

**PA STATE FIRE ACADEMY TRAINING AND CERTIFICATION SITE  
RETURN TO TRAINING AND TESTING PLAN  
COVID-19 Pandemic  
For  
Northampton Community College  
Northampton County Fire School  
PA State Fire Academy Certification Testing Site # 29  
6-16-20**

**1.0 GENERAL**

**1.1 Purpose**

The purpose of this plan is to provide a safe and healthy training and testing site for all our instructors, evaluators, students, candidates, staff members and any service provider or person while on property or at a delivery site. To ensure we have as safe and healthy training and test site, we have developed the following COVID-19 Preparedness Plan in response to the COVID-19 pandemic. Leadership from NCC, NCFS and Test Site #29 are all responsible for implementing this plan. Instructors, evaluators, students, candidates, staff members and any service provider or person on property or at a delivery site is expected to implement and comply with all aspects of this COVID-19 Preparedness Plan. Our goal is to mitigate the potential while managing the risk for transmission of COVID-19 while on property or at other delivery sites.

**1.2 Scope**

This plan applies to instructors, evaluators, students, candidates, staff members and any service provider or person while on property or at a delivery site.

**1.3 Enforcement**

Monitoring and enforcement of the plan along with the point of contact for all official entities is For Northampton Community College

Thomas Barnowski  
Director of Corporate and Public Safety Education  
511 East Third Street  
Bethlehem, PA 18015  
610 861 5467 Office  
484 221 2160 Cell

For Northampton County Fire School and Test Site # 29

Richard (Rick) Weaver  
Director  
# 6 Nagy's Hill Road  
Bangor, PA 18064  
484 239 3990 Cell

**2.0 POLICY**

It is the policy of Northampton Community College, Northampton County Fire School, and Certification Test Site #29 to protect the health and wellness of all personnel involved in training and/or certification testing. With the spread of the coronavirus or "COVID-19," a respiratory disease caused by the SARS-CoV-2 virus, we must remain vigilant in mitigating the outbreak.

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In order to be safe and maintain training and certification operations, we have developed this COVID-19 Exposure Prevention, Preparedness, and Response Plan to be implemented, to the extent feasible and appropriate, throughout the all-training sites and on property at # 6 Nagy's Hill Road Bangor PA. This policy includes but is not limited to instructors, evaluators, students, candidates, staff members and any service provider or person while on property or at a delivery site.

**3.0 PROCEDURE (Shall include but are not limited to the following recommendations)**

All procedures shall focus on exposure prevention and mitigation. All procedures must follow current guidelines as established by DOH, CDC and/or Governor's Directives.

**3.1 General Precautions**

- **Group Size** – We shall limit group size to recommendations from DOH/CDC by classification of County in which training is conducted (Red/Yellow/Green)
- **Hand Hygiene** –Frequently wash hands with soap and water for at least 20 seconds. When soap and running water are unavailable, use an alcohol-based sanitizer with at least 60% alcohol. Hand sanitizer will be available on-site or supplied to instructors for appropriate use. The use and wearing of disposable gloves will be determined by the exposure risks associated with the training or certification operation. Disposable gloves, when needed, will be provided by the sponsoring agency, individual student or candidate or NCC /NCFS as appropriate.
- **Masks** – The use of facial masks will be in accordance with CDC and DOH guidelines. Generally, masks will be required at all times unless higher levels of respiratory protection are needed for the training to be conducted i.e. SCBA. Individual masks will be provided by students or candidates. Instructors or evaluators can supply their own individual mask or use the NCC/NCFS supplied three-ply facemasks. Failsafe will be NCC/NCFS supplied masks on an as needed basis until students or candidates can supply their own mask.
- **Social Distancing** – all participants shall follow social distancing guidelines established by DOH/CDC. Social distancing of six feet will be implemented and maintained between persons while engaging in instructional or certification activities. Participants and staff members must maintain distancing guidelines during breaks and mealtimes.
- **Staging of personal effects (clothing, PPE, SCBA, etc.)** to ensure separation to prevent cross contamination shall be implemented. Site conditions will determine the best methodology to ensure adequate separation. Instructors and evaluator will supervise these efforts to ensure compliance.

