



GLASTONBURY FIRE DEPARTMENT STANDARD OPERATING GUIDELINES



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REVISION #: 2 REVISED DATE: 03-19-20 EFFECTIVE DATE: 03-19-20
CATEGORY: EMERGENCY OPERATIONS - GENERAL
SUB-CATEGORY: DEPARTMENT DIRECTIVE
SUBJECT: CLEANING OF SCBA – AFTER USE
RELATED GUIDELINES: FDO-113; FDO-114; FDO-116

Section I – Introduction

A. Objective

To assure proper cleaning and/or decontamination of breathing apparatus prior to its being placed in service after use.

B. Applicability

This guideline applies after an SCBA has been used and is to be cleaned prior to placing the SCBA back into service.

C. References

Town of Manchester Fire-Rescue-EMS – General Operating Guideline
Town of Hebron Fire Department – General Operating Guideline

Section II – Guideline

It shall be mandatory that personnel clean and disinfect his/her assigned breathing apparatus after each *use* and before returning the unit to service.

This shall be done as soon as practically possible after the use.

Actual *use* of the breathing apparatus does not include a service check.

Section III – Disinfecting Solutions

1. Will consist of one ounce of MSA Confidence Plus solution to one gallon of water (1:100 dilution), as recommended by the Center for Disease Control and stored in a one-gallon container labeled MSA Confidence Plus solution. This solution is to be used in routine disinfecting procedures and to disinfect SCBA parts contaminated with Blood or Airborne substances.

2. **NEVER INCREASE THE CONCENTRATION OF MSA CONFIDENCE PLUS IN THE DILUTION BEYOND THE RECOMMENDED AMOUNT.** Stronger amounts of the solution will prematurely deteriorate rubber and severely corrode metallic parts. Both solution concentration and duration of immersion must be strictly adhered to.
3. Certain cleaning and disinfecting agents such as quaternary ammonium compounds (Ammonium Chlorides) found in glass cleaner, will cause damage, deterioration, or accelerated aging to parts of the SCBA. MSA Confidence Plus is to be the Department's recommended cleaning and disinfectant solution.
4. Wear goggles to protect eyes, and rubber gloves to protect the hands when preparing or using MSA Confidence Plus solution.

Section IV -- Gross Decontamination

1. Contaminated SCBA's or components that can't be cleaned or disinfected due to blood or other body fluids shall:
 - A. Be placed in a double sealed clear plastic bag or red Bio-Hazard bag;
 - B. A tag shall be attached to the bag noting details of the incident including known and suspected contaminants;
 - C. Be placed on the apparatus in an appropriate location to preserve the integrity of the bag, and shall be transported back to the fire station;
 - D. At the fire station, the bag shall be placed in the station's red Haz-Mat container.
 - E. Notification to a Chief Officer that an SCBA(s) have been placed in the red Haz-Mat container.

Section V -- Face Mask Disinfecting Procedure

1. When cleaning SCBA parts, use household strength soap or detergent mixed with warm water. Use of strong industrial strength cleansers, abrasive soap pads or brushes is damaging and not recommended.
2. Never mix disinfectant or cleaning solutions, or their respective cloths and sponges. Remove face piece from regulator assembly. Remove voice amplifier.
3. Put on goggles and rubber gloves to protect eyes and hands from MSA Confidence Plus solution.
4. Mist face piece inside and out with the MSA Confidence Plus solution and let stand on the surface for a minimum of 10 minutes.
5. After 10 minutes thoroughly rinse under cold running water, wiping lens with a soft cloth.
6. Nose cup is designed to be an integral part of the face piece and does not need to be disassembled for cleaning and disinfecting.
7. In the event the nose cup is removed for cleaning or inspection, make certain it is reassembled behind the chin pocket of face seal and properly seated between the flanges of the voice emitter ducts.

8. Shake off remaining water droplets from face piece. The face piece shall be dried; drying shall not be done in direct sunlight or in high heat.
9. Clean remaining SCBA parts of dirt and debris with damp sponge, soft brush, and running water.
10. Areas where SCBAs are stored should also be kept thoroughly clean of dust and dirt.
11. Place the Kevlar head net inside of the face piece lens. In order to achieve a proper face piece seal when donning the SCBA, Kevlar head nets shall be stored on the inside of the face piece. This will prevent the head net straps from entangling with the thumb buckles.

