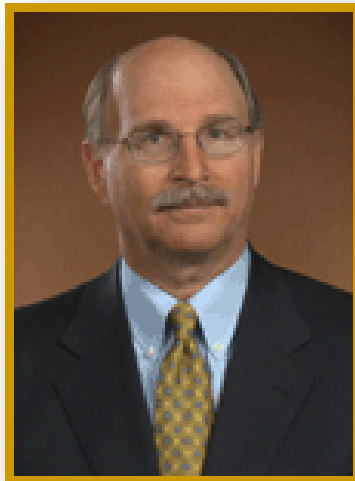


# 1,000 Household COVID Study

## *Survive and Thrive Guide*™



# Welcome



## **Charles Denham, MD**

Chairman, TMIT Global  
Founder Med Tac Bystander Rescue Care

**Med Tac Bystander Rescue Care  
May 5, 2022**

***CareUniversity* Webinar 185**

## 1,000 Worker Study

### The 5 R's of Safety



**HEAD**



**HEART**



**HANDS**



**VOICE**

THE UNIVERSITY OF TEXAS  
**MD Anderson**  
~~Cancer~~ Center

## Family Rescue R&D



**Stanford**  
University



**UCSF**  
University of California  
San Francisco



## The 5 R's of Safety

**UF** | UNIVERSITY of  
**FLORIDA**

**UT Southwestern**  
Medical Center



# Our 1,000 Household COVID Study: “3 Whats and the How”



❑ What did we learn?

❑ What is new?

❑ What do we need in our family plan?

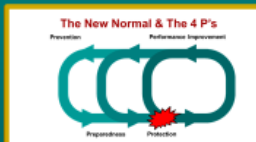
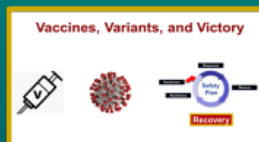
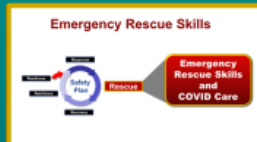
❑ How do we protect our families now?



*Turn the Science into Safety™*

# Our 1,000 Household COVID Study: “3 Whats and the How”

## Survive & Thrive Guide™ Program Road Map

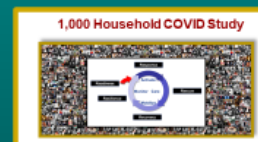


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TMIT

## Survive & Thrive Guide™ Program Road Map



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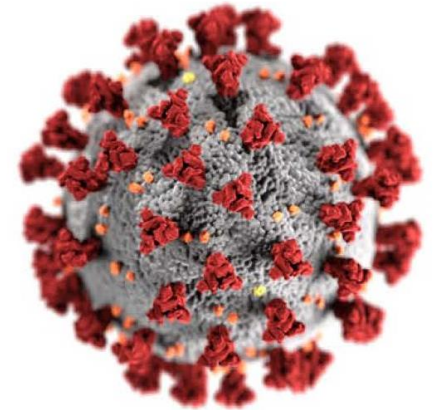
TMIT

## ***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**



## Speakers & Reactors



Jennifer Dingman



Dr. Gregory Botz



Chief William Adcox



Dr. Christopher Peabody



Charlie Denham III



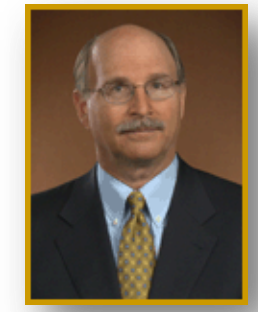
Heather Foster RN



Dr. Brittany Barto-Owens



David Beshk



Dr. Charles Denham



## 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***<sup>®</sup>

### Our **ICARE** Values:

**Integrity, Compassion, Accountability, Reliability, and Entrepreneurship.**



### 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

- Dr. Gregory H. Botz has nothing to disclose.
- Dr. Christopher Peabody has nothing to disclose.
- William Adcox has nothing to disclose.
- David Beshk has nothing to disclose.
- Dr. Barto-Owens has nothing to disclose.
- Charlie Denham III has nothing to disclose.
- Heather Foster RN has nothing to disclose.
- Jennifer Dingman has nothing to disclose.
- Dr Charles Denham 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.



# Coronavirus Care Community of Practice

# Bystander Rescue Care *CareUniversity Series*

[About](#) [Values & Team](#) [Coronavirus Response](#) [Recorded Broadcasts](#) [Specialty Programs](#) [Student Outreach](#) [Research & Development](#) [CAREUNIVERSITY](#)

**Coronavirus Care Community of Practice**

**Bystander Rescue Care CareUniversity Series**

May 5, 2022

[REGISTER](#)[JOIN EVENT](#)

## Our 1,000 Household Study: Applying What We Learned...Now!

### Session Overview

The impact of the COVID Pandemic is far from over. There is much more we can apply to medical emergencies...whether we have more COVID or other challenges. Join us and learn what we have learned through our study of more than 1,000 families:

- Prevention of harm – primary and secondary harm
- Preparedness for surges, infections, and disasters
- Protection strategies and tactics
- Performance Improvement – apply what we learned

Hear from our experts on what can apply today and on our journey forward... regardless of the medical emergency.

Go to <https://www.medtacglobal.org/coronavirus-response/> for short videos covering the critical topics. Join as we focus on family Readiness, Response, Rescue, Recovery, and Resilience.

*We offer these online webinars at no cost to our participants.*


### Webinar Video, and Downloads

The webinar video will be available within five (5) business days after the webinar.

**Speaker Slide Set:**

The slides will be posted here before the webinar begins.

### Date, Time, Dial-in Information, & Objectives

 May 5, 2022

- 01:00 PM to 2:30 PM Eastern Time
- 12:00 PM to 1:30 PM Central Time
- 11:00 AM to 12:30 PM Mountain Time
- 10:00 AM to 11:30 AM Pacific Time


**Learning Objectives:**

- **Awareness:** Participants will be made aware of the opportunities for improvement of dealing with COVID from a 1,000 household 24 month study.
- **Accountability:** Participants will understand who can be accountable for improving COVID safety in the home and in the community.
- **Ability:** Participants will learn about the know-how necessary for improving COVID safety in the home and in the community.
- **Action:** Participants may understand what line-of-sight actions may be taken to improve COVID safety in the home and in the community.

To request a Participation Document, please [click here](#).


The CAREUniversity Team of TMIT Global, approved by the California Board of Registered Nursing, Provider Number 15996, will be issuing 1.5 contact hours for this webinar. TMIT Global is only providing nursing credit at this time.

### Session Speakers and Panelists




Charles Denham, MD

[BIO](#)




John Christian Fox, MD

[BIO](#)




Gregory H. Botz, M.D., FCCM

[BIO](#)




Brittany Owens, MD

[BIO](#)




Christopher Peabody, MD

[BIO](#)




Randal Styner

[BIO](#)




William Adcox

[BIO](#)



Jennifer Dingman

[BIO](#)



Charlie Denham

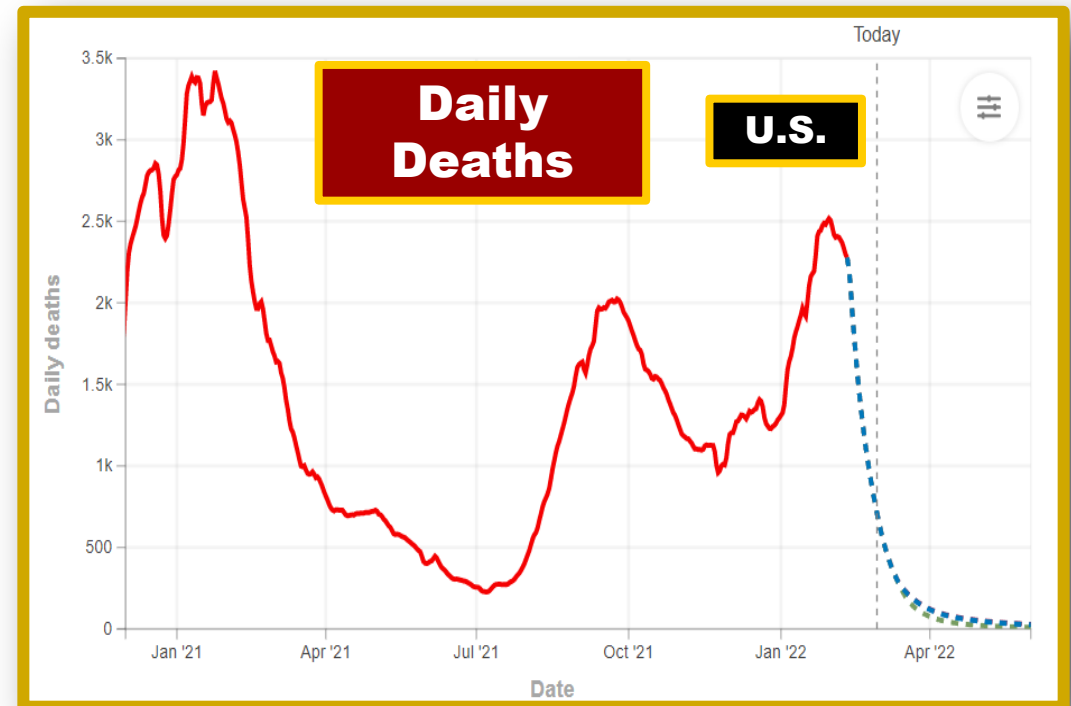
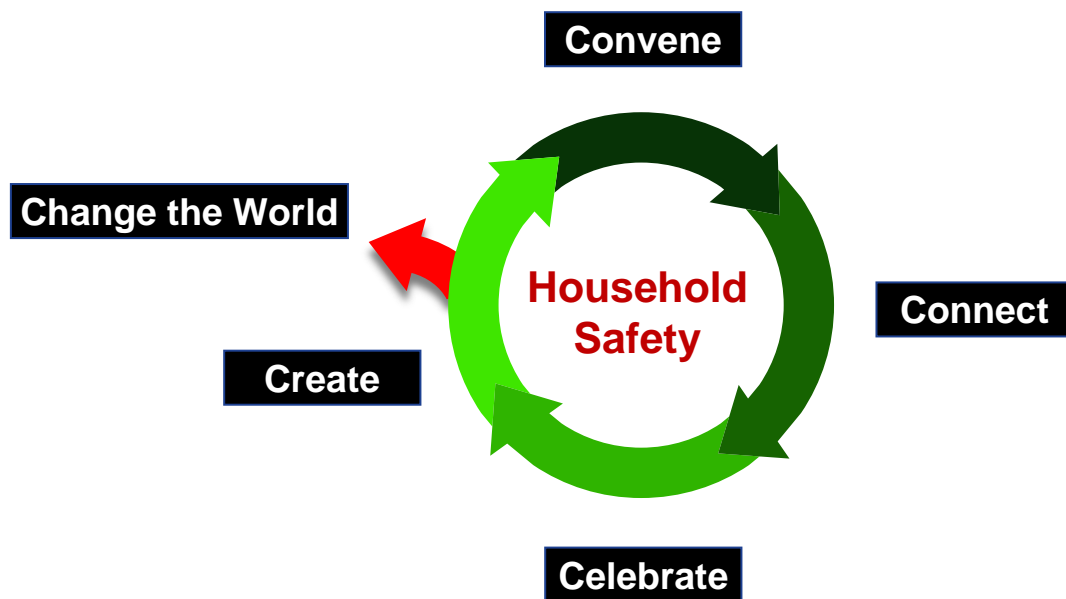
[BIO](#)

MedTac Global | Copyright © 2022 | LOGIN  
Austin, Texas

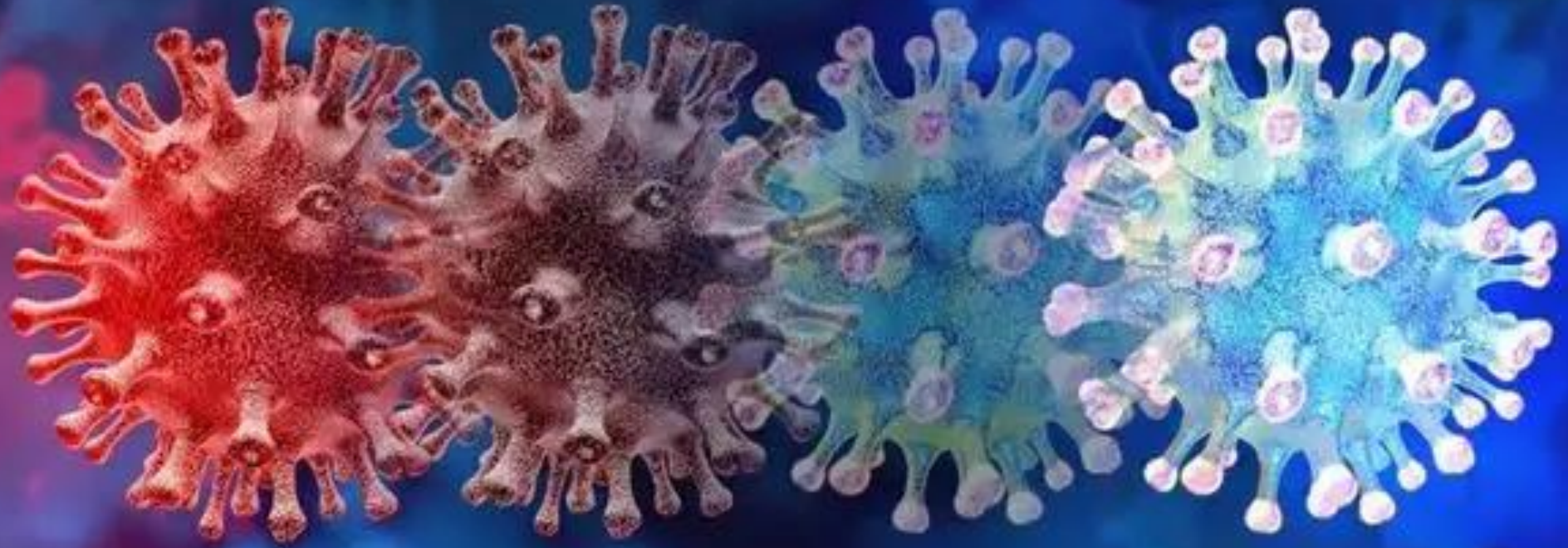
<https://www.medtacglobal.org/webinarmay2022/>

# Coronavirus Care Community of Practice

## Q2 2022 Progress Report



# Variant Evolution



**Alpha**

**Beta**

**Delta**

**Omicron**

JOHNS HOPKINS  
UNIVERSITY & MEDICINE

CORONAVIRUS  
RESOURCE CENTER



**April 5, 2022**

Source: <https://coronavirus.jhu.edu/covid-19-daily-video>

JOHNS HOPKINS  
UNIVERSITY & MEDICINE

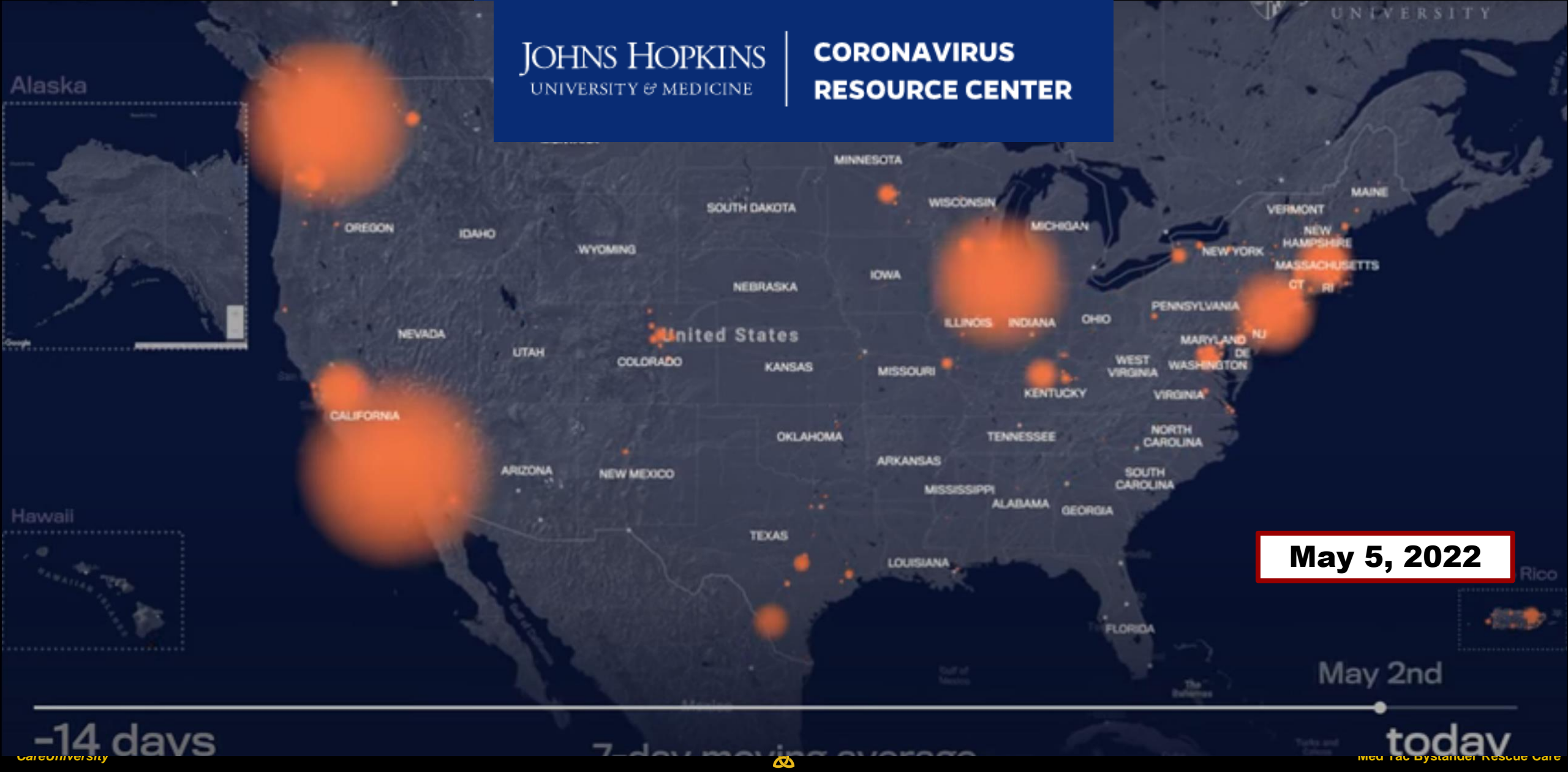
CORONAVIRUS  
RESOURCE CENTER

May 5, 2022

May 2nd

-14 days

today



**MEDTAC** About Values & Ten Commandments Recorded Broadcasts Specialty Programs Student Outreach Research & Development CareUniversity

Short Videos Survive and Thrive Guide™ Courses Resources Certificate Course Caregiver/CME/CEU Courses Care at Home Course

This webpage and videos have been produced for essential infrastructure workers and general public families. We have drawn on our network of 500 subject matter experts and a patient safety community of practice of 3,100 hospitals in 3,000 communities to tackle the Coronavirus Crisis.

**Protecting You & Your Family**

**Coronavirus Care Community of Practice** **Bystander Rescue Care CareUniversity Series**

We have organized important information into Short Video Topics and longer Survive & Thrive Guides™ Courses below.

**Short Video Topics**

Masks: Filter, Fit, and Finish

Hand Washing & DISINFECTANTS

CLEAN High Contact Surfaces

Building a FAMILY SAFETY PLAN

If we NEED Emergency Care

Why ICU, Respirators, and ECMO

Family Lifeguard Program

Vaccination Conversation

**Survive and Thrive Guide™ Courses**

Program Road Map

This short clip provides the highlights of the courses that have been developed for Essential Worker Families and the Public.

The following Survive and Thrive Guide™ Courses are organized in reverse chronological order to allow you to review the latest information first. They have been produced since March of 2020.

Dealing with Delta: The Critical FAQs

Addressing the Delta Variant surge FAQs.

11 Best Practices for Reopening

Covers actionable practices to reopen.

Long Haulers & Severe COVID Recovery

Long COVID and inflammatory harm to children and adults.

Vaccines, Variants, and Victory

The key principles of variants, vaccines, and safe success.

Vaccines, Variants, and Victory

What To Do - They're in the ICU

Guidance on how to help your loved one when they are in ICU.

Emergency Rescue Skills

"How to" identify one in trouble, get them to the ED and home.

Your 2021 Family Safety Plan

The "how to" adjust a Family Safety Plan is addressed.

Providing Care at Home

The "how to" set up care at home and checklists provided.

Safety Plan Templates for Everyone

Templates families may use for their own plans are provided.

Creating Your Family Safety Plan

The S.R. design of Family Safety Plans is presented.

Keeping Our Kids Safe

Understanding family threat, vulnerability, and risk are covered.

Coming Home Safely

Communication Prevention Safe Practices covered.

The table below provides resource articles that may be downloaded and links to video assets provided to help viewers understand the science behind the COVID Safe Practices.

MedTacGlobal Coronavirus Resources (View Only)

Task Name Notes

Delta Surge Issues, Risks, Benefits, and Mitigation

Recent Weekly Newsletter: Delta Surge - COVID-19 Surge

Delta Surge Issues, Risks, Benefits, and Mitigation

Comparison of two highly-effective mRNA vaccines for COVID-19 during periods of Delta and Omicron variant exposure posted 08-05-21

Delta is Bad News for Kids, Adults 08-10-21

# Coronavirus Care Community of Practice

## Q2 2022 Progress Report



[www.medtacglobal.org/coronavirus-response/](http://www.medtacglobal.org/coronavirus-response/)



## Global Patient Safety Forum

### Global Patient Safety Forum

The GPSF is a convening alliance with a mission to save lives, save money, and build value in the community it serves. The Forum was expressly founded to make available important content that the collaborators want to share more broadly. This website is not intended to compete with any other initiative and will meet its objectives if collaborators and those interested in the topics share the information with their communities. There are no financial requirements of users of the site. Certain communities are private in order to protect those we serve and those who serve. Those we serve are patients and their families. Those who serve are the caregivers, administrators, researchers, educators, and staff in the healthcare industry.

