

October 1, 2020 CareUniversity Webinar #147



Welcome



Charles Denham, MD

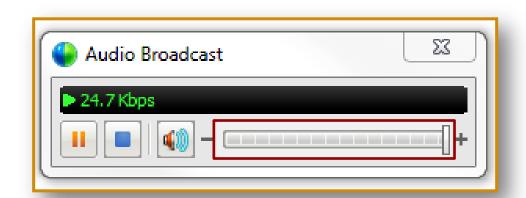
Chairman, TMIT Global Founder Med Tac Bystander Rescue Care

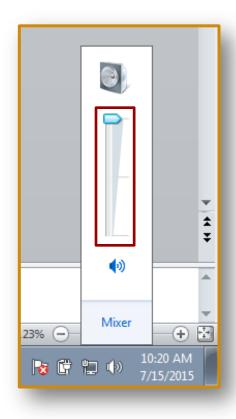
Med Tac Bystander Rescue Care October 1, 2020

CareUniversity Webinar #147



CareUniversity Series





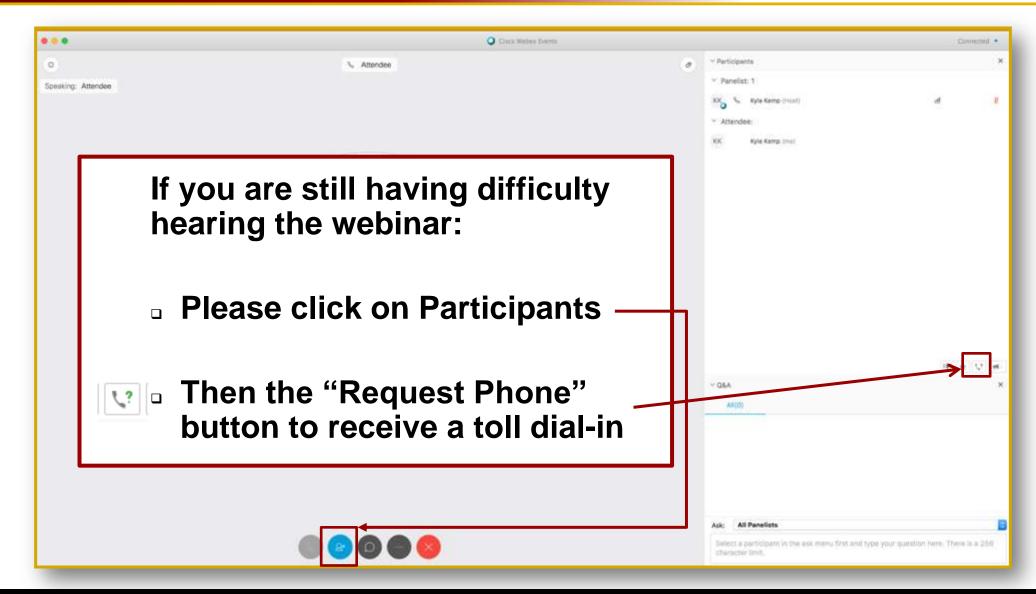


To optimize webinar sound volume, please check:

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- **External speaker volume**



Bystander Rescue Care CareUniversity Series



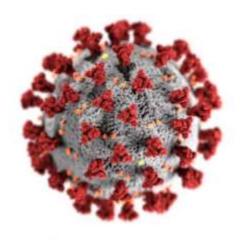


Voice of the Patient



Jennifer Dingman

Founder, Persons United Limiting Substandard and Errors in Healthcare (PULSE), Colorado Division Co-founder, PULSE American Division TMIT Patient Advocate Team Member Pueblo, CO



Our Purpose, Mission, and Values



Our Purpose:

We will measure our success by how we protect and enrich the lives of families...patients **AND** caregivers.

EMERGING THREATS
COMMUNITY OF PRACTICE

Our Mission:

To accelerate performance solutions that save lives, save money, and create value in the communities we serve and ventures we undertake.

CAREUNIVERSITY®

Our ICARE Values:

Integrity, Compassion, Accountability, Reliability, and Entrepreneurship.



Bystander Rescue Care CareUniversity Series

Disclosure Statement

The following panelists certify that unless otherwise noted below, each presenter provided full disclosure information; does not intend to discuss an unapproved/investigative use of a commercial product/device; and has no significant financial relationship(s) to disclose. If unapproved uses of products are discussed, presenters are expected to disclose this to participants. None of the participants have any relationship pharmaceutical or device companies discussed in their presentations. The funding of the program is from the Denham Family fund of TMIT Global, a 501c3 Medical Research Organization

- Gregory H. Botz, MD, FCCM, has nothing to disclose.
- Dr. Casey Clements has nothing to disclose.
- Brittany Owns MD has nothing to disclose.
- Randal Styner has nothing to disclose.
- David Beshk has nothing to disclose.
- Preston Head III has nothing to disclose.
- Jennifer Dingman has nothing to disclose.
- Heather Foster has nothing to disclose.
- Perry Bechtle III has nothing to disclose.
- Clair Peck has nothing to disclose.

- Matt Horace has nothing to disclose
- John Tomlinson has nothing to disclose.
- John Little has nothing to disclose.
- Keith Flitner has nothing to disclose.
- Randy Styner has nothing to disclose.
- Danny Policichio has nothing to disclose.
- Paul Bhatia has nothing to disclose.
- · Charlie Denham III has nothing to disclose.
- · Jacqueline Botz has nothing to disclose.
- Jaime Yrastorza has nothing to disclose.

Charles Denham, MD, is the Chairman of TMIT Global; a former TMIT education grantee of CareFusion and AORN with co-production by Discovery Channel for Chasing Zero documentary and Toolbox including models; and an education grantee of GE with co-production by Discovery Channel for Surfing the Healthcare Tsunami documentary and Toolbox, including models. HCC is a former contractor for GE and CareFusion, and a former contractor with Siemens and Nanosonics, which produces a sterilization device, Trophon. HCC is a former contractor with Senior Care Centers. HCC is a former contractor for ByoPlanet, a producer of sanitation devices for multiple industries. He does not currently work with any pharmaceutical or device company. His current area of research is in threat management to institutions including conflict of interest, healthcare fraud, and continuing professional education and consumer education including bystander care. Dr. Denham is the developer and producer of CareUniversity™, the learning management system providing continuing education materials for TMIT Global.

TMIT Global Research Test Bed

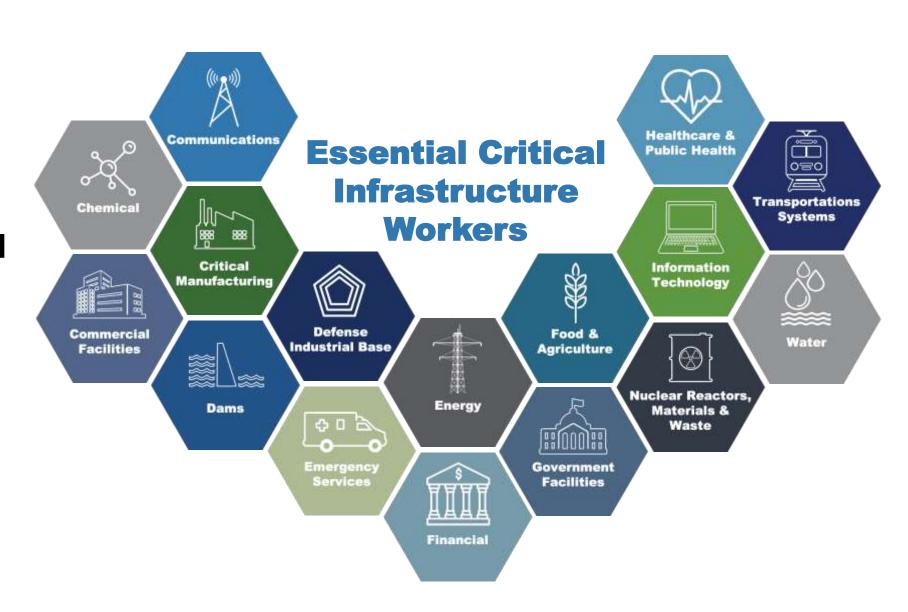
3,100 Hospitals in 3,000 Communities 500 Subject Matter Expert Pool





Educators Declared Essential Critical Infrastructure Workers





The Washington Post

August 21, 2020

The Trump administration declared teachers 'essential workers.' Here's what that means.



The declaration of teachers as "critical infrastructure workers," which came in an Aug. 18 guidance published by the Department of Homeland Security, means that teachers exposed to coronavirus but who show no symptoms can return to classrooms and not quarantine for 14 days as public health agencies recommend. School district leaders have spent the summer preparing safety protocols aimed at preventing the virus's spread when buildings reopen, but many teachers say not enough has been done to allow for safe reentry.



Source: https://www.washingtonpost.com/education/2020/08/21/trump-administration-declared-teachers-essential-workers-heres-what-that-means/#comments-wrapper



CareUniversity Series







Dr. Gregory Botz



Chief William Adcox



Heather Foster



Dr. Charles Denham



Dr. Casey Clements



Beth Ullem



Dr. McDowell



Dennis Quaid Preston Head III



Fred Haise



Dr. Steve Swensen



Tyler Sant



Avarie Pettit



Dr. Mary Foley



Bob Chapman



Perry Bechtle III



Becky Martins



Betsy Denham



Charlie Denham III



Dr. C Peabody



Dr. Chris Fox



Randy Styner



Tom Renner



David Beshk



Ann Rhoades



Nancy Conrad



Dr. Chopra



John Little



Debbie Medina



Bystander Rescue Care CareUniversity Series







John Tomlinson



Dan Ford



Arlene Salamendra



Jennifer Dingman



Bill George



Penny George



Hilary Schmidt PhD



Paul Bhatia EMT



Dr. McDowell

Contributions Through Segments of our *Discovery Channel* Documentaries



Prof Christensen



Jim Collins



C Sullenberger



Charlotte Guglielmi



Dr. Don Berwick



Dr. Howard Koh



Dr. Jim Bagian



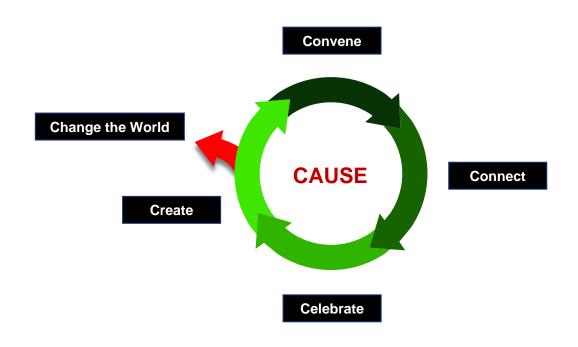
Dr. Harvey Fineberg

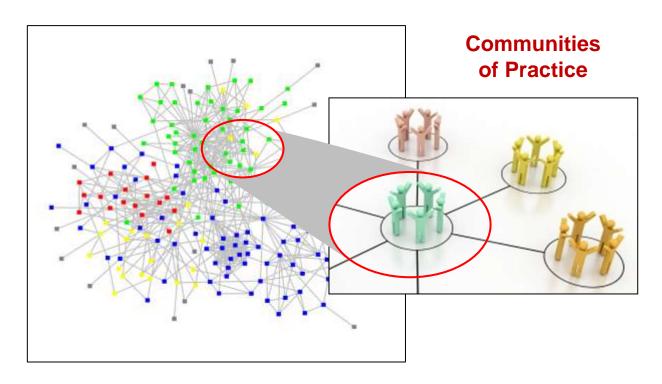






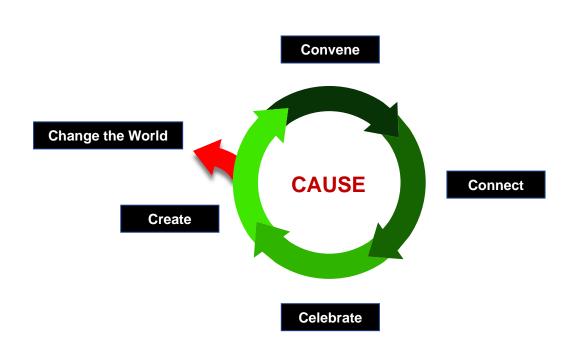
Communities of Practice Model







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Family Centric

- General Public
- Critical Essential Workers
- Professional Caregivers
- First Responders
- All Faiths Volunteers & Staff
- Educators & School Staff
- Scouts, Teams, and Membership Organizations



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Motore .