Section VI – Regulator Disinfecting Procedure

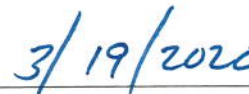
1. Supplies needed: MSA Confidence Plus in a spray bottle; Drinking (potable) water - running or in a spray bottle.
2. Remove the breathing regulator from the face piece by rotating the regulator 1/4 turn clockwise.
3. Remove any obvious dirt from the external surfaces of the regulator using running water with a sponge or soft cloth.
4. Inspect the inside of the regulator assembly through the regulator opening. If excessive dirt or soil is present, return the entire SCBA with a completed, detailed description noting reason to the Company SCBA Technician. Do not insert any foreign objects into the opening.
5. Depress the manual shut-off, close the purge knob by turning fully clockwise and spray a minimum of 3 full pumps of MSA Confidence Plus into the regulator opening. Make sure to also wet the immediate area around the opening. Swirl to completely cover internal components. Turn regulator opening face down and shake excess liquid out. Allow for 10 minutes of contact time to disinfect, and dry.
6. Shake excess MSA Confidence Plus solution out of regulator. Completely air-dry the regulator before use. Perform regulator check by opening the purge valve and observe the air flow from the regulator spray bar. Droplets of water indicate the regulator is not dry. If this occurs, repeat drying procedure and regulator check.
7. **Note: Under no circumstances should the face of the regulator be banged against a hard surface to expedite the removal of water. It may damage the spray bar ports or crack the exterior surface of the regulator. Shaking and opening the purge valve is the only acceptable way to remove water.**

