Multi-Casualty Incident Plan

Attachment – A

ICS Positions

Prepared by:

Orange County Fire Chiefs' Association

Orange County Fire Services

Operational Plan

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INCIDENT PLAN**

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Revised: January 2019

INCIDENT COMMANDER: The Incident Commander (IC) is responsible for the overall management of the incident. On most incidents, a single Incident Commander carries out the command activity; however, Unified Command may be appropriate.

- Assess the situation and/or obtain a briefing from the prior Incident Commander.
- Determine incident objectives and strategy.
- Establish the immediate priorities.
- Establish a command post.
- Consider the need for Unified Command.
- Establish an appropriate organization.

MEDICAL BRANCH DIRECTOR: The Medical Branch Director is responsible for the implementation of the Incident Action Plan within the Medical Branch. The Branch Director reports to the Operations Section Chief and supervises the Medical Group(s) and the Patient Transportation Function (Unit or Group). Patient Transportation may be upgraded from a Unit to a Group based on the size and complexity of the incident.

- Review Group assignments for effectiveness of current operational and modify as needed.
- Provide input to Operations Section Chief for the IAP.
- Supervise Branch activities and confer with Safety Officer.
- Report to Operations Section Chief on Branch activities.

MEDICAL GROUP SUPERVISOR: The Medical Group Supervisor reports to the Medical Branch Director and supervises the Triage Unit Leader, Treatment Unit Leader, Patient Transportation Unit Leader, and Medical Supply Coordinator. The Medical Group Supervisor establishes command and controls the activities within a Medical Group.

- Establish Medical Group with assigned personnel and request additional personnel and resources sufficient to handle the magnitude of the incident.
- Designate Unit Leader and Treatment area locations as appropriate.
- Isolate Morgue and Minor Treatment areas from Immediate and Delayed Treatment areas.
- Request law enforcement for security, traffic control, and access for the Medical Group areas.
- Determine the amount and types of additional medical resources needed.
- Ensure activation or notification of appropriate hospital or other coordinating facility/agency.
- Coordinate with assisting agencies.
- Ensure adequate patient decontamination and proper notifications are made.
- Consider responder rehabilitation.

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TRIAGE UNIT LEADER: The Triage Unit Leader (MCTL) reports to the Medical Group Supervisor and supervises triage personnel/litter bearer and the Morgue Manager. The Triage Unit Leader assumes responsibility for proving triage management and movement of patients from the Triage Area. When triage has been completed and all the patients have been moved to the treatment areas, the Triage Unit Leader may be reassigned as needed.

- Develop organizational sufficient to handle assignments.
- Inform Medical Group Supervisor of resource needs.
- Implement triage process
- Coordinate movement of patients from the Triage Area to the appropriate Treatment Area.
- Ensure adequate patient decontamination and proper notifications are made (if applicable).
- Assign resources as triage personnel/litter bearers.
- Give periodic status reports to Medical Group Supervisor.
- Maintain security and control of the Triage Area.
- Establish a temporary Morgue Area in coordination with law enforcement/Coroner if necessary.

PATIENT TRANSPORATION UNIT LEADER: The Patient Transportation Unit Leader (PTUL) is responsible for the coordination of patient transportation and maintenance of records relating to the patient's identification, condition, and destination. The Patient Transportation function may be initially established as a Unit and upgraded to a Group based on the incident size and complexity.

- Ensure the establishment of communications with the appropriate hospital or other coordinating facility/agency.
- Designate Ambulance Staging Area(s).
- Direct the off-incident transportation of patients as determined by the Medical Communications Coordinator.
- Ensure that patient information and destinations are recorded.
- Establish communications with the Ground Ambulance Coordinator, the Air Ambulance Coordinator, and the Helispot Manager.
- Request additional Medical transportation resources as required.

MEDICAL COMMUNICATIONS COORDINATOR: The Medical Communications Coordinator (Med Com) reports to the Patient Transportation Unit Leader and establishes communications with the appropriate hospital or other coordinating facility/agency to maintain status of available hospital beds to ensure proper patient destination.

