## EVACUATION, TRIAGE, AND TRANSPORTATION

## SESSION DELIVERABLES

Overview.

History and Background.

ICS Process Position and Role's.

Strategy and Tactical Priorities

All Hazard Response Plan





#### **EVENT TRIGGER**

- Vehicle Accident
- Hazmat
- Poisoning
- Environmental
- Machinery
- Fire
- Collapse
- Explosion
- Acts of violence



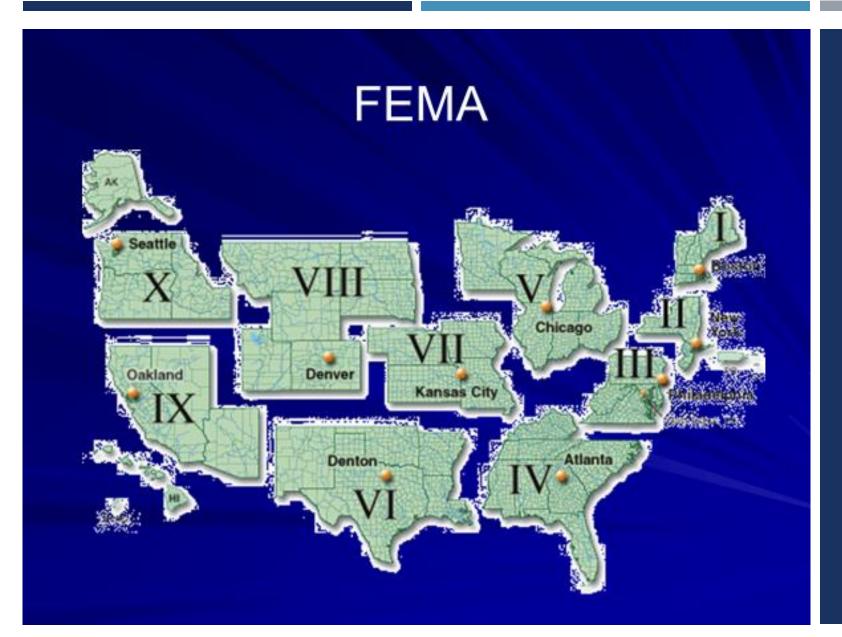


## HISTORY AND BACKGROUND

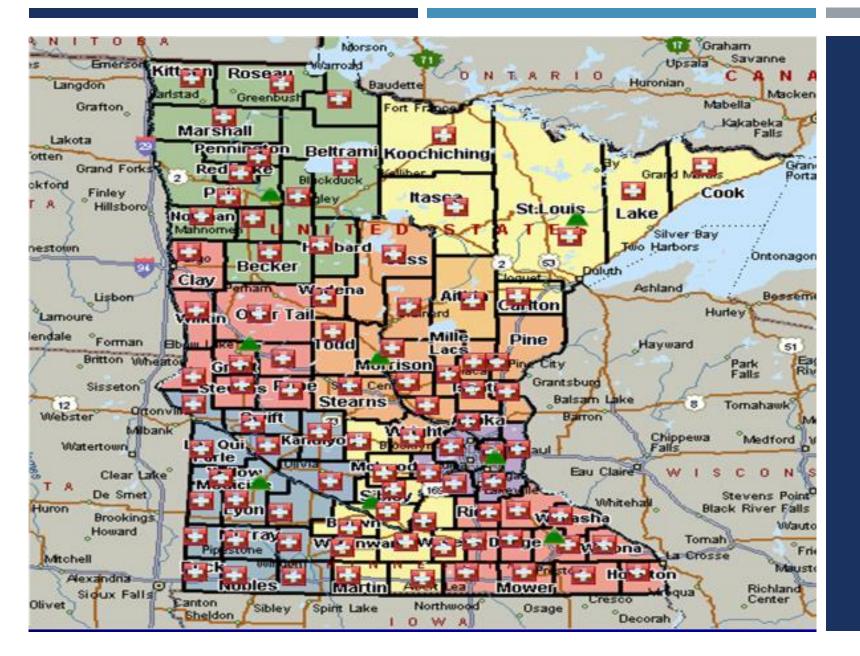
- 2000, LTC Facility Fire Emergent.
- 2005, Hurricanes Rita and Katrina Deployment— Catastrophic.
- 2007, 35W Bridge Collapse Emergent.
- 2009, Red River Flooding LTC Evacuation Urgent.
- 2012, Care Facility Fire Emergent/Urgent.
- 2017, Metro Hospital Compact Training / Exercises.
- 2019, Waterville Flood Urgent.
- 2019, Metro Hospital Flood Impact Evacuation Urgent.
- 2020, Civil Unrest Evacuation Emergent
- 2020-2023, Covid Pandemic, Alternate Care Sites.