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Coronavirus - Protecting You & Your Family

See the extens, provers to FACs, and resources below. They will be continuously updated for the communities we serve



Bystander Rescue Care

We have experient the voters below as EU/CE VERON to present retired information specific. For Name who must make about your the EU/ONESD VERON. The names articles may be storeholded below.

BASIC MODULES

By Social Statements WORKS

Manay ARE Critical

Women; The SCIENCS of Secrees.

ters Washing & DISSERSECT

CLEAN HIGH CONTACT BUTTON

1 International property

Why ICU, Respectives, and RCMS



The following ADWACED MODALES address many comprehensive information you may wish to write.

ADVANCED MODULES

AU PRINCIPAL BUILDING

TRANSCOCKE Works - Try II

RESULTED TO EXPENSE

Corring Home Safe Webba



The following table provides resource articles and looks to vides askets that viewers, rang use and diserviced to understand the ocionop belieful the beat practices.



Monthly Webinars every first Thursday of the month at 1PM ET (Noon Central and 10AM PT). Free, video, and resources posted.



BASIC MODULES:

- Short Videos 4-10 min
- Critical Information
- Hits Pillars of Prevention



Preparing for CARE at Home

TELEMEDICINE Works - Try it

Care of Seniors & those AT-RISK

The Latest Best Practices

Caregivers Surf the Next Wave

Coming Home Safe Webinar

The New Normal Webinar

Back to School Safety



ADVANCED MODULES:

- Longer more detailed
- Webinar Recordings
- **Technical Information**

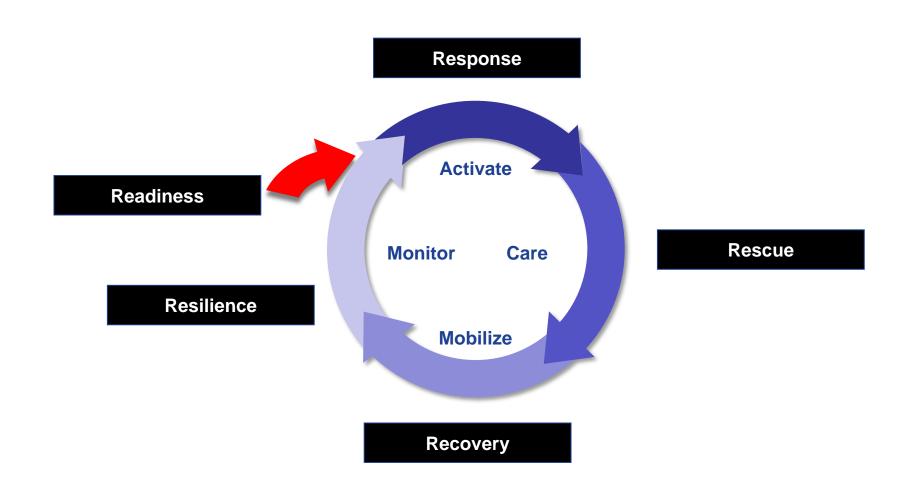
Related Resources



Care of the At Risk & Seniors at Home

www.medtacglobal.org/coronavirus-response/

Creating Your Family Safety Plan



Creating a Family Safety Plan

- . What is the science behind the risk to your family?
- . How can we improve our state of **READINESS**?
- . How do we best RESPOND when a loved is sick?
- . How do we RESCUE someone with severe symptoms?
- . What is the best <u>RECOVERY</u> plan after an infection?
- . How can we make our family more **RESILIENT**?
- . How do we get teens, those in their 20's, and 30's to take the lead in protecting our families?



CareUniversity Series

Speakers & Reactors



Chief William Adcox



Dr. Gregory Botz



Dr. B Owens



Heather Foster RN



Dr. Casey Clements



David Beshk



Perry Bechtle III



Jennifer Dingman



Matt Horace



Clair Peck



Jacqueline Botz



D Policichio



Jaime Yrastorza



Paul Bhatia EMT



Charlie Denham III



Father MacKenzie



Preston Head III



Randal Styner



Keith Flitner



John Little

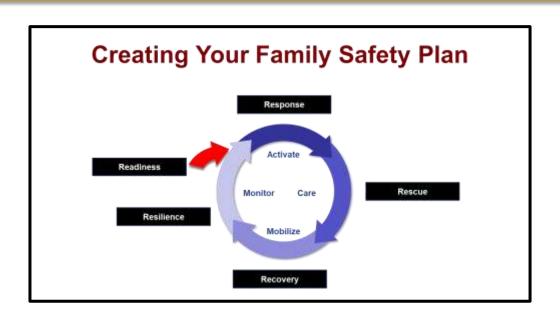


John Tomlinson

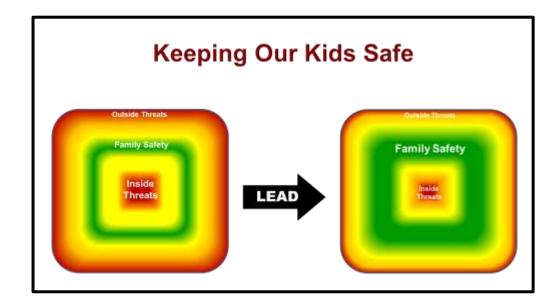


Dr. Charles Denham

Survive & Thrive Guide Webinars







Coming Home Safely



Public & Work Exposure



Warm Zone

Disinfection Area



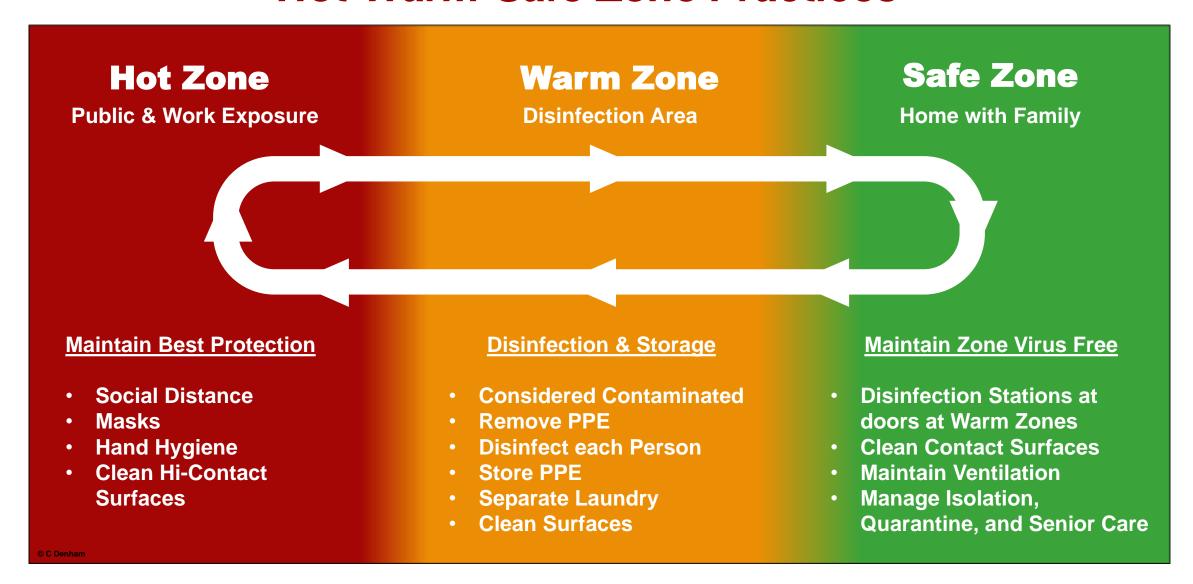


Safe Zone

Home with Family



August 6, 2020





HOT ZONE PRACTICES

- Social Distance 6 Feet is a MINIMUM
- Handwashing is poor even in caregivers 20 sec
- Avoid Poorly Ventilated Spaces
- Don't Touch Face Masks or the Face
- Be gracious but firm when others invade your space
- It is critical to know how to put on and take off Personal Protective Equipment (PPE). Called "Don and Doff" in healthcare jargon.
- Whenever in doubt, wash your hands.
- Know the process for reporting outbreaks.
- "Exposure to Infected" is being within 6 FEET OF INFECTED FOR LONGER THAN 15 MINUTES.

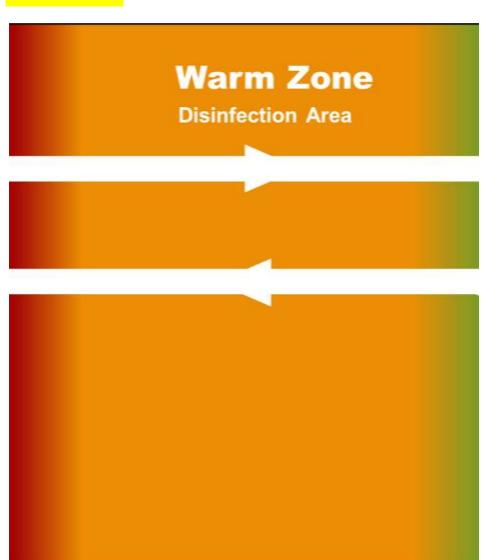
WARM ZONE Leaving Hot Zone Practices

- Disinfect before getting in car.
- Contain Contaminated Materials
- Wipe Down Car Door Handles and contact surfaces if car is warm zone.
- If Car is WARM ZONE: It must be considered contaminated.
- Be ready to store contaminated gear in your car if you must.

WARM ZONE Joining Hot Zone Practices

- Assure your mask has good fit.
- Practice no mask or face touching
- If contaminated wash hands.
- Know the rules of the workplace or public venue.

© C Denham



WARM ZONE Coming Home Practices

- Designate WARM ZONE room or space for disinfecting,
- Assemble & Maintain Disinfection Station with cleaning supplies.
- Keep the family out of WARM ZONE
- Increase precautions if someone is in quarantine or isolation.

