

Regional MCI Communications and Exercise (Drill) Plan



Topics

- **Mass Casualty Incident (MCI)**
- Communications and Drills (small exercises)
 - Planning process
 - SALT Triage and Materials
 - Regional Hospital Notification System (RHNS)
 - Regional MCI Radios and Talkgroups
 - GDAHA Surgenet MCI Page
 - OHTrac
 - Drill Plan

8/1/2017

2

Objectives

- Be familiar with Regional Mass Casualty Incident (MCI) Communications Plan and Job Aid
- Have basic understanding of SALT Triage and materials
- Understand use of Regional Hospital Notification System
- Be able to locate and use the HSR3 MCI MARCS Radio in your facility
- Be able to utilize GDAHA Surgenet MCI Page, knowing how to update patient numbers for your facility in the MCI page
- Understand relationship of RHNS, Surgenet MCI Page, OHTrac, and MCI-MARCS Radio TG in Mass Casualty Incident communications
- Be familiar with MCI Communications Quarterly Triage Drill Day Plan

8/1/2017

3

COLLABORATIVE PLANNING



MCI Communications Planning

- Recognized need to bring together the pieces of communications during MCIs
- Developed RHNS
- Developed plans for use of GDAHA Surgenet MCI page
- Added MCI Talkgroups to EMS radios (for much of the region)
- Hospitals agreed to purchase MCI radios for each ED
- Developed Job Aids

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5

GDAHA/GMVEMSC Surgenet Mass Casualty Incident (MCI) Communications Process Job Aid	
ACTION	PERFORMED BY:
1. Receive or Activate Regional Hospital Notification System (RHNS). RHNS is used to message all hospitals in the GDAHA region, some other hospitals, regional coordinators, etc. • Call 937-333-8727 (333-USAR) • Request to speak with RDC Supervisor. • Request activation of the Regional Hospital Notification System. • Provide the following information: A. Name of agency B. There is an MCI reported at _____ (location) as a result of _____ (cause: bus crash, tornado, haz-mat spill, etc.) C. Provide a general statement on severity, such as approximate number of victims D. Any other information to be conveyed E. Include the statements, "All hospitals: update your GDAHA Surgenet MCI Page. All hospitals monitor HSR3 MCI-MARCS talkgroup."	Activated by first to become aware of MCI: EMS or Hospital
2. Activate hospital's MCI Radio, and assign a person to monitor that radio continuously (MCI Talk Group does NOT receive alert tones) • The EMS Transport Officer or aide will use MCI Talk Group to communicate all information to hospitals	Hospitals
3. Update GDAHA Surgenet MCI Page	Hospitals
4. Prepare to receive patients, make appropriate notifications within your agency, consider Code Yellow	Hospitals
5. Log on to OHTrac. Check to see if an incident has been initiated in OHTrac; if not, create one	Hospital or EMS, but usually hospital
6. On resolution of incident, send an update notification via the RHNS	

8/1/2017

6

MCI Communications Quarterly Triage Day Drills

- Agreed on by GDAHA Domestic Preparedness Coalition, GMVEMSC, MVFEA, GMCFCA, et al
- One day each quarter from 8 AM (0800) to 8 AM (0800) the next morning
- Day of week will be different each quarter so all ED & EMS personnel have opportunities to participate
- Day selected each quarter by GDAHA Communications Committee
- Communicated to all hospitals and EMS agencies
- More info later

8/1/2017

7

SALT Triage

8/1/2017

8

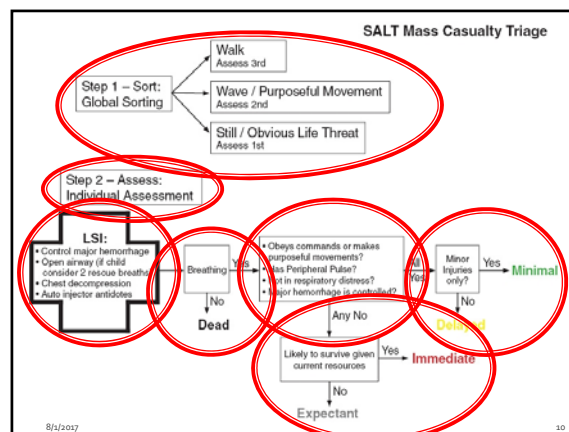
SALT Triage Categories: ID-MED

- Immediate
- Delayed
- Minimal
- Expectant
- Dead

(Ribbon/Tag zebra-striped)

8/1/2017

9



8/1/2017

10

Dayton MMRS Contributions to SALT – Two Mnemonics

- CRAP:**
 - C – Follows Commands
 - R – No Respiratory Distress
 - A – No (uncontrolled) Arterial bleeding
 - P – Peripheral Pulse Present
- “Good or Bad”**
 - “Bad” answer to any one or more: Pt. is either Red or Gray

SALT TRIAGE SYSTEM: What the Receiving Facility Needs to Know...

