Montana Department of Natural Resources and Conservation
Fire Protection
COVID-19 Recommended Actions and Guidance

DNRC Fire Daily Health Monitoring & Self-Screening Protocols

Effective Date: 4/22/2020 or until rescinded/modified

Agency Intent
The agency intent for the Montana Department of Natural Resources and Conservation’s fire preparedness, COVID-19 mitigation actions, and COVID-19 precautions in the state’s fire operations are:

- The DNRC’s mission critical work, including suppressing wildfires, will continue with appropriate risk management strategies consistent with current guidance from the Centers for Disease Control and Prevention and state health safety guidelines regarding COVID-19 mitigation.
- The DNRC is committed to engaging in local and statewide COVID-19 emergency response while prioritizing and balancing our responsibilities to execute our mission critical duties.
- The best way to mitigate COVID-19 exposure throughout our fire operations is to maintain our capacity to do what we do best—succeed on initial attack, build the capacity of our local partners, and support our federal partners in doing the same.
- Community preparedness and fire prevention will play a critical role leading up to the 2020 Fire Season to reduce firefighter exposure and reduce nonessential interactions.
- Management of wildfire is inherently interagency, and we are working to align national plans with ongoing efforts across Montana and the Northern Rockies Geographic Area.

Introduction & Purpose
The DNRC Fire Protection Program depends on a combined workforce of permanent and seasonal employees to redeem statutorily mandated fire protection responsibilities. These employees are mission critical and are relied upon to protect Montanan’s lives, property, and natural resources from wildland fire during the core of the fire season. While maintaining our capacity to provide mission critical services; DNRC will minimize and mitigate risks associated with COVID-19 for our employees, their families, and the public we serve. DNRC must assure that our employees can report to work healthy and remain healthy once they arrive. By implementing a layered defense protocol that safeguards the DNRC fire response employees, we will be better able to protect Montana’s communities and not contribute to the spread of COVID-19. The recommendations contained in this document represent initial actions the DNRC would undertake in establishing a multi-layer defense strategy. Additional, complimentary actions and guidance are in development.

Wildland fire activities create an ideal environment for the transmission of infectious diseases including high-density living/working conditions and a transient workforce. There will often be situations where social distancing requirements are unattainable, unfeasible or pose greater risks (engine crews, flight crews etc.). These and other environmental and occupational factors (e.g., smoke, heat, plants, insects, fatigue, and physically demanding work) can increase the likelihood of disease transmission. Assuming the DNRC can begin the core of the fire year with a seasonal workforce free of COVID-19, it will prove critically important for the members of that mission-critical fire response workforce to remain healthy, in part, by vigilantly complying with CDC, State, Agency and local public health guidance, and perhaps even substantially exceeding that guidance to ensure that our fire response capability is maintained.
The purpose of the **DNRC Fire Daily Health Monitoring and Self-Screening** is to protect our employees’ health and safety by identifying COVID-19 symptoms early and preventing exposures. Although this process may not always identify asymptomatic individuals, it is an additional layer of defense in trying to identify and prevent COVID-19 from impacting our workforce.

**Recommended Actions and Guidance**

The following instructions are for all DNRC fire protection and fire support employees during the COVID-19 national emergency. DNRC cannot provide direction for every circumstance and this protocol is intended to provide plenty of decision space to the local work unit as conditions in each area differ. There will be instances that direction/policy does not foresee, and possibly even provide conflicting direction/policy. While maintaining our ability provide mission critical services; Managers/Supervisors should use their best judgement to implement the overarching goal to do all we can to minimize and mitigate risks associated with COVID-19 for our employees, their families, and the public we serve. DNRC is recommending that all fire response and fire support personnel be vigilant, by monitoring twice daily (both pre-shift and prior to the end of shift) to identify symptoms early and prevent exposures. These recommendations should be followed whether or not you have been exposed to COVID-19.

This interim guidance is based on what is currently known about the Coronavirus Disease 2019 (COVID-19) and founded on CDC recommendations for minimal to moderate community COVID-19 transmission like those occurring in the State of Montana. DNRC will update this interim guidance as needed or as additional information becomes available. Additional strategies may need to be considered when/if there is substantial transmission increase observed in the local community (in addition to those implemented here).


1. Supervisors should designate a dedicated entrance at DNRC owned facilities and administration buildings where **Daily Health Monitoring and Self-Screening** is to be conducted. Post specific guidelines on how to proceed into the facility and complete the screening.

2. Managers/Supervisors should ensure temporal thermometers are available at their facility.

3. Health monitoring and self-screening information should be recorded in a manner suited to the Unit office (such as electronically using a designated link/QR code or personal health log book). Please ensure that ALL documentation obtained through this protocol is protected as Personally Identifiable Information (PII) and properly secured.

4. All fire protection and fire support personnel shall complete the following self-screening protocols at the beginning of each workday and final screening prior to end of workday:
   a. Employee should conduct self-screening upon entry of a building, prior to entering populated areas. Document symptoms using procedures outlined for the respective facility.
      i. Self-screening criteria:
         ➢ Temperature reading. Fever of greater than 100.4 F with or without chills? (yes/no) If positive with temporal thermometer, attempt confirmation reading with oral thermometer
         ➢ Uncontrolled nasal secretions/excretions not attributed to season allergies (yes/no)
         ➢ Sore throat not attributed to seasonal allergies (yes/no)
         ➢ Productive/uncontrolled cough (yes/no)
         ➢ Diarrhea associated with an acute illness (yes/no)
         ➢ Influenza or COVID-19 like illness, fever and/or shortness of breath (yes/no)
      b. Employees with one or more of these signs or symptoms are considered to have a communicable illness, should not be at work.
c. This is simply a “sick” or “not sick” evaluation tool. If “sick” the employee should not report to work for that shift. Employees shall communicate through the proper channels with supervisors about absences.

d. Employees should follow agency specific Return to Work policies following an illness including:
   i. No fever for at least 72 hours, without the use of medicine, AND;
   ii. Other symptoms have improved (diminished cough, or no longer experiencing shortness of breath. AND;
   iii. At least 7 days have passed since your symptoms first appeared.

e. Seasonal & probationary are authorized to use “paid sick leave.” Employees should work with their supervisor on specific leave codes to use for time off (and/or if leave will result in a negative balance).

5. To the extent possible, self-screening should continue to occur twice daily, even when engaged in fire suppression activities.

Additional Information
Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19:

Complete Daily Health Monitoring and Self-Screening Process

1. Self-screening to be conducted at the beginning of each workday and final screening prior to end of workday.
2. Employee should conduct self-screening upon entry of building, prior to entering populated areas.
3. Employees with one or more of these signs or symptoms are considered to have a communicable illness, should not be at work.
4. This is simply a “sick” or “not sick” evaluation tool. Employees should communicate through the proper channels with supervisors about absences.
5. Employees should follow agency specific Return to Work policies following an illness.
6. Seasonal & probationary are authorized to use “paid sick leave.” Employees should work with their supervisor on specific leave codes to use for time off (and/or if leave will result in a negative balance).

YES/NO Temperature reading. Fever of greater than 100.4 F with or without chills (If positive with temporal thermometer, confirm reading with oral thermometer)

YES/NO Uncontrolled nasal secretions/excretions not attributed to season allergies

YES/NO Sore throat not attributed to seasonal allergies

YES/NO Productive/uncontrolled cough

YES/NO Diarrhea associated with an acute illness

YES/NO Influenza or COVID-19 like illness, muscle aches, loss of taste/smell, fever and/or shortness of breath

Employees with one or more of these signs or symptoms are considered to have a communicable illness, and should not be at work.