## 2009 FLOOD RESPONSE

- "Start Up Struggles"
- EMAC
- Lack of IGA Intergovernmental agreement.
- Lack of NGA Nongovernmental agreement.
- Statewide Collaboration MDH Deployment.
- Lack Coordination

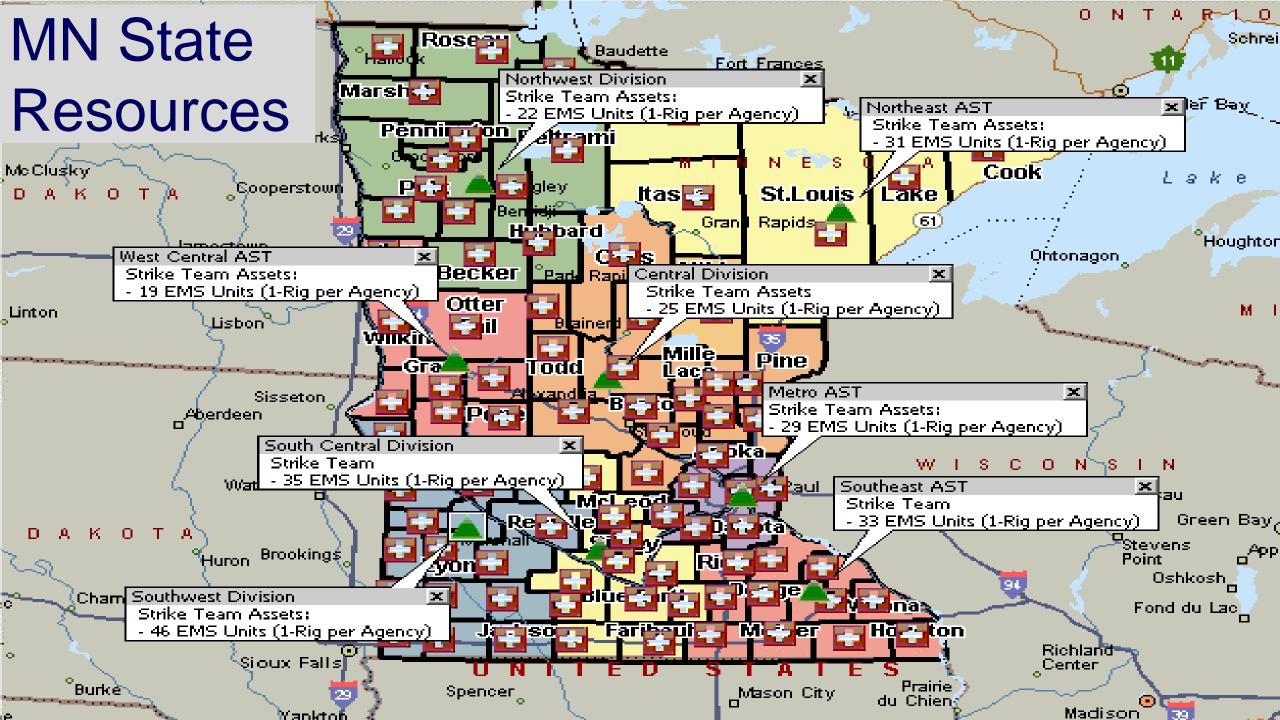


## 2005 - LESSONS LEARNED

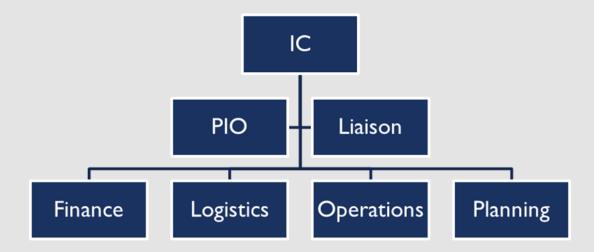


#### COORDINATION

KNOWING WHO HAS WHAT?