The SALT Triage, Assess, Life Saving Intervention, Treatment/Transporting system was developed by the Centers for Disease Control and Prevention (CDC) to reduce triage and transport response times to a mass casualty incident (MCI). This document will provide an overview of the SALT Triage System and detail the steps of the SALT Triage System.

LSI: LSI stands for Life Saving Intervention. It is a set of interventions that are performed on patients who are in need of immediate medical attention. LSI includes interventions such as controlling major hemorrhage, opening airway, providing rescue breaths, chest decompression, and administering antidotes.

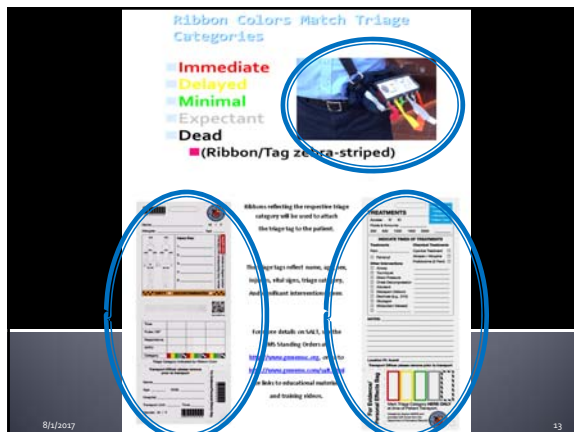
CRAP: CRAP stands for C (Follows Commands), R (No Respiratory Distress), A (No uncontrolled Arterial bleeding), and P (Peripheral Pulse Present). These are the four criteria used to determine if a patient is a good or bad candidate for transport.

Good or Bad: Good patients are those who meet all four criteria of CRAP. Bad patients are those who fail one or more criteria. Bad patients are further categorized as Red (immediate transport) or Gray (delayed transport).

Transport: Transport is the movement of patients from the scene of the MCI to the receiving facility. Transport is performed by ground or air ambulance. Transport is performed by ground ambulance for patients who are not in need of immediate transport. Transport is performed by air ambulance for patients who are in need of immediate transport.

8/1/2017

11



REGIONAL HOSPITAL NOTIFICATION SYSTEM (RHNS)

- One number for EMS, hospitals, and EMAs to call
- Makes rapid, simultaneous notifications during MCI or other major emergency
- Use whenever an incident could involve a significant number of region's hospitals
- Also used to indicate no need for action
- Montgomery County Regional Dispatch Center (RDC) puts out computerized message

8/1/2017 15



REGIONAL HOSPITAL NOTIFICATION SYSTEM (RHNS)

- Use RHNS for any incident likely to involve or concern six or more hospitals (+ or -)
- Examples include "gear up"
 - "Three dozen seriously injured victims being extricated)..."
 - Any request for a CHEMPACK in our region
 - Advise hospitals that patients will need decon
 - EMAs could use for incidents (e.g., tornadoes) involving multiple jurisdictions

8/1/2017 17

REGIONAL HOSPITAL NOTIFICATION SYSTEM (RHNS)

- ...or to tell hospitals disaster preparations are NOT needed
 - Middletown school shooting, cyanide spill in Dayton, a local hospital shooting, et al
- Dispatch Center Job Aid provided

8/1/2017 18

REGIONAL HOSPITAL NOTIFICATION SYSTEM (RHNS)

- Primary purpose of RHNS is:
 - Let hospitals know what is going on
 - And what preparations are needed or not needed
- Hospitals - do **NOT** call Dispatch Center to request additional information
 - Use MCI radio (more to come)
- Do contact Dispatch to put out an update or to send message to close the incident notification

8/1/2017

19

REGIONAL HOSPITAL NOTIFICATION SYSTEM (RHNS)

- Numbers for each hospital chosen by that hospital
 - Recommended that emergency messages on cell phones should get both text and voice (if one system down, other may go through)
- Receiving RHNS Messages
 - Alerts hospitals plus regional coordinators, some EMAs, etc.
 - RHNS is tested monthly and during most area exercises