- Establish communications with the appropriate hospital or other coordinating facility/agency. Provide pertinent incident information and periodic updates.
- Determine and maintain current status of hospital/medical facility availability and capability.
- Receive basic patient information and condition from Treatment Area Managers and or Patient Loading Coordinator.
- Coordinate patient destination with the appropriate hospital or other coordinating facility/agency.
- Communicate patient ground transportation needs to the Ground Ambulance Coordinator based on requests from the Treatment Area Managers and/or Patient Loading Coordinator.
- Communicate patient air transportation needs to the air Ambulance Coordinator based on requests from the Treatment Area Managers and/or Patient Loading Coordinator.

GROUND AMBULANCE COORDINATOR: The Ground Ambulance Coordinator (GAC) reports to the Patient Transportation Unit Leader, manages the Ambulance Staging Area(s), and dispatches ambulances as requested.

- Establish appropriate staging areas for ambulances.
- Establish routes of travel for ambulances for incidents operations.
- Establish and maintain communications with Air Ambulance Coordinator and the Helispot Manager regarding air transportation assignments.
- Establish and maintain communications with the Medical Communications Coordinator and Patient Loading Coordinator.
- Provide ambulances upon request from the Medical Communications Coordinator.
- Ensure that necessary equipment is available in the ambulance for patient needs during transportation.
- Establish contact with ambulance providers at the scene.
- Request additional ground transportation resources as appropriate.
- Consider the use of alternate transportation resources such as buses or vans based on local policy.
- Provide an inventory of medical supplies available at Ambulance Staging Area for use at the scene.

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TREATMENT UNIT LEADER: The Treatment Unit Leader (MCUL) reports to the Medical Group Supervisor and supervises Treatment Area Managers and the Patient Loading Coordinator. The Treatment Unit Leader assumes responsibility for treatment, preparation for transport, and the movement of patients to loading location(s).

- Develop organization sufficient to handle assignment.
- Direct and supervise Immediate, Delayed, and Minor Treatment Areas and Patient Loading Coordinator.
- Ensure adequate patient decontamination and that proper notifications are made, if appropriate.
- Ensure continued assessment of patients and re-assess/re-locate as necessary throughout Treatment Areas.
- Coordinate movement of patients from Triage Areas to Treatment Areas with Triage Unit Leader.
- Assign incident personnel to be treatment personnel/litter bearers.
- Request sufficient medical caches and supplies including DMSU or support trailers.
- Establish communications and coordination with Patient Transportation Unit Leader.
- Responsible for the movement of patients to ambulance loading areas.

PATIENT LOADING COORDINATOR: The Patient Loading Coordinator reports to the Treatment Unit Leader and is responsible for coordinating with the Patient Transportation Unit Leader (or Group Supervisor if established), the transportation of patients out of the Treatment Areas.

- Establish communications with the Immediate, Delayed, and Minor Treatment Managers.
- Establish communications with the Patient Transportation Unit Leader.
- Verify that patients are prioritized for transportation Unit Leader.
- Advise Medical Communications Coordinator of patient readiness and priority for transport.
- Coordinate transportation of patients with Medical Communications Coordinator.
- Ensure that appropriate patient tracking information is recorded.
- Coordinate ambulance loading with the Treatment Managers and ambulance personnel.

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IMMEDIATE TREATMENT AREA MANAGER: The Immediate Treatment Area Manager (MCIM) reports to the Treatment Unit Leader and is responsible for treatment and re-triage of patients assigned to Immediate Treatment Area.

DELAYED TREATMENT AREA MANAGER: The Delayed Treatment Area Manager (MCDM) reports to the Treatment Unit Leader and is responsible for treatment and re-triage of patients assigned to Delayed Treatment Area.

MINOR TREATMENT AREA MANAGER: The Minor Treatment Area Manager (MCMT) reports to the Treatment Unit Leader and is responsible for treatment and re-triage of patients assigned to Minor Treatment Area.