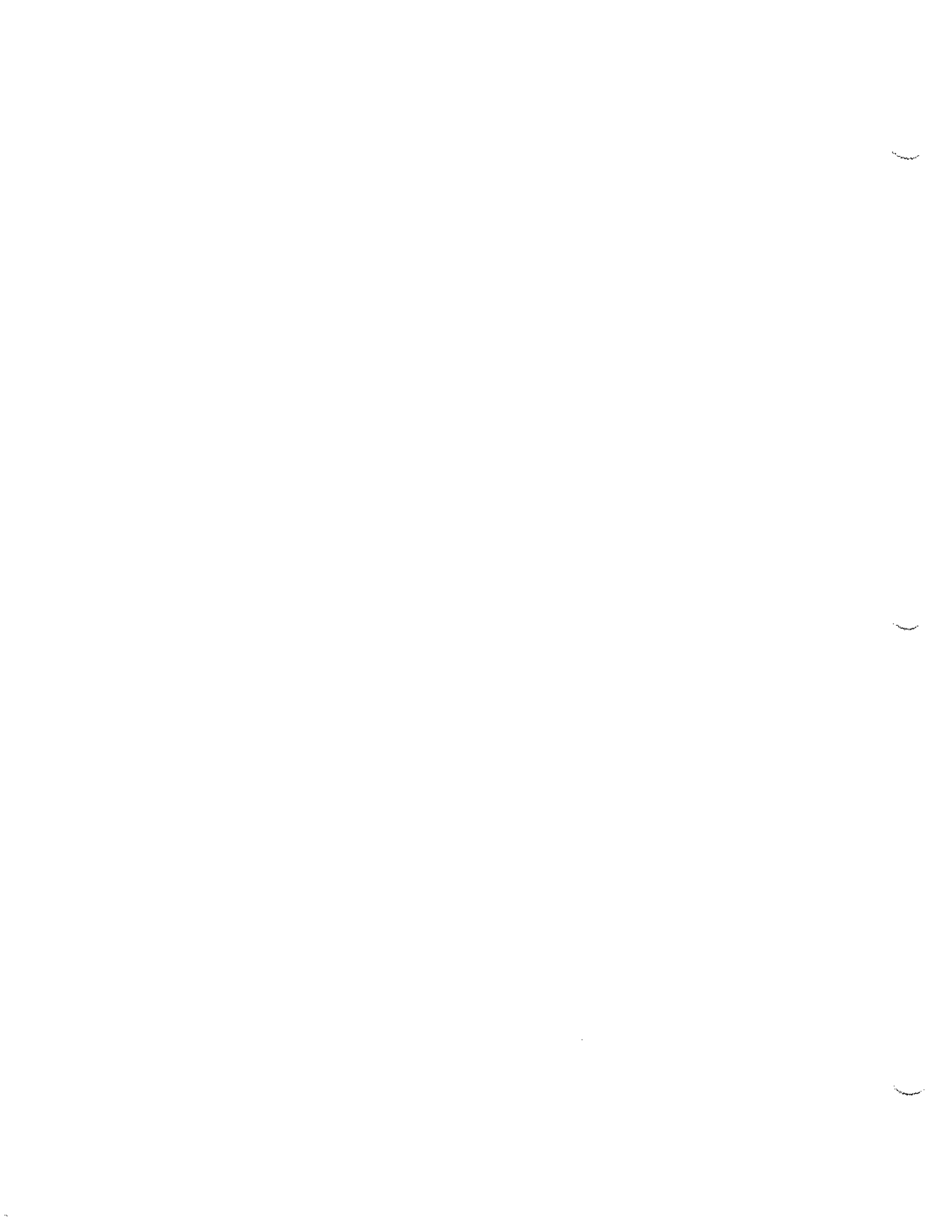
Section VII - Approval

Fire Chief



Date of Approval:





MSA Novel Coronavirus Disease (COVID-19) Brief



Issue Date: March 5, 2020

Guidance on the novel Coronavirus (COVID-19) is available from national and international organizations, such as the United States Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), the World Health Organization (WHO), the European Centre for Disease Prevention and Control (ECDC), and/or your local health authority. The purpose of this bulletin is to provide a summary of key information from these authorities on this viral-related disease, as well as some recommendations on potential personal protective equipment (PPE) that may be suitable for use when working in an environment where COVID-19 or individuals infected with the virus may be present based on guidance from these authorities. This bulletin is NOT a substitute for the detailed information provided about the disease or any related topics by these organizations and is based on the information available as of the issue date of this bulletin. For the most up-to-date information, as well as actions needed to prevent, control and manage contact with COVID-19, you should regularly consult one of these authorities:

US CDC	https://www.cdc.gov/coronavirus/index.html
US NIH	https://www.nih.gov/news-events/news-releases/nih-officials-discuss-novel-coronavirus-recently-emerged-china
WHO	https://www.who.int/health-topics/coronavirus
ECDC	https://www.ecdc.europa.eu/en/coronavirus

What is the Novel Coronavirus (COVID-19)?

The 2019 Novel Coronavirus, or COVID-19, is a new respiratory virus first identified in Wuhan, Hubei Province, China. Since that time, it has been reported in other regions of the world. Public health officials are closely monitoring the virus and we encourage you to visit the websites listed above for the latest information and advice.

How is COVID-19 Transmitted?

While animals are the source of the virus, human-to-human transmission has been demonstrated. Although there is not enough epidemiological information to determine how easily and sustainably this virus is spreading between individuals, it is believed to be transmitted primarily via respiratory droplets that people sneeze, cough, or exhale. These droplets are subsequently inspired into the mouths or noses of people who are nearby or possibly be inhaled into the lungs. According to the CDC, at this time it is unclear if a person can be exposed to the COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes.

According to the CDC, the incubation period for COVID-19 (i.e. the time between exposure to the virus and onset of symptoms) is currently estimated at between two and 14 days. While people are mostly infectious when they exhibit (flu-like) symptoms, there are indications that some may be able to transmit the virus without presenting any symptoms (asymptomatic) or before the symptoms appear.

There is more to learn about the transmissibility, severity, and other features associated with COVID-19, and investigations are ongoing.

Who is at Risk?

The level of risk to individuals is dependent upon exposure. Those at higher risk of infection include Healthcare Professionals (HCP) and others coming in close contact with infected individuals.

How Can I Protect Myself, and Prevention Transmission?