WARM ZONE Leaving Home Practices

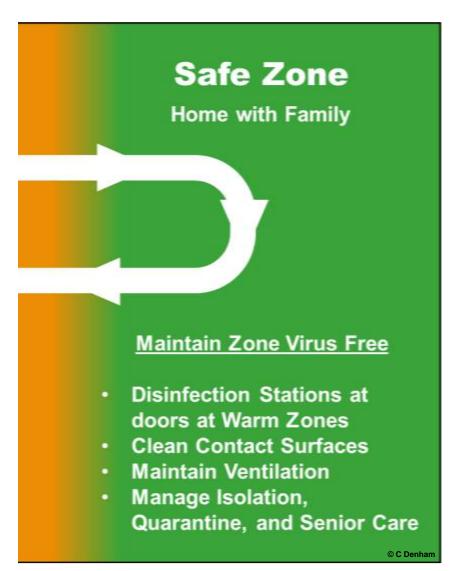
- New or Cleaned masks, gloves, face shields and coverings.
- Bring disinfectants in your car or your gear.
- Bring extra masks if you have them.

SAFE ZONE PRACTICES

- Establish and maintain disinfection stations at doors.
- Regularly clean high contact surfaces.
- Prevent people or parcels from bringing the virus home.
- If possible, keep rooms well ventilated.

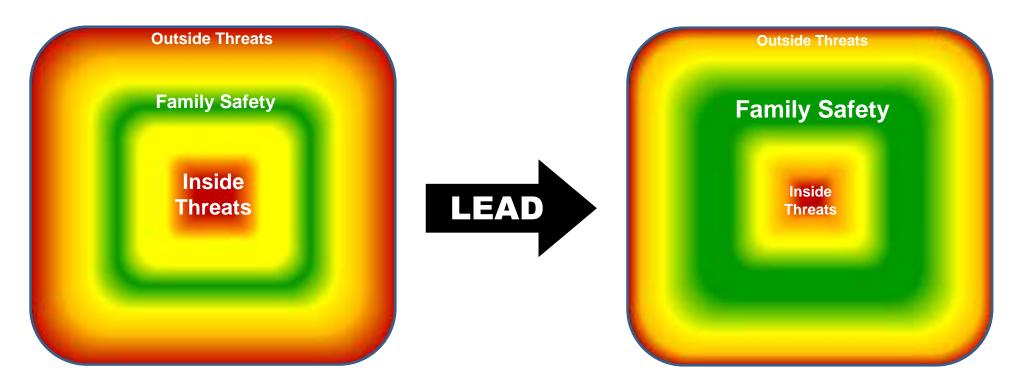
Care of Someone At Home

- Getting your "MacGyver On" Use what you have.
- Whether the flu or Coronavirus use same processes.
- Isolation is for all those who are infected or sick.
- The infected NEED to wear masks. Social distance and hand hygiene are important. Surfaces ARE a risk.
- Quarantine is for who may be infected assume infected until end of quarantine period or test negative.





Family Survive & Thrive Guide: Keeping Our Kids Safe



August 03, 2020 CareUniversity Webinar #145

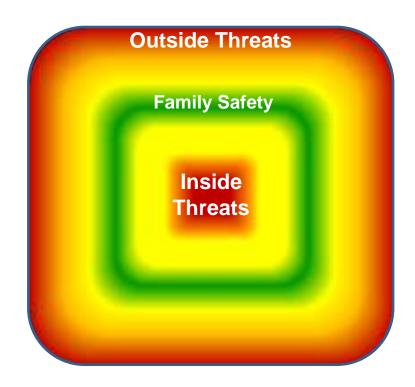
Threats X Vulnerability = Risk to Your Family

Threats:
Likely to
cause HARM.

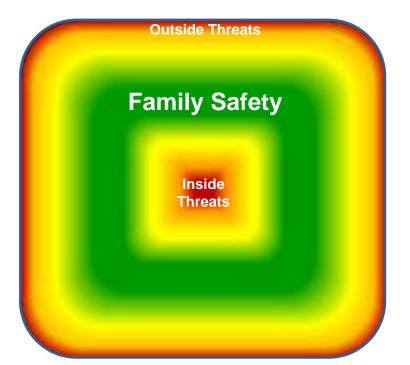
Vulnerability:
Weaknesses that can be
EXPLOITED by threats.

Risk:

PROBABILITY of harm by a threat exploiting vulnerability.



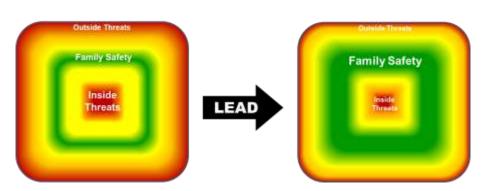




Keeping Our Kids Safe...by Keeping the Unit Family Safe



Reduce Family Vulnerability



STEP 1: Identify Each Family Member's Threat Profile

- Family living together and those in direct contact.
- Identify threats due to age, underlying conditions, and outside threats related to region and living conditions.

STEP 2: Identify and Follow Local Coronvirus Threats

- Local Community infection factors, trends, and public health guidelines will drive your behaviors and plans.
- Understand the public health processes in place where the family members will work, learn, play, and pray.

STEP 3: Develop a Family Safety Plan

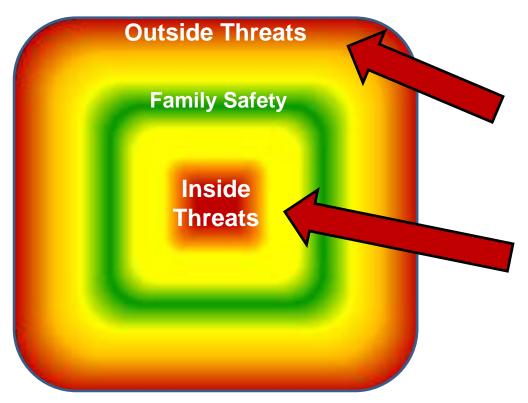
 A leader or leaders of the family act as the CFO – Chief Family Officer who drives the plan: Readiness, Response, Rescue, Recovery, and Resilience.

STEP 4: Plan the Flight and Fly the Plan

 The novel Coronavirus virus science, threats, vulnerabilities, and therefore the family risk changes continuously. Every airplane flight plan is modified along the route – so will your family safety plan.

STEP 1: Identify Each Family Member Threat Profile

Understanding the Threats, Vulnerability, and Risk of Harm to our Children





Family Unit Threat Profile:

Outside Threats from Community

- Threats, Vulnerability, and Risk from the outside environment for each individual family member for being infected, harmed, and death.
- Threats, Vulnerability, and Risk of current behaviors.

Inside Threats to Family – Home and Conditions

- Threats, Vulnerability, and Risk for each family member unique to them for being infected, harmed, and death.
- Threats, Vulnerability, and Risk of current behaviors within the home and living spaces.

STEP 1: Identify Each Family Member Threat Profile













Pregnant Under 2 Years Moms

2 to 10 Years

10 to 30 Years

30 to 50 Years

50 to 65 Years

Over 65

Pregnant Moms

 Have been found to have certain higher risks for severe COVID illness due to pregnancy – an "inside risk" (CDC)

Under 2 Years

• Watch evolving science in this area for "inside risks".

2 to 10 Years

- May have more virus in their nasopharynx than adults.
- Half as likely to get infected as over 10 years old.
- A rise in infection rate seen with school attendance.
- May develop MIS-C Multisystem Inflammatory Syndrome in Children. <21 years old, lab evidence of inflammation, >2 organ involvement. SEE CDC Case Description on CDC website.

10 to 30 Years

- Fastest growing infection group more than 50%
- Super Spreaders due to social interaction.
- Over 30% of COVID positive Big 10 players have cardiac inflammation on cardiac MRI. SEE Evolving CNN Reports

30 to 50 Years

Rapidly growing group of infections in later surge stage.
Underlying conditions including obesity a factor.

50 to 65 Years

 Have higher incidence in underlying conditions putting them at higher risk for infections and harm.

Over 65 Years

 Age is a risk factor independent of underlying conditions and have them. Highest death rate.

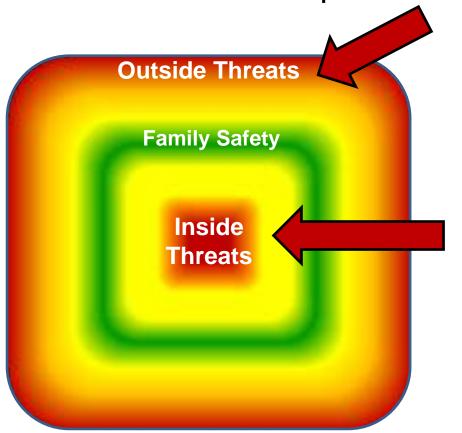
STEP 2: Identify and Follow Local Coronvirus Threats

OutsideThreats:

Inside versus Outside Threats

- High Background Community Infection or trending with more infections.
- Schools without proper Test, Trace, Treat, Isolate, and Quarantine Programs.
- Group Activities and Sports without Proper Prevention - Social Distancing etc.

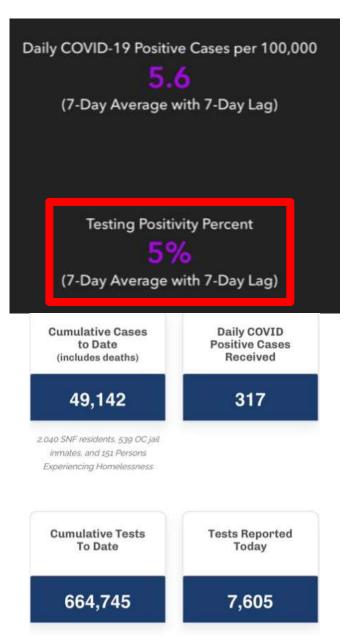
- Lack of Mask Use by all exposed to family.
- Community without adequate public health services including Test, Trace, Treat, Isolate, and Quarantine Programs.
- Critical Essential Infrastructure Worker Exposure bringing virus home to family.



Inside Threats:

- Delayed Emergency Medical Care for of Children due to fear.
- Delayed Vaccines for Children due to fear.
- Depression in Children isolated at home.
- Threats to Immune Compromised Children.
- Inadequate Nutrition of Children.
- Lack of Exercise of Children and Adults.
- Adults with underlying at-risk illnesses.
- Seniors over 65 years of age at risk due to age.
- Delayed Emergency Medical Care for Adults due to Fear.
- Delayed or absent Screening for Adults and Seniors.
- Delayed Elective Medical Procedures for adults.
- Inadequate Disinfection of Hi Contact Surfaces.

Survive & Thrive Guide: Protecting Your Family





Example Family Threat Profile Orange County CA



Male over 65 years of age.



 Female in mid 50's with history of pulmonary infections & bronchitis.



 Mid-teen youth with recent cardiac surgery and hospitalizations for hyperimmune reactions to viral infections.



 Grandmother at 99 years of age in assisted living with history of lung disease.

Survive & Thrive Guide: Protecting Your Family

3.6
(7-Day Average with 7-Day Lag)
Testing Positivity Percent
3.1%
(7-Day Average with 7-Day Lag)

Daily COVID-19 Positive Cases per 100,000

5.6

(7-Day Average with 7-Day Lag)

Testing Positivity Percent

(7-Day Average with 7-Day Lag)



Example Family Threat Profile Orange County CA



Male over 65 years of age.