### Global Innovators Network

We are a global network of leaders from academic, industry, NGOs, philanthropy, and faith-based organizations sharing best practices in leadership of innovation. Some of the members are innovators in healthcare and patient safety across multiple sectors with a focus on mentorship and development. There is no specific commercial purpose for this website. There is no financial relationship between the members. No direct financial support of any type is provided to the healthcare industry or communities of practice serving it. The information on this website is entirely free.

Featured Leaders

Global Webinars & Summits

Patient Safety Community Of Practice

Med Tac Bystander Care Program

Emerging Threats Community Of Practice

CareUniversity & Continuing Education



**Thomas Zeltner, MD**  
Expert leader in Public Health  
Former Special Envoy of the WHO  
Former Secretary of State for Health  
Swiss Federal Office of Public Health, Bern, Switzerland

[Read bio...](#)

[View video clip](#)

### The Healthcare Threat Safety Spectrum



The private community of practice addresses a number of sensitive topics and subject matter that should not be made public for security reasons.

- **Brand Damage** from Outside, Inside, and or Mixed Outside-Inside Threats including cyberterrorism.
- **Workplace Violence** including physical, verbal, sexual, or emotional harassment, bullying or harm to caregivers, staff, students, or patients.
- **Active Shooter, Violent Intruder, and Deadly Force Incidents** including events causing physical harm to staff, caregivers, students, or patients.
- **Domestic Terrorism** such as organized attacks using chemical, biologic, radiologic, nuclear, and explosive weapons. Also weaponization of transportation & vehicles (CBRNET)
- **Violent Acts Against Leadership** where administrative, clinical, or governance leaders are specifically targeted by insiders or outsiders.
- **Intentional Harm of Patients** by caregivers who commit harmful acts against patients with or without enablers who do not report such harm.
- **Unintentional Patient Harm** through errors of omission from systems failures identified by mortality reviews such as diagnostic errors.
- **Failure to Rescue** in pre-hospital, hospital, and post-hospital continuity of care.
- **Hospital Optimization & Flow** with overcrowding & boarding/transfer issues.
- **Readiness for Epidemics** including preparedness for testing and volume surges.
- **Sexual Misconduct** including sexual harassment, abuse of power, and or harm to caregivers, staff, students, or patients.
- **Racial and or Sexual Discrimination** against those we serve including patients and their families and or those who serve in the organization.
- **Cybersecurity Patient Records Issues** including breach, theft, and contamination of medical records leading to patient and caregiver harm.
- **Cybersecurity Operation Issues** including breach, theft, and contamination of operational records, invasion of data systems, and ransom crimes.
- **Theft of Intellectual Property** by insiders, outsiders, or nation-states.
- **Sabotage** of service, information systems, clinical care, and property.
- **Employee Fraud** including misrepresentation of identity or qualifications, safety related issues such as vaccination and testing status, and attestations of truth.
- **Patient Fraud** including misrepresentation of identity, safety related issues such as vaccination and testing status, and attestations of truth.
- **Nation State Influence** through academic espionage, financial conflicts of interest, or other means.
- **Drug Diversion** by staff including caregivers and pharmacists who divert medications for themselves or others.
- **Conflict of Interest** of staff including physicians, researchers, and administrators including disclosed and undisclosed financial relationships.
- **Conflict of Interest of Governance** including undisclosed financial relationships and disclosed financial relationships.
- **Academic Fraud** including fabrication, falsification, plagiarism, or dishonest grant documentation including applications and reports.
- **Defamation or Unfair Press** by investigative reporting or false whistleblowers.
- **Burn-out** of caregivers, leadership, and staff.
- **Critical Drug and Supply Shortages** such as I.V. fluids, medications, and key supplies.
- **Regulatory Compliance Issues** including new risk for non-compliance.

THE UNIVERSITY OF TEXAS  
**MD Anderson  
Cancer Center**



## Emerging Threats Community of Practice

**Stanford  
University**



**UCSF**  
University of California  
San Francisco



**UF** UNIVERSITY of  
**FLORIDA**






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- **Active Shooter, Violent Intruder, and Deadly Force Incidents** including events causing physical harm to staff, caregivers, students, or patients.
- **Domestic Terrorism** such as organized attacks using chemical, biologic, radiologic, nuclear, and explosive weapons. Also weaponization of transportation & vehicles (CBRNET)
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- **Unintentional Patient Harm** through errors of omission from systems failures identified by mortality reviews such as diagnostic errors.
- **Failure to Rescue** in pre-hospital, hospital, and post-hospital continuity of care.
- **Hospital Optimization & Flow** with overcrowding & boarding/transfer issues.
- **Cybersecurity Operation Issues** including breach, theft, and contamination of operational records, invasion of data systems, and ransom crimes.
- **Theft of Intellectual Property** by insiders, outsiders, or nation-states.
- **Sabotage** of service, information systems, clinical care, and property.
- **Employee Fraud** including misrepresentation of identity or qualifications, safety related issues such as vaccination and testing status, and attestations of truth.
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- **Regulatory Compliance Issues** including new risk for non-compliance.
- **Cybersecurity Patient Records Issues** including breach, theft, and contamination of medical records leading to patient and caregiver harm.
- **Readiness for Epidemics** including preparedness for testing and volume surges.
- **Shortages** such as I.V. fluids, medications, and staff.

# **TMIT Global Research Test Bed & 500 Subject Matter Expert Pool**

**Survive & Thrive Guide: Keeping Your Family Safe**

**TMIT Global Research Test Bed**  
3,100 Hospitals in 3,000 Communities  
500 Subject Matter Expert Pool Developed over 35 Years



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CareUniversity Med Tac Bystander Rescue Care

**Survive & Thrive Guide: Protecting Your Family**



**500 Subject Matter Experts**

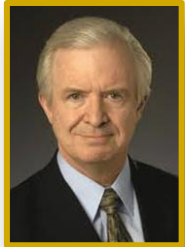
Graphic Representation to Protect Expert Privacy

CareUniversity Med Tac Bystander Rescue Care



# Coronavirus Care Community of Practice

# Bystander Rescue Care *CareUniversity Series*



John Nance JD



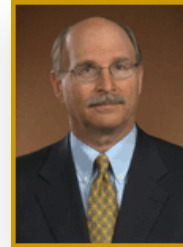
Dr. Gregory Botz



Chief William Adcox



Heather Foster



Dr. Charles Denham



Dr. Casey Clements



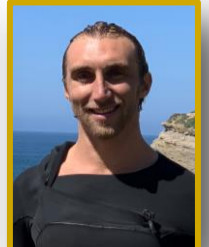
Beth Ullem



Dr. McDowell



Dennis Quaid



Preston Head III



Fred Haise



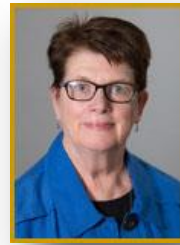
Dr. Steve Swensen



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



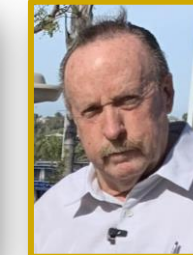
Ann Rhoades



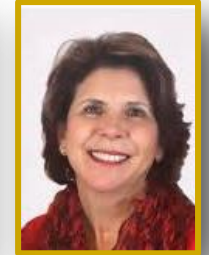
Nancy Conrad



Dr. Chopra



John Little



Debbie Medina



## Coronavirus Care Community of Practice

## Bystander Rescue Care *CareUniversity Series*



Matt Horace



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



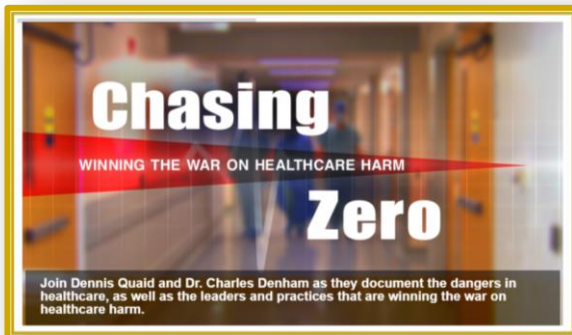
Dr. Howard Koh



Dr. Jim Bagian



Dr. Harvey Fineberg





## **Coronavirus Care Results**

- **Established National Community of Practice**
- **Launched Multi-center 1,000 Family Household R&D Study**
- **48 Ninety Minute Broadcasts and Online Programs**
- **24 *Survive & Thrive Family Training* Programs**
- **Produced a National Campus Safety Summit**
- **Published Multiple Articles Providing Guidance**
- **Established Student Led College & Alumni Programs**
- **Delivered Free Continuing Education for Caregivers**
- **Short Videos for Mobile Viewing**
- **Rapid Response to Family Gatherings**
- **National Vaccine Hesitancy Student Outreach**
- **Smart Phone Mobile Applications**

## Youth & Young Adult Team



**D Contreras EMT**  
Harvard



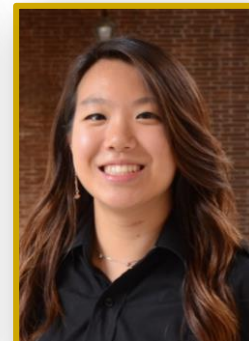
**Ivy Tran EMT**  
Harvard



**Nick Scheel**  
UCSB



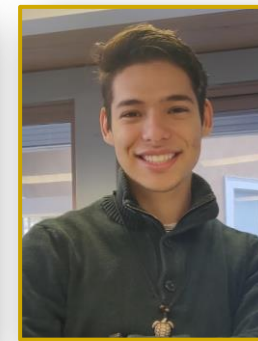
**Sophia McDowell**  
California Inst. of Arts



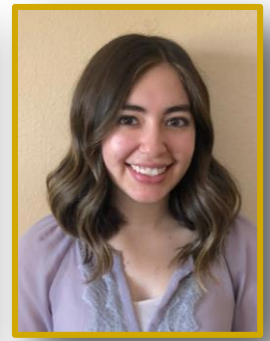
**Audrey Lam EMT**  
USC



**Jacqueline Botz**  
Chapman



**Luis Licon**  
UCI Alum



**Melanie Rubalcava**  
UCSD



**Charlie Denham III**  
High School Lead



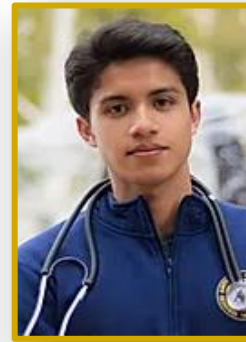
**Charlie Beall**  
Stanford Alum



**Marcus McDowell**  
U of Cincinnati



**Jaime Yrastorza**  
UCSD Pre-med



**Paul Bhatia EMT**  
UCI Pre-med



**D Policichio**  
NYU Film



**Manue Lopez**  
Berkeley Alum



**Preston Head III**  
UCLA Alum

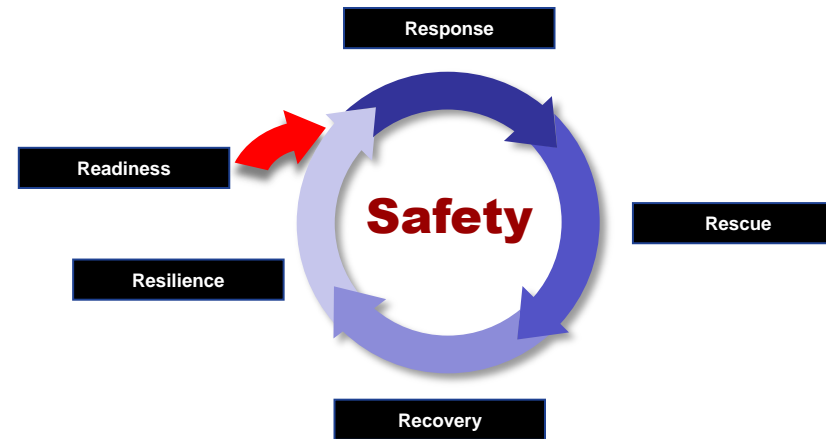


## Family Rescue R&D



Stanford  
University

Yale



## The 5 R's of Safety



UNIVERSITY OF CALIFORNIA  
SANTA BARBARA

UC San Diego



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



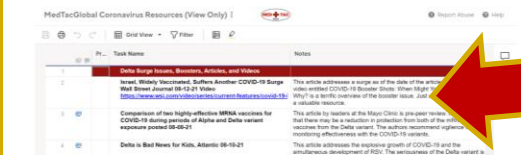
#### Short Video Topics



The following Survive and Thrive Guide™ Courses are organized in reverse chronological order to allow you to review the latest information first. They have been produced since March of 2020.



The table below provides resource articles that may be downloaded and links to video assets provided to help viewers understand the science behind the COVID Safe Practices.

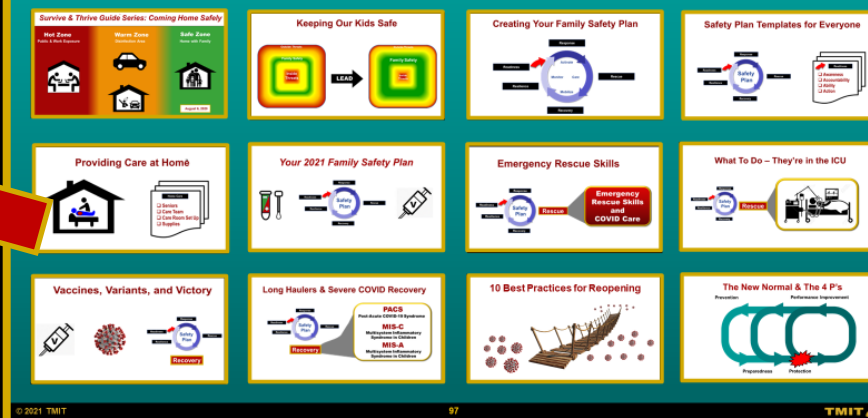


#### Short Video Topics



- SHORT TOPIC:**
- Short Videos 4-10 min
  - Critical Information
  - Hits Pillars of Prevention

#### Survive & Thrive Guide™ Program Road Map



- SURVIVE & THRIVE 90 MINUTE COURSES:**
- Longer more detailed
  - Webinar Recordings
  - Technical Information

#### Related Resources

Resources:

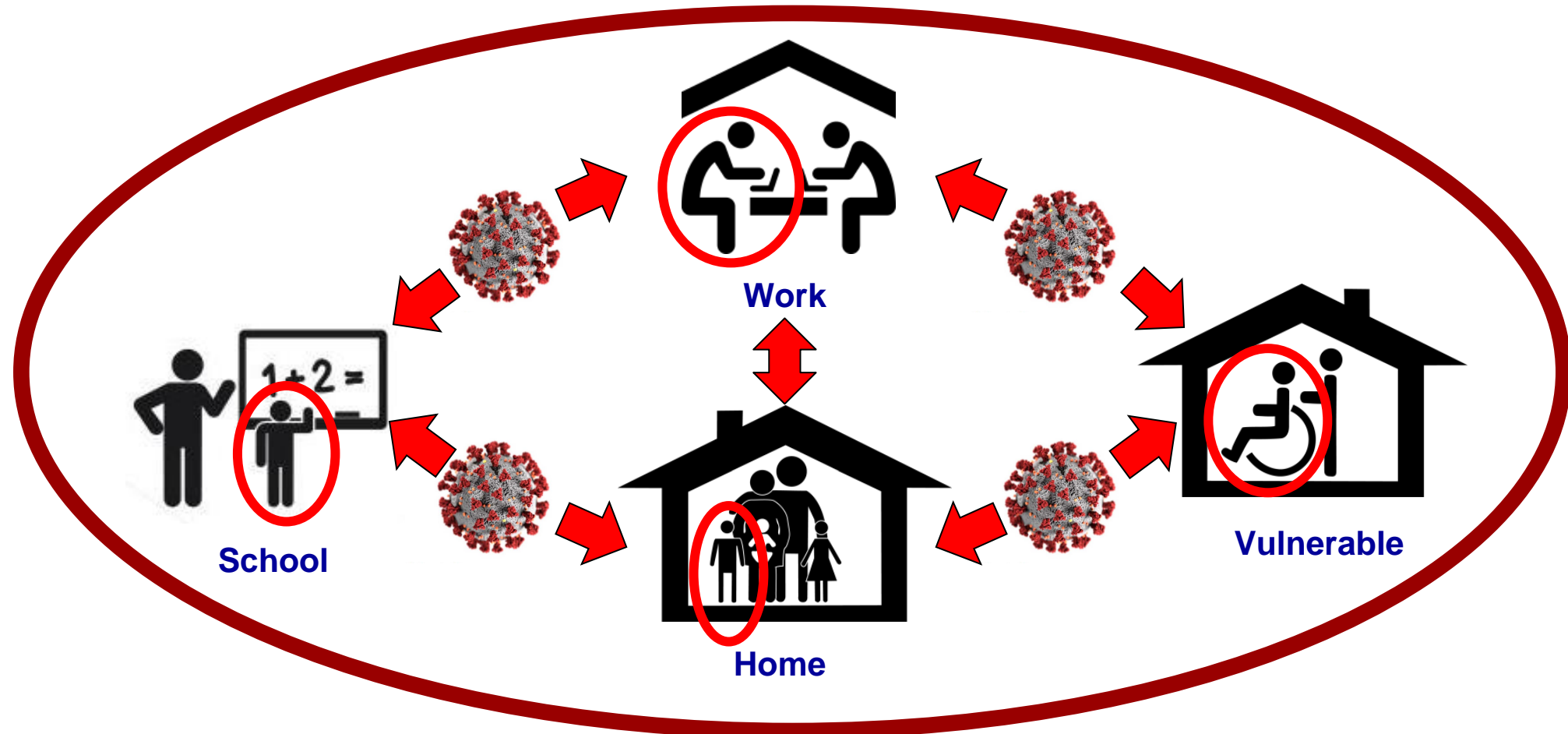


[www.medtacglobal.org/coronavirus-response/](https://www.medtacglobal.org/coronavirus-response/)

**Educators  
Declared  
Essential Critical  
Infrastructure  
Workers**



# Save the Families... You Save the Worker



## **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**

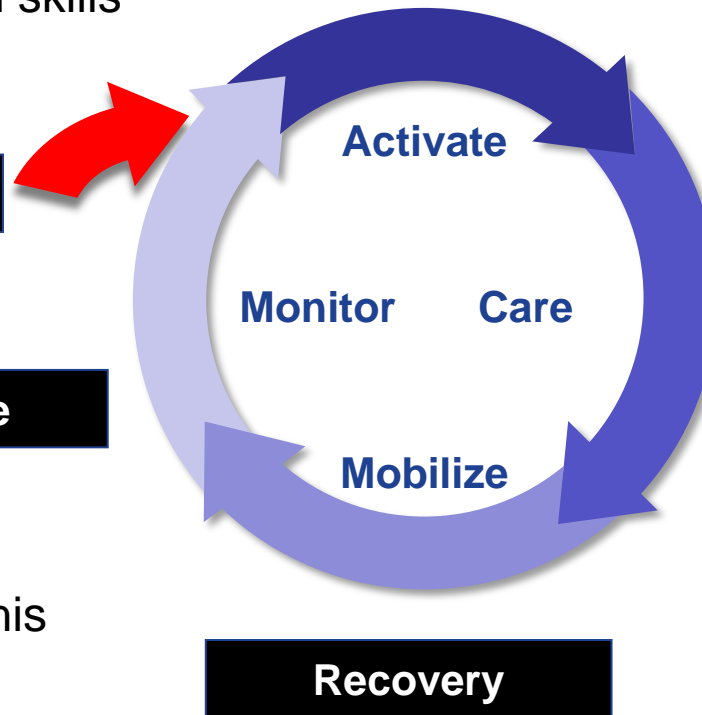
**Response:** Family moves to action to respond to an emergency. Safeguards are put in place. The family may respond to a member being infected or exposed to someone infected.

