CODE ORANGE MASS CASUALTY

PREAMBLE

A mass casualty is any incident with 2 or more casualties that "regular services and resources" cannot bring under control. It is the job of the facility, EMS and all other responders to provide a timely and effective response to the persons involved in the incident, therefore reducing suffering.

If the facility is unable to handle all incoming casualties, the facility may need to function as a triage station and forward the most critical casualties.

Dual/multiple roles may be necessary during such an incident. Scenes with multiple agency responses should be commanded by the Police or Fire Dept.

MITIGATION

- 1. All ARHA staff will be familiarized with the Mass Casualty procedures.
- 2. A Code Orange kit will be available at each EMS station. This will include such items as extra triage tags, vests, transport logs etc. This may be in the form of a kit or a part of unit stock.
- 3. A disaster stockpile will be set up within the region. See Appendix 10range Access can be obtained by contacting the EMS On-Call Supervisor
- 4. A mass casualty exercise will be conducted at least once every three years for acute care facilities. This should rotate between districts. A paper exercise should be completed at least once bi-annually and the plan should be reviewed annually.
- 5. Maintenance Staff will be familiar with the shut down of all equipment, including but not limited to Oxygen, Nitrous Oxide, natural gas, air exchangers and HVAC. They will ensure that there is a facility map in Code Green and Grey that indicates the necessary shut off locations.

GENERAL INSTRUCTIONS

- The Coordinator or designate will be in charge of co-ordinating the disaster within the facility. The Business Office will be the facility command site.
- The shut down of all equipment, including but not limited to Oxygen, Nitrous Oxide, natural gas, air exchangers and HVAC systems.
- No in-house or outgoing telephone calls from the site shall be permitted, unless the calls are related directly to the disaster.
- The internal paging system will be utilized for the emergency situation only. <u>If the internal communication system fails, i.e. telephone and/or paging system, consider alternate methods of communication (2 way radio, FleetNet, cell phones).</u>
- Off duty staff reporting to work will do so to the designated pooling area and received further instructions as to duties required.

•	Persons reporting to work will park vehicles	
		Input designated parking area
	And enter through	
	Input designated entrance for staff rep	orting to work

 Following the activation of any portion of this code, the Area Manager or Coordinator will submit a report to the EPC (refer to Section1/ Overview/ General Policies #6)

EMS ROLES and RESPONSIBILITIES

EMS- First Crew

- Confirm that the page has been received
- Ask to have the information repeated
- Load additional disaster equipment
- Request mutual aid
- Notify the facility of the incident –further updates to follow

On arrival at the scene the crew will:

- Assess for safety and assess the situation
- Crew member #1- Assume the role of EMS Commander until such time as Station Supervisor or Senior Crew member arrives on scene
- Crew member #2- Assume the role of Triage/Transport Officer
- Ensure adequate communications between other responding crews and the EMS On-Call Supervisor. Communications should include:
 - Number and type of casualties
 - Location of the entrance and egress routes
 - Location of the Staging Area
 - Safety concerns

EMS- Second Crew/Additional Crews

- Load disaster equipment into unit
- Load any additional supplies that may be needed
- Unload portable equipment in the equipment staging area. If no staging area has been established, do so at this time
- If no Triage Area has been established, set it up in a safe place in consultation with other agencies present
- Other duties as assigned

EMS- ON-CALL SUPERVISOR

- Additional units may be required in such an event. Ensure additional units have been dispatched
- Mutual Aid from other regions may need to be accessed depending on the size or location of the event
- Designate a separate communications channel for the incident. This channel will be:
 - *Tactical (MTS 2000, channel 2)
 - * 2B (GTX)
- Initiate EMS fan out as required
- Update the facility as to the number of casualties, times etc. as required
- Contact the EMS Medical Director
- Consult with the EMS Commander and EMS Medical Director as to diversions, if necessary
- Contact other facilities regarding bed availability (ARHA Disaster Form B1)
- Keep a log of dispatched ambulances

EMS SITE COMMANDER will:

- Wear the Blue EMS Commander vest
- Direct all EMS activity at the site
- Establish and operate a Medical Command Post
- Communicate directly with Triage, Treatment, Transport and Staging Officers
- Coordinate operation with other responding agencies
- Keep Site Command informed of EMS activities and the number and types of casualties transported and destination
- Keep a record of casualties transported
- Keep informed as to hospital status and relay information to Transport Officer
- Request additional means of transport through Site Commander or EOC
- Assign personnel to assist the Staging and Safety Officers

NOTE: May be required to act as overall Site Commander

TRIAGE OFFICER will:

