DELAWARE COUNTY DEPARTMENT OF EMERGENCY SERVICES



MULTIPLE CASUALTY INCIDENT PLAN FOR EMS

FEBRUARY 2012

Table of Contents

CHON		PAGE
I.	Introduction	3
II.	Purpose	3
III.	Declaration of a Multiple Casualty Incident	3
IV.	Establishing Unified Command	4
V.	Group Supervisor Roles and Responsibilities	5
VI.	Incident Reporting	6
VII.	Fire Personnel	7
VIII.	Other Positions	7
IX.	Dispatch Procedure	8
PENDI	X	PAGE
Tı	ransport/Communications Patient Status Sheet	9
	riage Group Worksheet	10
	reatment Group Worksheet	11
Le	evel 1 MCI Organizational Chart	12
Le	evel 2 MCI Organizational Chart	13
Le	evel 3 MCI Organizational Chart	14

DELAWARE COUNTY EMERGENCY SERVICES

Multiple Casualty Incident Plan for EMS

I. INTRODUCTION

The role of Delaware County Emergency Medical Services in the event of a Multiple Casualty Incident (MCI) is essential. The responders to such an incident are drawn from volunteer and paid ambulance service, fire departments, police agencies and various other organizations. This plan is to be used as a guide for all responding EMS agencies. All responders must work together, using the Incident Command System (ICS), to make this plan effective.

II. PURPOSE

The purpose of this plan is to provide responding agencies with an orderly and efficient guideline that uses the ICS to manage incidents which would tax our normal day-to-day routine. Use of the ICS must be practiced on a frequent basis in order to develop command and organizational skills. Accordingly, this plan recommends the use of the ICS at daily EMS incidents. In addition, use of the ICS facilitates interagency cooperation by unifying command at all incidents.

III. DECLARATION OF A MULTIPLE CASUALTY INCIDENT

- A. An MCI shall be declared in all cases where three or more people are ill or injured and a second ambulance will be required.
- B. MCI's shall be broken down in the following levels:
 - 1. 3 to 8 patients = Level 1 MCI
 - 2. 9 to 20 patients = Level 2 MCI
 - 3. 20+ patients = Level 3 MCI
- C. In addition to command activities outlined in Section IV, the following actions should be taken by the EMS Branch:
 - 3 to 8 patients (Level 1 MCI)
 Declare/Confirm a MCI/number of patients
 Transmit to 911 PSAP the level MCI and location
 Request number of units needed / mutual aid
 Arrange for stand-by coverage
 Roll-call the area hospitals for bed availability**
 Designate Group Supervisors**

- 2. 9 20 patients (Level 2 MCI)
 Declare/Confirm a MCI/number of patients
 Transmit to 911 PSAP the level MCI and location
 Request that 911 PSAP roll-call the area hospitals for bed availability
 Arrange for stand-by coverage
 Consider setting up a rehab sector
 Designate Group Supervisors**
- 3. 20+ patients (Level 3 MCI)
 Declare/Confirm a MCI/number of patients
 Transmit to 911 PSAP the level MCI and location
 Designate Group Supervisors
 Arrange for stand-by coverage
 Consider setting up a rehab sector
 Request a mass transport vehicle (i.e. bus) to the scene for transportation of P-3 patients

** = As necessary

IV. ESTABLISHING UNIFIED COMMAND

- A. EMS Branch shall be established by the crew leader in the first arriving EMS unit in all of the following circumstances:
 - 1. Personal injury automobile accidents
 - 2. Fire / Hazmat calls
 - 3. Search & Rescue calls / Drownings
 - 4. Multiple casualty incidents
- B. EMS Branch shall be unified with Fire, Police, and other agencies involved as soon as possible after scene arrival.
- C. The first arriving unit shall do the following:
 - i. Establish EMS Branch and EMS Director
 - ii. Provide a brief initial size up to 911 PSAP
 - iii. Declare / Confirm appropriate level MCI
 - iv. Advise inbound units where to stage their unit
 - v. Advise all EMS units to switch to common frequency (e.g. 155.715)
- D. It shall be the role of EMS Branch to direct all aspects of EMS operations at the scene in cooperation with Fire and Police Branch Directors.