**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.

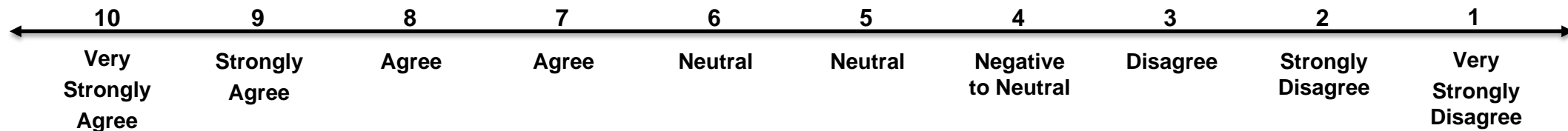
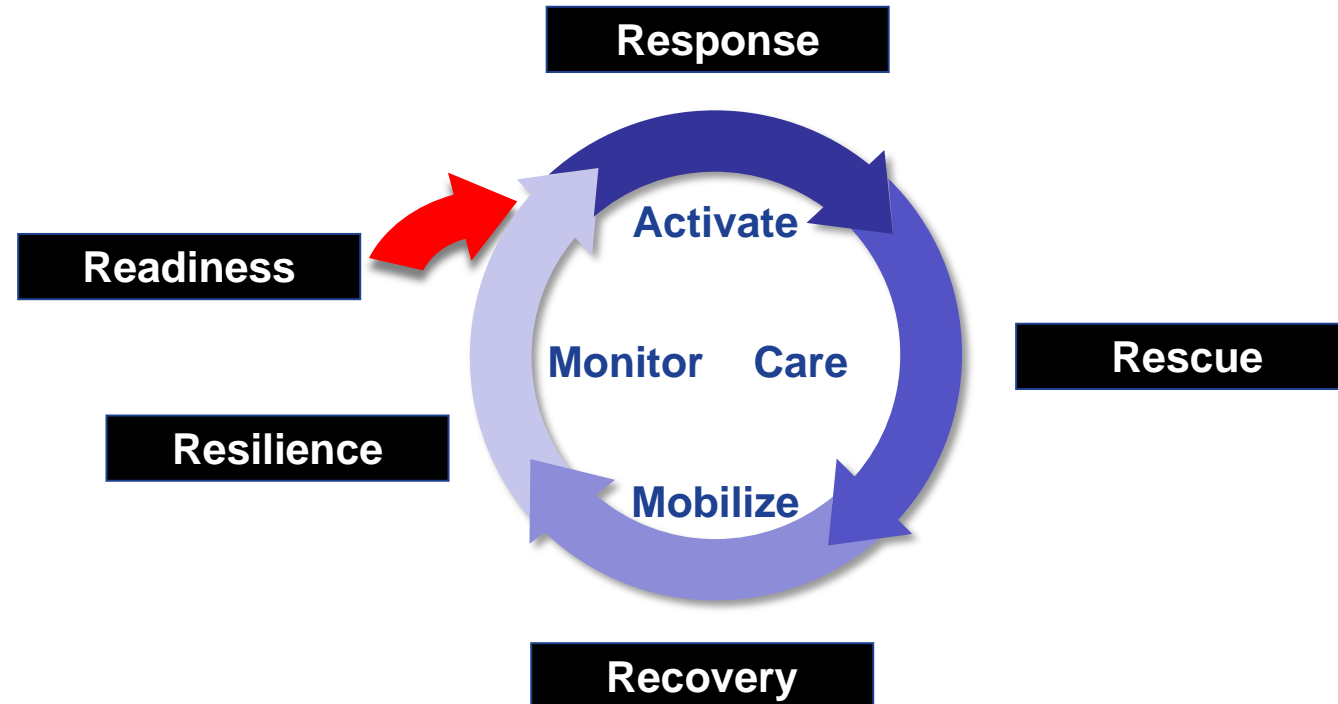
**Recovery**

**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.”





## ***Family Health Safety & Organization Security Plans™***



## 1,000 Worker Study

We used a 10 level Likert Scale and Free Text Entry format to capture the data on a continuously through the study.

I have already responded to the Family Health Safety Survey

YES

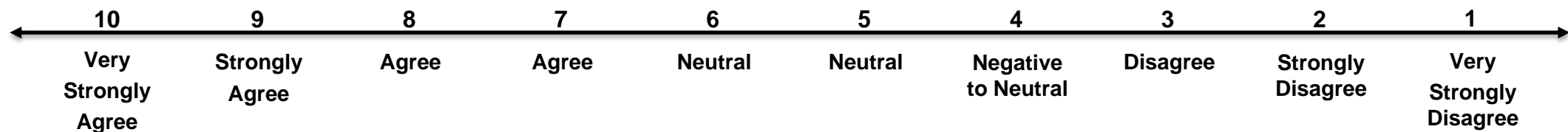
NO

State what you want to see in the Family Safety Plan Templates in Free Text Entry

Readiness

## READINESS

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



## 1,000 Worker Study

### READINESS

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

### RESPONSE

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

### RESCUE

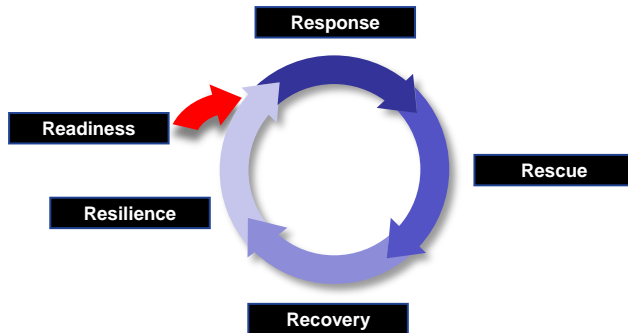
My family knows what do when someone develops severe COVID-19 symptoms.

### RECOVERY

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

### RESILIENCE

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



**1,000  
Worker Study**

**READINESS**

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

Readiness



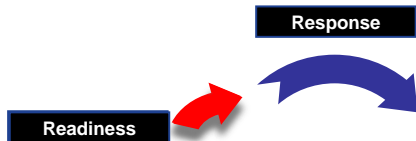
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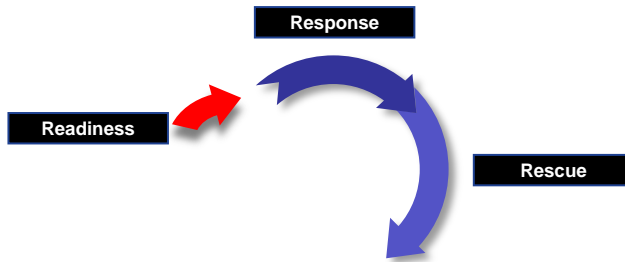
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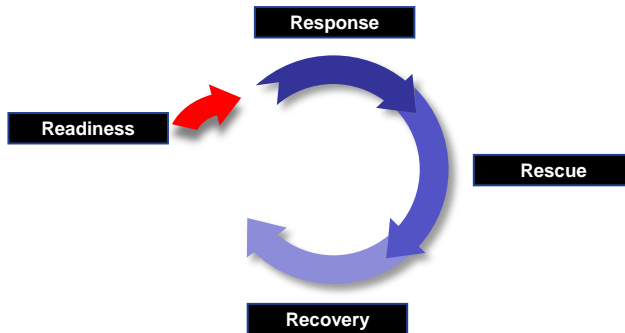
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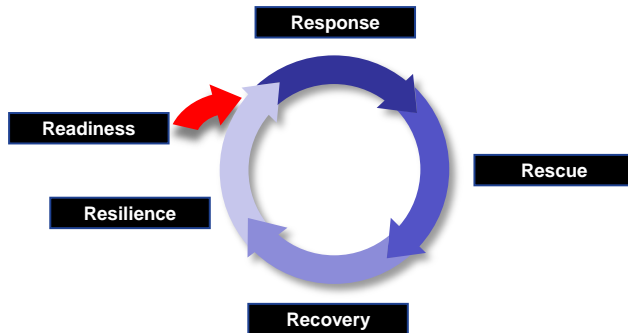
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News

### Coronavirus Family Safety Plans: Protect Your Loved Ones and Help Save America

If you break the family-unit COVID-19 transmission chains, you can save the lives of teachers, healthcare workers and police officers. You might even help save our nation.



Dr. Charles Denham II, Dr. Gregory Botz,  
Charles Denham III, Chief William Adcox

### The Problem: Family Transmission Chains

### The Solution: Coronavirus Family Safety Plans

#### Plans Must Be Flexible:

- **Family Impact Scenarios**
- **4A Checklist Framework**
- **5R Score Scorecards<sup>™</sup>**

#### The 5 R Framework:

- **Readiness**
- **Response**
- **Rescue**
- **Recovery**
- **Resilience**

#### The 3 Whys:

- **Why a Family Safety Plan?**
- **Why Now?**
- **Why This?**

#### Our Message:

- **Educators**
- **Students**
- **Law Enforcement Leaders**

### Family Impact 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



## Readiness

## Response

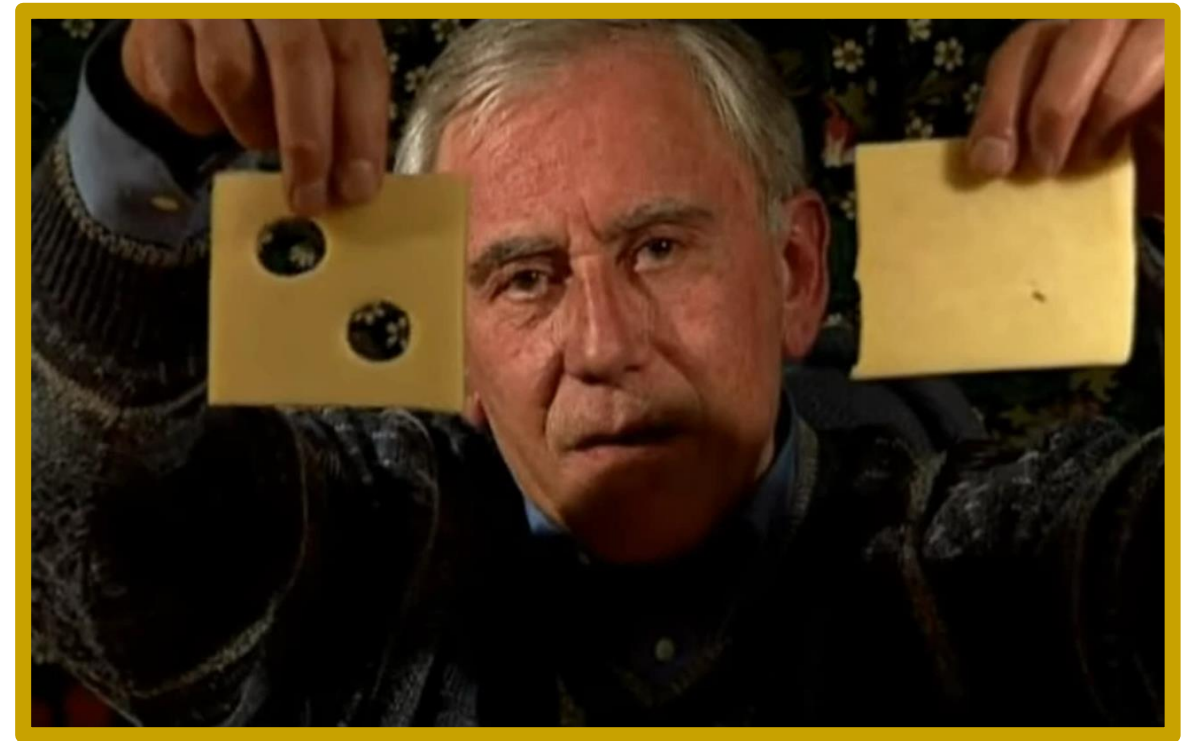
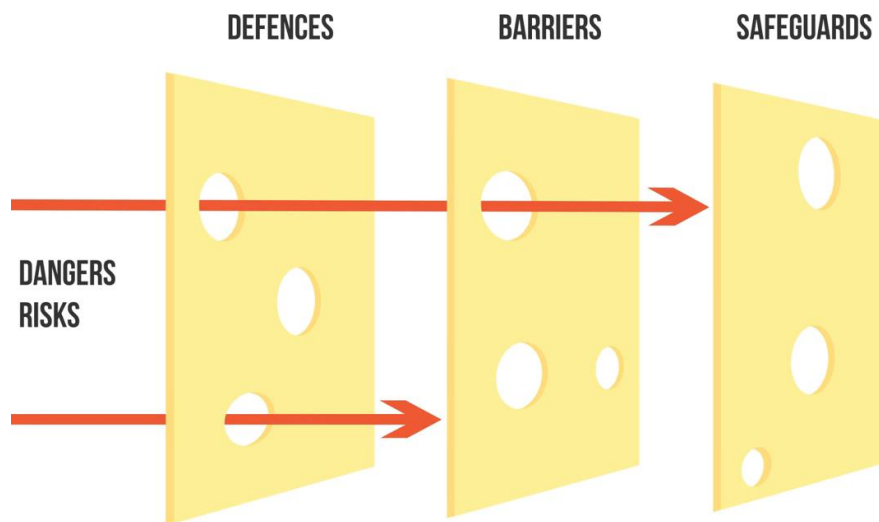
## Rescue

## 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  |
|---|--|---|---|---|---|
| No Exposure<br>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 “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            | <b>Customize Your Family Checklists to the Real-life Scenarios that CAN HAPPEN to You!</b>                   |   |   |   |   |
| Infected & Symptomatic – Have Symptoms                |  |   |   |   |   |
| Infected & Severely Symptomatic – Need Help           |  |   |   |   |   |
| Infected & Requiring Hospitalization                  |  |   |   |   |   |
| 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. |

# SWISS Cheese Model

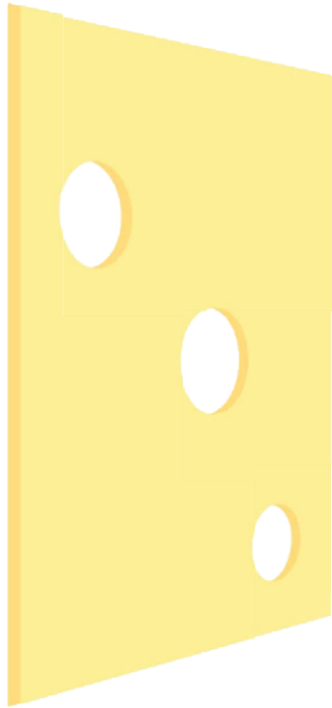


**Professor James Reason**

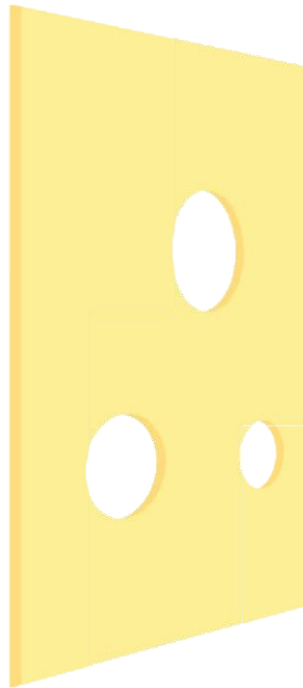
Source: <https://www.youtube.com/watch?v=KND5py-z8yl>

# COVID Defense Strategies are Layers

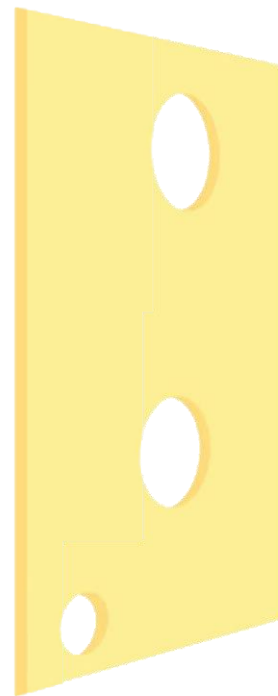
**Distancing**



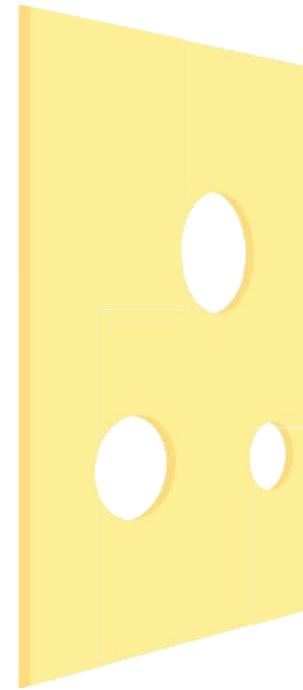
**Masks**



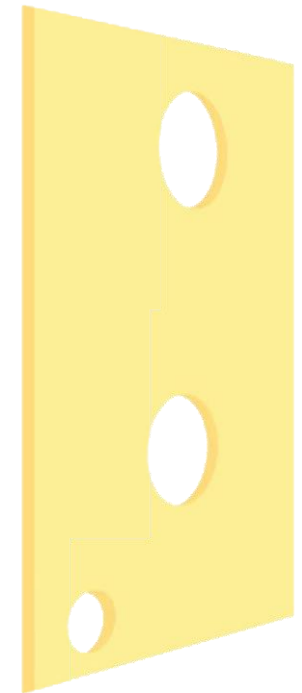
**Disinfecting**



**Ventilation**



**Testing**



# Our Stressed Emergency Safety Net:



- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?



# What is the State of Our Safety Net?



# What is the State of Our Safety Net?



# What is the State of Our Safety Net?

## 1,000 Family Household Study:

### ❑ What did we learn?

- ✓ Our public safety net is stretched with many gaps.

### ❑ What is new?

- ✓ Bystander Rescue Care could not be more important.

### ❑ What do we need in our family plan?

- ✓ The family needs to be ready for new threats and risk.

### ❑ How do we protect our families now?

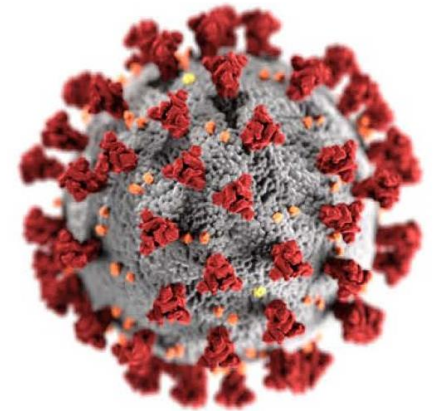
- ✓ Prepare for delays in law enforcement, EMS, Fire, and Emergency Care response. Delay = Harm

## Our 1,000 Family Study: Our Public Safety Net



### **William Adcox MBA**

**Chief Security Officer  
and Vice President  
MD Anderson Cancer Center  
Chief of Police,  
University of Texas at Houston  
Med Tac Lead Threat  
Safety Scientist**



# Coming Home Safely:

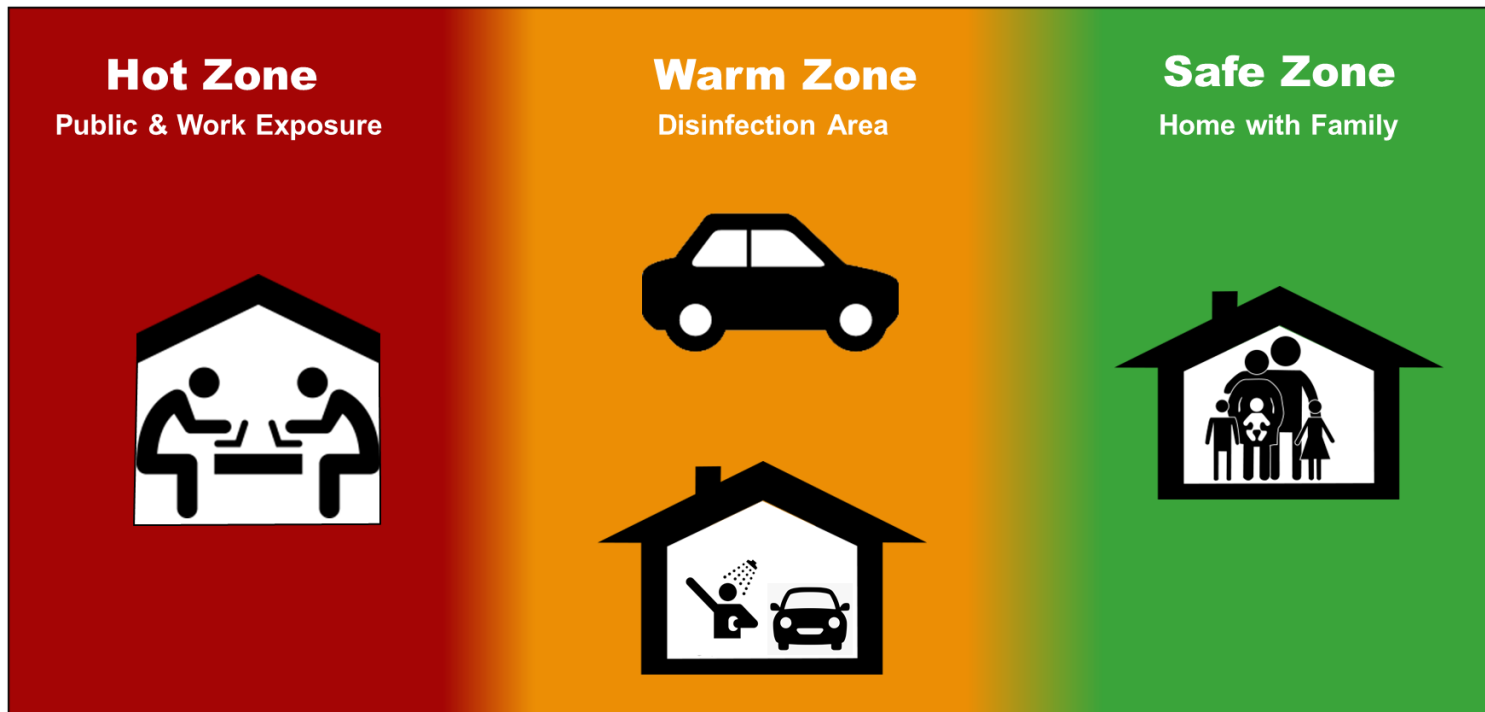


- ❑ What did we learn?
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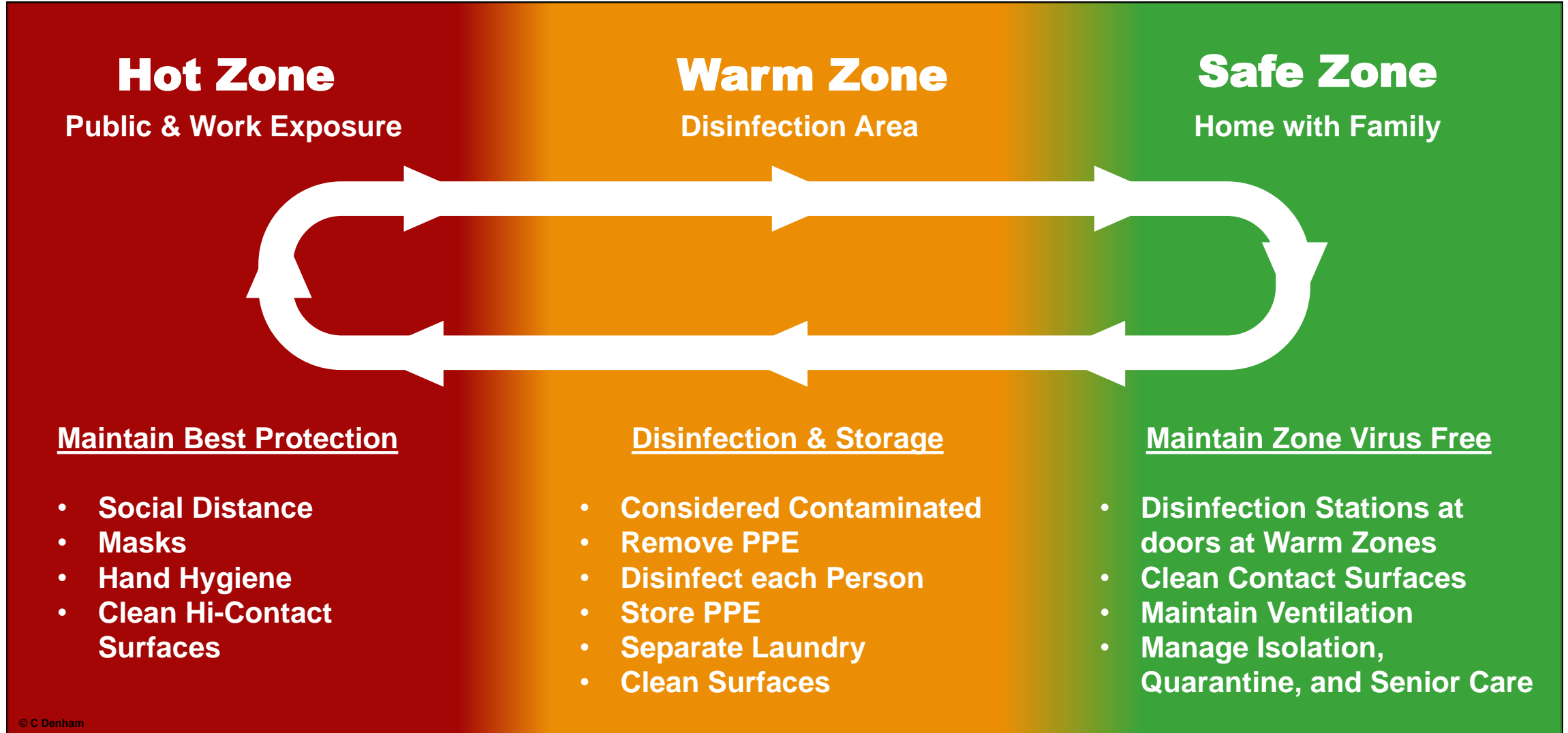