8/1/2017

20

REGIONAL HOSPITAL NOTIFICATION SYSTEM (RHNS)

- To activate RHNS (use the MCI Comm Job Aid):
 - Call 937-333-USAR (8727)
 - Ask for Dispatch Supervisor
 - Request a "Regional Hospital Notification"
 - Provide information below:
 - Name of agency
 - Nature of emergency
 - Location of emergency
 - General statement on severity, such as approximate number of victims
 - Any other information to be conveyed

8/1/2017

21

MCI MARCS Radios & TG

- Ohio MARCS
 - Multi-
 - Agency
 - Radio
 - Communication
 - System
- Talk group (TG) – channel

8/1/2017

22

"HSR3 MCI" MARCS Radio Talkgroup

- MCI MARCS - new, additional hospital ED radio be used solely in an MCI
- Used to notify each hospital of patients they will receive
- Used to provide ALL hospitals with a "common operating picture" simultaneously
- Hospitals can ask questions about incident over HSR3 Radio Talk Group

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23

HSR3 MCI-MARCS Radio Talkgroup

- No alerts on MCI TGs!
- During an event, hospitals turn on MCI talk group (TG)
 - Monitor MCI radio
 - Request to monitor HSR3MCI Radio is included in Communications Job Aid, but hospitals should plan to do so on any MCI notification

8/1/2017

24

HSR3 MCI-MARCS Radio Talkgroup

- >90% of EMS communication during MCI should come from Transport Officer or Transport Comm Aide
- Hospital radios may have two primary TGs
 - HSR3 MCI MARCS Talkgroup
 - HSR6 MCI MARCS Talkgroup
 - Can be patched together by Dispatch Centers

8/1/2017

26

GDAHA Surgenet MCI Page and OHTrac

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8/1/2017

27

GDAHA Surgenet MCI Page

- Increasingly emphasized to EMS importance of distributing patients to hospitals during MCIs
- GDAHA Surgenet MCI Page allows hospitals to indicate how many patients received, by category
- During MCI, MCI Web Page allows hospitals to indicate by category how many more can be handled
- Update the GDAHA Surgenet MCI page

8/1/2017

28

HICS 254 - DISASTER VICTIM / PATIENT TRACKING

PURPOSE: The HICS 254 Disaster Victim / Patient Tracking records the triage, treatment, and disposition of victims/patients at the event seeking medical attention.

ORIGINATOR: Completed by the Patient Tracking Manager or team members.

COPIES TO: Distributed to the Situation Unit Leader, with copies to Patient Registration Unit Leader, Planning Section Patient Tracking Manager, Medical Care Branch Director, and the Documentation Unit Leader.

NOTES: The form is completed upon arrival of the first patient and updated periodically. Copies of this form are sent to the Planning Section Patient Tracking Manager each hour and at the end of each operational period. The disposition of the last victim(s) are known. If additional pages are needed, use blank HICS 254 and reinitiate as needed. Additional may be made to the forms meet the organization's needs.

NUMBER	TITLE	INSTRUCTIONS
1	Incident Name	Enter the name assigned to the incident.
2	Operational Period	Enter the start date (MM/DD) and time (24-hour clock) and end date and time for the operational period which this form applies.
3	Area	Enter the triage or specific treatment area (e.g., Triage, Immediate Treatment Area).
	Field Tag Number	Enter field tag number.
	Medical Record Number	Enter hospital medical record number if available.
	Name	Enter the full name of victim/patient.
	Sex	Enter sex: M for male/F for female.
	DOB / Age	Enter date of birth and age.
	Triage Category	Enter triage category assigned to patient.
	Location / Time of Procurement	Enter location and time and time patient leaves triage or treatment area for alert or procedure.
	Disposition / Time	Enter the letter of the disposition category and time of disposition.
4	Prepared by	Enter the name and signature of the person preparing the form. Enter date (MM/DD), time prepared (24-hour clock), and locality.