- E. The EMS Branch Director shall remain in command of the EMS Branch unless it is transferred to another fully qualified member of an EMS agency.
- F. EMS Branch shall assume all of the following Group functions for EMS personnel, unless a Group Supervisor is designated to handle that function. Once a function is delegated, the person responsible shall wear the appropriate bib/identification. The following are EMS Group functions:
 - 1. Triage
 - 2. Treatment
 - 3. Transportation

V. GROUP SUPERVISOR ROLES AND RESPONSIBILITIES

A. TRIAGE GROUP SUPERVISOR

RADIO ID = TRIAGE

<u>LOCATION</u> = TRIAGE AREA

- Ensures that all patients receive primary triage using SMART triage method
- 2. Supervises initial patient care at site
- 3. Supervises patient packaging and transportation to a treatment area
- 4. Coordinates EMS activities including equipment and manpower needs within the Triage Group
- 5. Appoints triage and transport (between Groups) Teams (as needed)
- 6. Coordinates patient movement through 2nd stage triage to Treatment or Transportation Groups (may have fire personnel help do this)

B. TREATMENT GROUP SUPERVISOR

<u>RADIO ID</u> = TREATMENT

LOCATION = TREATMENT (PATIENT HOLDING) AREA

- 1. Establishes a treatment area (if requested by EMS Branch)
- 2. Supervises treatment, re-triage and tagging of patients in the treatment area or any area set up to hold patients prior to transport from the scene
- 3. Coordinates the activities of all EMS Personnel assigned to the Group and may organize Treatment Teams if necessary
- 4. Oversees the provision of patient care by all assigned providers
- 5. Determines need for and requests manpower and equipment
- 6. Coordinates patient evacuation in conjunction with the Transportation Group Supervisor

^{**}Only functions dictated by the size and scope of the event should be delegated or activated by the EMS Branch**

C. TRANSPORTATION/COMMUNICATIONS GROUP SUPERVISOR

RADIO ID = TRANSPORTATION

LOCATION = TRANSPORTATION (PATIENT LOADING) AREA

- Establishes and maintains patient loading area and ensures such area provides adequate entry and egress routes for EMS units as well as safe loading area to accommodate stretchers
- 2. Supervises patient evacuation in conjunction with Treatment Group Supervisor
- 3. Determines and monitors area hospital capabilities
- 4. Coordinates helicopter evacuation in conjunction with Air Transport Branch and establishes Helispots as needed
- 5. **Prior to any patient leaving the scene**, the person functioning as Transportation Group Supervisor shall keep part of their MCI tag and log the following information:
 - a. tag#
 - b. priority
 - c. patients name
 - d. unit transporting
 - e. time out
 - f. destination / disposition
- 6. May appoint Medical Communications Team and other support staff (as needed)
- 7. Ensures that hospitals are notified of incoming patients with pertinent information from the triage tags
- 8. Instructs units not to encode hospitals with patient reports

VI. INCIDENT REPORTING

A. AMBULANCE CREWS

 On all level incidents, ambulance crews should complete a PCR for each patient transport and keep a copy of the respective MCI tag

VII. FIRE PERSONNEL

- A. EMS Personnel shall work in a unified command structure with on scene Fire Services to provide the most expedient care possible to all patients
- B. Fire Services shall be responsible for the following on scene tasks.

- 1. Fire Suppression
- 2. Extrication of patients
- 3. Assist with spinal immobilization of patients for transport to treatment sector/hospital
- 4. Assist with moving patients to treatment area/ambulances

While serving in EMS Branch (i.e. assisting in treatment area), Fire personnel shall work under the direction of the appropriate Group Supervisor

VIII. OTHER POSITIONS (staffed as needed)

A. STAGING

- The Staging Manager will either fall as a Command Staff
 Assistant or directly under the Operations Chief, depending on the size of the MCI
- 2. The Staging Manager will work closely with Command Staff and the Transportation Group Supervisor to ensure safe and adequate entry and egress routes for all apparatus
- 3. The Staging Manager will keep a log of all arriving units (esp. EMS) and when they are mobilized and demobilized

B. REHABILITATION (Rehab)

- The Rehab Team Leader will fall under the Logistics Section Chief
- 2. The Rehab Team Leader is responsible for the physical well being of all responders involved in the MCI and arranges for appropriate food/beverage to be brought to the scene in conjunction with the Logistics Section Chief
- 3. The Rehab Team Leader also ensures any firemen involved in extended operations has their vital signs and general condition monitored in accordance with Regional Protocols
- 4. Ensures Rehab is set up away from the actual incident

IX. DISPATCH PROCEDURE

- A. LEVEL 1 MCI: (3 to 8 patients)
 - 1. Normal dispatch of local agency
 - 2. Utilizing the Home Agencies call down list, dispatch at least one additional ambulance to the scene
 - 3. Make routine notifications (County Coordinators, etc.)
 - 4. Dispatch Mutual Aid as requested by EMS Branch
 - 5. Roll call area hospitals **

- B. LEVEL 2 MCI: (9to 20 patients)
 - 1. Normal dispatch of local agency
 - 2. Utilizing the Home Agency's call down list, dispatch each agency listed for 1 ambulance each to respond to the scene
 - 3. Make routine notifications (County Coordinators, etc.)
 - 4. Dispatch other mutual aid/stand-by assignments as requested by EMS Branch
 - 5. Roll call area hospitals **
- C. LEVEL 3 MCI: (20+ patients)
 - 1. Normal dispatch of local agency
 - 2. Using Home Agency's call down list, dispatch each agency listed for 2 ambulances each to respond to the scene as well as dispatch other nearby agencies the Dispatcher may deem appropriate
 - 3. Make routine notifications (County Coordinators, etc.)
 - 4. Roll-call all area hospitals
 - 5. Dispatch other mutual aid/stand-by assignments as requested by EMS Branch
 - 6. Notify County and Local Chief Executive Officers

