Augusta County Emergency Services Officers Association
Augusta County Government Center
P.O. Box 590 – 18 Government Center Lane
Verona, Virginia 24482

REGIONAL
MASS
CASUALTY
INCIDENT
PLAN

General Guidelines

An MCI will be assigned to appropriate county channel regardless of incident location

Augusta EOC will close the channel for the incident and assign a medical channel

Incident Command will be established with the following NIMS guidelines.

START Triage will be performed as soon as it is safe to operate on the scene

Staging area will be established for all resources to report to

Stretchers will be left in units until needed for transport

AMC will be notified by EOC ASAP about the number and priority of patients

Documentation will be done on state triage tags

Rescue Box alarms will be used to dispatch units

When appropriate number of units is en route EOC will notify command for direction and the alert tone will be sounded and all agencies notified to remain in their station

MCI'S will be divided on to 4 categories based on the number of patients

Patients will be transported in regards to their priority

Transportation Officer will notify AMC of all patients being transported with the following information

Unit Number
Number of Patients and priority
Specific needs at the hospital

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Level 1
(10-20 Patients)

- Dispatch the Initial Response Assignment for the incident
- Level 1 MCI Requested

LEVEL 1

ACTION	Comments
Three (3) Rescue Agencies (TOTAL)	To the scene
Dispatch one (1) Heavy Duty Squad	To the scene
Dispatch one (1) Light / Medium Duty Squad	To the scene
Three (3) Fire Agencies (TOTAL) to the scene	Manpower
Dispatch the ACFR Duty Officer	
Notify Augusta Medical Center – ED	Charge Nurse
One (1) Aeromedical Transport Unit	Standby
Dispatch additional Law Enforcement Assistance	To the scene
Notify EOC Director or Designee	EOC Management/Additional Staffing
**Notify VDOT Smart Traffic Center	Advise VDOT to go to scene

COMMENTS

- Activate the "All Tone" to alert / dispatch Fire-Rescue agencies
  In the event a Fire-Rescue agency does not have the "All Tone"
  capability, Augusta EOC will activate the selected tones for the agency.

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Level 2
(20-49 Patients)

- Dispatch the Initial Response Assignment for the incident
- Level 2 MCI Requested

LEVEL 2

ACTION	Comments
Six (6) Rescue Agencies (TOTAL)	To the scene
Dispatch one (1) Heavy Duty Squad	To the scene
Dispatch one (1) Heavy Duty Squad	Standby
Dispatch one (1) Light / Medium Duty Squad	To the scene
Dispatch one (1) Light / Medium Duty Squad	Standby
Dispatch the Regional Disaster Trailer - SARS	To the scene
Dispatch one (1) School Bus	To the scene
Six (6) Fire Agencies (TOTAL) to the scene	Manpower
Dispatch the ACFR Duty Officer	
ACFR	All Call
Dispatch the Command Bus	To the scene
Dispatch Rehab 1	To the scene
Notify Augusta Medical Center – ED	Charge Nurse
Two (2) Aeromedical Transport Units	Standby
Dispatch additional Law Enforcement Assistance	To the scene
Notify EOC Director or Designee	EOC Management / Additional Staffing
Implement the Modified Response Plan	
**Notify VDOT Smart Traffic Center	Advise VDOT to go to scene

COMMENTS
- Activate the "All Tone" to alert / dispatch Fire-Rescue agencies
  In the event a Fire-Rescue agency does not have the "All Tone"
  capability, Augusta EOC will activate the selected tones for the agency

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Level 3
(50-99 Patients)

- Dispatch the Initial Response Assignment for the incident
- Level 3 MCI Requested

LEVEL 3

ACTION	Comments
13 Rescue Agencies (TOTAL)	To the scene
Dispatch two (2) Heavy Duty Squads	To the scene
Dispatch two (2) Light / Medium Duty Squads	To the scene
Dispatch two (2) Light / Medium Duty Squads	Standby
Dispatch two (2) Disaster Trailers (SARS / CARS)	To the scene
Dispatch two (2) School Buses	To the scene
VAVRS Rescue Officer	Notification
Six (6) Fire Agencies (TOTAL) to the scene	Manpower
Dispatch the ACFR Duty Officer	
ACFR	All Call
Dispatch the Command Bus	To the scene
Dispatch Rehab 1	To the scene
Notify Augusta Medical Center – ED	Charge Nurse
Three (3) Aeromedical Transport Units	On Standby
Dispatch additional Law Enforcement Assistance	To the scene
Notify EOC Director or Designee	EOC Management / Additional Staffing
Virginia Department of Emergency Management	Notification
Implement the Modified Response Plan	
**Notify VDOT Smart Traffic Center	Advise VDOT to go to scene

COMMENTS
- Activate the "All Tone" to alert / dispatch Fire-Rescue agencies
  In the event a Fire-Rescue agency does not have the "All Tone"
  capability, Augusta EOC will activate the selected tones for the agency.