• Female in mid 50's with history of pulmonary infections & bronchitis.



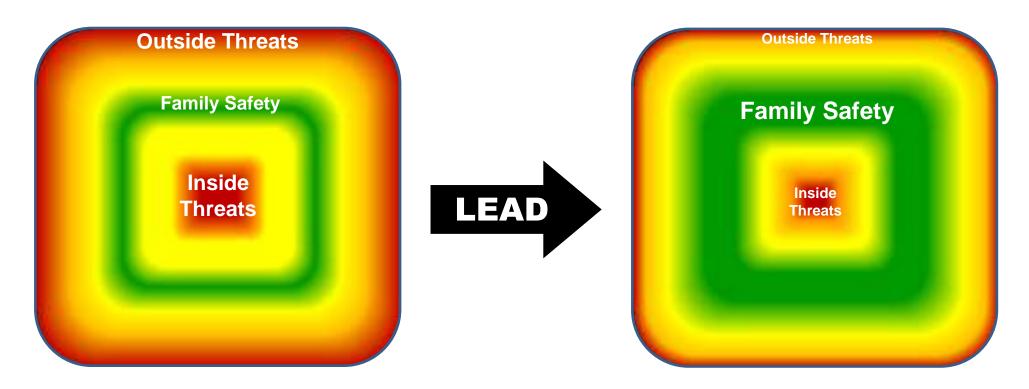
Mid-teen youth with recent cardiac surgery and hospitalizations for hyperimmune reactions to viral infections.



• Grandmother at 99 years of age in assisted living with history of lung disease.

Threats X Vulnerability = Risk to Your Family

Our Goal: Reduce Risk of Family Harm by Reducing Vulnerability to Threats



STEP 3: Develop a Family Safety Plan

Reduce Vulnerability

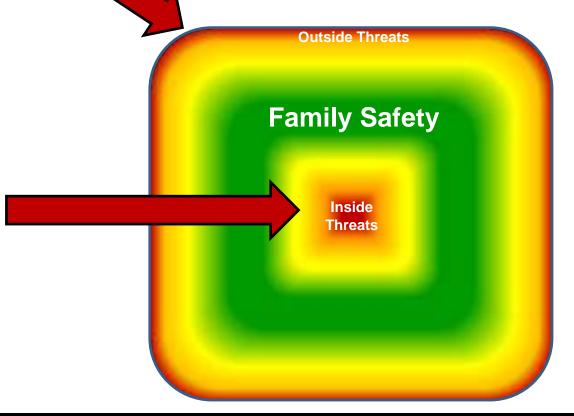
- Adjust behaviors depending on Background Community Infection and local infection trends.
- Base school decisions n Test, Trace,
 Treat, Isolate, and Quarantine Programs.
- Avoid Group Activities and Sports without Proper Social Distancing.

nerability to OutsideThreats:

- Assure Mask Use by all exposed to family
- Monitor public health services including Test, Trace, Treat, Isolate, and Quarantine Programs and adjust behavior to it.
- Assure Critical Essential Infrastructure Workers reduce bringing virus home.

Reduce Vulnerability to OutsideThreats:

- Produce a Medical Care Emergency Plan for the Children and Adults (5 Rights of Emergency Care).
- Safely see Pediatricians to maintain Vaccines.
- Combat depression in Children with activities
- Protect Immune Compromised Children .
- Protect Adults with underlying at-risk illnesses.
- Protect Seniors over 65 years of age.
- Safely Pursue Regular Screening for Adults.
- Weigh Risks for Elective Medical Procedures.
- Assure Nutrition for children and adults in isolation.
- Pursue Regular Exercise during isolation/quarantine.
- Inadequate Disinfection of Hi Contact Surfaces.



STEP 3:

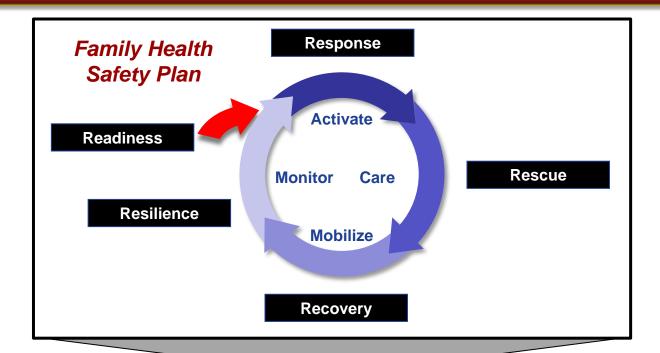
Develop a Family Safety Plan

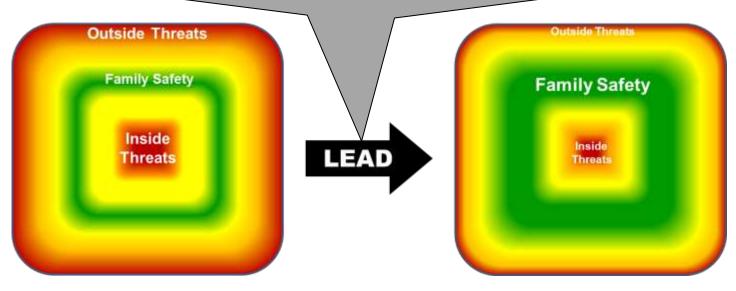
 A leader or leaders of the family act as the CFO – Chief Family Officer who drives the plan: Readiness, Response, Rescue, Recovery, and Resilience.

STEP 4:

Plan the Flight and Fly the Plan

 The novel Coronavirus virus science, threats, vulnerabilities, and therefore the family risk changes continuously. Every airplane flight plan is modified along the route – so will your family safety plan.





Family Health Safety Plans

Readiness: Preparation, regular review, and updating of a plan based on the latest science. Regular deliberate practice of roles and skills each family member undertake.

Readiness

Resilience

Resilience: Fortify response, rescue, and recovery actions in plan. In law enforcement and healthcare, we call this "target hardening".

Response **Activate Monitor** Care **Mobilize** Recovery

Response: Family moves to action to respond to an emergency. Safeguards are put in place. The family may respond to a member being infected or exposed to someone infected.

Rescue

Rescue: Regular deliberate practice of roles and skills to take a loved one to the Emergency Department if they have severe symptoms. This means having records and medications ready go with the patient.

Recovery: Follow up care of the family member after an event. Returning to normal family activities after a family member is infected and isolated, hospitalized, or under quarantine."







Rescue

Recovery

Resilience

Family Member Scenarios	Be ready for waves or new epidemics.	Response if someone in the home gets sick.	Care of loved on with severe symptoms.	Assistance safely to the "new normal".	Making the family "hardened" as a target
No Exposure No Test or Negative Test	Social distance, hygiene, cleaning, and masks. Protect high risk family members.	Recognize people with no exposure – no test are at risk for infections.	Know the triggers for emergency care. Have med records ready for family	Be very careful until vaccine, antivirals, or an immunity shield is can protect public.	Learn from others who are infected. Maintain medical records for family members.
Exposure to Infected Person and No Test	Know: what "exposure" is, what to if exposed, and if notified by a contact tracer.	Know where to get testing, maintain quarantine period, and how to protect family.	Know the triggers for emergency care. Have med records ready for family	If infected, be aware of the possible long-term consequences of infection.	Maintain prevention, testing, contact tracing, isolation and quarantine knowledge.
Infected & Asymptomatic – No Symptoms Ever	Family behaves as if they can infect someone. Protect	Isolate if test positive and contact tracers link	Watch for the signs and symptoms triggering	Be aware of and watch for the long-term consequences	Maintain prevention, testing, contact tracing, isolation and guarantine knowledge.
Infected & Pre-symptomatic - Before Symptoms	Before Symptoms				laintain prevention, testing, ontact tracing, isolation and uarantine knowledge.
Infected & Symptomatic – Have Symptoms	to the Real-life Scenarios that CAN HAPPEN to You!			laintain prevention, testing, ontact tracing, isolation and uarantine knowledge.	
Infected & Severely		laintain latest knowledge of cal testing, contact tracing,			
Symptomatic – Need Help	be solo phone only contact.	worsening signs/symptoms	ED care providers.	"long haulers" scenario	solation process <u>AND</u> best emergency care location.
Infected & Requiring Hospitalization	Be ready for no contact with patient while at hospital. Be ready to give care at home following hospital discharge.	Be ready to respond to infections of others at home or in contact with patient.	Watch for triggers for emergency care of other family members who may get sick.	Recognize probable long- term consequences after being infected. Be aware of "long haulers" scenario	Maintain latest knowledge of local testing, contact tracing, isolation process AND ID best hospital care providers.
Infected & Require ICU Life Support Respirator & ECMO	Keep the family ready for a death. Prepare to deliver substantial care at home if the patient is discharged.	Be ready to respond to isolate and care for infected family members. Quarantine those in significant contact.	Watch for symptom triggers requiring emergency care visit if others in family get sick.	Recognize probable long- term consequences after being infected. Be aware of "long haulers" scenario	Maintain latest knowledge of local testing, contact tracing, isolation process AND ID best hospital care providers.





Response

Rescue

Recovery

Resilience

Family Member Scenarios	Be ready for waves or new epidemics.	Response if someone in the home gets sick.	Care of loved on with severe symptoms.	Assistance safely to the "new normal".	Making the family "hardened" as a target
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Infected & Asymptomatic – No Symptoms Ever	Family behaves as if they can infect someone. Protect "at risk" family members.	Isolate if test positive and contact tracers link infections to you.	Watch for the signs and symptoms triggering seeking emergency care.	Be aware of and watch for the long-term consequences of infection.	Maintain prevention, testing, contact tracing, isolation and quarantine knowledge.
Infected & Pre-symptomatic – Before Symptoms	Know: what "exposure is", what to if expose or notified by a contact tracer.	Isolate if test positive and contact tracers link infections to you.	Watch for the signs and symptoms triggering seeking emergency care.	Be aware of and watch for the long-term consequences of infection.	Maintain prevention, testing, contact tracing, isolation and quarantine knowledge.
Infected & Symptomatic – Have Symptoms	Be ready for worsening symptoms and to maintain Isolation per guidelines.	Isolate if test positive and contact tracers link infections to you.	Watch for the signs and symptoms triggering seeking emergency care.	Be aware of and watch for the long-term consequences of infection.	Maintain prevention, testing, contact tracing, isolation and quarantine knowledge.
Infected & Severely Symptomatic – Need Help	Choose ED Care site, have med records, meds, and a plan. Be ready for patient to be solo phone only contact.	Isolate if test positive and contact tracers link infections to you. Watch for worsening signs/symptoms	Seek emergency care immediately. Have medical records and medications for ED care providers.	Recognize probable long- term consequences after being infected. Be aware of "long haulers" scenario	Maintain latest knowledge of local testing, contact tracing, isolation process <u>AND</u> best emergency care location.
Infected & Requiring Hospitalization	Be ready for no contact with patient while at hospital. Be ready to give care at home following hospital discharge.	Be ready to respond to infections of others at home or in contact with patient.	Watch for triggers for emergency care of other family members who may get sick.	Recognize probable long- term consequences after being infected. Be aware of "long haulers" scenario	Maintain latest knowledge of local testing, contact tracing, isolation process AND ID best hospital care providers.
Infected & Require ICU Life Support Respirator & ECMO	Keep the family ready for a death. Prepare to deliver substantial care at home if the patient is discharged.	Be ready to respond to isolate and care for infected family members. Quarantine those in significant contact.	Watch for symptom triggers requiring emergency care visit if others in family get sick.	Recognize probable long- term consequences after being infected. Be aware of "long haulers" scenario	Maintain latest knowledge of local testing, contact tracing, isolation process AND ID best hospital care providers.