According to the CDC, currently there is no vaccine to prevent COVID-19 infection. However, exposure to the virus can be controlled/minimized through use of protective measures where contact with the virus could occur. When the protective measures recommended by the CDC or other authorities includes the use of respirators and/or eye and face protection, those devices must carry approval by a government agency. If the equipment is not disposable, it must be sterilized properly before reuse.

It is recommended that, at a minimum, the following preventive actions be followed to prevent or minimize the spread of respiratory viruses.

- Wash your hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer if soap and water are not available.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick, have a fever or cough.
- Cover your cough or sneeze with a tissue. Afterwards, properly dispose of the tissue and immediately wash your hands.
- Clean and disinfect touched objects and surfaces.
- When visiting live markets in areas currently experiencing cases of novel coronavirus, avoid direct unprotected contact with live animals and surfaces in contact with animals.

What PPE Should I Use?

The CDC does not currently recommend the use of face masks among the general public in the United States, stating that "While limited person-to-person spread among close contacts has been detected, this virus is not currently spreading in the community in the United States". The CDC however, has established "Interim Infection Prevention and Control Recommendations for Patients with Confirmed 2019 Novel Coronavirus (COVID-19) or Patients Under Investigation for COVID-19 in Healthcare Settings".

Employers should select the appropriate PPE (as listed below), and provide it to Health Care Professionals in accordance with OSHA's PPE standards (29 CFR 1910 Subpart I).

- Fluid resistant, impermeable, disposable gloves
- Fluid resistant, impermeable, disposable gowns
- Eye Protection such as goggles or a disposable face shield that covers the front and sides of the face. Reusable eye protection must be cleaned, disinfected and maintained in accordance with the manufacturer's instructions.
- Facemask which has been fit-tested and provides protection that is at least as protective as a fit-tested NIOSH-certified N95 filtering facepiece respirator. If reusable respirators (e.g., powered air purifying respirator/PAPR) are used, they must be cleaned, disinfected and maintained in accordance with the manufacturer's instructions. Respirator use must be in the context of a complete respiratory protection program in accordance with Occupational Safety and Health Administration (OSHA) Respiratory Protection standard (29 CFR 1910.134).

MSA offers both eye/face and respiratory protection that meet the CDC guidance. Be sure to follow the CDC or other authority's proper PPE donning and doffing instructions, as the sequence followed can help prevent the spread of infection. Additionally, ensure proper disposal or cleaning of any PPE after each use in accordance with manufacturer's instructions.

For COVID-19, CDC recommends the use of cleaning products with EPA-approved emerging viral pathogens claims. CDC refers to List N on the EPA website for EPA-registered disinfectants that meet this guidance. MSA's Confidence Plus 2 cleaner is included on List N based on its EPA Reg. No., which begins with 47371-130. The active ingredients in Confidence Plus 2 are quaternary ammonium compounds, which are compatible with MSA's products. Alternate cleaners that meet the CDC guidance also may be used if they have quaternary ammonium compounds as their active ingredients and an EPA Reg. No. starting with 47371-130. Other cleaning products or disinfection methods may be harmful to MSA's products.

Keep in mind, as well, that while PPE can prevent infected material from coming in contact with mucous membranes and exposed, open skin, it is essential that all relevant infection prevention and control (IPC) protocols, and our manufacturer's user instructions are followed when using any of our PPE described in the following.

Goggles - Non-vented, anti-fog (AF) coated goggles can be worn to

meet the CDC guidance. Vents in goggles can provide an exposure path. The AF on non-vented goggles will help reduce the likelihood of fogging during potential exposure work. Be sure the goggles are tightly sealed to the face. Goggles exposed to COVID-19 should be disposed of properly once removed.

Faceshields - While goggles reduce the likelihood of splashes to the eyes, they do not protect other mucous membranes (nose, mouth) that could be exposed; nor do they protect skin. To help reduce the likelihood of splash on these areas, use a faceshield designed for splash protection, such as a polycarbonate visor. DO NOT use a mesh visor as these do not provide splash protection. Faceshields do not take the place of respirators and goggles. Be sure to wear an appropriate respirator and goggles under any faceshield. Faceshields exposed to COVID-19 Virus should be disposed of properly once removed.