# Coming Home Safely

## *Family Survive & Thrive Guide™*



## **Hot-Warm-Safe Zone Practices**



## 1,000 Family Household Study:

- ❑ What did we learn?
  - ✓ Aerosol spread is the critical issue.
- ❑ What is new?
  - ✓ Vaccination, ventilation, and masking have great impact. Home testing is not being reported – not an early warning.
- ❑ What do we need in our family plan?
  - ✓ Protect your vulnerable members from aerosol spread.
- ❑ How do we protect our families now?
  - ✓ Continuously monitor your community risk – wastewater, hospitalizations, and deaths. Testing data is now weak.

### Hot Zone

Public & Work Expos



#### Maintain Best Protection

- Social Distance
- Masks
- Hand Hygiene
- Clean Hi-Contact Surfaces

CareUniversity

### WARM ZONE

#### Leaving Hot Zone Practi

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

### WARM ZONE

#### Joining Hot Zone Practi

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

© C. DeBaz

MUM

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invade your space

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MINUTES.

Med Tac Bystander Rescue Care

### Life Zone

with Family



#### Zone Virus Free

on Stations at  
Warm Zones  
Contact Surfaces  
Ventilation

- Manage Isolation, Quarantine, and Senior Care

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CareUniversity

Med Tac Bystander Rescue Care

Med Tac Bystander Rescue Care

CareUniversity

Med Tac Bystander Rescue Care

Med Tac Bystander Rescue Care

# Keeping Our Kids Safe:

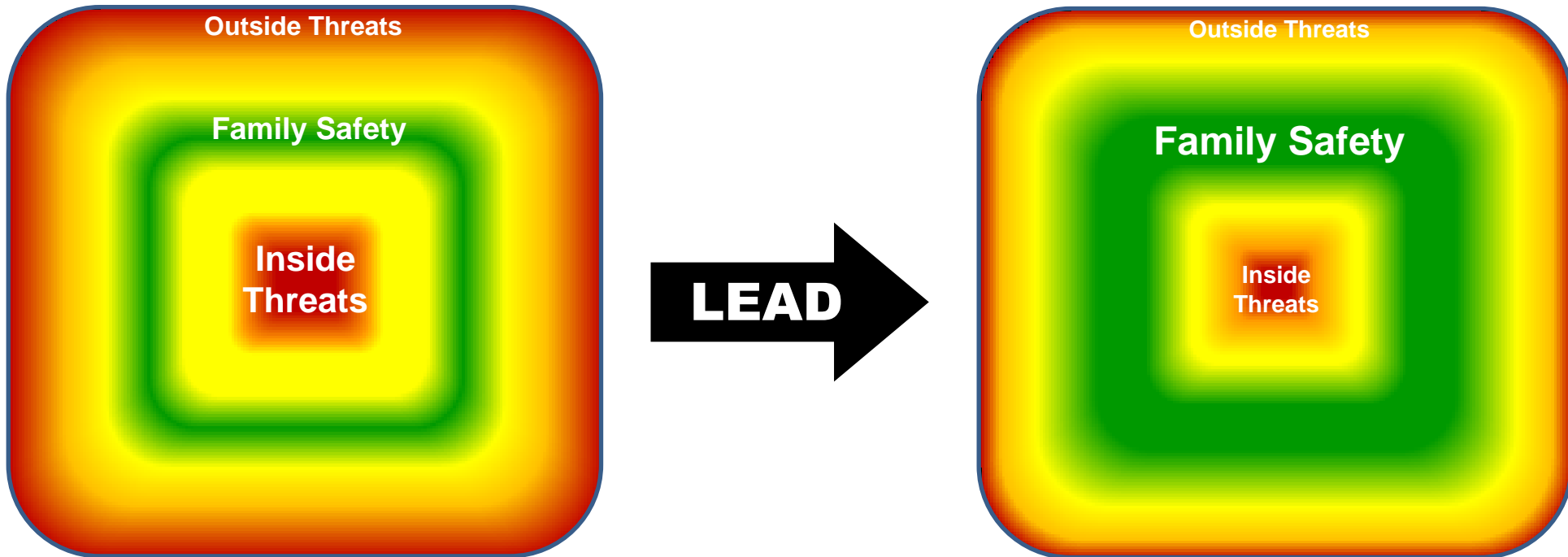


- ❑ What did we learn?
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- ❑ How do we protect our families now?



# Keeping Our Kids Safe

## *Family Survive & Thrive Guide™*

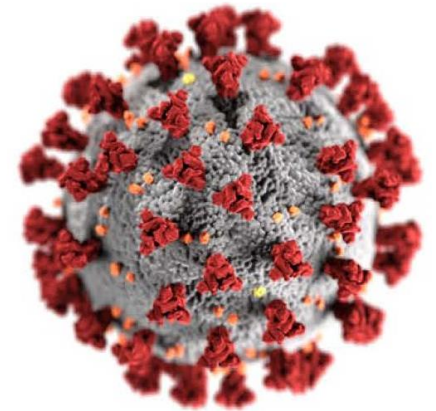


## Keeping Our Kids Safe



**Dr. Brittany Barto-Owens**

**Community Pediatrician  
Med Tac Advisor  
Coronavirus Care  
Community of Practice**

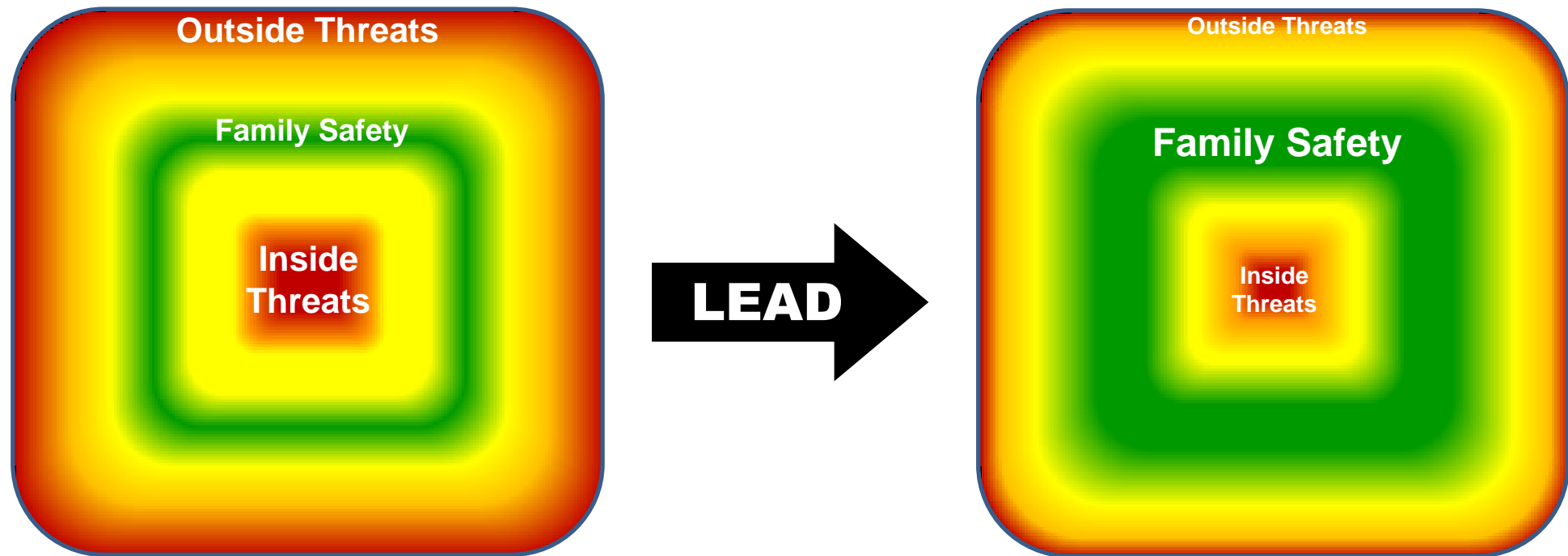


# Threats X Vulnerability = Risk to Your Family

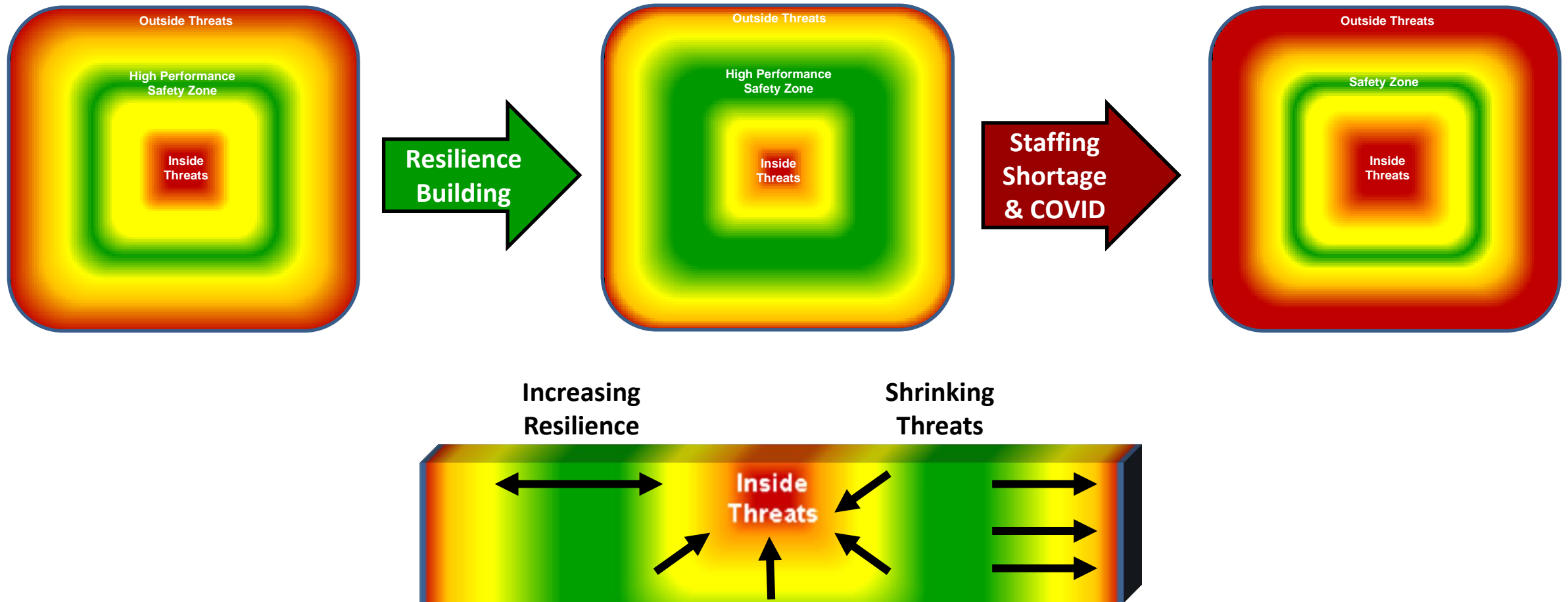
**Threats:**  
Likely to  
cause HARM.

**Vulnerability:**  
Weaknesses that can be  
EXPLOITED by threats.

**Risk:**  
PROBABILITY of harm by a  
threat exploiting vulnerability.



# Inside & Outside Threats and Resilience Building



## STEP 1: Identify Each Family Member's Threat Profile

### Keeping Our Kids Safe Keeping the Family Safe



Reduce Family Risk



### 1,000 Family Household Study:

- ❑ What did we learn?
  - ✓ Every family has a unique risk profile.
- ❑ What is new?
  - ✓ There is a huge pay off to protect vulnerable members.
- ❑ What do we need in our family plan?
  - ✓ Protect your vulnerable members.
- ❑ How do we protect our families now?
  - ✓ Continuously monitor the risk – community immunity versus infections. Know what to do if infected.

vulnerabilities, and therefore the family risk changes continuously. Every airplane flight plan is modified along the route – so will your family safety plan.

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# Providing Care at Home:

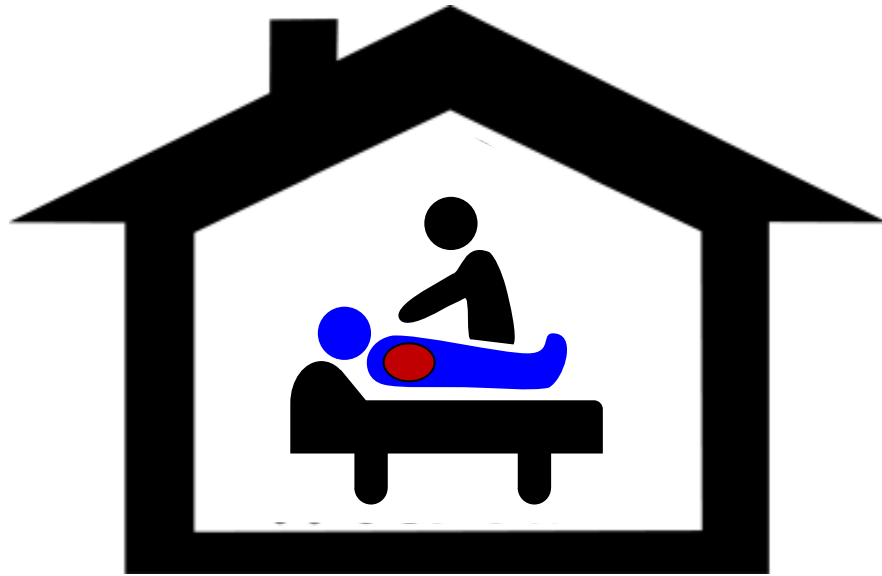


- ☐ What did we learn?
- ☐ What is new?
- ☐ What do we need in our family plan?
- ☐ How do we protect our families now?



# Providing Care at Home

## *Family Survive & Thrive Guide™*





## Home Care Room Program

Coronavirus Response  
*CareUniversity Series*

### Select a Care Room Checklist:

- ☐ Select a room separate from the rest of the home that ideally should be used only for patient care.
- ☐ Identify the bathroom that can be used to wash hands.
- ☐ If a fully dedicated room is not available, use a room where supplies and equipment are stored, away from the family and other visitors.
- ☐ If another room or area is used, set up a station set that up a dedicated area.
- ☐ Make sure the Care Room is well-ventilated.
- ☐ If you have no separate room, use plastic sheets, or vinyl curtains or tents to create a separate area.
- ☐ Optimize ventilation by opening a window that may be available.
- ☐ If Heating and Air Conditioning is available, use separate ventilation for the Care Room.
- ☐ Make decisions regarding the Care Room. It is optimal for the patient.



## Home Care Room Program

Coronavirus Response  
*CareUniversity Series*

### Care Room Set Up Checklist:

- ☐ Set Up Cleaning Station
- ☐ Set Up Cleaning Station
- ☐ Equip Both Cleaning Station
- ☐ Post Signs to Restrict Access
- ☐ Consider Signs for the Care Room
- ☐ Prepare a Daily Cleaning Schedule
- ☐ Remove Hard to Clean Items
- ☐ Set Up Personal Protective Equipment
- ☐ Set up a Contaminated Laundry Bin
- ☐ Set up Waste Can
- ☐ Set up a Contaminated Laundry Bin
- ☐ Set up a Non-contaminated Laundry Bin
- ☐ Put Waste Cans, Sharps Containers, and Materials in Care Room
- ☐ Place Safe Contaminated Laundry Bin
- ☐ Injection Meds Under the Sink
- ☐ Keep Patient's Personal Items
- ☐ Place Water Pitcher
- ☐ Personal Hygiene
- ☐ Keep dedicated Thermometers in Care Room
- ☐ Keep Reusable Supplies



## Home Care Room Program

Coronavirus Response  
*CareUniversity Series*

### Supplies Checklist:

- ☐ Eye Protection
- ☐ A Face Shield
- ☐ Reusable Gloves
- ☐ Rubber Gloves
- ☐ Disposable Hair Coverings
- ☐ N95 Mask or Medical Grade Mask
- ☐ Aprons - single-use and reusable gowns.
- ☐ Plastic Aprons
- ☐ Alcohol-based Hand Sanitizer
- ☐ Plain Soap
- ☐ Clean Single-use Paper Towels
- ☐ Safe Puncture Proof Container
- ☐ Detergent for Cleaning
- ☐ Thermometer & Medical Grade
- ☐ Mobile Phone
- ☐ Waste Bags - Garbage



## Home Care Room Program

Coronavirus Response  
*CareUniversity Series*

### Home Care Team Checklists:

#### Laundry Processes:

- ☐ Disinfect Laundry Room after Every Wash
- ☐ Always Separate Contaminated Laundry from Non-contaminated Laundry
- ☐ Wash all regular and Non-contaminated laundry first
- ☐ Wash kitchen towels and bathroom hand towels daily.
- ☐ Wash all Contaminated Laundry last
- ☐ Disinfect Laundry Room while Contaminated Laundry are in the wash
- ☐ Move Formerly Contaminated Laundry from Washer to Dryer after Disinfecting Laundry Room

#### Cleaning the Home:

- ☐ Door knobs



## Select a Care Room Checklist:

- ☐ Select a room that ideal
- ☐ Identify the can be us
- ☐ If a fully c where su
- ☐ the family
- ☐ If another station se
- ☐ Make sur
- ☐ If you hav plastic sh
- ☐ curtains c
- ☐ Optimize window t
- ☐ If Heating separate
- ☐ Make dec Room. It i patient.

## 1,000 Family Household Study:

- ☐ What did we learn?
  - ✓ We don't need to obsess on contact surfaces.
- ☐ What is new?
  - ✓ Aerosol spread and isolation works.
- ☐ What do we need in our family plan?
  - ✓ Emphasize ventilation and masking.
- ☐ How do we protect our families now?
  - ✓ Be ready for isolation and quarantine – the CDC guidelines are updated and testing can impact them.