Response

Rescue

Recovery

Resilience

Family Member Scenarios

No Exposure
No Test or Negative Test

Exposure to Infected Person and No Test

Infected & Asymptomatic – No Symptoms Ever

Infected & Pre-symptomatic – Before Symptoms

Infected & Symptomatic – Have Symptoms

Infected & Severely Symptomatic – Need Help

Infected & Requiring Hospitalization

Infected & Require ICU
Life Support
Respirator & ECMO

Family Safety Plan





Choose ED Care site, have

Response

Isolate if test positive and

Rescue

Seek emergency care

increased in the literature and a site of

	Readiness			
Family Member Scenarios	Be ready for waves or new epidemics.	Response if someone in the home gets sick.	Care of loved on with severe symptoms.	
No Exposure No Test or Negative Test	Social distance, hygiene, cleaning, and masks. Protect high risk family members.	Recognize people with no exposure – no test are at risk for infections.	Know the triggers for emergency care. Have med records ready for family	E a s
Exposure to Infected Person and No Test	Know: what "exposure" is, what to if exposed, and if notified by a contact tracer.	Know where to get testing, maintain quarantine period, and how to protect family.	Know the triggers for emergency care. Have med records ready for family	c b
Infected & Asymptomatic – No Symptoms Ever	Family behaves as if they can infect someone. Protect "at risk" family members.	Isolate if test positive and contact tracers link infections to you.	Watch for the signs and symptoms triggering seeking emergency care.	t c
Infected & Pre-symptomatic – Before Symptoms	Know: what "exposure is", what to if expose or notified by a contact tracer.	Isolate if test positive and contact tracers link infections to you.	Watch for the signs and symptoms triggering seeking emergency care.	t t
Infected & Symptomatic – Have Symptoms	Be ready for worsening symptoms and to maintain Isolation per guidelines.	Isolate if test positive and contact tracers link infections to you.	Watch for the signs and symptoms triggering seeking emergency care.	t c
				\top

	Response	Rescue	Recovery	Resilience
	Response if someone in the home gets sick.	Care of loved on with severe symptoms.	Assistance safely to the "new normal".	Making the family "hardened" as a target
t	Recognize people with no exposure – no test are at risk for infections.	Know the triggers for emergency care. Have med records ready for family	Be very careful until vaccine, antivirals, or an immunity shield is can protect public.	Learn from others who are infected. Maintain medical records for family members.
	Know where to get testing, maintain quarantine period, and how to protect family.	Know the triggers for emergency care. Have med records ready for family	If infected, be aware of the possible long-term consequences of infection.	Maintain prevention, testing, contact tracing, isolation and quarantine knowledge.
	Isolate if test positive and contact tracers link infections to you.	Watch for the signs and symptoms triggering seeking emergency care.	Be aware of and watch for the long-term consequences of infection.	Maintain prevention, testing, contact tracing, isolation and quarantine knowledge.
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1	Isolate if test positive and contact tracers link	Seek emergency care immediately. Have medical	Recognize probable long- term consequences after	Maintain latest knowledge of local testing, contact tracing,



Coronavirus Care Community of Practice

Bystander Rescue Care CareUniversity Series

First Responder and Educator Panel



Dr. B Owens



Paul Bhatia EMT



Matt Horace



Dr. Casey Clements



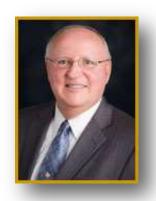
Dr. Gregory Botz



David Beshk



Heather Foster RN



Chief William Adcox



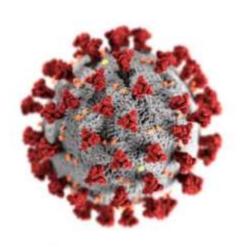
Dr. Charles Denham Moderator





Gregory Botz MD

Critical Care Physician
Professor University of Texas
Professor Stanford Medical
College

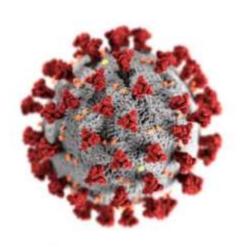






Dr. Brittany Barto-Owens

Community Pediatrician Practicing in Philadelphia



Survive & Thrive Guide:

Multisystem Inflammatory Syndrome (MIS-C)



What is MIS-C?

Multisystem inflammatory syndrome in children (MIS-C) is a condition where different body parts can become inflamed, including the heart, lungs, kidneys, brain, skin, eyes, or gastrointestinal organs. Children with MIS-C may have a fever and various symptoms, including abdominal (gut) pain, vomiting, diarrhea, neck pain, rash, bloodshot eyes, or feeling extra tired. We do not yet know what causes MIS-C. However, many children with MIS-C had the virus that causes COVID-19, or had been around someone with COVID-19.

Coronavirus Disease 2019 (COVID-19)



Cases & Data >

Your Health > Community, Work & School > A Your Health Symptoms Testing Prevent Getting Sick If You Are Sick What to Do If You Are Sick Isolate If You Are Sick When to Quarantine Caring for Someone Parents or Caregivers Who Are Sick When You Can be Around Others

YOUR HEALTH

When to Quarantine

Stay home if you might have been exposed to COVID-19

Updated Sept. 10, 2020

Languages *

Healthcare Workers & Labs v

Print







More v





Note:

At this time, we have limited information about reinfections with the virus that causes COVID-19. This is a new virus, and CDC is actively working to learn more. We will provide updates as they become available. Data to date show that a person who has had and recovered from COVID-19 may have low levels of virus in their bodies for up to 3 months after diagnosis. This means that if the person who has recovered from COVID-19 is retested within 3 months of initial infection, they may continue to have a positive test result, even though they are not spreading COVID-19.

Health Depts v

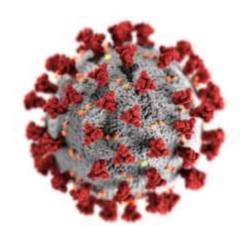
There are no confirmed reports to date of a person being reinfected with COVID-19 within 3 months of initial infection. However, additional research is ongoing. Therefore, if a person who has recovered from COVID-19 has new symptoms of COVID-19, the person may need an evaluation for reinfection, especially if the person has had close contact with someone infected with COVID-19. The person should isolate and contact a healthcare provider to be evaluated for other causes of their symptoms, and possibly retested.





David Beshk

Award Winning Educator
Med Tac School
Program Leader
Scout Program Mentor
San Juan Capistrano, CA



The Family Plan: Learning as a Family





Who is the CFO?

TMIT Global: Effectiveness of Masks





Thoughts for Families with Young Children:

- □ Review other Readiness Checklists. Use FEMA Emergency Preparedness Checklist (we use when we teach Med Tac Bystander Rescue Program.
- Make sure you have Personal Protective Equipment for everyone.
- Make sure you have a copy of everyone's Medical Records including lists of allergies and meds.

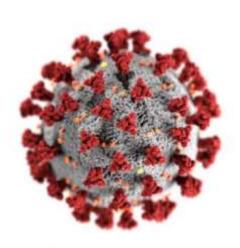
- ☐ Review the 5 Rights of Emergency Care video to be prepared for a new experience.
- ☐ Use Icons in your plan to make plan family friendly.
- ☐ Create plan sections for adults and children
- ☐ Create an "All Teach All Learn" Environment
- **□** Play Date Simulations for being prepared.
- ☐ Gamify Readiness we use FEMA as an example





Paul Bhatia, EMT

UCI Pre-Med Student
EMT
President UCI EMT Association
Med Tac Instructor

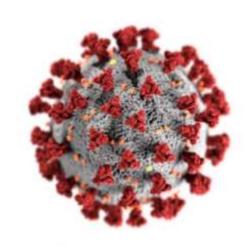






Casey Clements, MD PhD

Emergency Medicine Director Staff Safety Director Mayo Clinic, Rochester



Why Social Distancing WORKS

Masks ARE Critical

Masks: The SCIENCE of Success

Hand Washing & DISINFECTANTS

CLEAN High Contact Surfaces

Building a FAMILY SAFETY PLAN

If we NEED Emergency Care

Why ICU, Respirators, and ECMO

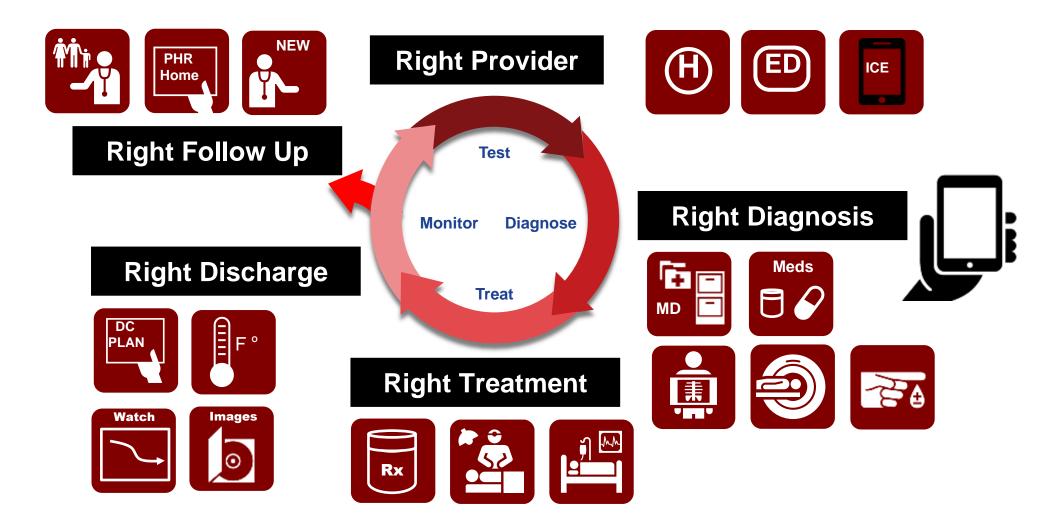


Dr. Christopher Peabody

Discusses the new challenges when bringing a loved one to the Emergency Department



The 5 Rights of Emergency Care®

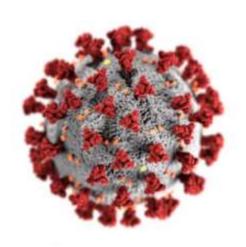






Matt Horace

Chief Security Officer
Mayo Clinic
Best Selling Author

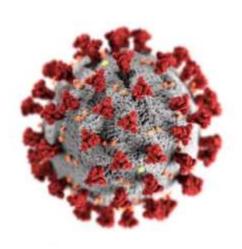






Chief William Adcox

Chief Security Officer
Associate Vice President
MD Anderson Cancer Center
Chief of Police University of
Texas at Houston