- Wear the Yellow Triage Vest or another approved identifying apparel
- Ensure a safe and accessible triage/treatment area has been established
- Ensures that each casualty is appropriated triage, reassesses and ensures appropriate coding.
- Ensure that all casualties are triaged, treated as necessary and transported.
- Triage casualties according to the Triage Coding Chart Appendix 2Orange
- Advises Treatment Officer of any changes to casualty status- upgrading or downgrading of Triage Coding
- Relay any resources required to the EMS Commander
- Responsible to the EMS Commander

TREATMENT OFFICER will:

- Wear the Red Treatment vest or another approved identifying apparel
- Oversee treatment personnel to ensure that all life-threatening treatments are carried out
- Prioritize the need to transport
- Advise the Transport Officer of casualty numbers and priority
- Advise the EMS Commander of needs for personnel and supplies
- Inform the EMS Commander of need for security in treatment/triage area
- Responsible to the EMS Commander

TREATMENT PERSONNEL will:

- Be trained at the EMR level or higher. First Aiders may act as assistants
- Treat casualties at the scene
- Assist with the setting up of the Treatment/Triage area
- Advise the Treatment Officer of any supplies required
- Inform Treatment officer of any changes in casualty status
- Responsible to the Treatment Officer

TRANSPORT OFFICER will:

- Wear the Green Transportation vest or another approved identifying apparel
- Direct and supervise the transport of patients
- Ensure proper staffing of transport vehicles
- Coordinate EMS traffic and additional resources arriving at the scene
- Advise the receiving facility of incoming casualties and their condition
 *The incoming crew will only communicate with the hospital in the event that their patient's condition has deteriorated
- Keep informed as to hospital status
- Ensures equipment is returned to the scene from the facility
- Coordinated casualty transport with the Treatment Officer to ensure timely transport
- Regularly update EMS Command on casualty status
- Keep accurate records of casualty transport using an EMS Transport Log (ARHA Disaster Form T1)
- Responsible to the EMS Commander

STAGING OFFICER will:

- Wear the Orange Staging vest or another approved identifying apparel
- Establish a staging area for equipment and vehicles in a safe, accessible location
- Ensure additional equipment has been unloaded from vehicles
- Ensure arriving ambulances have additional personnel report to EMS site command with a driver and an attendant staying with the unit
- Ensure out of region ambulances know radio and site operating procedures
- Ensure portable equipment is removed from the ambulances and request mutual aid units arriving do the same
- Coordinate equipment needs and ensure that equipment not in use is returned to staging area
- Ensure appropriate equipment is kept in the treatment area
- Responsible to the Transport Officer

SAFETY OFFICER will:

- Ensure safe practices are being followed by EMS personnel
- Ensure the safety of casualties, bystanders and other agencies working with EMS
- Ensure proper decontamination procedures are followed as required
- Responsible to the EMS Commander
- Have the ability to override the EMS Commander when safety concerns arise
- When mutually agreed upon, the Safety Officer may be a member of the Fire Department

LIAISON OFFICER will:

- Operate from the Site Command post
- Wear the Liaison Officer Vest or another approved identifying apparel
- Act as a link between the EMS Supervisor, Site Commander and any other agencies at the Command post
- Receive any requests from the EMS Commander

NOTE: Depending on the size of the event and personnel available, EMS personnel may be required to assume multiples roles.

FACILITY ROLES and RESPONSIBLITIES

The Nurse in Charge will act as the Emergency Coordinator until the Coordinator reaches the facility. At that time the Coordinator will assume the role of the Emergency Coordinator.

The Emergency Coordinator w

- Assess the need for additional staff based on the information relayed to the facility from the scene and based on available staff in the facility
- Confirm the number of available staff in the facility, including but not limited to the following:
 - Physicians
 - □ RN's
 - □ LPN's
 - □ HCA's
- Confirm the number of possible incoming casualties
- Initiate the Fan Out by contacting your Call Out Centre, identify the type of staff required (ie: RN's, LPN's, etc)

RESTON - 877-3925

Should you be unable to reach Reston (ie busy signal)

SANDY LAKE - 585-2107

***Acute Care facilities may use FleetNet Radio

If using FleetNet:

State "On Call Supervisor this is ______ (your facility) we have a CODE ORANGE please initiate our fan out." Confirm that the on call supervisor has copied the transmission by asking: "did you copy?" Ensure you get a response.