## ts:

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from Non-  
laundry first  
towels daily.  
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om Washer to

Oximeters in Car

- ☐ Keep Reusable S

☐ Thermometer & Med

☐ Mobile Phone

☐ Waste Bags, Garbag

Cleaning the Home:

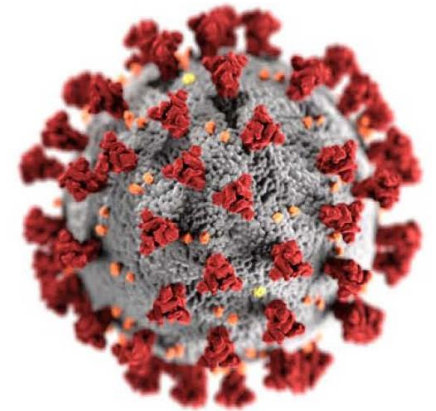
- ☐ Door knobs

## Our 1,000 Family Study: Our Public Safety Net



### Heather Foster RN

Frontline Nurse  
Infection Preventionist  
Pete Conrad Global  
Patient Safety Award Winner 2018



# Emergency Rescue Skills:

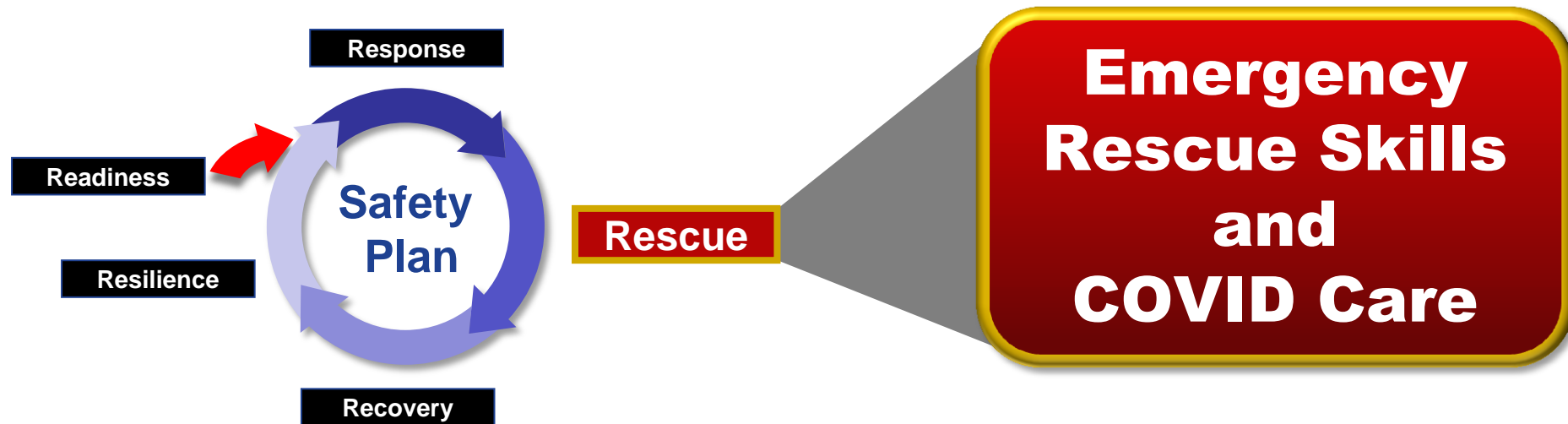


- ❑ What did we learn?
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- ❑ How do we protect our families now?



# Emergency Rescue Skills

## *A Survive & Thrive Guide™*





# The 5 Rights of Emergency Care Review



**Christopher R. Peabody, MD, MPH**

Emergency Physician  
Director, UCSF Acute Care Innovation Center,  
University of California San Francisco  
Clinical Instructor, University of California San  
Francisco  
San Francisco, CA



The screenshot shows the MED+TAC Global website. The header includes the MED+TAC Global logo and navigation links: About, Values & Team, Coronavirus Response, Webinar Programs, Specialty Programs, Innovations & Supplies, and CAREUNIVERSITY. A paragraph explains that the webpage and videos are for essential infrastructure workers and general public families, produced by a network of 500 subject matter experts and a patient safety community of practice of 3,100 hospitals in 3,000 communities. It mentions the Coronavirus Community of Practice and the option of taking Survive & Thrive™ certification courses. A red button says "Join Our Community Intro Video Click Here".

## Coronavirus – Protecting You & Your Family

See the videos, answers to FAQs, and resources below. They will be continuously updated for the communities we serve.

Below this are two banners: "MED+TAC Global Coronavirus Care Community of Practice" and "Bystander Rescue Care CareUniversity Series".

A paragraph states: "We have organized the videos below as BASIC VIDEOS to provide critical information quickly. For those who want more detail, view the ADVANCED VIDEOS. The source articles may be downloaded below."

### BASIC MODULES

- Why Social Distancing WORKS
- 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

The main content area features a video player titled "NEW Emergency Dept. Issues". The video thumbnail shows a diagram titled "The 5 Rights of Emergency Care" with a central red circle and five surrounding boxes: Right Provider, Right Follow Up, Right Discharge, Right Treatment, and Right Diagnosis. A red box on the left of the diagram says "Emergency Department and COVID Care". The video player has a play button, a progress bar at 06:10, and the MED+TAC logo.

[www.medtacglobal.org/coronavirus-response/](http://www.medtacglobal.org/coronavirus-response/)



**Christopher R. Peabody, MD, MPH**  
Emergency Physician  
Director, UCSF  
Acute Care Innovation Center

**Dr. Peabody walks us through The 5 Rights of Emergency Care with the COVID-19 perspective:**

- Family members may not be able to be present and may need to wait outside.
- Communication is vitally important.
- Be prepared for a completely new experience with caregivers wearing full Personal Protective Equipment.



## Med Tac Bystander Rescue Care

Med Tac is short for "Medical Tactical" and is an advanced first aid platform to battle failure to rescue. The mission is to teach anyone the critical bystander care skills that can save lives during the most common life threatening emergencies. Our focus is to train all ages to provide the greatest help in the first 10 minutes before professional first responders arrive and then assist them when they do. The training includes how to work with professional first responders and how to help families as they proceed through hospital emergency care.

### Video Library

[Med Tac Story](#)

[Med Tac Leadership Team](#)

[Adopt a Cove Program](#)

[5 Rights of Emergency Care](#)

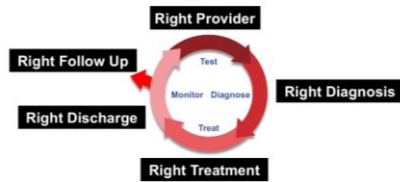
[College and Youth Program](#)

[Surf & Lifeguard Program](#)

[3 Minutes & Counting Trailer](#)

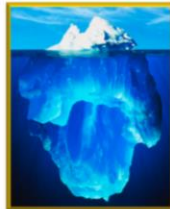
[Opioid Overdose Briefing](#)

### The 5 Rights of Emergency Care™



### The Battle Against Failure to Rescue

The Med Tac Program was developed by a team originally focused on active shooter events. When they found that there at least 8 leading causes of preventable death including severe bleeding and that there was no integrated program to teach the public what they can do to save lives and prevent "failure to rescue" before EMS arrives, Med Tac was born. In many cases bystander rescue care can triple survival if the public knows what to do. The program was funded through 2019 by philanthropy through TMIT Global, a 501c3 medical research organization that leads a global patient safety community of practice found at [www.SafetyLeaders.org](http://www.SafetyLeaders.org). With the development of the Coronavirus crisis, our rapid response team has prioritized infection care as one of our major focus areas. As of January 1st, 2020 the team has published four articles and has developed pilot programs in five states. [Click here](#) to download a PDF of the four articles.



[Cardiac Arrest](#)

[Choking & Drowning](#)

[Opioid Overdose](#)

[Anaphylaxis](#)

[Major Trauma](#)

[Infection Care](#)

[Transportation Accidents](#)

[Bullying](#)

**Bystander Care Training** is a critical need in all communities. The preventable deaths we see in the news are the tip of the iceberg. Our program is a Good Samaritan support system to help everyone learn life-saving actions that will save lives.

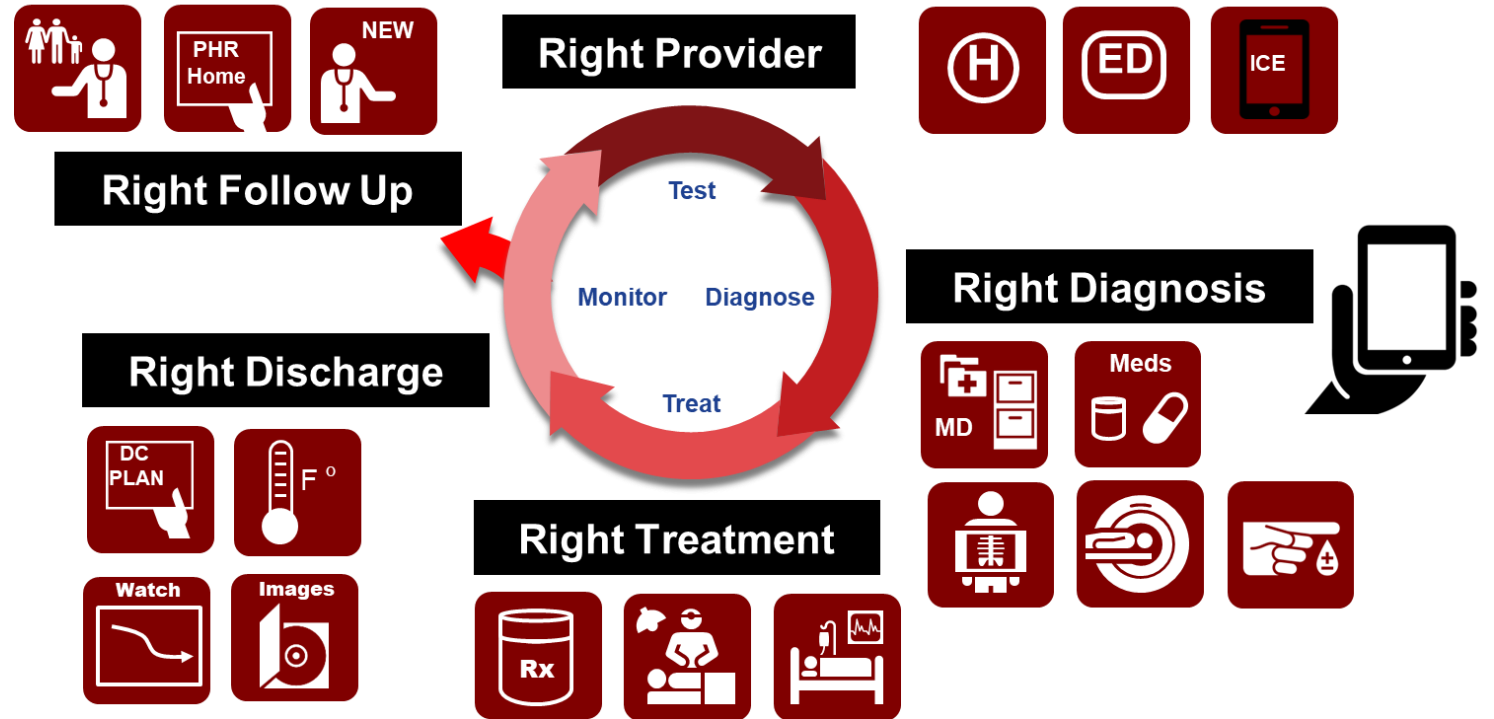
**High Impact Care Hazards** are conditions that are frequent, severe, preventable, and measurable. We have identified the leading causes of death that strike children, youth, and those in their workforce years. We provide evidence-based bystander care training that can have the greatest impact.

**Bystander Rescue Skills** are the competencies that bystanders can learn that will save lives in the few precious minutes before the professional first responders arrive. Such behaviors can be learned by children, adults, and entire families. We have programs for children, adults, law enforcement, educators, lifeguards, and caregivers.

**MedTac** is the only integrated program addressing the top causes of death of otherwise healthy children, youth, and adults in the workforce. Med Tac partners with terrific on-site trainers from great organizations who are already in the community.

[www.medtacglobal.org/](http://www.medtacglobal.org/)

## The 5 Rights of Emergency Care™





**Casey Clements, MD PhD**

Assistant Professor  
Practice Chair, Dept of  
Emergency Medicine  
Staff Safety Officer  
Mayo Clinic  
Rochester, MN



**John Christian Fox, MD**

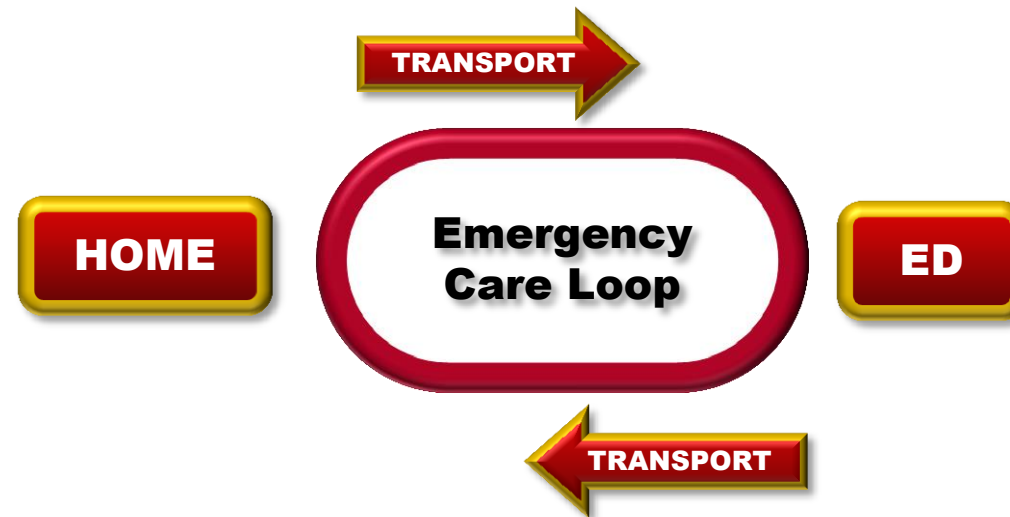
Professor and Chair  
Emergency Medicine  
Department  
Director of Ultrasound  
in Medical Education  
University of California  
at Irvine



**Heather Foster RN BSN**

Frontline Nurse  
Infection Prevention Advisor  
Patient Safety Advocate  
Dolores Colorado

## Emergency Rescue Skills: Getting to the ED



Response

Readiness

Resilience

Saf  
Pl

Reco

TRANSPORT

ED



Ca

Ass  
Pra  
Em  
Sta  
May  
Roc

## 1,000 Family Household Study:

- ❑ What did we learn?
  - ✓ Our safety net is stretched – preparation works.
- ❑ What is new?
  - ✓ During surges Emergency Care is delayed.
- ❑ What do we need in our family plan?
  - ✓ Follow our program for COVID or any emergency.
- ❑ How do we protect our families now?
  - ✓ Readiness will help during any emergency. The 5 Rights of Emergency Care can have enormous impact.

Foster RN BSN

Nurse  
Prevention Advisor  
Safety Advocate  
Colorado

## What to do – They're in the ICU:



- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?

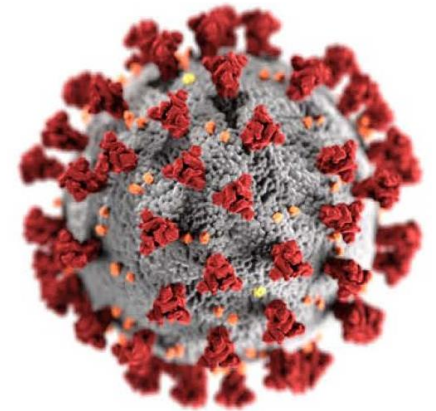


## What to do – They're in the ICU:



**Gregory H. Botz, MD, FCCM**

**Professor of Anesthesiology and Critical Care  
UT MD Anderson Cancer Center, Houston, TX  
Adjunct Clinical Professor, Department of  
Anesthesiology  
Stanford University School of Medicine,  
Stanford, CA**



## Short Video Topics

**Masks: Filter, Fit, and Finish**

**Hand Washing & DISINFECTANTS**

**CLEAN High Contact Surfaces**

**Building a FAMILY SAFETY PLAN**

**If we NEED Emergency Care**

**Why ICU, Respirators, and ECMO**

**Family Lifeguard Program**

**Vaccination Conversation**

## ICU Care, Respirators, and ECMO



## Short Video Topics

Masks: Filter

Hand Washing &

CLEAN High C

Building a FAM

If we NEED E

Why ICU, Respi

Family Lifes

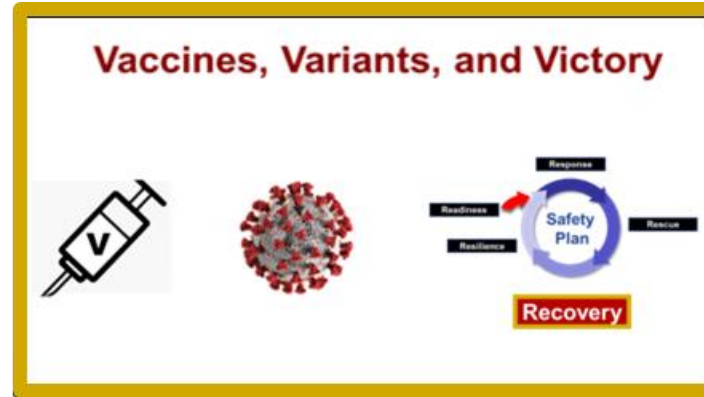
Vaccination

## 1,000 Family Household Study:

- ❑ What did we learn?
  - ✓ Our critical care processes dramatically improved.
- ❑ What is new?
  - ✓ Proning patients and medications have great impact.
- ❑ What do we need in our family plan?
  - ✓ Be ready for new surges and what to do if loved ones get very ill – it still happens.
- ❑ How do we protect our families now?
  - ✓ Understand what will happen when in the ICU.



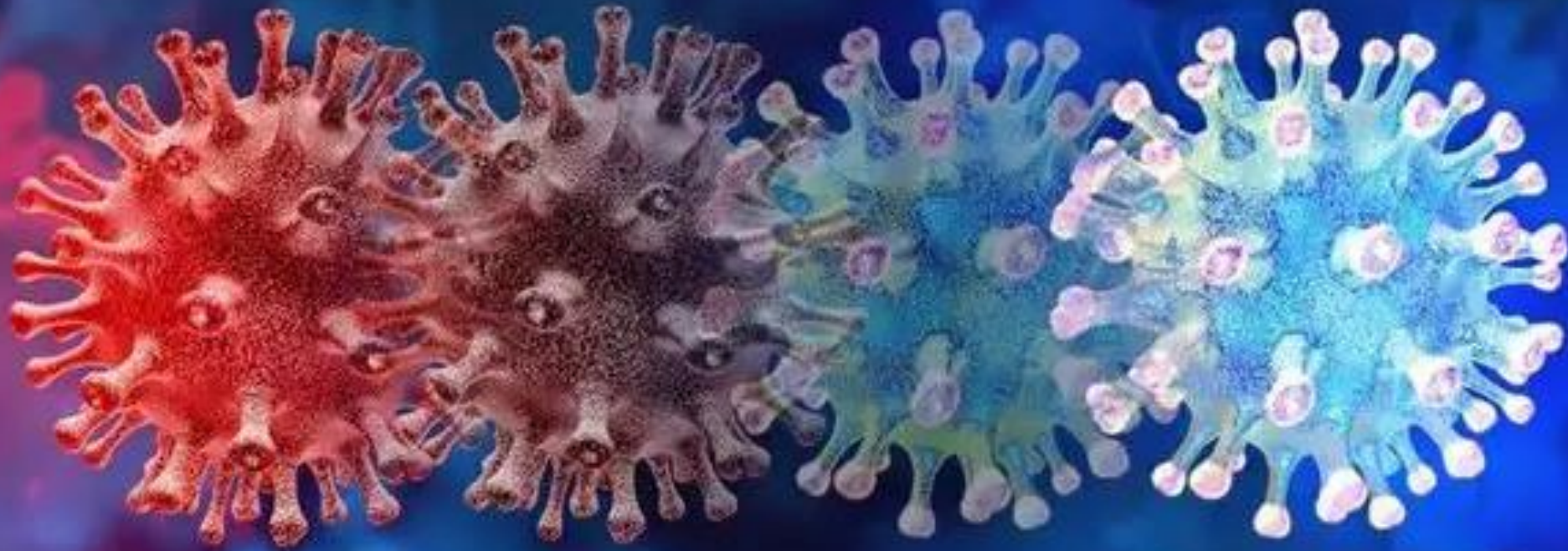
# Vaccines, Variants, and Victory:



- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?