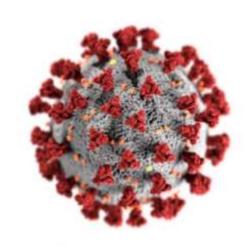






Heather Foster, RN

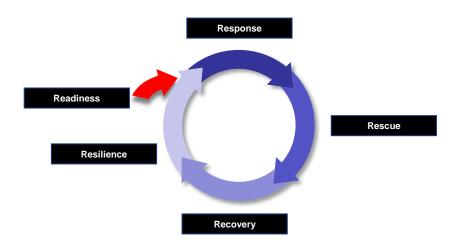
Practicing Nurse Infection Preventionist Patient Safety Expert



THE UNIVERSITY OF TEXAS

MD Anderson Cancer Center







University of California San Francisco











Our Discoveries:

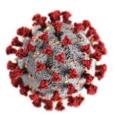
The Family Unit is the Achilles Heel Family Transmission Chains

Family Unit Training Works

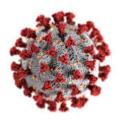
- Saves Lives
- Saves Money
- Saves Liability

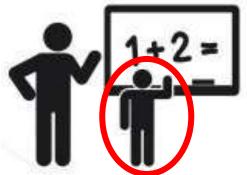
Survive & Thrive Guide:

Our Discovery: The Achilles Heal Our Family Unit

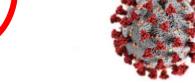




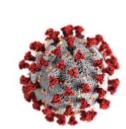




School









Vulnerable

Home

Survive & Thrive Guide:

Our Discovery: The Achilles Heal Our Family Unit



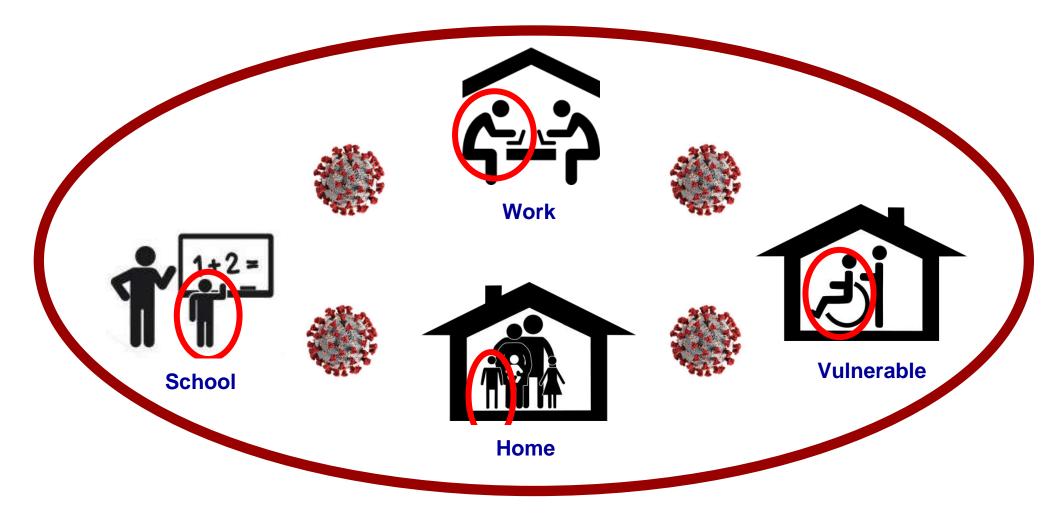
We Can't Train Essential Infrastructure Workers Alone



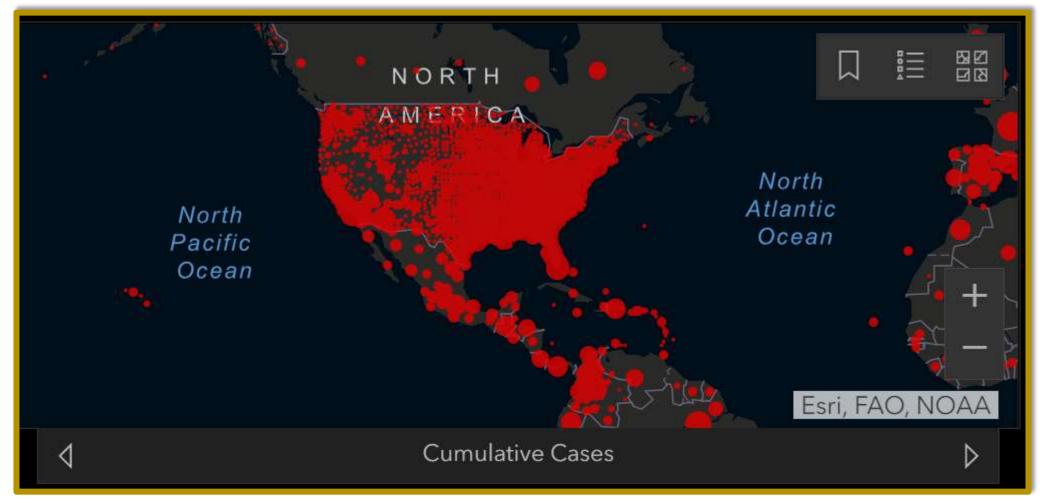
We Can't Train Essential Infrastructure Workers Alone

The Family Unit is the Achilles Heel

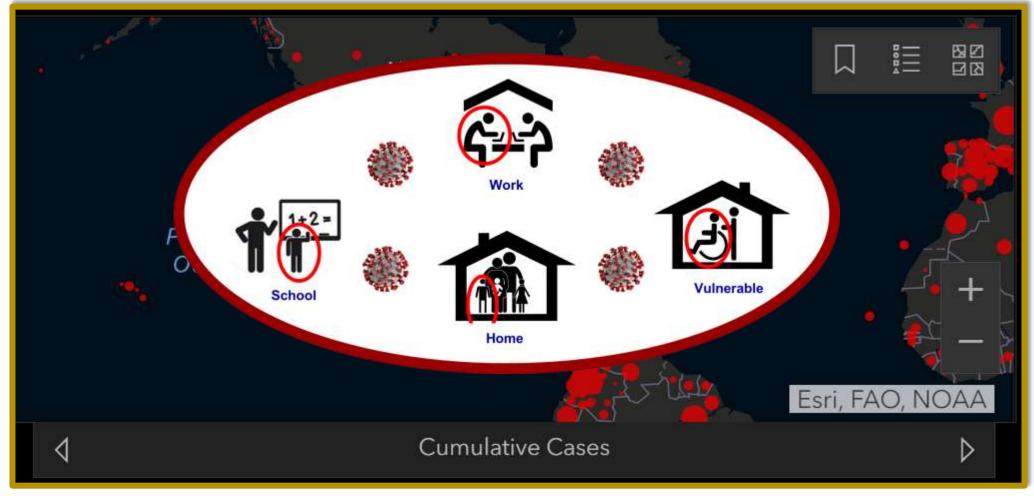
Save the Family Unit Saves the Worker



Save the Family Units in Communities Can Save Our Nation



Save the Family Units in Communities Can Save Our Nation



Why Social Distancing WORKS

Masks ARE Critical

Masks: The SCIENCE of Success

Hand Washing & DISINFECTANTS

CLEAN High Contact Surfaces

Building a FAMILY SAFETY PLAN

If we NEED Emergency Care



Why Social Distancing WORKS

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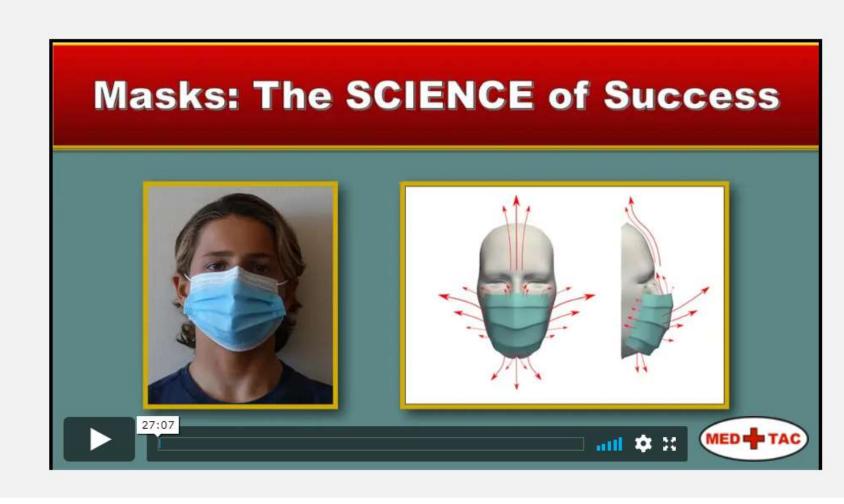
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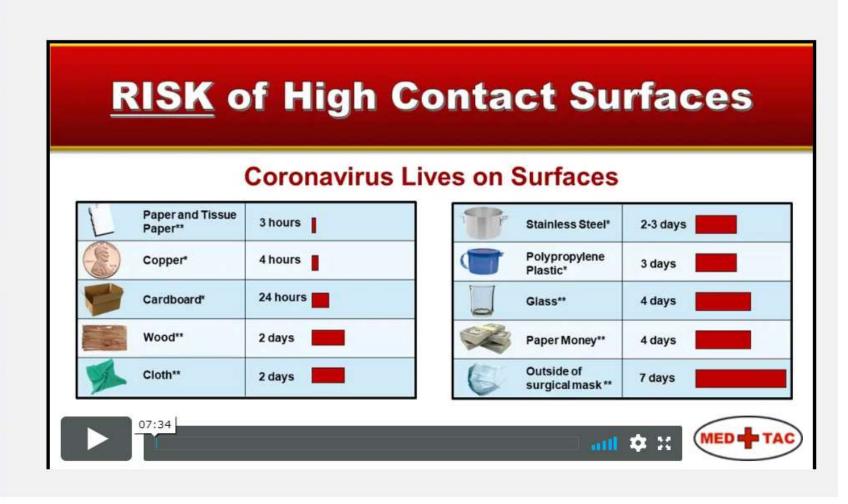
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Survive & Thrive Guides:



Coronavirus Care Community of Practice Bystander Rescue Care CareUniversity Series

Survive & Thrive Guide Masks: The SCIENCE of Success

Charles Denham II MD

This article is a narrative summary of the short film entitled Masks: The SCIENCE of Success posted on the Med Tac Global website that provides access to free films and resources to families of the Essential Critical Infrastructure. Workers of stateen industry sectors and the general public 1.







N95 Mask

Surgical Mask

Cloth Mask

"It is critical that we all take the personal responsibility to slow the transmission of COVID-19 and embrace the universal use of face coverings"

Dr. Robert Redfield, CDC Director

"There is no doubt that wearing masts protects you and gets you to be protected"

Dr. Anthony Fauci, National Institute of Allergy and Infectious Diseases Director

"We need to support mask wearing when I'm not in uniform I wear them their white they were very effective, and I think there are a great investment for the American people"

> Admiral Brett Giroir, Assistant Secretary Health and Human Services

"It is not an inconvenience it is not a suppression of your freedom"

Dr. Jerome Adams U.S. Surgeon General "When you're outside and not have the capability of maintaining distance, you should wear a mask at all times"

> Dr. Anthony Fauci, National institute of Allergy and Infectious Diseases Director

This face covering actually is an instrument of freedom for Americans if we all use it.

> Dr. Jerome Adams U.S. Surgeon General

"Wear facial coverings were social distancing is not possible."

