



The Commonwealth of Massachusetts  
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Department of Public Health  
Office of Emergency Medical Services  
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**ADVISORY 20-05-01**

**TO:** MA Accredited EMT Training Institutions, Licensed Ambulance Services and Chief Examiners  
**CC:** EMCAB Members  
**FROM:** W. Scott Cluett III, Director, OEMS  
**DATE:** May 23, 2020  
**RE:** Partial Lifting of In-Person EMS Course and Psychomotor Exam Suspensions

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The Massachusetts Department of Public Health (Department) continues to work with federal, state and local partners on the outbreak of novel Coronavirus 2019 (COVID-19), caused by the virus SARS-CoV-2, and we continue to appreciate the essential role you have in responding to this evolving situation.

In response to the Governor's order on social distancing and restricting gatherings, and the Governor's order on essential services, to include "instructors supporting academies or training facilities and courses or assessments for the purpose of graduating or certifying, during the duration of the state of emergency, healthcare personnel, cadets, and other workers who are critical to the ongoing response to COVID-19," effective immediately, the Department is rescinding Advisory 20-03-04, which suspended in-person EMS courses and psychomotor exams, and issuing this new Advisory.

EMS Training: Effective immediately, Department-accredited EMS training institutions (ATIs) may operate EMT and Paramedic **courses** with in-person components, as long as they can do so in accordance with the requirements below, which are based on current Department and U.S. Centers for Disease Control (CDC) Social Distancing guidelines, until the Governor's declared state of emergency is terminated. Clinical and field internship components of such courses remain suspended.

ATIs wishing to operate during the declared state of emergency must comply with the following requirements:

- Individuals who are particularly vulnerable to COVID-19 according to the CDC (e.g., due to age or underlying conditions) are encouraged to stay home and not participate in training at ATI sites.
- All didactic content shall be delivered using distributive, or virtual instructor led methods, to decrease the time students are in contact with others.
- ATIs must implement a symptom-monitoring program, to include:
  - Before entering the facility daily, the ATI must document symptom checks for all instructors, students and staff on site, which should include queries about

exposure risk to COVID-19 patients, presence of symptoms, and presence or absence of fever.

- Use CDC guidance for risk assessment for healthcare providers, available at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html>.
- If any instructors, students or staff present with a fever, or any symptoms, they must be excluded from the premises.
- ATIs must provide education to all instructors, students and staff on the donning, use, and doffing of protective personal equipment (PPE).
- ATIs must limit groups of students and staff within a room to no more than 10 individuals total, and distance individuals at least 6 feet apart, as training duties permit.
- All instructors, students and staff must wash their hands immediately upon entering the ATI, upon donning or doffing PPE, and frequently throughout their stay. Alcohol-based hand sanitizers with at least 60% alcohol may be used when handwashing facilities are not available
- All instructors, students and staff must wear surgical masks at all times when at the ATI site.
- All students must wear non-latex procedure gloves at all times when performing psychomotor skills, including patient assessment.
- Institutions must thoroughly decontaminate all spaces and equipment used on a regular basis (at least daily), using EPA-registered agents.

ATIs should source their PPE in a way so as not to reduce the available stock for health care entities, including ambulance services. This may include using reusable gowns that are washed between uses.

On an emergency basis, ATIs and instructors with courses that were in progress prior to the suspension under Advisory 20-03-04 may transition the didactic content to online or Virtual Instructor Led delivery, subject to notification to the Department. ATIs that choose to suspend their courses and restart after the emergency declaration is lifted shall ensure students continue to meet cognitive and psychomotor criteria for course completion when courses resume.

Psychomotor Exams: Effective immediately, in accordance with the requirements below, and subject to approval from the Department, psychomotor examinations may be performed, and may be scheduled to prioritize candidates who were scheduled to test at suspended exams in March and April.

ATIs that sponsor and conduct psychomotor examinations during the declared state of emergency (exam sponsors) must comply with the following requirements:

- Individuals who are particularly vulnerable to COVID-19 according to the CDC (e.g., due to age or underlying conditions) are encouraged to stay home and not participate in EMS psychomotor exams.
- Exam sponsors must review current Department and CDC guidelines for social distancing, and develop a written plan to be submitted to the assigned Chief Examiner and the Department for approval, prior to exam confirmation. This plan must detail how

the exam sponsor will meet all the requirements of this Advisory, including compliance with symptom checks, PPE (including sourcing and training on use), availability of handwashing, site layout with room sizes and locations, and documentation of contact tracing.

- Exam location must allow for multiple large rooms for student gathering, stations and examiner holding, to allow for social distancing spacing of all participants in accordance with Department and CDC guidance. The exam location must accommodate limiting groups of candidates and examination staff within a room to no more than 10 individuals total, and distancing individuals at least 6 feet apart, as examination duties permit. Exam sponsors must work with their assigned Chief Examiner, to review site requirements and gain the Chief Examiner's approval of the safe suitability of the site for its use.
- Exam sponsors must implement a symptom-monitoring program, to include:
  - Before entering the facility daily, the sponsor must document symptom checks for all Examiners, candidates and staff on site, which should include queries about exposure risk to COVID-19 patients, presence of symptoms, and presence or absence of fever.
  - Use CDC guidance for risk assessment for healthcare providers, available at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>.
  - If any Examiners, candidates or staff present with a fever, or any symptoms, they must be excluded from the premises.
- Exam sponsors must provide education to all examiners, candidates and staff on the donning, use, and doffing of protective personal equipment (PPE).
- All Examiners, candidates and staff must wash their hands immediately upon entering the exam site, upon donning and doffing any PPE, and frequently throughout their stay.
- All Examiners, candidates and staff must wear surgical masks at all times when at the exam site.
- All candidates must wear non-latex procedure gloves at all times when performing psychomotor skills.
- When performing assessments or skills involving or near mucous membranes (including eyes, nose, mouth, etc.), students must wear eye protection and a gown.
- Exam sponsors must thoroughly decontaminate all spaces and equipment used on a regular basis (at least daily), using EPA-registered agents.

While Chief Examiners may make modifications to the psychomotor examination format, by staggering candidates or decreasing the number of candidates at a given time, the substance of the exam, including station content and evaluation criteria, must remain in accordance with current Department standards.

Thank you all for your patience and flexibility. For any questions, please contact Susan Lewis, NRP/IC, Deputy Director, at [Susan.K.Lewis@mass.gov](mailto:Susan.K.Lewis@mass.gov).