** = On the request of Medical Sector

Delaware County Department of Emergency Services EMS Program~

TRANSPORTATION/COMMUNICATIONS

GROUP SUPERVISOR – PATIENT STATUS SHEET						
Incident Location: _				Dat	e:	
Hospitals						
Can Handle						
# Sent						

** Retain Yellow Copy of Patient Triage Tag **

		DATIFNITE NAME	LIMIT TRANS	TIME OUT	HOSDITAL
TAG#	PRIORITY	PATIENTS NAME	UNIT TRANS.	TIME OUT	HOSPITAL

NOTES:

~Delaware County Department of Emergency Services EMS Program~

TRIAGE GROUP WORKSHEET

Supplies:

- Vest / Bib
- Radio
- Triage Tags / Ribbons
- Lighting
- Marking Pens

CHECK	ITEM		
	Ensure Safety		
	Coordinate Triage with EMS Branch		
	Test Communications		
	Triage All Patients		
	Establish Additional Triage Areas as needed		
	Direct Patient Flow to Transport		
	Coordinate with Treatment Group Supervisor		
	Appoint Support Personnel as needed		

~Delaware County Department of Emergency Services EMS Program~

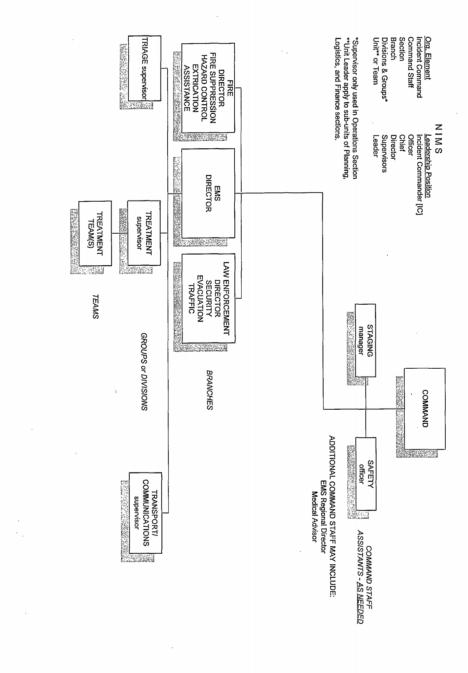
TREATMENT GROUP WORKSHEET

Supplies:

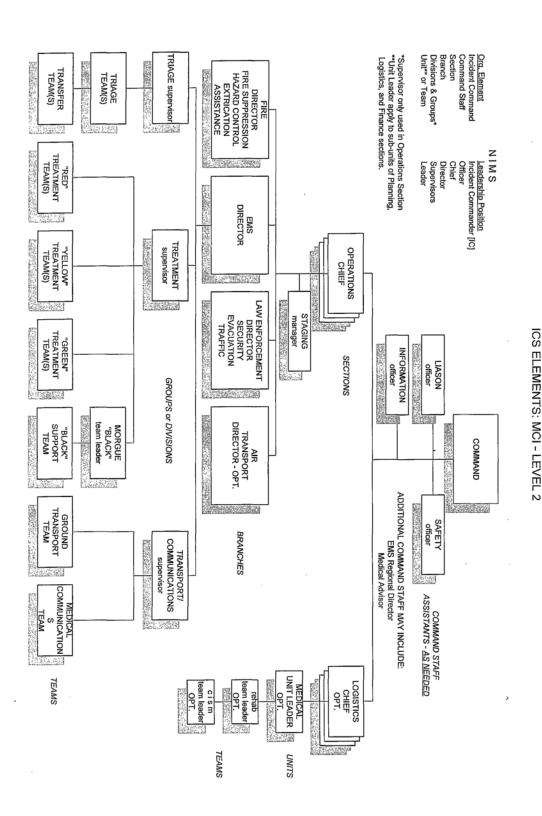
- Vest / Bib
- Medical Supplies
- Treatment Flags
- Scene Ribbon
- Lighting
- Marking Pens
- Patient Status Sheets

CHECK	ITEM
	Ensure Safety
	Coordinate Treatment with EMS Branch
	Test Communications
	Mark Treatment Area (Red, Yellow, Green)
	Complete Patient Status Sheets
	Direct Patient Status Sheets
	Establish / Coordinate Patient Flow to Transport
	Appoint Support Personnel as needed





ICS ELEMENTS: MCI - LEVEL 1



ICS ELEMENTS: MCI - LEVEL 3 or "EXTENDED"