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3.2 Participant Screening

- Shall be done using current pandemic guidelines
- Screening Procedure for all participants will begin with wellness questions.  
Have you had any of these symptoms that is not attributable to another condition?
  1. Cough
  2. Shortness of breath or difficulty breathing
  3. Or at least two of these symptoms
  4. Fever
  5. Chills
  6. Repeated shaking with chills
  7. Muscle pain
  8. Headache
  9. Sore throat
  10. New loss of taste or smell

If the answer is YES to any of these questions, the person will be referred for medical follow up with their healthcare provider and prohibited from participation in the training program.

- Medically qualified lead instructors or designated Emergency Medical Technicians will be performing the screening.
- Training attendees will be Northampton County responders. Only participants from other counties that have a “green” or “yellow status will be a permitted to enroll and attend a training class. “Red” counties responders cannot participate in training as an aspect to prevent community spread.
- Participants who feel ill or present with COVID-19 symptoms are not permitted to participate in any training session.
- Post Exposure Process – should a student become ill or test positive the process to be followed is below.

**Symptomatic HCP with suspected or confirmed COVID-19** (Either strategy is acceptable depending on local circumstances): *Symptom-based strategy*. Exclude from participation until:

At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**, At least 10 days have passed *since symptoms first appeared*.

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*Test-based strategy.* Exclude from participation until:

Resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath), **and** Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected  $\geq 24$  hours apart (total of two negative specimens).

**HCP with laboratory-confirmed COVID-19 who have not had any symptoms** (Either strategy is acceptable depending on local circumstances):

*Time-based strategy.* Exclude from participation until:

10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test. If they develop symptoms, then the *symptom-based* or *test-based strategy* should be used. Note, because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after their first positive test.

*Test-based strategy.* Exclude from participating until:

Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected  $\geq 24$  hours apart (total of two negative specimens). Note, because of the absence of symptoms, it is not possible to gauge where these individual are in the course of their illness. There have been reports of prolonged detection of RNA without direct correlation to viral culture.

- Participants involved with exposure to potentially infected individual(s) will be notified by e-mail and follow up confirming phone call if needed. Confidentiality of the exposing person will be maintained. Advice for medical follow-up will be part of the communication.
- On-going evaluation of participants during training events will be conducted by designated Emergency Medical Technician or medically qualified instructor(s). Depending on duration of training session, spot temperature checks and verbal questions of wellness status will be conducted or asked as appropriate within the session.
- Designated Emergency Medical Technician or medically qualified instructor(s) will provide continuous monitoring of all participants in the training session(s).

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3.3 Cleaning/Disinfection

- NCC and NCFS have instituted regular housekeeping practices, which include cleaning and disinfecting frequently used tools and equipment, and other elements of the training environment, where possible. All participants and instructors will inspect and survey areas for ongoing remediation as needed.
  - Classrooms and break/lunchroom areas will be cleaned and all contact surfaces therein contained will be disinfected prior to use and upon conclusion of use. Staff performing cleaning will be issued proper personal protective equipment (“PPE”), such as nitrile, latex, or vinyl gloves and gowns, as recommended by the CDC. Disinfection materials will be per the EPA registered N list of approved disinfectants. Performance of disinfecting will be per the product label instructions. NCC / NCFS will maintain Safety Data Sheets of all disinfectants used on training and testing sites.
  - Any trash collected from the training or testing site must be changed frequently as needed by designated staff member wearing nitrile, latex, or vinyl gloves.
  - All rest rooms will be cleaned and sanitized prior to beginning any training sessions. Frequent use as dictated by the number of participants and time duration of training or testing session will necessitate fixture cleaning and disinfecting. Designated staff members will perform disinfection operations within product labeling guidelines and with the use of pertinent PPE.
  - Any portable training or test site toilets should be cleaned by the leasing company at least twice per week and disinfected on the inside. All Sanitizer dispensers are to be maintained and filled as needed. Frequently touched items (i.e. door pulls and toilet seats) will be disinfected frequently.
  - Participants should limit the use of training props, tools, equipment and appliances. To the extent that training props, tools, equipment and appliances must be shared, NCC / NCFS will provide alcohol-based wipes to clean training props, tools, equipment and appliances before and after use. Cleaning of training props, tools, equipment and appliances, will be in accordance with manufacturer recommendations for proper cleaning techniques and restrictions.