8/28/2017

8/1/2017

20

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8/1/2017

30

Surgenet: OHTrac

- State of Ohio tool for patient tracking used during any MCI or disaster situation for family reunification
- MCI incident alerts can be sent
 - Not primary method of communication
 - Regional Drills/Exercises and Real World Incidents
- Hospitals responsible for ensuring patients received from incident entered and tracking information updated
 - Including "walk-in" patients

8/1/2017

31

Surgenet: OHTrac

- Can allow dispatch centers to assist a Transport Officer in hospital destination decisions
- EMS & dispatch centers can (at their option) log on and view numbers of each triage level at each hospital
 - Integrating all communication methods helps EMS ensure triaged patients are transported to appropriate hospitals

8/1/2017

32

OHTrac App

- App designed for EMS
 - For agencies using it, allows patient tracking to begin at the scene
- OHTrac
 - Allows increased patient tracking accuracy
 - Provides for family reunification
 - Allows hospitals and other agencies to see the number and acuity of patients en-route



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Who Should Have GDAHA Surgenet Access: MCI and OHTrac

- For both OHTrac and MCI pages, MUST be available 24/7/365
- For both pages, consider the need to do this during an MCI when chaos is rampant
- As determined by your facility, MCI Page updates may be performed by:
 - Charge nurses; house/nursing supervisor; others according to your hospital policy
- OHTrac entry (as determined by your facility) performed by:
 - Registration personnel; ED Clerks; others (as defined by your facility)

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34

What GDAHA Surgenet Access Should You Have?

- Assure personnel who will do MCI updates have both view and edit privileges for your facilities
- Responsible personnel should have already received training
 - Training available on GDAHA Surgenet web page

8/1/2017

35



MCI Scenario

8/1/2017

37

Scenario

- County Fair
 - Stage collapse
 - Summer
 - One EMS unit on site at fair as standby
 - Initial estimate of 50 injured, some severe

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38

Hospitals Receive RHNS Notification:

- "There has been an MCI reported as a result of a stage collapse at the County Fair, with initial estimates of 50 injured. All hospitals should update their GDAHA Surgenet MCI page. All hospitals monitor HSR3 MCI MARCS talkgroup."

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39

Hospital Actions

- Receives RHNS
- Monitors HSR3MCI Radio
- Updates MCI page
 - Indicate number of Red, Yellow, and Green patients you are able to receive
- Prepare to receive casualties
- Make internal notifications
- Prepare for use of OHTrac

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40

Scenario (continued)

- County Fair Stage Collapse
 - 1 Ems unit on scene, full response requested
 - Multiple Victims (Roughly 50)
 - Initial Triage: 26 Red, 14 Yellow, 10 Green, 2 Black

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41

Hospital Actions

- Receiving patients
 - Entered in OHTrac
- Update MCI page again
 - How often?
 - Importance of periodic updates to the MCI page during an MCI event (15 - 20 minutes between updates)

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42

Scenario

- When does it end?
 - IC or delegate should use RHNS again to indicate that all or most patients have cleared the scene
- Hospital receives 2nd RHNS notification:
 - Incident is nearly over; patients have all been transported

8/1/2017

43

MCI Communications GDAHA Quarterly Triage Day Drills (QTD Drills)

8/1/2017

44

Quarterly Triage Day Drills

- Every patient in every ED gets a Triage Ribbon and Triage Tag
- If not applied by EMS, ED will apply
- Each EMS & ED receiving supply of **GREEN** Triage "Drill" Tags

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45

Quarterly Triage Day Drills

- Starting Tuesday, September 26, 2017 at 8:00 AM
- Days announced in advance each quarter
- Notification via Email one week in advance, and via RHNS twice/day of each QTD Drill
 - Email notifications to EMS Medical Directors, ED Directors, GMVEMSC Listserv, GDAHA Domestic Preparedness Consortium, EMS Coordinators

8/1/2017

46

QTD Drills or Exercises: Use Green Tags but Real Ribbons!



Quarterly Triage Day Drills

- Tags do not have ties – use Triage Ribbon to attach the Tag
- Each Tag will have a bar-code and a matching number. ~~Patient's Tag can be scanned into OHTRac~~

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48

Quarterly Triage Day Drills

- All patients arriving via EMS should have a Triage Ribbon and a **GREEN** Triage Drill Tag
 - ED personnel place a Triage Ribbon and Drill Tag on any patient (regardless of mode of arrival) without one

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49

Quarterly Triage Day Drills

- Each ED nurse should place and fill out one **GREEN** Triage Drill Tag each shift during QTD Drills for familiarization
 - Assign patient to appropriate triage color/category
 - Use actual patient information on triage tags
 - Complete all normal documentation



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Quarterly Triage Day Drills

- Each hospital already had a Blue Triage Ribbon Kit for use in actual MCIs
- Each hospital ED has received supply of **GREEN** Triage "Drill" Tags and a **GREEN** Ribbon Kit
 - Ribbons identical in both
 - May use either or both Ribbon Kits for QTD Drills
 - White Tags for real incidents; **Green for Drills**

