

- A. Feeling feverish, having chills or temperature of 100.0 or greater.
- B. Loss of taste or smell.
- C. New or unexplained persistent cough.
- D. Shortness of breath or difficulty breathing.

Minor Symptoms

Segregate the individual and monitor for worsening symptoms.

- A. Sore throat.
- B. Runny nose or congestion.
- C. Muscle or body aches.
- D. Headache.
- E. Fatigue.
- F. Nausea, vomiting.
- G. Diarrhea.

Voluntary Mass Testing

With the wider availability of COVID-19 tests comes the possibility of taking tests voluntarily. Some IMTs are working with state resources to provide mass voluntary COVID-19 testing prior to demobilization from an incident. The COVID-19 testing must be requested by the IMT several days in advance to ensure that the appropriate preparations can be made. Mobile testing may also be available.

Important Consideration

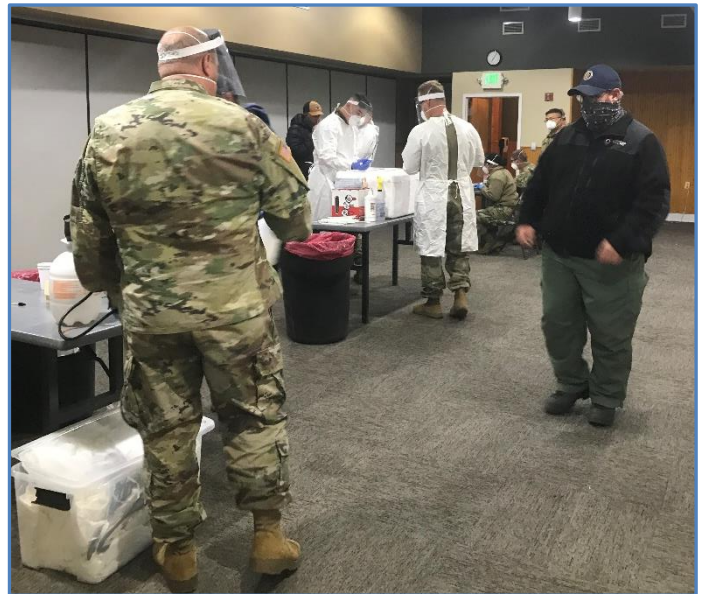
If resources are not going to be held in quarantine while they await their results, it’s important that they take additional precautions until receiving a negative test result confirmation. In addition, they need to realize that if they receive a positive test result en-route home they will be requested to quarantine in place, wherever that may be.

Awaiting Test Results when Showing Symptoms of Illness

Essentially, anyone showing symptoms who gets tested should assume they are positive until proven otherwise. This means adhering to quarantine guidelines while awaiting results.

What if a known COVID-19 positive individual refuses to stay in quarantine?

It is incredibly important for the IMT to establish a relationship with the local county (or state) health officer as soon as they arrive to the geographic area. A health officer has the authority to hold a person in quarantine when it is considered a threat to public health.



The Colorado National Guard offers voluntary mass testing at the location of your choosing. Pictured here is the testing site for the William’s Fork fire.

Financial Disincentive to Get Tested

Firefighters nationwide have concern about the financial loss associated with a COVID-19 positive test result and/or long-duration quarantines. Utilizing rapid testing may speed things up, but rules are different everywhere. A county may require multiple negative tests several days apart before being released from quarantine.

1. Federal firefighters are reduced to base pay while in quarantine, which could result in thousands of dollars in lost wages, depending on the duration of quarantine.
2. If a firefighter tests positive, their entire crew could end up having significant wage losses as well if/when they get placed into quarantine.
3. While contracted resources will have accommodation and meals provided during quarantine, they will not be paid a wage of any kind.

Recommendation

Each of the three items listed (above) create an incentive to hide symptoms when feeling ill. A revision of the policies associated with pay regarding COVID-19 testing and quarantine is strongly recommended. Removing the financial penalty associated with COVID-19 testing/quarantine would be a significant step toward removing fear and slowing the spread of COVID-19 among the fire community.

“Establish a unified front with the Health Department, IMT, and local unit about what the response will be.”

Safety Officer

What Comes Next?

How Does Contact Tracing Work?

The initial contact tracing begins with the COVID positive individual, the Medical Unit Leader and Safety Officer from the IMT. Locking down access in and out of ICP, spike camp, etc. may be necessary during this stage. Once contacts have been identified, the IMT will work to get the listed individuals from the incident into quarantine.

The county will work with the COVID positive individual to confirm that their contact tracing is accurate and then begin making contact with the listed individuals.

Did You Know?

The initial phase of contact tracing can generally be accomplished within 30 minutes.

Contractors and Cooperators

What happens when a contracted resource is showing symptoms of COVID-19?

1. Treat all resources the same at the outset. Isolate and test, then keep the individuals in quarantine to await results.
2. Ensure that there is a protocol in place for contracted resources.
3. **Contact the Contracting Officer associated with that resource immediately.**
4. Follow contract stipulations.
5. Work with Finance on the IMT to figure out parameters. ([This link](#) provides recent guidance related to the fiscal responsibilities surrounding COVID-19.)

Recommendation: Alter contracts and cooperator agreements to account for concerns associated with COVID-19.

Who will Receive Your Medical Updates?

With the increased potential for intubation related to COVID-19, firefighters should decide ahead of time who will be allowed to receive updates about their condition. Beyond family members, there is benefit in also authorizing the Medical Unit Leader to receive updates to best advocate for their needs.

Turning Down an Assignment Due to COVID-19

As with any circumstance where you wish to refuse risk, there is a proper way to turn down an assignment (see page 19 of the IRPG). This includes working to find mitigations that will provide a level of comfort in order to engage. A [Risk Assessment Tool](#) could help attain a definitive decision about accepting or turning down an assignment.

Communication Flow During COVID-19 Testing and Beyond

When there are multiple COVID-19 positive cases and a high number of quarantined individuals, tracking and communicating to all necessary parties can become extremely complex.

1. Decide on a comprehensive tracking system to account for all quarantined and positive individuals. (Resource Tracker COVID-19 Exposure Spreadsheet [Example](#))
2. Figure out who will require regular updates about the situation and set specific times of the day when official updates will be provided to all interested parties. Example: “COVID-19 Status Updates will occur daily at 0800, 1200, and 1800.”

Having these two things in place will significantly lessen the stress and workload for the IMT, while also providing accurate and timely information to all concerned parties. This also eliminates the potential for fluctuating information being passed throughout the day by multiple individuals.

This RLS was developed by:
**The Cameron Peak FLA Team in collaboration with
the USFS Region 2 Risk Management Officer, the
local unit and the respective Incident Management
Teams from the Williams Fork and Cameron Peak Fires.**

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