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- Vehicles, equipment/tools and apparatus should be cleaned and contact surfaces disinfected at least once per day and before there is a change in operator or rider.
- Turn out gear (TOG) and self-contained breathing apparatus (SCBA) will be solely used by the individual participant. There shall be disinfection materials available for individual use by participants using their individual gear. There will be no sharing of equipment or gear. SCBA and TOG will be separated from all other participants gear or SCBA at all times. A minimum of six feet of distance must be maintained for all gear or SCBA not in use. Contact or cross contamination must be avoided.

#### 3.4 Communications

- Participants will be informed of requirements and expectations prior to arriving any training location or testing site via e mail communication of this policy as well as an introductory briefing prior to the start of any training session.
  - The lead instructor of any training session will conduct the Mandatory Safety Briefing prior to start of any training session or test.
- Available signage per CDC/DOH recommendations will be posted at all permanent training and testing sites.

#### 4.0 DEFINITIONS

- Terms for definition or further explanation include:

**Asymptomatic:** no symptoms of the disease you may still have it.

**Symptomatic:** showing symptoms of COVID-19, which can include a fever, dry cough, shortness of breath and body aches. Health officials believe the risk of transmitting the virus is highest when an individual is *symptomatic*.

**Contact tracing:** identifying and monitoring people who may have come into contact with an infected person. In the case of COVID-19, monitoring usually involves self-quarantine as an effort to control the spread of disease.

**Self-isolation:** the act of separating oneself from others.

**Social distancing:** the act of remaining physically apart in an effort to stem transmission of COVID-19. Social distancing can include a move to remote work, the cancellation of events and remaining at least six feet away from other individuals.

A **respirator** is a device designed to protect the wearer from inhaling hazardous atmospheres, including fumes, vapors, gases and particulate matter such as dusts and airborne microorganisms.

**Face masks or coverings,** are simple cloth or paper devices that cover the nose and mouth of the wearer. The intention is to capture liquid droplets produced by the wearer. Face coverings are not filtering respirators.

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**Hierarchy of controls:**

**Engineering controls** involve isolating employees from work-related hazards. An example of an engineered control is the Plexiglas panels that serve as barriers between people.

**Administrative controls** are changes in work policy or procedures to reduce or minimize exposure to a hazard.

An administrative control is the requirement to wash your hands after touching contact surfaces; an administrative policy is to use zoom and videoconferencing instead of face-to-face meetings

**Safe work practices** are types of administrative controls that include procedures for safe and proper work used to reduce the duration, frequency, or intensity of exposure to a hazard.

A safe work practice is to stagger start and stop times or travel paths in one direction to reduce exposures.

**Personal Protective Equipment (PPE)** are barrier devices. Examples of **PPE** include gloves, goggles, face shields, facemasks, and respiratory protection, when appropriate. This is the last level of control. It must be understood that PPE is the wearing of barrier devices. This is the least efficient of the controls as failures are often associated with wearer errors or omissions.

## 5.0 REFERENCES

Preventing Worker Exposure to Coronavirus (COVID-19), OSHA pub 3989/3991):  
[www.osha.gov/Publications/OSHA3989.pdf](http://www.osha.gov/Publications/OSHA3989.pdf),

Guidance on Preparing for COVID-19, (OSHA pub 3990):  
[www.osha.gov/Publications/OSHA3990.pdf](http://www.osha.gov/Publications/OSHA3990.pdf),

Guidance on Social Distancing at Work (OSHA pub 4027/40), Cleaning and Disinfection for Community/Building Facilities: [www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaningdisinfection.html?deliveryName=USCDC\\_10\\_4-DM24118\\_28](http://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaningdisinfection.html?deliveryName=USCDC_10_4-DM24118_28)) [www.osha.gov/Publications/OSHA4027.pdf](http://www.osha.gov/Publications/OSHA4027.pdf),

General COVID-19 information: [www.cdc.gov/coronavirus/2019-ncov/index.html](http://www.cdc.gov/coronavirus/2019-ncov/index.html)