- Contact the Coordinator
- Notify the Physicians
- Notify the Nurse on Call, as applicable
- Notify Diagnostics
- Assess the facility resources:
 - Number of available beds
 - Number of potential discharges
 - Total number of available beds
- Assign staff to treatment rooms
- Assign staff to triage incoming casualties
- Initiate set up of treatment rooms, applicable to the type of treatment required
- Assign staff to non-treatment rooms, such a family room, morgue, media, etc.
- Contact the EMS On-Call Supervisor to arrange transport, as required
- Set up the Triage White Board. This board can be found

Input location of triage board

- Keep a log of incoming casualties including their Triage Tag # and their location in the facility on the appropriate form (ARHA Disaster Form C1) as well as on the Triage White Board
- Note the triage tag # on the casualty's chart
- Delegate jobs as necessary
- Divert casualties once they have been assessed, as deemed necessary
- Notify the Area Manager
- Following the activation of any portion of this code, the Area Manager or Coordinator will submit a report to the EPC (refer to Section1/ Overview/ General Policies #6)

DO NOT SPEAK TO THE MEDIA

MEDIA will be directed to an ARHA Public Information Officer. This is in accordance with the ARHA Policy.

RECEIVING FACILITY STAFF will: Designate an entrance for incoming traffic such as family, clergy, etc. The The entrance will be monitored by staff and a log of incoming traffic will be kept. (ARHA Disaster Form I3) Designate a room and staff for the following: (See Appendix 3Orange for suggested staffing guidelines) Triage Area RED casualties, as these casualties are critical and may require aggressive treatment. Input room designated for RED patients AMBER casualties, Input room designated for AMBER patients GREEN casualties, ___ Input room designated for GREEN patients Command Centre for the facility will be the Business Office, unless otherwise designated by the Emergency Coordinator Clergy ______ Input location of clergy room Family ____ Input location of family room

If there is no room large enough to accommodate the deceased consider obtaining refrigerated truck from your local area. Check resource list located in Section 6

- Complete a Morgue Identification Form (ARHA Disaster Form M1) for each deceased
- Complete a DOA registry (ARHA Disaster Form D2) for the release of deceased/remains to a funeral home or medical examiner

MEDICAL RECORDS will:

Media

Morgue ____

- Complete an inpatient chart, ID band for admissions and outpatient forms
- Ensure a transfer referral form has been completed for casualties needing to be transferred out
- Other duties as assigned
- If this position does not exist in your facility, it may be designated

Input location of media room

Input location of morgue area

CSR will:

- Report to the Nurses Station
- Supply and maintain adequate stocks of sterile supplies and equipment to the various departments, including triage supplies
- If this position does not exist in your facility it may be designated

Nutrition will:

- Report to the Nutrition office
- Nutrition Services Supervisor or designate will report to the Command Centre for further direction
- Streamline menus
- Serve staff and ambulatory casualties cafeteria style
- Have coffee and meals available
- Deliver coffee/muffins to control areas (Nurses Station, Clergy Room, Family Room)
- Not distribute food trays to casualties unless given physician orders to do so
- Use disposable dishes where appropriate
- Be prepared to provide 24 hour coverage
- Secure bulk food from local stores, as required
- Perform other duties as required
- Provide regular reports to the Command Centre

HOUSEKEEPING will:

- Report to the Housekeeping office
- Housekeeping supervisor or designate will report to the Command Centre for further direction
- Perform cleaning duties as required
- Perform other duties as required
- Provide regular reports to the command centre

MAINTENANCE (on duty) will:

- Report to the Nurse in Charge to determine immediate priorities. Additional Maintenance staff will report to the Command Centre
- Ensure that the emergency doors are unlocked
- Perform other duties as required
- Provide regular reports to the command centre

LAUNDRY will:

- Report to the Laundry department
- Laundry supervisor or designate will report to the Command Centre for further direction
- Provide adequate supplies of clean linen to hospital departments
- Provide 24 hour coverage if required
- Perform other duties as required
- Provide regular reports to the Command Centre

IN-HOUSE TRAFFIC CONTROL will: (This job may be assigned to any personnel available)

- Permit staff and clergy entrance into the facility with identification
- Direct media and family to the appropriate area
- Keep a log of incoming traffic (ARHA Disaster Form 13)

EXTERNAL TRAFFIC CONTROL will: (This job may be assigned to any personnel available)

- Wear an identifying vest
- Supervise traffic and direct all vehicles to the appropriate locations (all individuals related to the disaster situation must provide identification)
- Direct staff to the appropriate parking lot and designated entrance, if different than
 designated areas listed in General Instructions. The Emergency Coordinator will
 determine if an alternate area or entrance needs to be designated. This may be
 done at time of the incident, as a result of the incident or other circumstances
- Direct families and transport vehicles picking up discharged clients to the appropriate entrance
- Direct media and escort them to the appropriate entrance by a staff member