# **RISK of High Contact Surfaces**



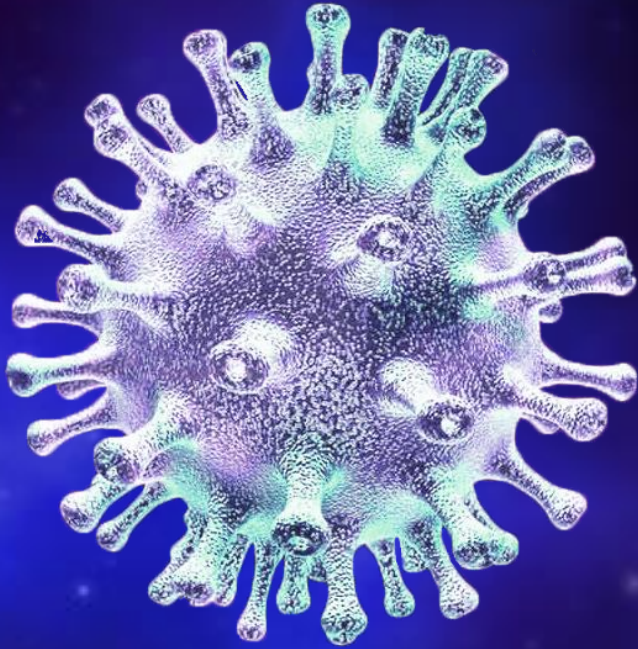
**Alpha**

**Beta**

**Delta**

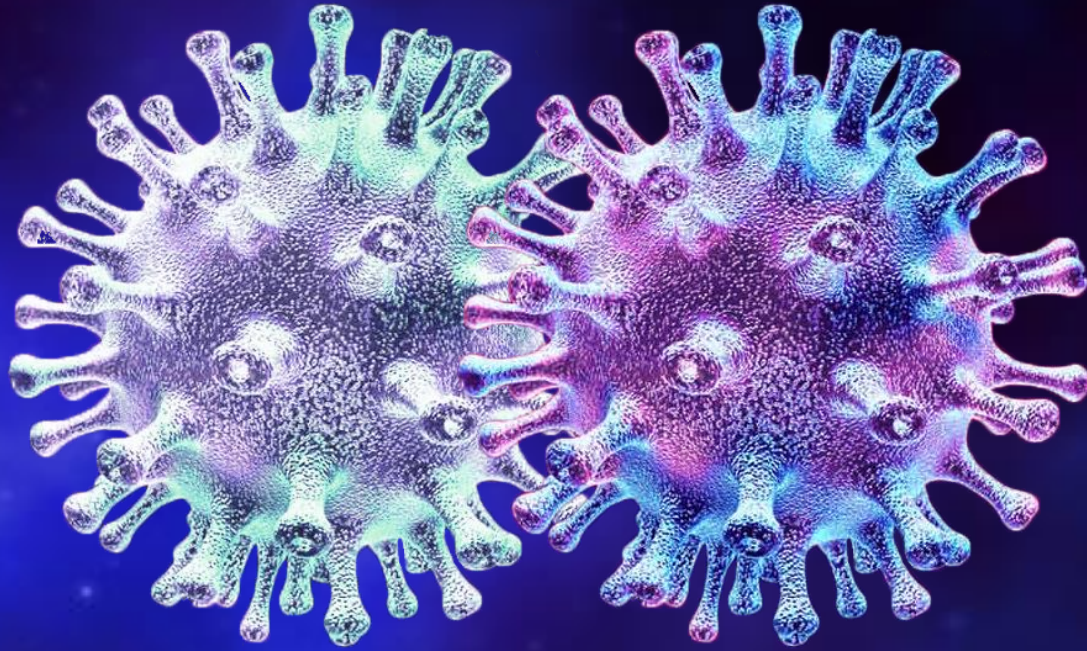
**Omicron**

# Variant Evolution



**Alpha**

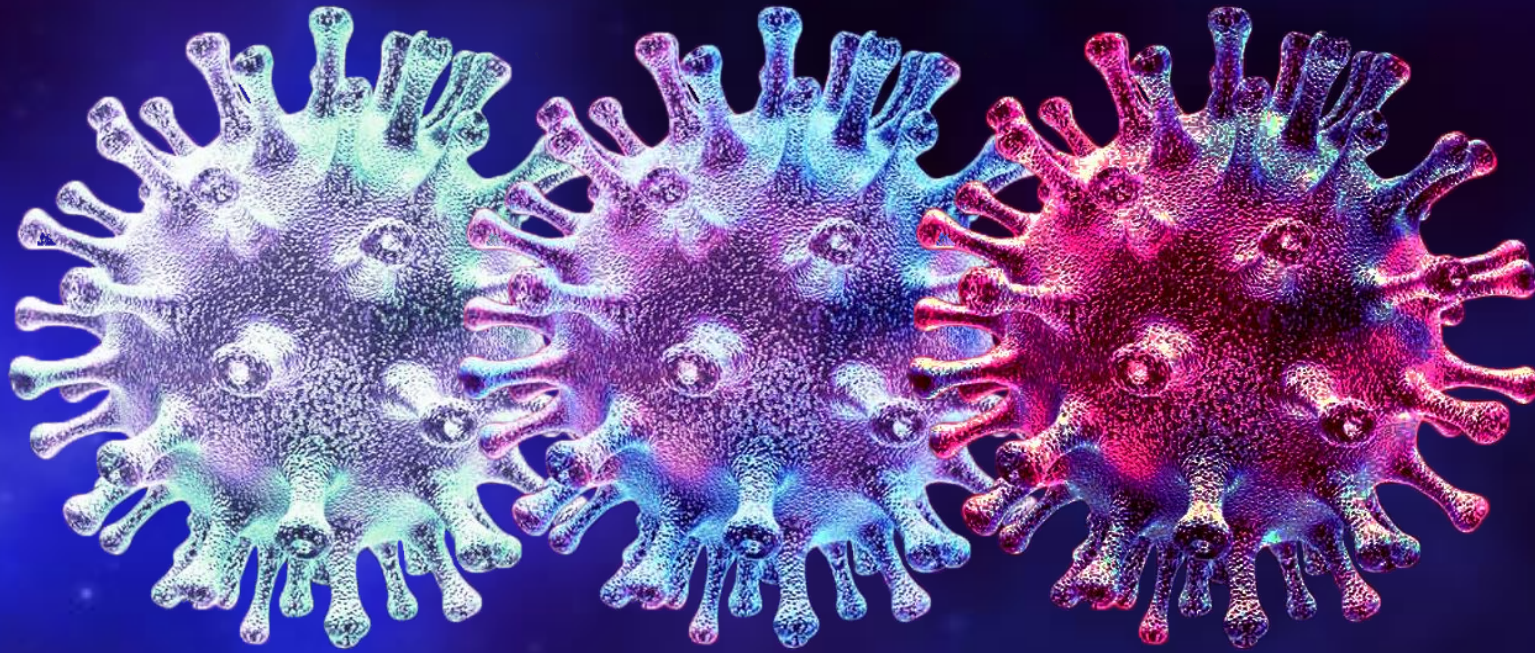
# Variant Evolution



**Alpha**

**Beta**

# Variant Evolution



**Alpha**

**Beta**

**Delta**

# Variant Evolution



**Alpha**

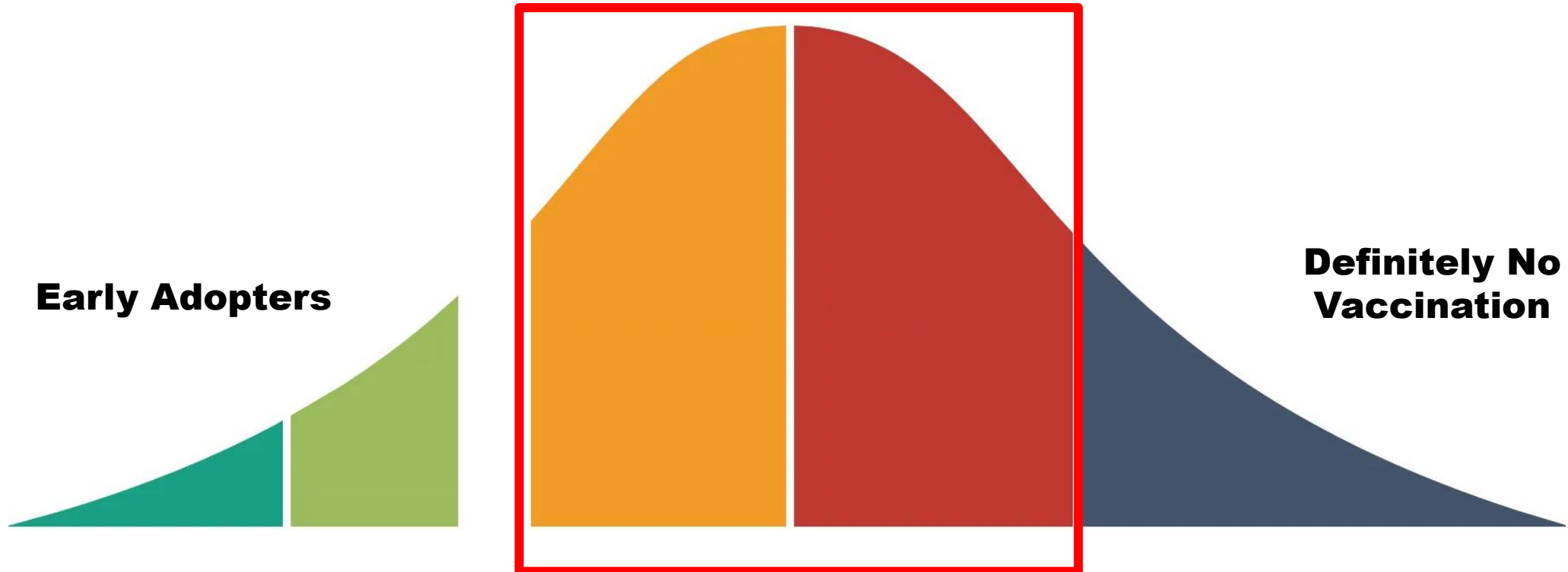
**Beta**

**Delta**

**Omicron**

# **The Movable Middle**

**Movable Middle  
Need Answers and Access**



# In the News: Tackling Vaccine Hesitancy



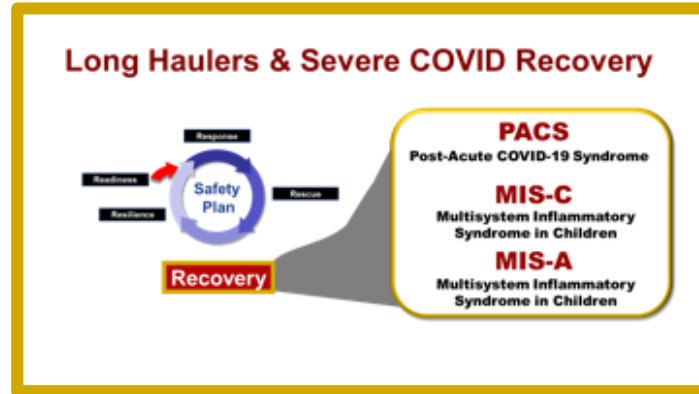
**TEAM PLAYER** <https://vimeo.com/679763639/0cfc1c62b6>

# Variant Evolution

## 1,000 Family Household Study:

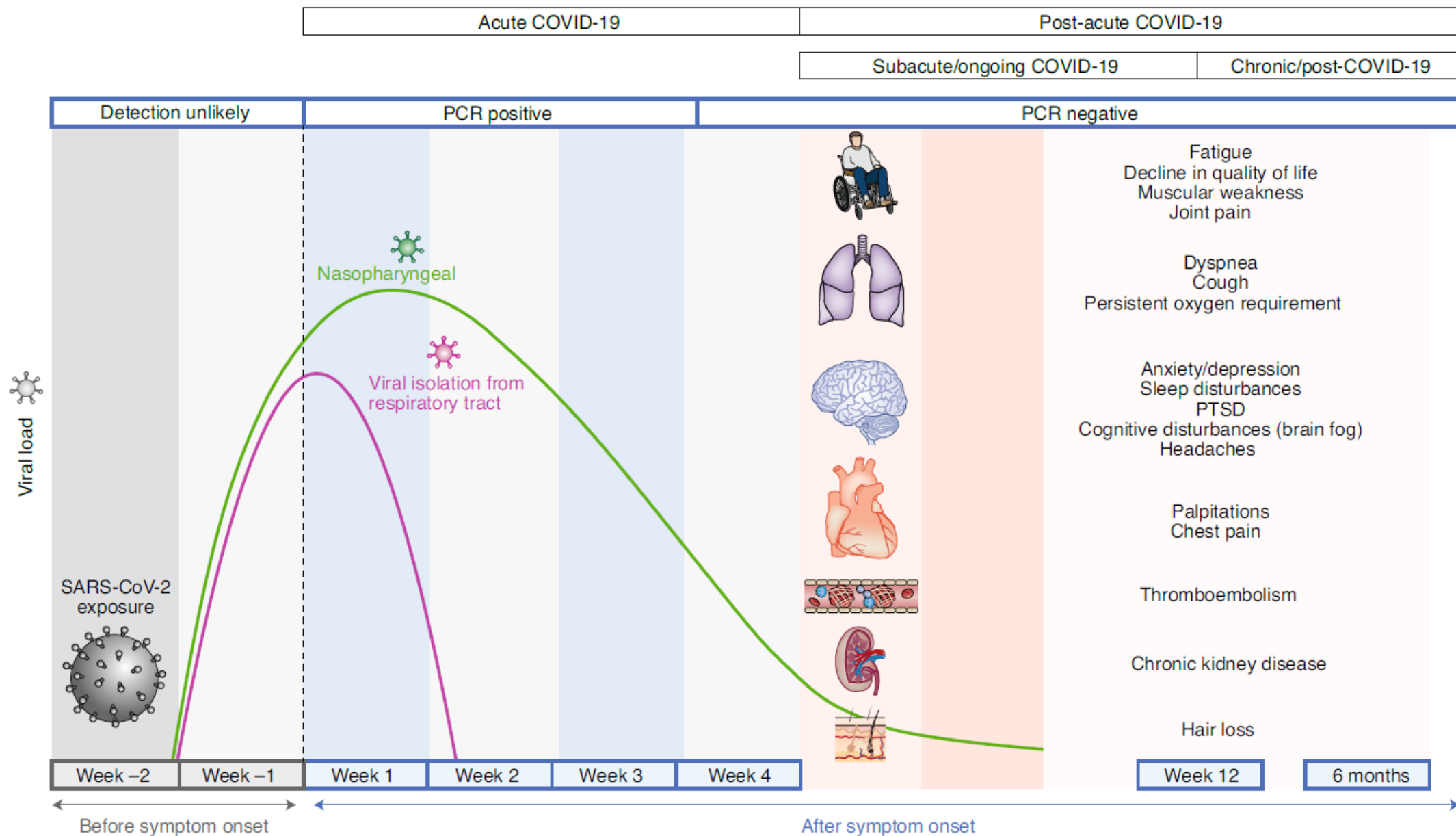
- ❑ What did we learn?
  - ✓ Vaccinations are very safe and the first line of defense.
- ❑ What is new?
  - ✓ Vaccination protection wanes. Those infected need it too.
- ❑ What do we need in our family plan?
  - ✓ Schedule vaccinations and boosters per CDC.
- ❑ How do we protect our families now?
  - ✓ Many forget to get boosters. Make sure everyone is boosted and “up to date”.

# Long Haulers & Severe COVID Recovery:



- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?





Acute COVID-19

Post-acute COVID-19

Subacute/ongoing COVID-19

Chronic/post-COVID-19

Detect

## 1,000 Family Household Study:

### ❑ What did we learn?

- ✓ Long COVID is real and a “timebomb”.

### ❑ What is new?

- ✓ Even those with mild infections can get it. Some people are really debilitated – and we don’t know who.

### ❑ What do we need in our family plan?

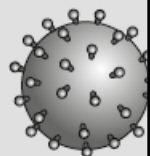
- ✓ Be vigilant and make family aware of Long COVID impact. Insurance and disability insurance may not cover it.

### ❑ How do we protect our families now?

- ✓ Fight COVID prevention fatigue. Make sure the family uses masks, avoids closed spaces, and keeps safe.

Viral load

SARS-CoV-2 exposure



Week -2

Before symptom onset

After symptom onset

Months

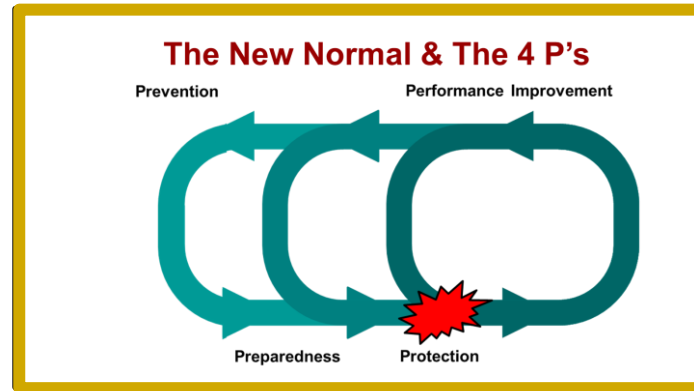
# 10 Best Practices for Reopening:



- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?



# The New Normal & The 4 P's:



- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?



Obtain  
Funds

Develop  
Organization

Gather &  
Provide  
Materials

Improvise  
Tactics  
Devices

Plan Attacks

Perform  
Attacks

Consequence  
Management

# Left of BOOM

## Breaking the Links in the IED Delivery Chain

Deter &  
Predict

Detect &  
Defeat



Mitigate

Source: Darling M, Parry C, Moore J. Learning in the thick of it. *Harvard Business Review* 2005 Jul-Aug. Available at <https://hbr.org/2005/07/learning-in-the-thick-of->



**EMERGING THREATS  
COMMUNITY OF PRACTICE**

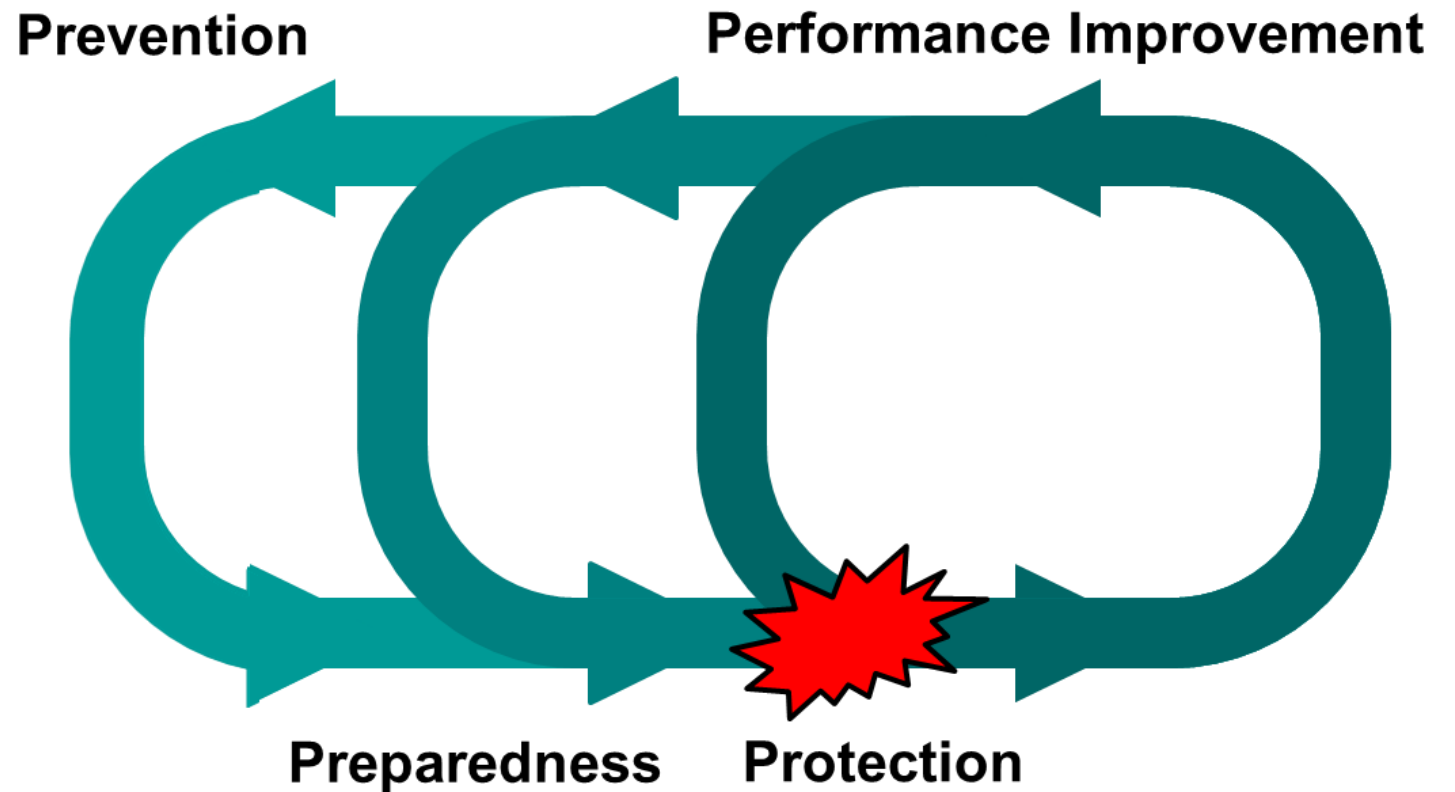


**Global Patient  
Safety Forum**

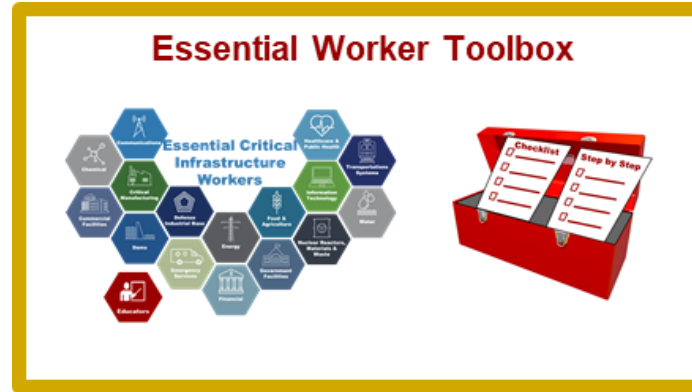
***SAFETY*LEADERS®**

***CARE*UNIVERSITY®**

## The 4 P's: Prevention, Preparedness, Protection, and Performance Improvement



# Essential Worker Toolbox:



- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?



# Special Care for Special Populations:



- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?



## Special Care for Special Populations

Immunocompromised



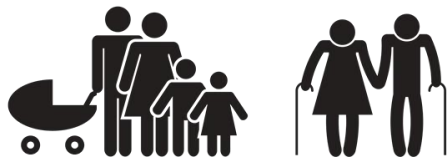
Seniors



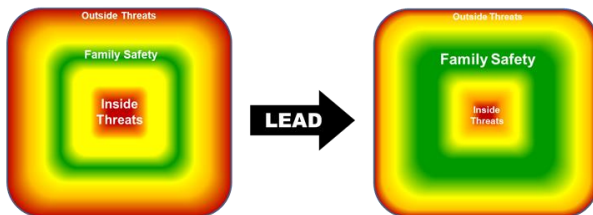
Our Children



## Keeping the Unit Family Safe



Reduce Family Vulnerability



## 1,000 Family Household Study:

- ❑ **What did we learn?**
  - ✓ Certain people are very vulnerable to COVID – for instance cancer and transplant patients.
- ❑ **What is new?**
  - ✓ Prevention behaviors really work.
- ❑ **What do we need in our family plan?**
  - ✓ Customize your approach to most at risk.
- ❑ **How do we protect our families now?**
  - ✓ Fight COVID Prevention fatigue – the variants are still present, and the communities have let their guard down.