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Level 4
(100 + Patients)

- Dispatch the Initial Response Assignment for the incident
- Level 4 MCI Requested

LEVEL 4

ACTION	Comments
13 Rescue Agencies (TOTAL)	To the scene
Dispatch two (2) Heavy Duty Squads	To the scene
Dispatch two (2) Light / Medium Duty Squads	To the scene
Dispatch two (2) Light / Medium Duty Squads	Standby
Dispatch two (2) Disaster Trailers (SARS / CARS)	To the scene
Dispatch three (3) School Buses	To the scene
VAVRS Rescue Officer	Notification
Six (6) Fire Agencies (TOTAL) to the scene	Manpower
Dispatch the ACFR Duty Officer	
ACFR	All Call
All available Emergency Service Personnel	All Call
Dispatch the Command Bus	To the scene
Dispatch Rehab 1	To the scene
Notify Augusta Medical Center – ED	Charge Nurse
Four (4) Aeromedical Transport Units	On Standby
Dispatch additional Law Enforcement Assistance	To the scene
Notify EOC Director or Designee	EOC Management / Additional Staffing
Virginia Department of Emergency Management	Notification
Local Emergency Declared	
Implement the Modified Response Plan	
**Notify VDOT Smart Traffic Center	Advise VDOT to go to scene

COMMENTS
- Activate the "All Tone" to alert / dispatch Fire-Rescue agencies
  In the event a Fire-Rescue agency does not have the "All Tone"
  capability, Augusta EOC will activate the selected tones for the agency.

MCI Management

Incident Commander

Mission: Incident Command is responsible for the overall management and coordination of personnel and resources responding to an incident.

A.   Responsibility: Upon arrival at the scene, Incident Command shall assume command and announce name and title to communications center for announcement after assuming command. Incident Command shall request a face-to-face briefing with the acting Incident Command and request information on the following.

1.   Nature and scope of the incident.
2.   Current situation.
3.   Current resources committed
4.   Number of injuries and number of expected injuries
5.   Radio frequencies currently being used for the incident.
6.   Hazards that may hinder the operation.
7.   Operational decisions made by the acting Incident Commander.
8.   Establish a Command Post that should house together the Police, Fire, and EMS Officers so that direct face-to-face decisions can be made.
9.   Coordinate interagency tactical on-scene communications
10.   Coordinate interagency strategic scene to dispatch and other centers away from the scene.
11.   Announce location of Command Post.
12.   Designate appropriate ancillary functions. (EMS, Fire/Rescue, Logistics, Staging, and Public Information)
13.   Request additional manpower and equipment as appropriate.
14.   Receive updates from ancillary Commanders as to the status of operations.
15.   Demobilize the incident.

B.   The Incident Commander reports to the Chief elected Official in the jurisdiction and or designated authority in which the incident is taking place.

C.   The Incident Commander supervises all personnel operating at the incident.

D.   The suggested title for the person in charge is the Incident Commander.

E.   The Incident Commander will be identified primarily by the type of incident encountered. (I.e. Fire, Medical, Etc.) For example, if the response is to a high-rise building fire then Fire Officials will take over the Incident Command.

EMS Operations Officer

Mission: EMS Operations is responsible for the overall EMS Operations at an incident for designating EMS functionaries as appropriate, managing prehospital emergency care resources, and forwarding recommendations to the Incident Commander.

A. Responsibilities:

1. Upon arrival, EMS Officer shall be in control of all EMS activities.
2. He or she shall report to the Command Area, and announce self to the other Command Officers.
3. Assess the situation, paying particular attention to the following areas:
   A. Nature and scope of incident.
   B. Type of structures or vehicles or etc involved.
   C. Number of patients anticipated.
   D. Type and extent of injuries anticipated.
   E. Hazards that may hinder EMS Operations.
   F. Current prehospital EMS resources operating on the scene.
   G. Additional EMS resources anticipated.
4. Based on assessment, request additional EMS equipment and personnel as needed.
5. Declare level of MCI and inform command of needed resources
6. Through communications, advise all area hospitals and specialty centers of the nature and scope of the incident, and the anticipated number of patients that are injured.
7. Designate EMS Officers as needed. (Triage Officer, Transportation Officer, Treatment Officer, Extrication Officer, and Morgue Officer.)
8. Coordinate with Police, Fire, and other agencies as appropriate.
9. Provide progress reports to the Incident Commander.
10. Demobilize EMS Operations.
11. Announce location of Treatment Area to all personnel.