Respirators - Government approved particulate respirators can be used to meet the CDC guidance; recommendations from CDC and other authorities include US NIOSH approved N95, European CE certified filtering facepieces EN149 FFP2 or EN149 FFP3, particulate filter EN143 P2 or P3, in combination with full- or half-mask, or any higher-level respiratory protection, such as power-assisted devices. Consult the information from your local authority to determine the specific recommendations for your situation.

When making a personal decision to use a government approved respirator to help reduce exposure to dispersoids, aerosols or particulates containing the COVID-19 virus, the user needs to understand that:

1. Reducing exposure to COVID-19 does not mean that the risk of exposure, infections and illness has been eliminated. Respirators will not prevent you from becoming infected by the virus in other ways such as by touching your mouth, nose or eyes with contaminated hands or objects, or by other means mentioned above.
2. In order for a respirator to be most effective, you must properly wear the respirator during the entire time you're exposed. Removing the respirator to eat, drink, talk or smoke while you are in a contaminated area will increase the likelihood that you may be exposed to virus particles or droplets.
3. Fit of the respirator to your face is very important to minimize the risk of virus particles or droplets from getting inside your lungs. Particles or droplets can enter your respirator through any leaks between the respirator and your face. Hair from beards and mustaches or anything that prevents the respirator from directly touching your skin can prevent a proper seal. Following the manufacturer's instructions to assure a proper fit is essential. Contact the manufacturer with questions about proper fit. Without a proper fit, the air you breathe may go around the mask rather than through the respirator filter.
4. Respirators are not intended for use by children or by individuals

with a medical condition that might prevent the use of a respirator, such as asthma, emphysema or a history of heart disease. If you have such a condition, consult your health care provider before use.

5. Properly dispose of respirators and filters/cartridges after they are used. Once used, they should not be shared with others.
6. Be sure to read and follow all instructions on the fit, use and warnings provided by the manufacturer before using any respirator.
7. Please be cautious of claims being made by websites and other

sources regarding the use of respirators for protection against COVID-19. We recommend that you reference your government or appropriate health agencies. For additional information or help selecting MSA products, please contact your local MSA affiliate.

Resources Used in the Development of this Brief

CDC, Coronavirus - <https://www.cdc.gov/coronavirus/index.html>

CDC, Coronavirus Disease 2019 (COVID-19), Situation Summary — <https://www.cdc.gov/coronavirus/2019-ncov/summary.html>

CDC, Coronavirus Disease 2019 (COVID-19), Prevention & Treatment — <https://www.cdc.gov/coronavirus/about/prevention.html>

CDC, "Interim Infection Prevention and Control Recommendations for Patients with Confirmed Coronavirus Disease 2019 (COVID-19) or Persons Under Investigation for COVID-19 in Healthcare Settings" —

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control.html>

NIH, "Coronaviruses: An Overview of Their Replication and Pathogenesis" — <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4369385/>

NIH, A Novel Coronavirus from Patients with Pneumonia in China, 2019 — <https://www.ncbi.nlm.nih.gov/pubmed/31978945>

NIH, Coronavirus Disease 2019 (COVID-19) — <https://www.nih.gov/health-information/coronavirus>

OSHA, COVID-19 —

<https://www.osha.gov/SLTC/novel-coronavirus/index.html> | WHO, Coronavirus - <https://www.who.int/health-topics/coronavirus>

WHO, Coronavirus disease (COVID-19) outbreak — <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

European Center for Disease Control and Prevention (ECDC), COVID-19 — <https://www.ecdc.europa.eu/en/novel-coronavirus-china>

List N: EPA's Registered Antimicrobial Products for Use Against Novel Coronavirus SARS-CoV-2, the Cause of COVID-19

https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf

Note: This Bulletin contains only a general description of the products shown. While product uses and performance capabilities are generally described, the products shall not, under any circumstances, be used by untrained or unqualified individuals. The products shall not be used until the product instructions/user manual, which contains detailed information concerning the proper use and care of the products, including any warnings or cautions, have been thoroughly read and understood. Specifications are subject to change without prior notice.

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