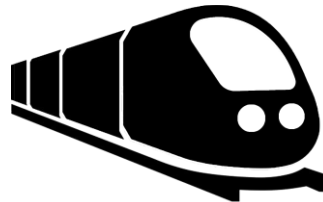
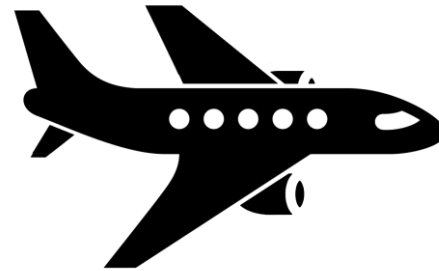
# Safer Holidays & Safer Families:



- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?



# Safer Holidays Safer Families



# Family Lifeguard Update for 2022



**David Beshk**

**Award Winning Educator  
Med Tac Master Instructor  
Eagle Scout Advisor  
Merit Badge Counselor**



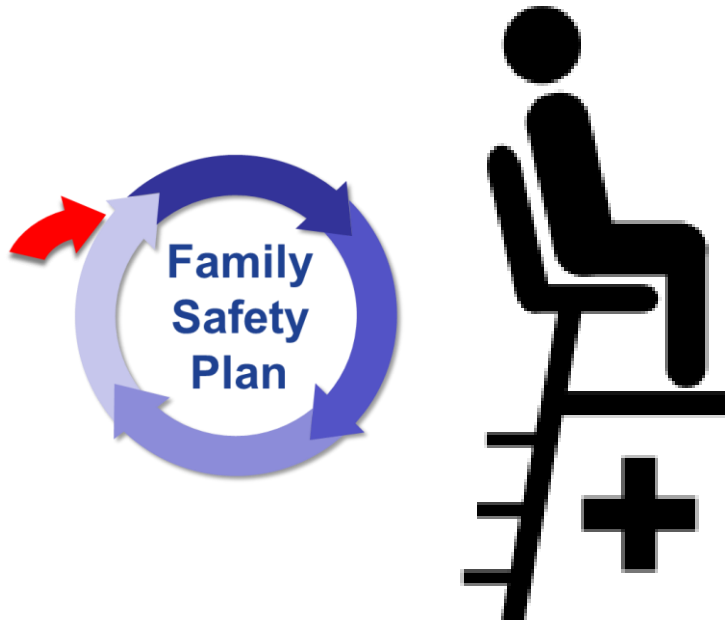
**Charles R. Denham III**

**High School Student  
Co-founder Med Tac Bystander  
Rescue Care Program  
Co-lead Lifeguard Surf Program  
Junior Med Tac Instructor  
Certified Lifeguard**



# Be Your Family Lifeguard

90% Prevention and 10% Rescue



## Family Huddle Checklist

### The Goal - Prevent Bubble Trouble

Maintain the Four Pillars: Distance, Mask Use, Hand Hygiene, and Disinfect Surfaces.

#### Before Event:

- ☐ Consider Rapid Antigen Testing
- ☐ Identify how to Optimize Ventilation
- ☐ Determine how to protect At-Risk Members
- ☐ Assign Tasks to Family Members
- ☐ Prepare Separate Family Bubble Portions
- ☐ Set Up Handwashing Stations
- ☐ Develop a Bathroom Plan
- ☐ Prepare Bathroom – Optimize Ventilation
- ☐ Maintain Kitchen Hygiene

#### During Event:

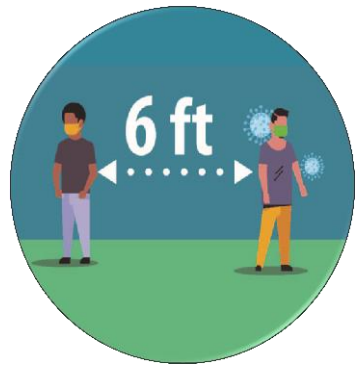
- ☐ Convene Holiday Huddle with Guests
- ☐ Opening Prayer
- ☐ Describe Safe Family Bubbles
- ☐ Review Four Safety Pillars
- ☐ Provide Restroom Plan
- ☐ Describe Eating Plan
- ☐ Summarize Clean Up Plan

#### After Event:

- ☐ Glove up to Clean Up
- ☐ Soak Plates and Cutlery in Soapy Water
- ☐ Wipe down surfaces touched by guests
- ☐ Wipe down bathroom used by guests
- ☐ Meet to de-brief to be safer next time



# Safe Practices



**Social  
Distancing**



**Use of  
Masks**



**Hand  
Washing**



**Disinfecting  
Surfaces**

SOURCE: Centers for Disease Control

# Holidays, Spring Break, Ski Week, and Vacations



## Family Huddle Checklist

### The Goal - Prevent Bubble Trouble

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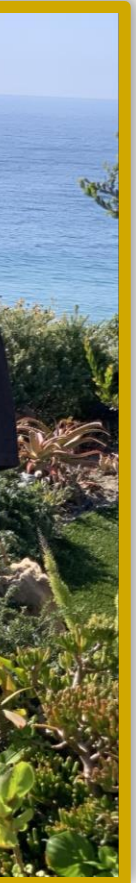
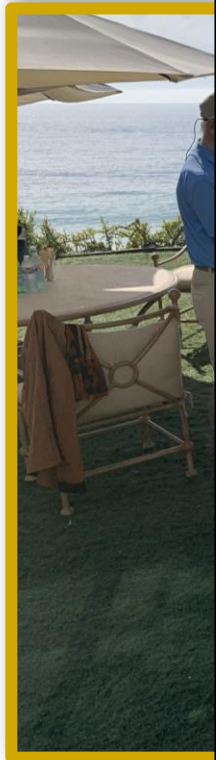
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# Holidays, Spring Break, Ski Week, and Vacations

## 1,000 Family Household Study:

- ❑ **What did we learn?**
  - ✓ Aerosol spread is much greater than contact surfaces.
- ❑ **What is new?**
  - ✓ There is a huge payoff to pay attention to vaccination status of guests, using rapid antigen testing before events, and avoiding indoor and poor ventilation.
- ❑ **What do we need in our family plan?**
  - ✓ Build in prevention of aerosol spread. Take precautions with travel.
- ❑ **How do we protect our families now?**
  - ✓ Avoid carpooling and exposure to unvaccinated people in indoor spaces. Monitor community immunity and spread. Use rapid testing and keep vaccinations up to date.



# Bystander Rescue Care:

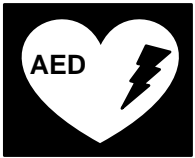


- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?



# The Solution: Bystander Rescue Care

Cardiac Arrest



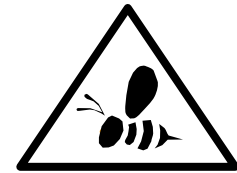
Choking & Drowning



Opioid OD & Poisoning



Anaphylaxis



Major Trauma



Infection Care



Transportation



Bullying

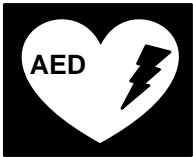


# The Solution: Bystander Rescue Care

## 1,000 Family Household Study:

- ❑ What did we learn?
  - ✓ Bystander or Good Samaritan Care can be safe.
- ❑ What is new?
  - ✓ Emergency response services are more stretched than ever, and bystander care is more important than ever.
- ❑ What do we need in our family plan?
  - ✓ Build deliberative practice of bystander rescue care into the family plan – make sure the family is ready for emergencies.
- ❑ How do we protect our families now?
  - ✓ Get CPR/AED trained and know what to do for common emergencies that could hit your family.

Cardiac



axis



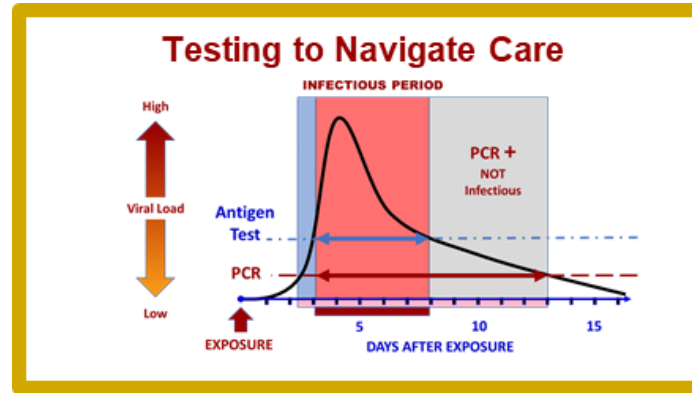
Major



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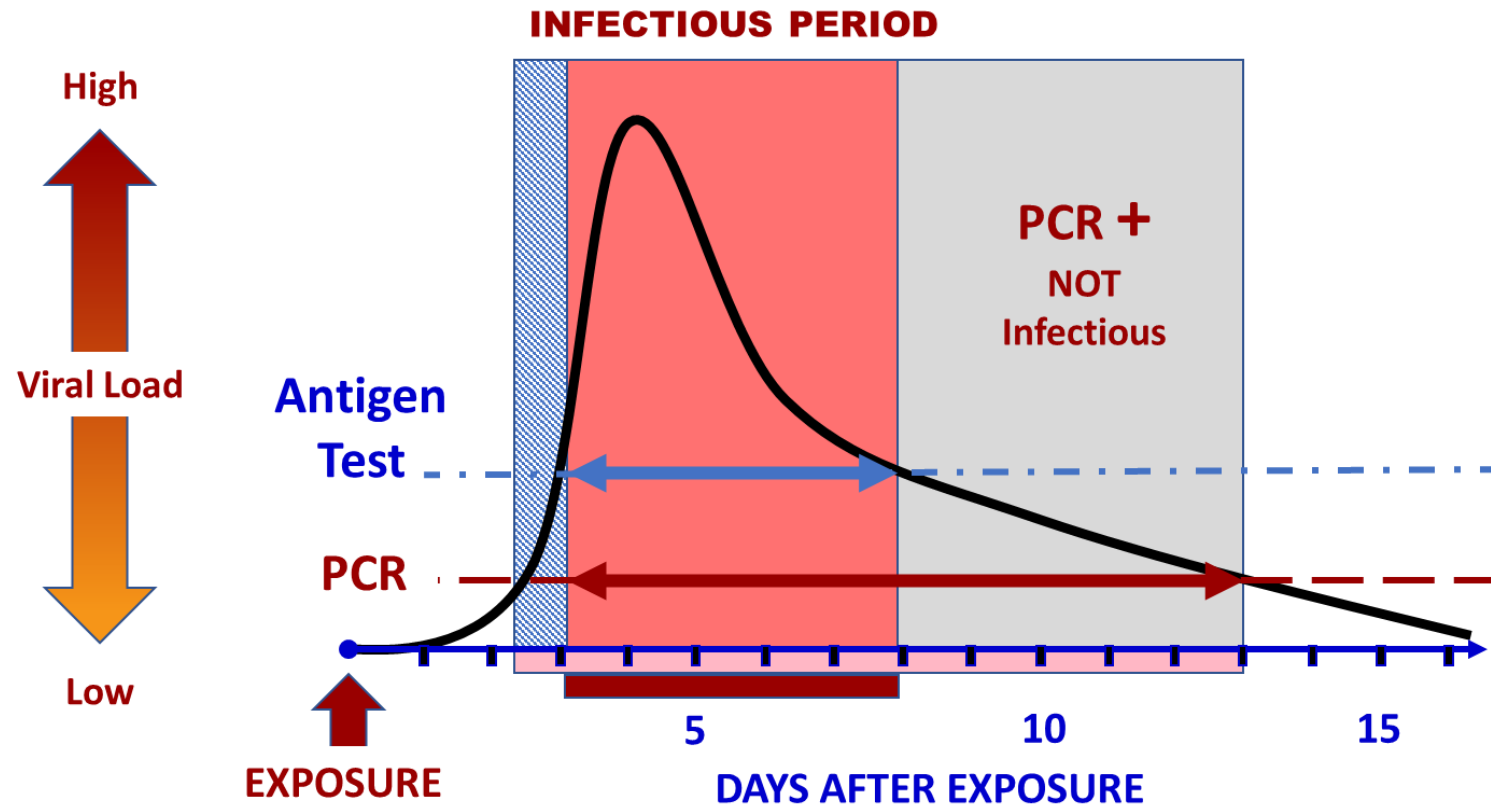
# Testing to Navigate Care:



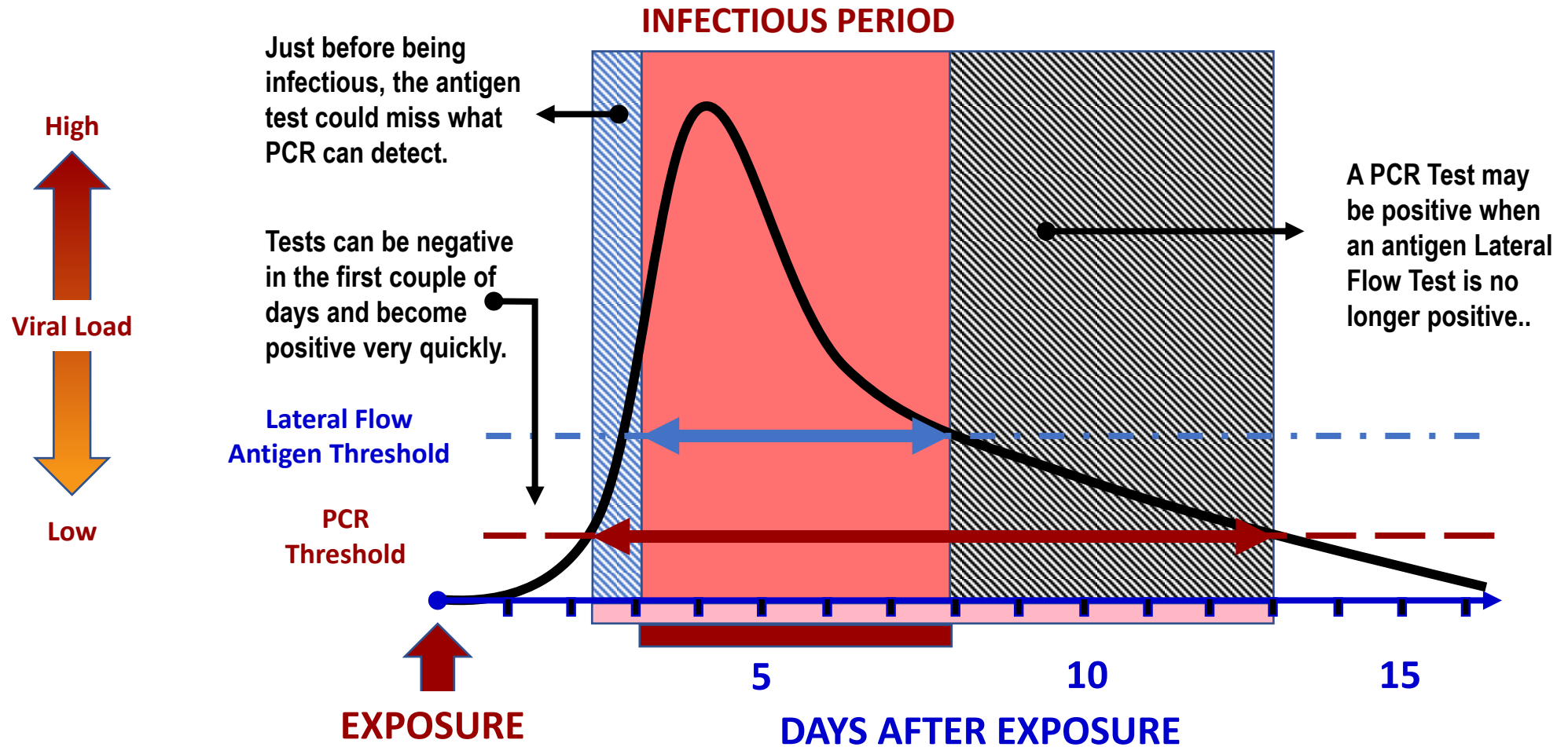
- ❑ What did we learn?
- ❑ What is new?
- ❑ What do we need in our family plan?
- ❑ How do we protect our families now?



# Testing to Navigate Care



# The WHO, WHAT, WHEN, and HOW to TEST



# Most Important Tests: PCR & Rapid Antigen

## RT-PCR



## Rapid Antigen



# Most Important Tests: PCR & Rapid Antigen

## 1,000 Family Household Study:

- ❑ **What did we learn?**
  - ✓ Consumers have great confusion regarding testing.
- ❑ **What is new?**
  - ✓ Home antigen tests tell us whether we are contagious. PCR tests can be positive after one is contagious.
- ❑ **What do we need in our family plan?**
  - ✓ Make sure everyone understands the basics of testing.
- ❑ **How do we protect our families now?**
  - ✓ Have home rapid antigen test kits ready for the next surge. Use them for family gatherings or after trips or exposure.



### Speakers & Reactors



Jennifer Dingman



Dr. Gregory Botz



Chief William Adcox



Dr. Christopher Peabody



Charlie Denham III



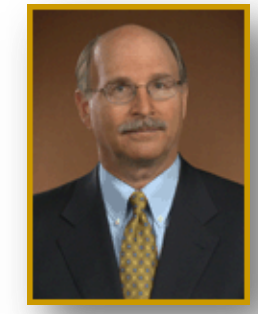
Heather Foster RN



Dr. Brittany Barto-Owens



David Beshk



Dr. Charles Denham

**Fight the Good Fight...**

**Finish the Race...**

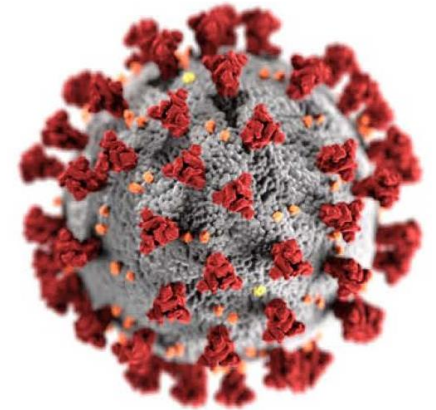
**Keep the Faith...**

## ***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**

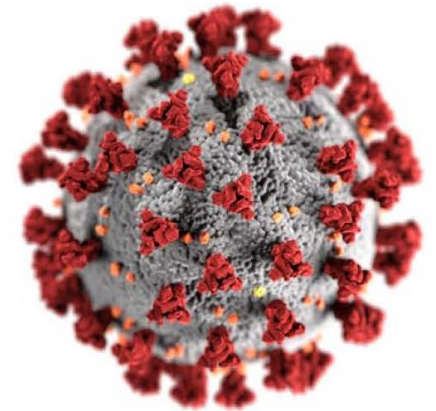


# A Message to Families Regarding Emergency Care



**Christopher Peabody MD MPH**

**Associate Professor  
Emergency Medicine  
UCSF School of Medicine  
Director of the UCSF  
Acute Care Innovation Center**





## Christopher Peabody MD MPH

Associate Professor  
Emergency Medicine  
UCSF School of Medicine  
Director of the UCSF  
Acute Care Innovation Center

<https://www.medtacglobal.org/>

[About](#) [Values & Team](#) [Coronavirus Response](#) [Recorded Broadcasts](#) [Specialty Programs](#) [Student Outreach](#) [Research & Development](#) 

This webpage and videos have been produced for essential infrastructure workers and general public families. We have drawn on our network of 500 subject matter experts and a patient safety community of practice of 3,100 hospitals in 3,000 communities to tackle the Coronavirus Crisis.

### Protecting You & Your Family



- [February 2022 Progress Report](#)
- [View 90 Minute Programs Online](#)
- [View Short Video Summaries](#)

**Coronavirus Care Community of Practice**

**Bystander Rescue Care**  
*CareUniversity Series*

We have organized important information into Short Video Topics and longer Survive & Thrive Guides™ Courses below.