B. The EMS Officer reports directly to the Incident Commander.

C. The EMS Officer supervises Triage, Transportation, Treatment, Extrication, Fatality Management, and EMS personnel involved in the incident.

D. The suggested title for this person is the EMS Operations Officer.

Staging Officer

Mission: Staging is responsible for the orderly assembly (In a designated area) and on scene dispatch of vehicles, equipment, and personnel.

A.   Responsibilities:

   1.   Establish a Staging Area.
   2.   Announce Staging Area location to the Incident Commander and the Communications Center so that all responding units will report to the Staging Area.
   3.   Establish a check in function for all responding units.
   4.   Designate units for assignment as requested by the Incident Commander or Transportation Officer.
   5.   Request maintenance for vehicle through Logistics at the Staging Area as needed.
   6.   Update the Incident Commander of the status of current available units.
   7.   Demobilize the Staging Area.

B.   Staging will report directly to the Incident Commander.

C.   Staging will supervise air operations and all other personnel assigned to the Staging Area.

D.   The suggested title for this person is the Staging Officer.

Triage Officer

Mission: Triage is responsible for the sorting of patients to establish priorities of treatment and transportation.

A.	Responsibilities:

1.	Assignment of personnel.
2.	Assignment of ALS personnel to the Treatment Area.
3.	Assignment of EMT and other personnel to the Triage function.
4.	Assure that all patients are assessed and triaged.
5.	Assure that all patients are transferred to the appropriate Treatment Areas.
6.	Transfer patient care to Treatment as patients are transferred from the incident area to the Treatment Area.
7.	Maintain communication and coordinate activities with Treatment, Extrication, and Fatality Management.
8.	Request personnel and equipment as needed from EMS.
9.	Coordinate the activities of all prehospital personnel assigned to Triage.
10.	Manage all triage activities at the site and provide updates to EMS.
11.	Utilize the START triage system on all incidents

B.	He or she shall report directly to the EMS Officer.

C.	He or she will supervise all personnel assigned to the Triage function.

D.	The suggested title for this person is the Triage Officer.

Transportation Officer

Mission: Transportation is responsible for the management of the transport of patients requiring hospital intervention from the incident scene.

A.   Responsibilities:

        1.   Establish a patient loading area.
        2.   Arrange appropriate vehicles and methods of transport. (Ambulance, Helicopter, etc.)
        3.   Maintain a log of vehicles and patient destinations.
        4.   Coordinate patient allocation and transportation with Treatment and Staging.
        5.   Determine hospital and specialty referral center capabilities and through communication centers update their status regularly.
        6.   Assign patients to be transported to each facility.
        7.   Communicates with receiving facilities regarding patient condition and status.
        8.   Provide progress reports to EMS.
        9.   Report to EMS when last patient has been transported.

B.   He or she will report directly to the EMS Operations Officer.

C.   He or she will supervise all ambulance, paramedic, and other transportation crews as well as all other personnel assigned to the Transportation Area.

The suggested title for this person is the Transportation Officer.

Treatment Officer

Mission: Treatment is responsible for the definitive on scene treatment of patients.

A.   Responsibilities:

1.   Request from EMS the number and type of injuries expected.
2.   Establish priority areas for treatment. (Primary, Delayed, and Minor)
3.   Inventory equipment and personnel necessary for the treatment of the patients.
4.   Request additional equipment and personnel as necessary.
5.   Designate prior area managers who are responsible for the supervision of care in their area.
6.   Provide for the proper deployment and utilization of personnel.
7.   Receive the transfer of patient care from Triage as the patients are transferred from the Triage Area to the Treatment Area.
8.   Assure that reassessment and re-triage of patients is done as needed.
9.   Assure the appropriate treatment is rendered to patients within the Treatment Area.
10.   Provide guidance and direction to personnel.
11.   Maintain constant communication with Transportation.
12.   Coordinate activities with Triage, Transportation, Extrication, and Fatality Management.
13.   Manage all activities within the Treatment Area.
14.   Provide updates to EMS operations.

B.   He or she will report directly to the EMS Operations Officer.

C.   He or she will supervise all personnel assigned to the Treatment Area.

D.   The suggested title for this person is the Treatment Officer.