8/1/2017

51

Quarterly Triage Day Drills

- Building block approach to drills
 - SALT Triage (for patient categories)
 - RHNS
 - ~~HSR3 MCI talk group~~
 - GDAHA Surgenet MCI Page
 - ~~OHTrac~~
 - Modified MCI Communications Job Aid for drills

8/1/2017

52

GDAHA/GMVEMSC Surgenet Mass Casualty Incident (MCI) Communications Process Job Aid for TRIAGE DRILL DAYS	
ACTION	PERFORMED BY
1. Receive or activate Regional Hospital Notification System (RHNS) - Call 937-333-4727 (333-43648) - Request to speak with RDC Supervisor - Request activation of the Regional Hospital Notification System - Provide the following information: - A- Name of agency - B- There is an MCI reported at _____ (location) as a result of _____ (cause: fire, crash, tornado, haz-mat spill, etc.) - C- Provide a general statement on severity, such as approximate number of victims - D- Any other information to be conveyed - E- Include the statement: "All hospitals - update your GDAHA Surgenet MCI Page. All hospitals monitor HSR3 MCI-MARECS talkgroup."	For Drills and Exercises, RHNS messages will be put out as directed by the GDAHA Communications Committee
2. Activate hospital's MCI Radio, and assign a person to monitor that radio continuously (MCI Talk Group does NOT receive alert tones)	Hospitals, but not on first Triage Drill Day
3. Update GDAHA Surgenet MCI Page	Hospitals
4. Make appropriate notifications within your agency, consider Code Yellow	Hospitals
5. Log on to OHTrac - Check to see if an Incident has been initiated in OHTrac; if not, create one	Drill OHTrac Incidents created by GDAHA Hospitals
6. All patients arriving via EMS should have a Triage Ribbon and a GREEN Triage Drill Tag - ED personnel should place a Triage Ribbon on any patient (regardless of mode of arrival) without one - Each ED nurse should place and fill out one GREEN Triage Drill Tag each shift on Triage Drill Days	
7. On resolution of incident, send an update notification via the RHNS	GDAHA for Drills

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53

Quarterly Triage Day Drills

- Receive RHNS messages at 0800 and ~ 2000
- Update GDAHA Surgenet MCI page for your hospital
 - On Drill Days, only need to update once per eight hours and **for capabilities only, not for numbers received**
 - Real-life, immediately and every 20 minutes

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54

Quarterly Triage Day Drills

- ~~Monitor HSR3 MCI radio talk group~~
- ~~Log into OHTrac and locate Incident (not first Drill Day)~~
- **Not first Drill Day**

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55

OHTrac for Quarterly Triage Day Drills

- Will not be used in first Quarterly Triage Day Drill
- Thereafter, it will be used for one four hour period each day
- Rotating to involve all shifts
- Hours will be announced via RHNS

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5

MCI Radio Talk Groups – FUTURE Drills

Future drills will incorporate use of the MCITGs

- Four hours out of 24
- Two hour block during the day, two hour block at night
- During those blocks, every hospital in the geographic area will monitor the MCITG
- During one two hour block, EMS crews transporting to hospitals north of Interstate 70 will call using HSR3MCITG
- During the other two hour block, EMS crews transporting to hospitals south of Interstate 70 will call using HSR3MCITG, except for hospitals in Butler and Warren Counties
 - For those hospitals, use HSR6 MCITG

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5

MCI Radio Talk Groups – FUTURE Drills

Future drills will incorporate use of the MCITGs
EMS agencies will make brief reports to the hospital over the HSR3MCITG

- Only items to be covered are number of patients and triage color
 - Possibly one or two word description of medical issue, e.g., chest injury
 - e.g., "Wayne Hospital, this is Greenville Medic 591 en route with one Yellow"
- Any more extensive information or requests, the Medic Crew will call by cell phone or on the hospital's regular radio channel
- No call will be made on MCI TG if crew workload does not permit

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5

Handout Materials

- Attached to this training are copies of:
 - HICS 254 Patient Tracking Form
 - SALT Hospital Handout
 - MCI Communications Job Aid
 - Real and...
 - 1st exercise version