Dr. Alex Azar Secretary Health and Human Services

"Please... please... please... wear a face covering when you go out in public"

Dr. Jerome Adams U.S. Surgeon General

Mask Facts & Fiction

TRUE or FALSE?

· Scientists are NOT in Agreement on Mask Use

. Masks ONLY protect the public and not the Wearer

- The Mask FIT impacts mask protection

· Masks can HARM the wearer

· ALL masks with good fit have equal protection

Dentum, CR Carelibiversity Series, 97-19-28

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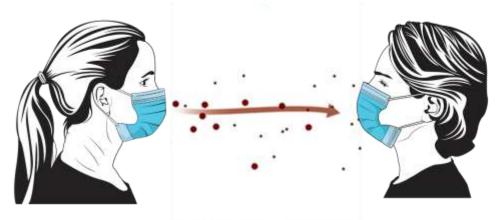
Survive & Thrive Guide: Masks: The SCIENCE of Success

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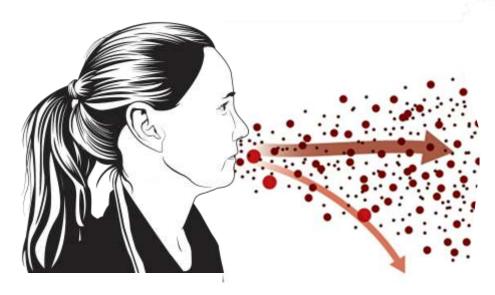
Dramatically Reduced Risk



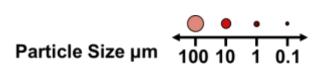
Best Solution – All Wear Masks N95 for Caregivers, Surgical Best for Consumers. Next Best Cloth – All are of Value

Mask Reduction of Airborne Transmission

A competition between droplet size, inertia, gravity, and evaporation determines how far emitted drop-lets and aerosols will travel in air.



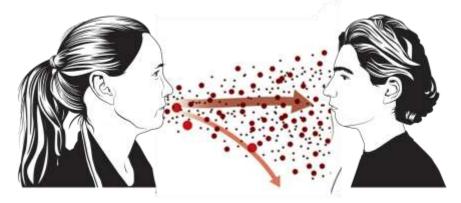
AEROSOLS are smaller will evaporate faster than they can settle, are buoyant, and thus can be affected by air currents, which can transport them over longer distances.



DROPLETS will undergo gravitational settling faster than they evaporate, contaminating high contact surfaces and leading to contact transmission.

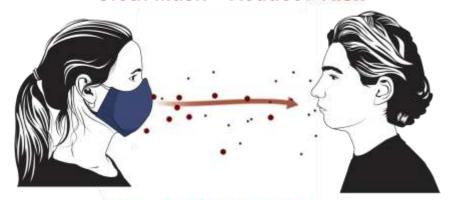
TMIT Global: Effectiveness of Masks

No Mask - Extreme Risk



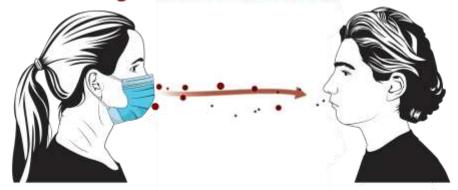
15 minutes within 6 feet = "High Risk"

Cloth Mask - Reduced Risk



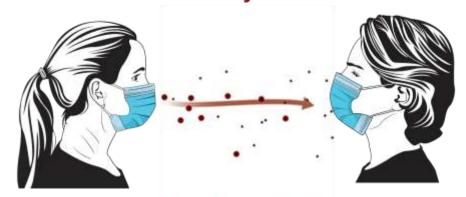
2 Layer Cloth Mask Reduces Exhaled and Inhaled Droplets by 60%

Surgical Mask – Reduced Risk



Surgical Mask Reduces
Exhaled Droplets Reduced by 99%
and Inhaled Droplets by 75%

Dramatically Reduced Risk



Best Solution – All Wear Masks N95 for Caregivers, Surgical Best for Consumers. Next Best Cloth – All are of Value



Coronavirus Care Community of Practice

Bystander Rescue Care CareUniversity Series

Young Adult Panel



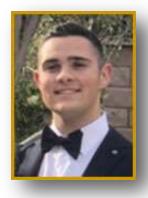
Jaime Yrastorza



Clair Peck



Jacqueline Botz



D Policichio

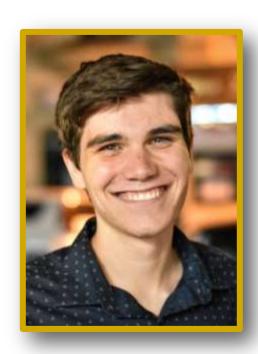


Preston Head III



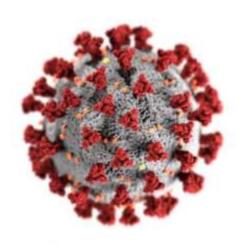
Perry Bechtle III
Moderator





Jaime Yrastorza

Graduate UCSD
Pre-Med Student
Med Tac College Team

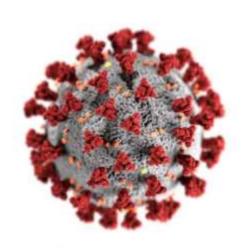






Jacqueline Botz

Chapman University
Sophomore
Theatrical Arts Student
Med Tac Program Intern

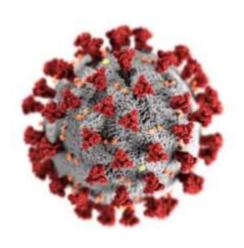






Clair Peck

NYU Sophomore Film Student Med Tac Production Team Member

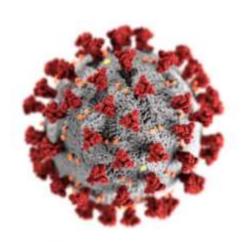




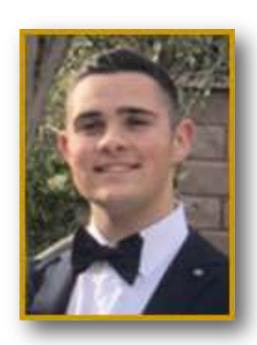


Perry Bechtle III

University of Florida Senior
Pre-Med Student
Med Tac Master Instructor
Eagle Scout and Eagle Team Lead

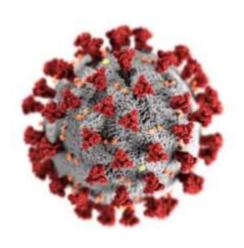






Danny Policichio

NYU Film Student Producer Med Tac Bystander Rescue Program Films

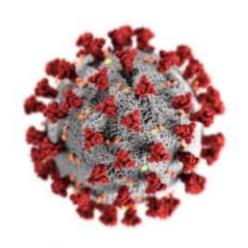




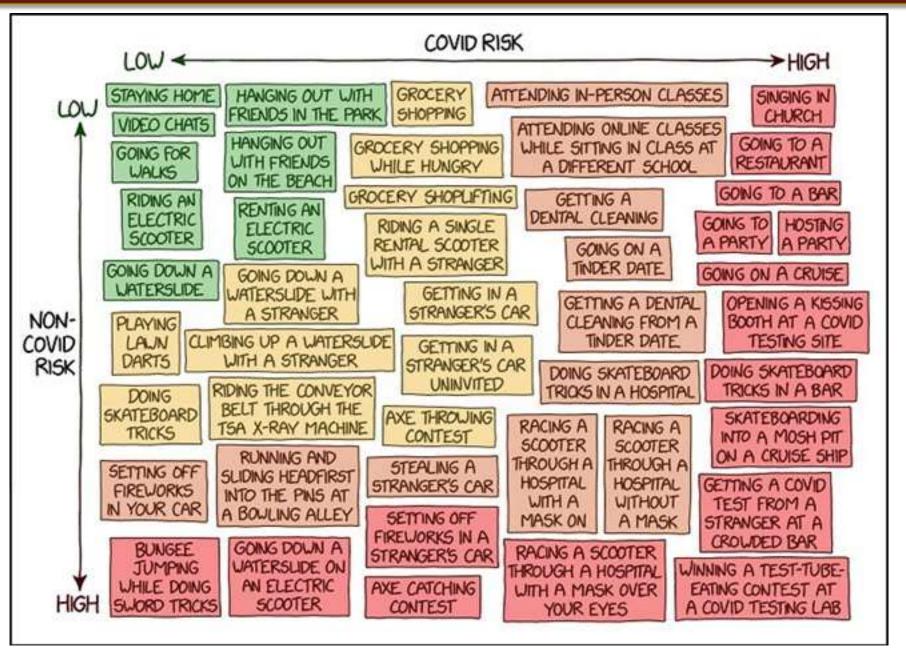


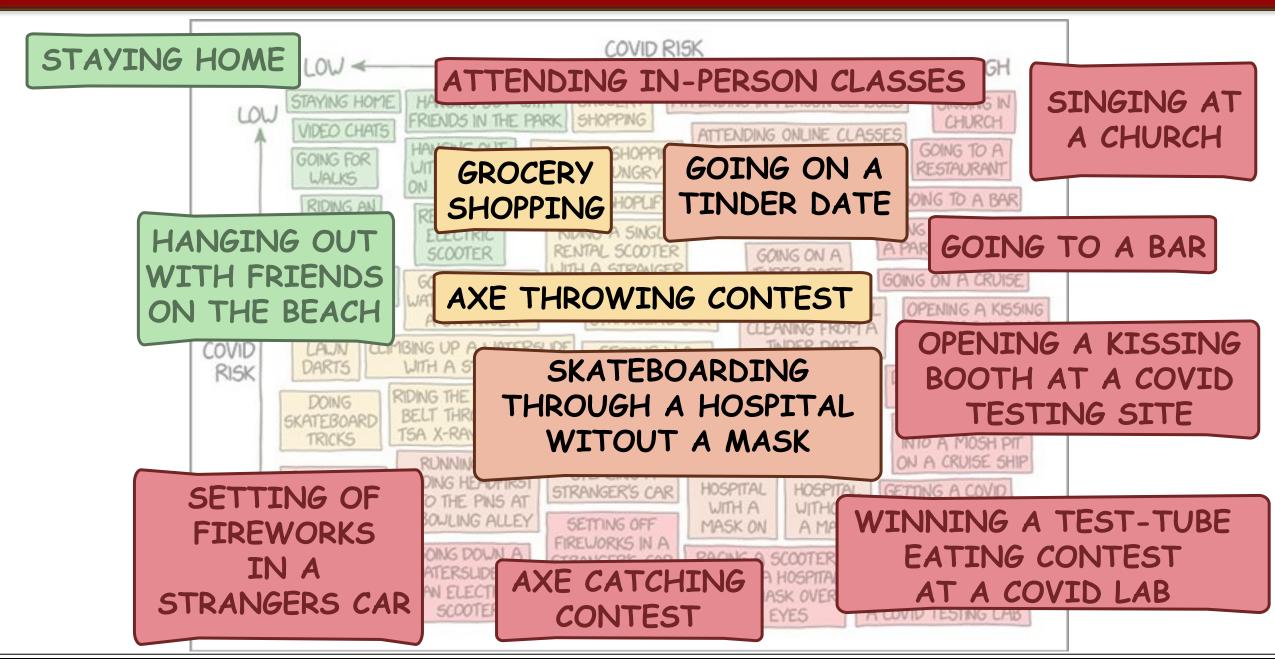
Preston Head III

Master Med Tac Instructor Co-founder Med Tac Surf & Lifeguard Program



Humor the Best Medicine





Survive & Thrive Guide: Protecting Your Family



BOY SCOUTS OF AMERICA

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Youth Safety
BSA Membership Standards
Diversity & Inclusion
Frequently Asked Questions
Annual Report & Financial Statements
Scouting Newsroom
Research
Volunteer
Why Scouting?
Follow Us on Social Media

Scout Oath

On my honor I will do my best to do my duty to God and my country and to obey the Scout Law; to help other people at all times; to keep myself physically strong, mentally awake, and morally straight.