### Short Video Topics

Masks: Filter, Fit, and Finish

Hand Washing & DISINFECTANTS

CLEAN High Contact Surfaces

Building a FAMILY SAFETY PLAN

If we NEED Emergency Care

Why ICU, Respirators, and ECMO

Family Lifeguard Program

Vaccination Conversation

## NEW Emergency Dept. Issues



Dr. Christopher Peabody  
Director Acute Care Innovation Center  
Associate Clinical Professor  
University of California San Francisco

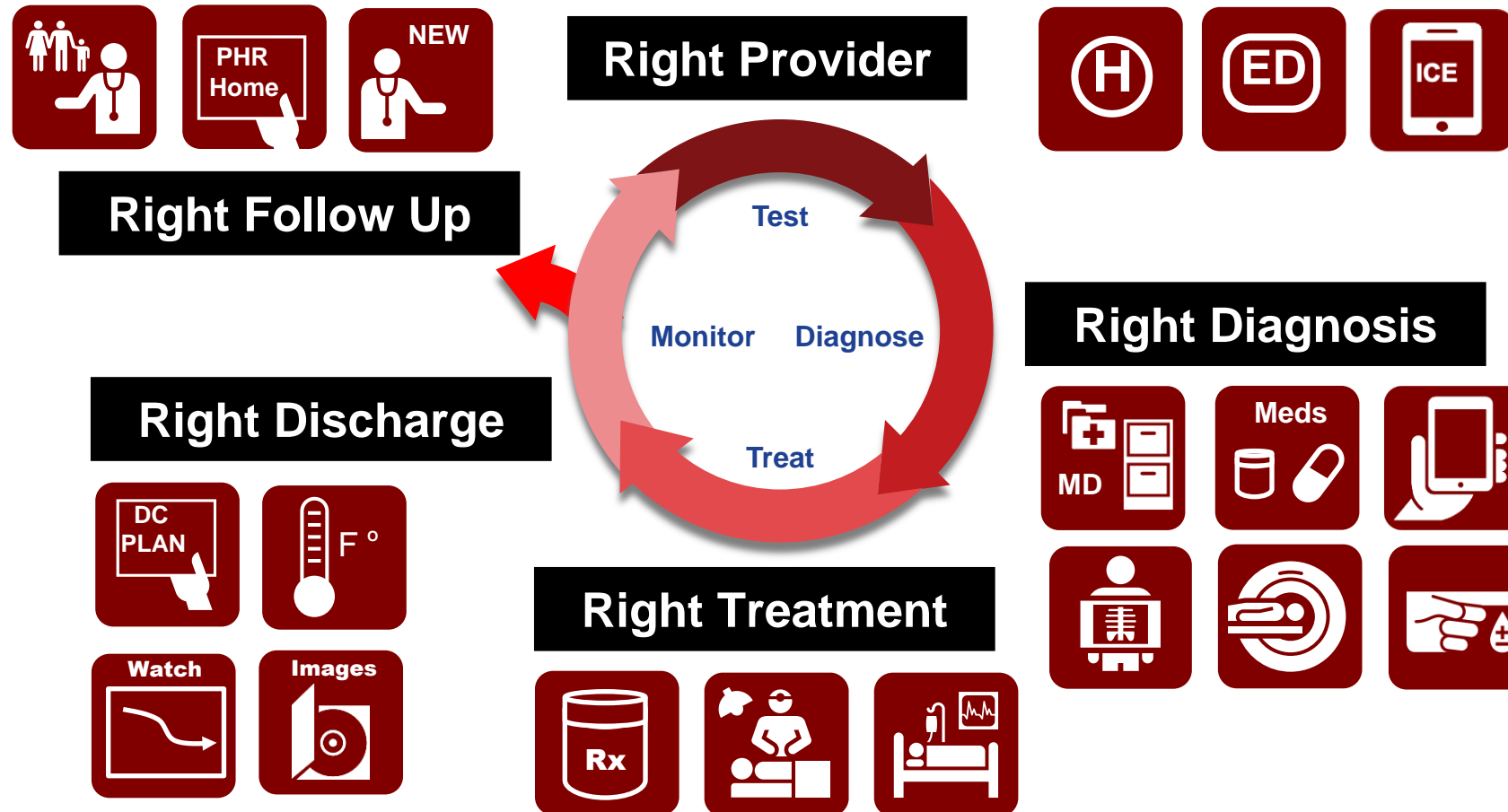
### The 5 Rights of Emergency Care



Right Provider  
Right Diagnosis  
Right Treatment  
Right Discharge  
Right Follow Up



## *The 5 Rights of Emergency Care™*

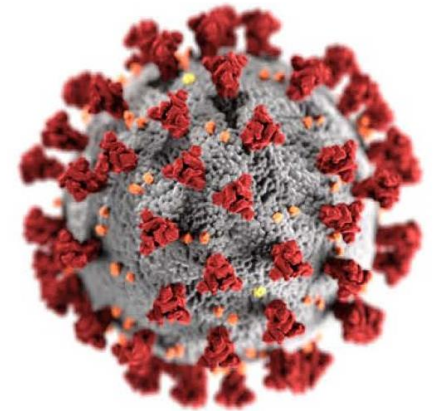


# The Next Normal: Our Family Safety Plan



**Gregory H. Botz, MD, FCCM**

**Professor of Anesthesiology and Critical Care  
UT MD Anderson Cancer Center, Houston, TX  
Adjunct Clinical Professor, Department of  
Anesthesiology  
Stanford University School of Medicine,  
Stanford, CA**



# The Next Normal: Survive and Thrive



- ❑ What should be our Family Plan?
- ❑ What should be our new state of **READINESS**?
- ❑ What should be our **RESPONSE** to COVID?
- ❑ How should we **RESCUE** loved ones with COVID?
- ❑ How do we help loved ones **RECOVER** from COVID?
- ❑ What is family **RESILIENCE** – how can we practice it?
- ❑ What about GOOD SAMARITAN CARE – is it safe?



*Turn the Science into Safety™*

# ***Additional Resources***

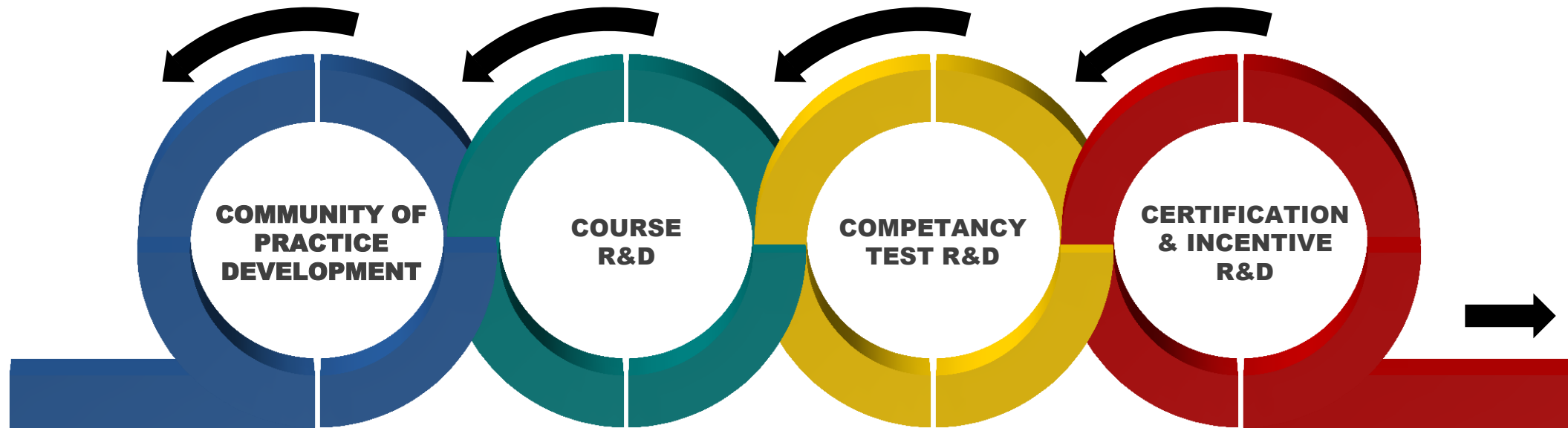


**TMIT Global  
Research Test Bed**



**SafetyLeaders®**

## Learning Management System



**CareUniversity®**



**SafetyLeaders®**

## Certificates for Med Tac Program



AMERICAN COLLEGE OF SURGEONS

*Inspiring Quality:*

*Highest Standards, Better Outcomes*

100+years



American  
Heart  
Association®

**Heartsaver® First Aid CPR AED**

# High Impact Care Hazards to Patients, Students, and Employees



AboutValues & TeamCoronavirus ResponseRecorded BroadcastsSpecialty ProgramsR&D Surveys & InnovationsCAREUNIVERSITY

## Med Tac Bystander Rescue Care

Med Tac is short for "Medical Tactical" and is an advanced first aid platform to battle failure to rescue. The mission is to teach anyone the critical bystander care skills that can save lives during the most common life threatening emergencies. Our focus is to train all ages to provide the greatest help in the first 10 minutes before professional first responders arrive and then assist them when they do. The training includes how to work with professional first responders and how to help families as they proceed through hospital emergency care.

### Video Library

Med Tac Story

Med Tac Leadership Team

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5 Rights of Emergency Care

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3 Minutes & Counting Trailer

Opioid Overdose Briefing



### The Battle Against Failure to Rescue

The Med Tac Program was developed by a team originally focused on active shooter events. When they found that there at least 8 leading causes of preventable death including severe bleeding and that there was no integrated program to teach the public what they can do to save lives and prevent "failure to rescue" before EMS arrives, Med Tac was born. In many cases bystander rescue care can triple survival if the public knows what to do. The program was funded through 2019 by philanthropy through TMIT Global, a 501(c)(3) medical research organization that leads a global patient safety community of practice found at [www.SafetyLeaders.org](http://www.SafetyLeaders.org). With the development of the Coronavirus crisis, our rapid response team has prioritized Infection Care as one of our major focus areas. As of January 1st, 2020 the team has published four articles and has developed pilot programs in five states. [Click here](#) to download a PDF of the four articles.



Cardiac Arrest

Choking & Drowning

Opioid Overdose

Anaphylaxis

Major Trauma

Infection Care

Transportation Accidents

Bullying

**Bystander Care Training** is a critical need in all communities. The preventable deaths we see in the news are the tip of the iceberg. Our program is a Good Samaritan support system to help everyone learn life-saving actions that will save lives.

**High Impact Care Hazards** are conditions that are frequent, severe, preventable, and measurable. We have identified the leading causes of death that strike children, youth, and those in their workforce years. We provide evidence-based bystander care training that can have the greatest impact.

**Bystander Rescue Skills** are the competencies that bystanders can learn that will save lives in the few precious minutes before the professional first responders arrive. Such behaviors can be learned by children, adults, and entire families. We have programs for children, adults, law enforcement, educators, lifeguards, and caregivers.

**MedTac** is the only integrated program addressing the top causes of death of otherwise healthy children, youth, and adults in the workforce. Med Tac partners with terrific on-site trainers from great organizations who are already in the community.

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Austin, Texas

<https://www.medtacglobal.org/>

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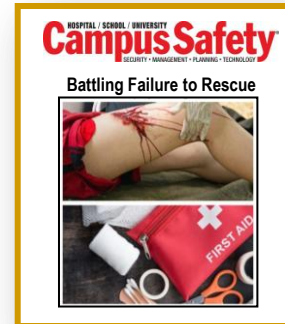
Transportation Accidents

Bullying

Active Shooter  
Healthcare Article



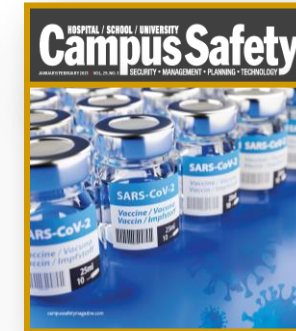
Rapid Response  
Teams Article



AED & Bleeding  
Control Gear Article

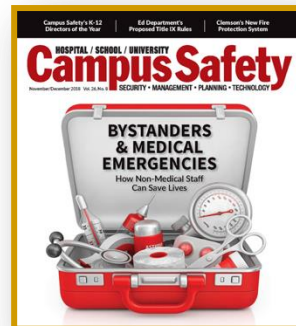


Family Safety  
Plan Article



Support  
today's  
webinar

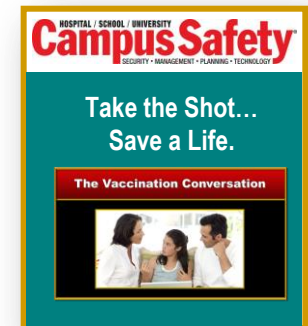
Med Tac  
Story Article



A **Medical-Tactical Approach** undertaken by clinical and non-clinical people can have enormous impact on loss of life and harm from very common hazards:

- **High Impact Care Hazards** are frequent, severe, preventable, and measurable.
- **Lifeline Behaviors** undertaken by anyone can save lives.

Take the Shot...  
Save a Life



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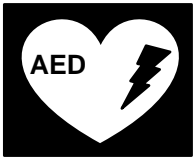
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# The Solution: Bystander Rescue Care

Cardiac Arrest



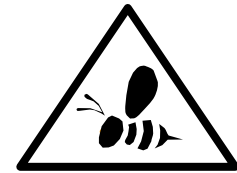
Choking & Drowning



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# The Solution: Bystander Rescue Care

## Cardiac Arrest



**Sudden Cardiac Arrest:** There is an epidemic of SCA with one quarter of the SCA events in children and youth occurring at sporting events. CPR and AED use have a dramatic impact on survival.  
*Possible Lives Saved in the US: 2 every hour and 3 children per day at a sporting event – 25% of SCA deaths in children occur at such events.*

## Choking & Drowning



**Choking:** More than 100,000 lives have been saved with the Heimlich Maneuver. Most choking deaths are preventable.

*Possible Lives Saved in the US: 13 per day*

**Drowning:** By population, drowning and near drowning events are very common. Since much of the OC population is near water, the numbers are likely much greater.

*Possible Lives Saved in the US: 8 per day*

## Opioid OD & Poisoning



**Opioid Overdose and Poisoning:** An exploding opioid OD crisis is gripping our nation with a great toll on families. Narcan opioid reversal agents, rescue breathing and positioning, and rapid EMS response saves lives. Awareness drives prevention.

*Possible Lives Saved in the US: There are 197 OD deaths per day. Up to 8 lives may be saved per hour.*

## Anaphylaxis



**Anaphylaxis & Life Threatening Allergies:** Many events are unreported; however 22% occur in children without a prior diagnosis of allergies. More than one in twenty adults will have an anaphylactic event in their lifetime. Epinephrine auto-injectors save lives within minutes.

*Possible Lives Saved in the US: 1 per day*

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**Major Trauma & Bleeding:** Bystander care especially for major bleeding using Stop-The-Bleed techniques of wound pressure, bandages, and tourniquets can have an enormous impact on survival.

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*Possible Lives Incalculable*

## Transportation



**Non-traffic Related Vehicular Accidents:** The incidence of non-traffic related drive-over accidents near schools and home is greater than 50 per week. More than 60% of the drivers are a parent or friend.

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**Bullying & Workplace Violence:** Bullying and abuse of power in schools and at work can lead to suicide, workplace violence, violent intruders, and active shooter events.

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# Med Tac Rescue Stations



**Soaring Eagle Awards:  
David Beshk  
Danny Policchichio**

**Lives Saved by Med Tac  
Bystander Rescue Care  
Trainers in Community**





### Rescue Station Stand:

- Treated Wood
- Stainless Steel and Bronze Cleats
- Aluminum Signage
- Quick Release Bungee Cords for easy access

### Rescue Gear:

- Dedicated 911 phone
- Soft Rescue Tubes
- Rescue Surfboard
- Spine board



### **Care Case:**

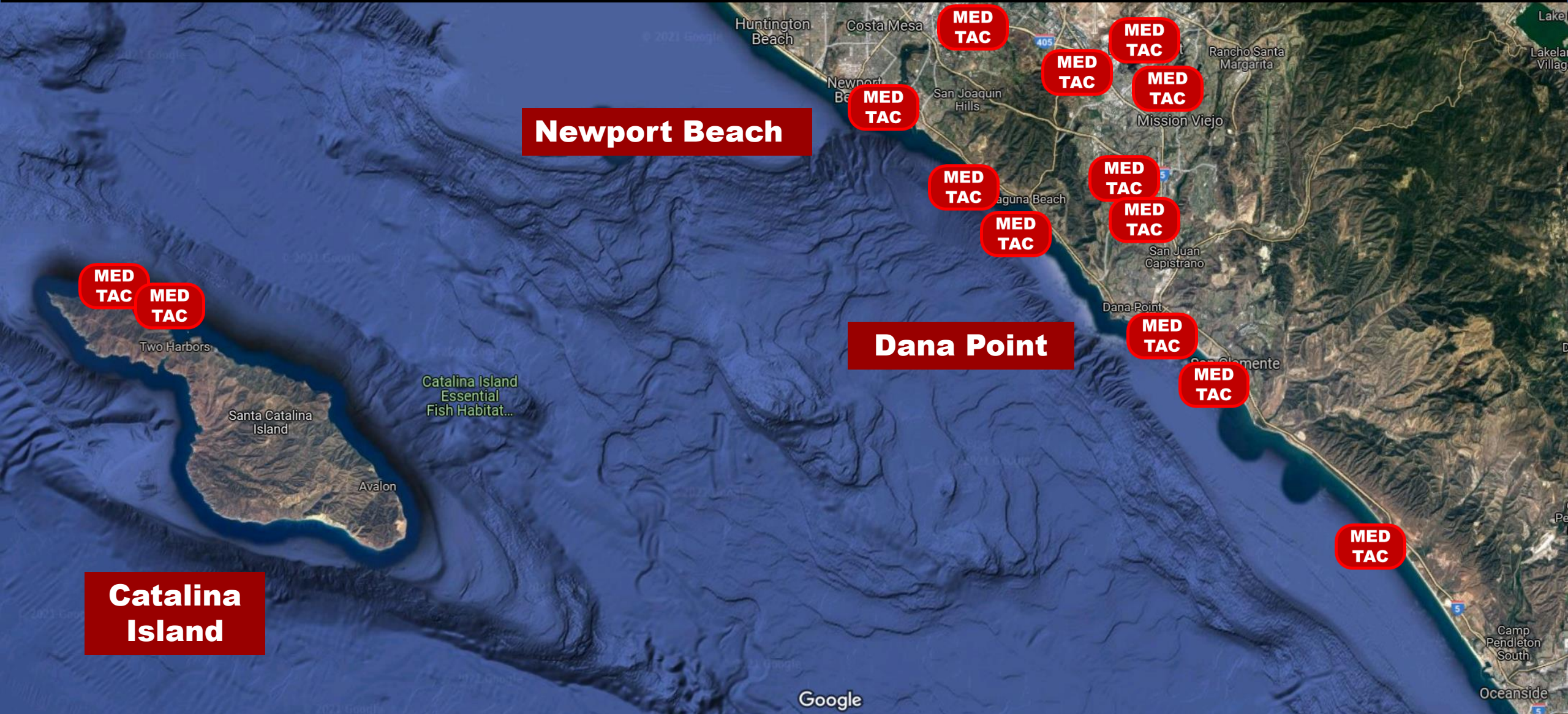
- AED
- Stop the Bleed Kits
- CPR Rescue Masks
- COVID Safety Gear

### **Approved by Advisors:**

- OC Lifeguards
- Laguna Beach Lifeguards
- Emergency Medicine MDs
- Critical Care MDs
- Infection Control Experts

**MED  
TAC**

# Med Tac Rescue Station Sites



## Cardiac Arrest



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***Possible Lives Saved in the US: 2 every hour and 3 children per day at a sporting event – 25% of SCA deaths in children occur at such events.***

## COVID-19 and Adult CPR

If an adult's heart stops and you're worried that they may have COVID-19, you can still help by performing Hands-Only CPR.



### Step 1



Phone 9-1-1 and get an AED.

### Step 2



Cover your own mouth and nose with a face mask or cloth.



Cover the person's mouth and nose with a face mask or cloth.

### Step 3



**Perform Hands-Only CPR.**  
Push hard and fast on the center of the chest at a rate of 100 to 120 compressions per minute.

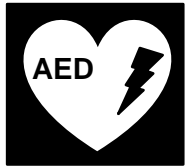
### Step 4



Use an AED as soon as it is available.

KJ-1424 4/20 © 2020 American Heart Association

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## SAVE A LIFE. GET NALOXONE.

Naloxone stops an overdose caused by opioid pain medication, methadone or heroin.

People at risk for overdose and their family and friends can learn to spot an overdose and respond to save a life.

To get naloxone, present this card to the pharmacy staff.

A



### MULTI-STEP NASAL SPRAY

**DIRECTIONS:** Spray 1 mL (half of the syringe) into each nostril.

NO BRAND NAME/GENERIC

COST: \$-\$\$

B



### SINGLE-STEP NASAL SPRAY

**DIRECTIONS:** Spray full dose into one nostril.

BRAND NAME: Narcan

COST: \$\$\$

C



### INTRAMUSCULAR INJECTION

**DIRECTIONS:** Inject 1 mL in shoulder or thigh.

NO BRAND NAME/GENERIC

COST: \$-\$\$

D



### AUTO-INJECTOR

**DIRECTIONS:** Use as directed by voice-prompt. Press black side firmly on outer thigh.

BRAND NAME: Evzio

COST: \$\$\$\$\*

\*Coupons available, see evzio.com for more info

**FOR ALL PRODUCTS,** repeat naloxone administration after 2–3 minutes if there is no response.

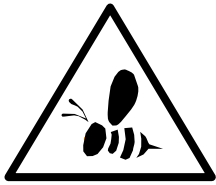
Most insurance will cover at least one of these options, or you can pay cash. All products contain at least two doses

For more on opioid safety, videos on how to use naloxone, or to get help for addiction, go to [PrescribetoPrevent.org](https://www.PrescribetoPrevent.org)

Used with permission from Boston Medical Center



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*Possible Lives Saved in the US: 1 per day*

## How To Use An EpiPen

EpiPen is used for severe lifethreatening allergic reactions.

### Signs & Symptoms

Lungs: Chest tightness, cough that will not stop. Wheezing or shortness of breath.

Heart: Lightheaded feeling, fainting, weak pulse, or low blood pressure

Throat: Tightness of throat, hoarse/scratchy throat or drooling.

Mouth: Swollen tongue or lips

Skin: Swelling or severe itching or hives

1

Form FIST around EpiPen® and PULL OFF BLUE SAFETY RELEASE

2

Place orange end HARD into outer thigh so it 'CLICKS' and HOLD for 10 seconds.

3

Remove EpiPen & massage injection site for 10 seconds.

4

After using EpiPen. MUST seek Medical Attention



### References

[www.nationwidechildrens.org](http://www.nationwidechildrens.org)  
[www.pharmacydirect.co.nz/epipen-adult.html](http://www.pharmacydirect.co.nz/epipen-adult.html)

By: Manjit Gill RN BSN

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### Med Tac Rescue Skill **CLEAN A CUT – SAVE A LIFE**

**1** CLEAN ONLY WITH SOAP AND WATER



**2** APPLY ANTIBIOTIC OINTMENT TO CUT



**3** BANDAGE TO WOUND KEEP CLEAN



**4** IF HURTS MORE ON DAY 2 - SEE DOCTOR



**Clean A Cut – Save A Life:** The pathogens of today are very resistant to antibacterial agents and can progress to life-threatening sepsis. So minor cuts and scrapes must be treated immediately and watched closely. Such wounds need to be cleaned quickly, only with soap and water. Alcohol or hydrogen peroxide will harm healing and they harm the infant cells critical to closing the wound.

## Transportation



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