8/1/2017

59

EDAHA/GM/VMSC SurgeNet Mass Casualty Incident (MCI) Communications Process Job Aid		VMSC SurgeNet (MCI) Communications Process TRIAGE DRILL DATES
ACTION	PERFORMED BY:	PERFORMED BY:
1. Receive or Activate Regional Hospital Notification System (RHS). RHS is used to message all hospitals in the GDAHA region, some other hospitals, regional coordinators, etc.	Activated by first to become aware of MCI: EMS or Hospital	Performed by: For Drills and Exercises, RHS messages will be put out as directed by the GDAHA Communications Committee
2. Request to speak with RDC Supervisor.	not hospital	
3. Request activation of the Regional Hospital Notification System.		
4. Provide the following information:		
A. Name of agency B. Name of MCI reported at (location) as a result of (cause: bus crash, tornado, bag-out spill, etc.) C. Provide a general statement on severity, such as approximate number of victims D. Any other information to be conveyed E. Include the statements, "All hospitals: update your GDAHA SurgeNet MCI Page. All hospitals: monitor HSEMA MCI-MARC's talkgroup."		
2. Activate hospital's MCI Radio, and assign a person to monitor that radio continuously (MCI Talk Group does NOT receive alert tones)	Hospitals	Hospitals, but not on first Triage Drill Day
The EMS Transport Officer or aide will use MCI Talk Group to communicate all information to hospitals		
3. Update GDAHA SurgeNet MCI Page	Hospitals	
4. Prepare to receive patient, make appropriate notifications within your agency, contact Code Yellow	Hospitals	
5. Log on to OHTRA. Check to see if an Incident has been initiated in OHTRA; if not, create one	Hospital or EMS, but usually hospital	
6. On resolution of incident, send an update notification via OHTRA		
		Drill OHTRA: Incidents created by GDAHA Hospitals
		Drill on a Triage
		Redden can see B without any
		Redden can see B without any
		Drill Days
		to notification via
		GDAHA for Drills

GDAHA/GMVME Mass Casualty Incident (MCI) Cc		GDAHA/GMVEMSC SurgeNet Mass Casualty Incident (MCI) Communications Process Job Aid for TRIAGE DRILL DAYS	
ACTION 1. Receive or Activate Regional Hospital Notification System (RHNS). RHNS is used to message in the GDAHA region, some other hospitals, coordinators, etc. • Call 917-333-8727 (333-USAR) • Request to speak with RDC Supervisor. • Request activation of the Regional Hospital Notification System • Provide the following information: A. Name of agency B. There is an MCI reported at _____ as a result of _____ (CRASH: tornado, hit-and-run spill, etc.) C. Provide a general statement on severity approximate number of victims D. Any other information to be conveyed E. Include the statements: "All hospitals: GDAHA SurgeNet MCI Page. All hospitals monitor HSR3 MCI-MARCS talkgroup" 2. Activate hospital's MCI Radio, and assign a monitor that radio continuously (MCI Talk G NOT receive alert tones) • The EMS Transport Officer or aide will u Group to communicate all information to 3. Update GDAHA SurgeNet MCI Page 4. Prepare to receive patients; make appropriate within your agency; consider Code Yellow 5. Log on to CHITrac. Check to see if an incident initiated in CHITrac; if not, create one 6. On resolution of incident, send an update not the RHNS		ACTION 1. Receive or activate Regional Hospital Notification System (RHNS) • Call 917-333-8727 (333-USAR) • Request to speak with RDC Supervisor. • Request activation of the Regional Hospital Notification System • Provide the following information: A. Name of agency B. There is an MCI reported at _____ (Incident) as a result of _____ (Cause: hit-and-run, tornado, hit-and-run spill, etc.) C. Provide a general statement on severity, such as approximate number of victims D. Any other information to be conveyed E. Include the statements: "All hospitals: update your GDAHA SurgeNet MCI Page. All hospitals monitor HSR3 MCI-MARCS talkgroup." 2. Activate hospital's MCI Radio, and assign a person to monitor that radio continuously (MCI Talk Group does NOT receive alert tones) 3. Update GDAHA SurgeNet MCI Page 4. Make appropriate notifications within your agency; consider Code Yellow 5. Log on to CHITrac. Check to see if an incident has been initiated in CHITrac; if not, create one 6. All patients arriving via EMS should have a Triage Ribbon and a GREEN Triage Drill Tag • ED personnel should place a Triage Ribbon on any patient (regardless of mode of arrival) without one • Each ED nurse should place and fill out one GREEN Triage Drill Tag each shift on Triage Drill Days 7. On resolution of incident, send an update notification via the RHNS	
		PERFORMED BY: For Drills and Exercises, RHNS messages will be put out as directed by the GDAHA Communications Committee	

Continuing Education

- Complete the accompanying quiz
- EMS Con Ed for this program (for EMS and nurses) provided courtesy of GMVEMSC



8/2/2017

62