Scout Law

The Scout Law has 12 points. Each is a goal for every Scout. A Scout tries to live up to the Law every day. It is not always easy to do, but a Scout always tries.

A Scout is:

TRUSTWORTHY. Tell the truth and keep promises. People can depend on you.

LOYAL. Show that you care about your family, friends, Scout leaders, school, and country.

HELPFUL. Volunteer to help others without expecting a reward.

FRIENDLY. Be a friend to everyone, even people who are very different from you.

COURTEOUS. Be polite to everyone and always use good manners.

KIND. Treat others as you want to be treated. Never harm or kill any living thing without good reason.

OBEDIENT. Follow the rules of your family, school, and pack. Obey the laws of your community and country.

CHEERFUL. Look for the bright side of life. Cheerfully do tasks that come your way. Try to help others be happy.

THRIFTY. Work to pay your own way. Try not to be wasteful. Use time, food, supplies, and natural resources wisely.

BRAVE. Face difficult situations even when you feel afraid. Do what you think is right despite what others might be doing or saying.

CLEAN. Keep your body and mind fit. Help keep your home and community clean.

REVERENT. Be reverent toward God. Be faithful in your religious duties. Respect the beliefs of others.

Coronavirus Care Community of Practice

Bystander Rescue Care CareUniversity Series

Speakers & Reactors



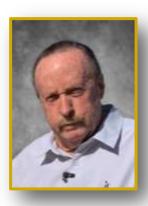
Rev Lester Mackenzie



Randal Styner



Keith Flitner



John Little



Charlie Denham III



John Tomlinson



Perry Bechtle III



Heather Foster RN



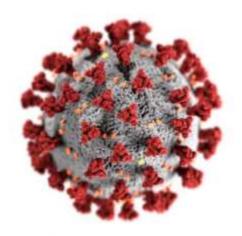
Dr. Charles Denham





Charles R Denham III

Co-founder Med Tac Bystander Rescue Program Junior Med Tac Instructor Co-lead Med Tac Surf & Lifeguard Program

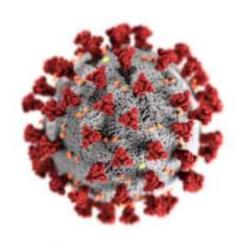






Randy Styner

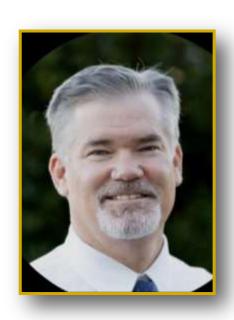
Emergency Management Director UCI Police Department Assistant Scout Master



Return to Scouting Safely

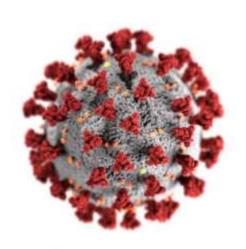




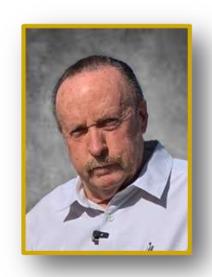


Keith Flitner

Aerospace Engineer Scout Leader Eagle Scout

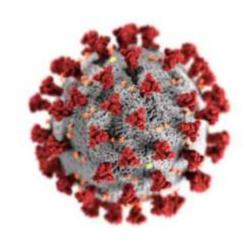






John Little

Paramedic
Faith-based Security and
Medical Leader
Med Tac Master Instructor

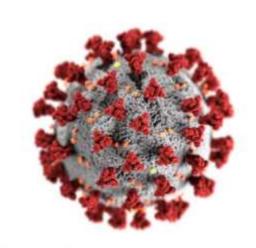






Rev Lester Mackenzie

Rector of The Episcopal Church of St Mary Laguna Beach CA

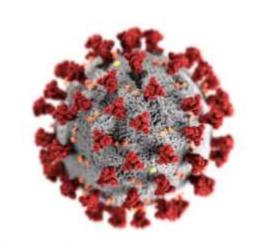






John Tomlinson JD MBA

Scout Troop Committee Chair Med Tac Adopt a Cove Program Partner Community Leader



Tomlinson Home Isolation Chamber











Coronavirus Care Community of Practice

CareUniversity Series

Speakers & Reactors



Chief William Adcox



Dr. Gregory Botz



Dr. B Owens



Heather Foster RN



Dr. Casey Clements



David Beshk



Perry Bechtle III



Jennifer Dingman



Matt Horace



Clair Peck



Jacqueline Botz



D Policichio



Jaime Yrastorza



Paul Bhatia EMT



Charlie Denham III



Father MacKenzie



Preston Head III



Randal Styner



Keith Flitner



John Little



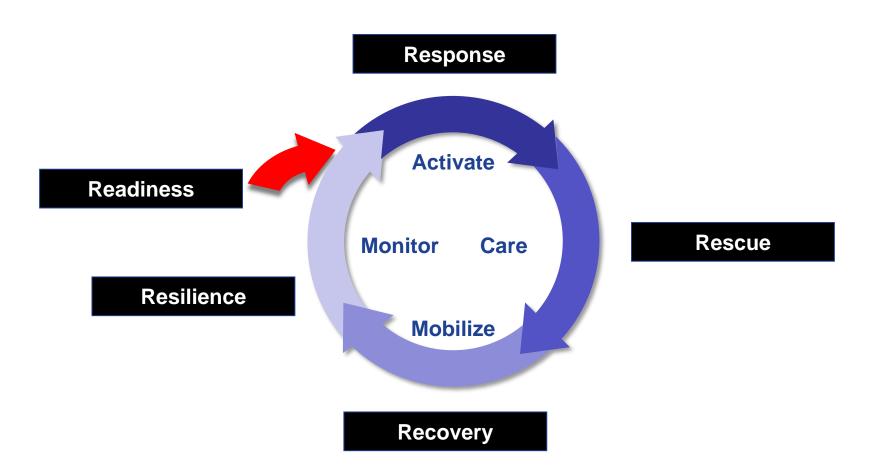
John Tomlinson



Dr. Charles Denham



Family Health Safety & Organization Security Plans[™]



National Survey Questions

I have already responded to the Family Health Safety Survey

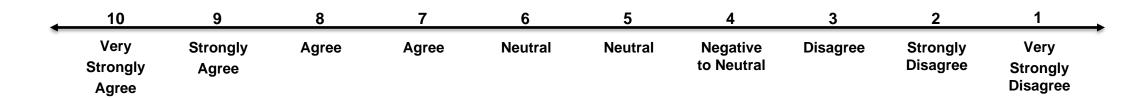






READINESS

My family is ready to take care of a loved one with Coronavirus in our home.

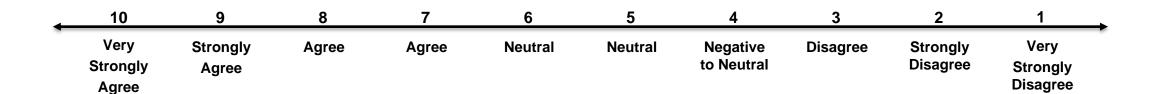


What readiness information would you like to have?

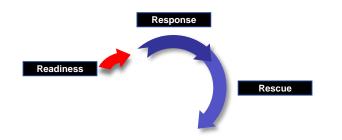


RESPONSE

My family knows what actions to take if a loved one becomes infected with Coronavirus.

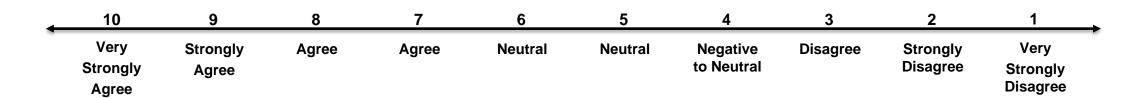


What information would help you respond when a loved one becomes infected?

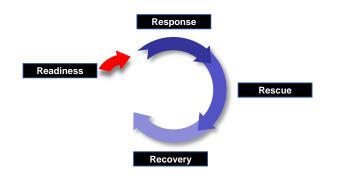


RESCUE

My family knows what do when someone develops severe COVID-19 symptoms.

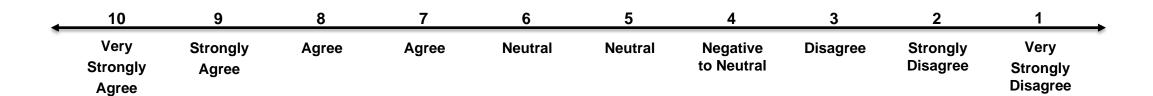


What information would help your family react if someone develops severe symptoms?



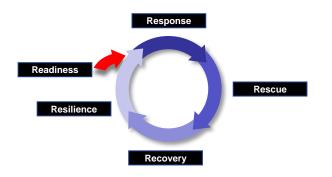
RECOVERY

My family has a safety plan to return to work and play when the Coronavirus social restrictions are relaxed.

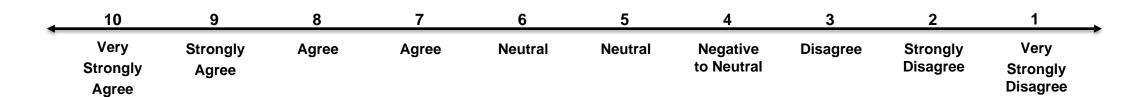


What information would help your family return to the new normal?

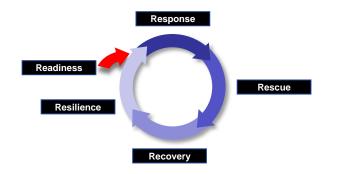




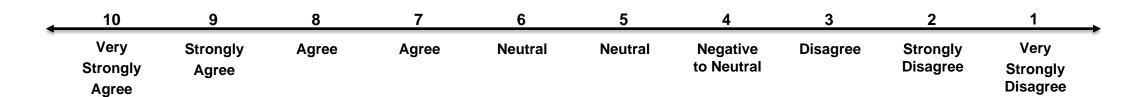
My family has a plan to make them less vulnerable to epidemics in the future.



What information would help you become more resilient in the future?



Changing behaviors of teens and young adults is key to beating the Coronavirus Crisis.



My suggestions to help making teens and young adults leaders in becoming part of the solution are:





Voice of the Patient



Jennifer Dingman

Founder, Persons United Limiting Substandard and Errors in Healthcare (PULSE), Colorado Division Co-founder, PULSE American Division TMIT Patient Advocate Team Member Pueblo, CO