#### ICS Process Position and Role's.



UIC

ICS

HICS

# COMMAND SYSTEM CONSIDERATIONS FOR LARGE SCALE INCIDENTS

## POSITION MANAGEMENT AND RESOURCE PLACEMENT

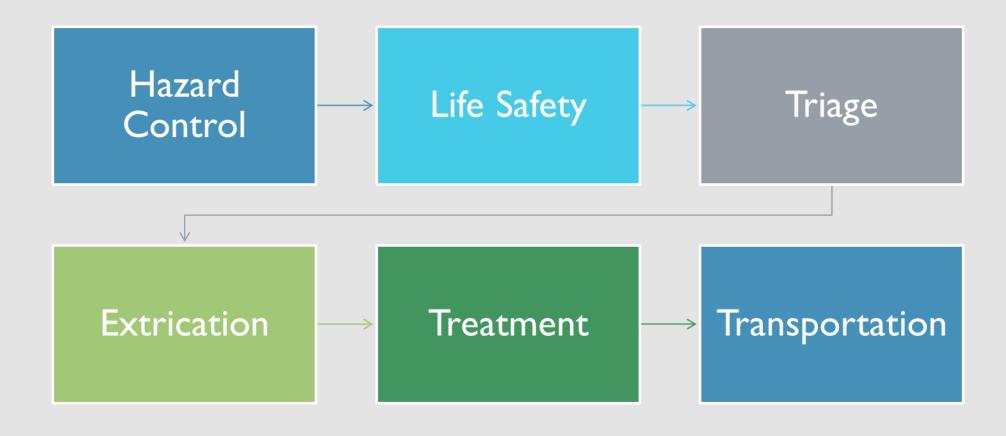
- Scene protection
- IC out of hazard zone
- Ambulance ingress and egress







## Strategy and Tactical Priorities



#### CONDITIONS / ACTIONS / NEEDS

- Effect current action is having?
- What needs to be done?
- Stage of operation (triage, extrication, treatment, transport)?
- Effective incident organization in place?
- Enough resources and qualified personnel on scene or responding?
- Hospital notifications made?



#### **RESOURCES**

- Staffing/Equipment on scene, responding, or in reserve
- Capabilities of responding personnel
- Transport capabilities
- Extrication/Rescue capabilities
- Response times
- Medical control
- Law enforcement to manage, maintain, and document
- Manage/interact with other agencies as required





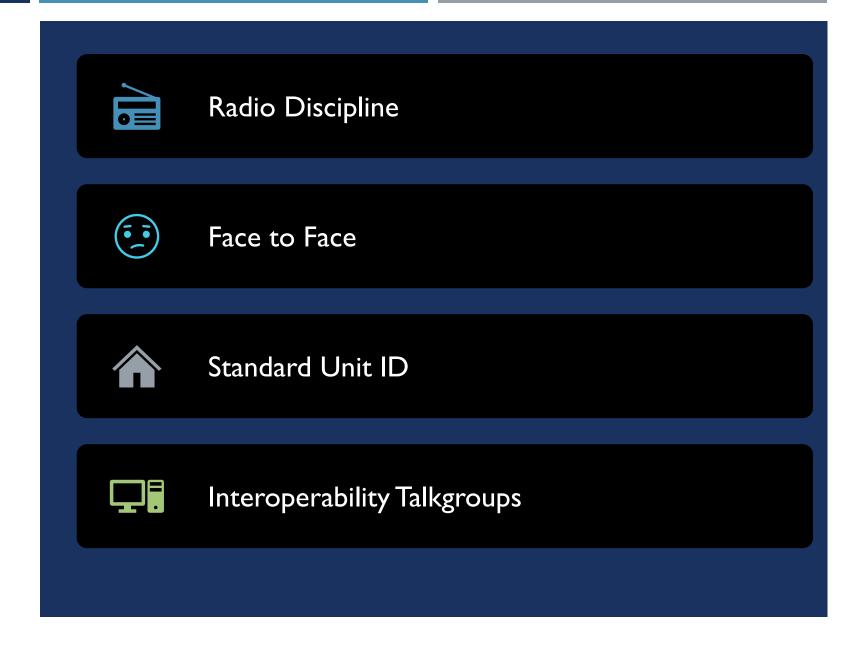








#### **COMMUNICATIONS**



#### SPECIAL CONSIDERATIONS







TIME OF DAY

DAY OF WEEK **SEASON** 





SPECIAL HAZARDS

**WEATHER** 

#### HICS 260 - PATIENT EVACUATION/TRANSFER TRACKING FORM

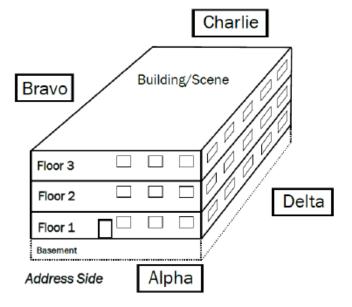
. Date 2. From (Hospital/Address):							Unit	
3. Patient Name				4. Medical Record Number				
5. DOB	Age Weight		t 6. Diagnosis					
7. Family/Friend No	tified PYES NO	NAME:			CONTACT INFORM	MATION:		
8. Mode of Transport:					9. Accompanying Equipment (check those that apply below):			
☐ Hospital Bed		☐ Bag/Mask with Tubing Sent			☐ Cardiac Monitor			
☐ Crib ☐ Ambulatory				☐ CPAP/BiPAP ☐ Pulse Oximetry				
☐ Isolette/Warmer ☐ Evacuation Device							(stand-alone)	
Gurney Other:			☐ Arterial Line / Swan			☐ Traction		
				# Volume Pump(s)			☐ Other	
					Other:			
10. Triage Categor	у		•		☐ Minimal/Moderate	Acuity/ALS	Transport & Care	
☐ Stable/No Injury/Non-EMS Transport/Discharge								
☐ Stable/L	ow acuity/BLS Trans	sport & Car	re		☐ Severe/Critical acu	uity/ALS Tra	ansport & Care	
11. Isolation								
12. Evacuating/Transferring Clinical Location					13. Arriving Location			
Sending Physician and Contact #					Receiving Physician and Contact #			
ROOM# TIME					ROOM#	TIME		
ID BAND CONFIRMED BY:			☐ YES ☐ NO		ID BAND CONFIRMED BY:		YES NO	
MEDICAL RECORD SENT	☐ YES, Ele	ectronically NO (fill out appe		ndix)	MEDICAL RECORD RECEIVED		☐ YES ☐ NO	
	☐ YES, At	tached/Hard (	Сору					
BELONGINGS	□ WITH PA	ATIENT	☐ LEFT IN ROOM	1	BELONGINGS RECEIVED		☐ YES ☐ NO	
			NONE					
1	l l						I .	

## SPECIAL CONSIDERATIONS

#### ARRANGEMENT

- Access for law, fire, and EMS to and from scene
- Protect the incident scene/impact area
- Traffic conditions surrounding incident scene
- Identifying best locations for:
  - Level I and 2 staging
  - Unit travel time from staging to work/patient locations
  - Patient travel times from extrication to treatment area
  - Patient travel times from treatment to transport area
  - Patient transport times from scene to hospital







- Identify and communicate location
- Identify, collect, and triage patients while providing life saving interventions.
- Expedite and coordinate patient movement to transport area.





### TRANSPORTING PATIENTS





#### OVERALL INCIDENT STABILIZATION GOAL

TREAT AND TRANSPORT PATIENTS TO APPROPRIATE FACILITY AS QUICKLY AND SAFELY AS POSSIBLE!!

## All Hazards Response Plan

- Local Control
- Emergency Operations Plans EOP
- Continuity of Operations Plans COOP
- Threat and Hazard Identification and Risk Assessment (THIRA)
- Annexes that support THIRA
- Exercises and Training
- Incident Action Plan (IAP)





I am looking for...

#### EMERGENCY PREPAREDNESS & RESPONSE

**Emergency Preparedness Home** 

Individual/Family Preparedness

<u>Disaster Mental/Behavioral</u> Health

<u>HAN</u>

<u>Legal</u>

**Medical Countermeasures** 

<u>Plans</u>

## Long-Term Care (LTC) Emergency Preparedness

The tools and resources on this page were developed to assist with emergency preparedness planning for long-term care (LTC) facilities. LTC facilities include nursing homes, skilled nursing facilities (SNF), assisted living facilities (ALF), Assisted living (AL) licensed group homes, intermediate care facility for individuals with intellectual disabilities (ICF/IID), home care agencies, and hospice. The resources on this page are intended for LTC facility owners, administrators, and staff, as well as others who may assist with LTC emergency preparedness planning, such as health care coalitions.

The toolkit was updated February 2023, see the latest version below.





#### I am looking for...

- Appendix O:Additional Resources
- Annex A: Emergency Notification of Administrator/Director Policy
- Annex B: Bioterrorism Threats
- Annex C: Bomb Threat Guidance
- Annex D: External Chemical Spill
- Annex E: Electrical Power Outage Guidance
- Annex F: Licensed Facility/Agency Evacuation Guidance
- Annex G: Fire Guidance

- Annex H: Severe Weather;
- Annex I: Cybersecurity
- Annex J: Flood Guidance
- Annex K: Missing Resident
- Annex L: Emergency Shut Down
- Annex M: Emerging Infectious Disease (EID) or High Consequence Infection Disease (HCID)
- Annex N:Active Shooter
- Annex O: Radiological Incidents

**THANK YOU** 

## QUESTIONS OR COMMENTS