

provide the patients the care they need. When the capacity of the county cannot appropriately care for the level of patients' needs, moving patients to facilities outside of the county may be pursued. The opening of an ACF can be requested to support the needs of patients as appropriate given the above priority actions.

To request a trailer call Spokane Regional Health District (324.1500). During normal hours, you will be routed to the appropriate staff person. After hours, you'll be routed to the 24-hour on-call Duty Officer, who will reach the appropriate person for you. State your name and agency. You **MUST** state "This is a public health emergency" in order to trigger the internal activities & permissions necessary to get a trailer.

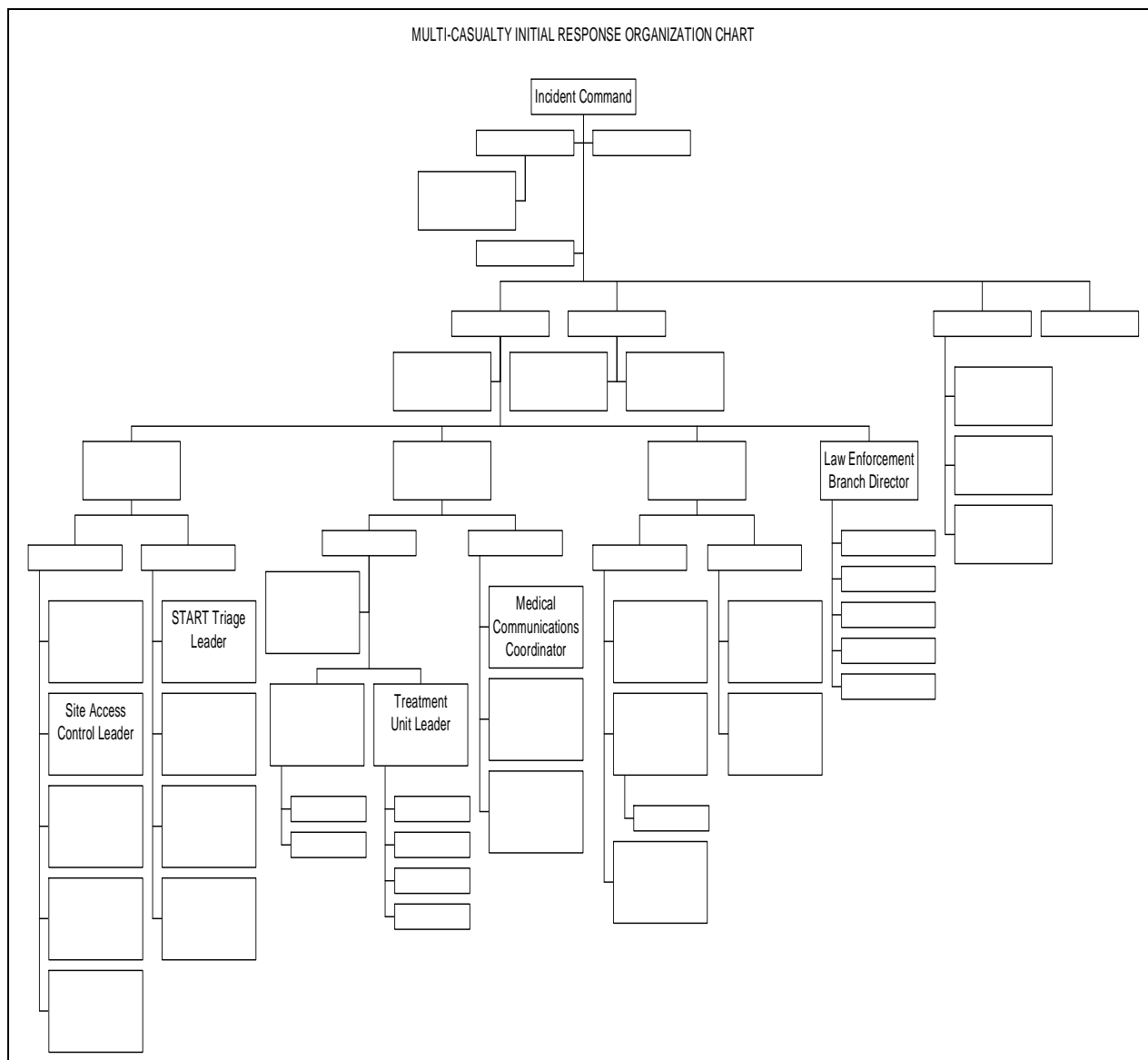
MODULAR DEVELOPMENT

A series of examples of modular development are included to illustrate one *possible* method of expanding the incident organization.

Initial Response Organization

The Incident Commander handles all Command and General Staff responsibilities and manages all response resources.

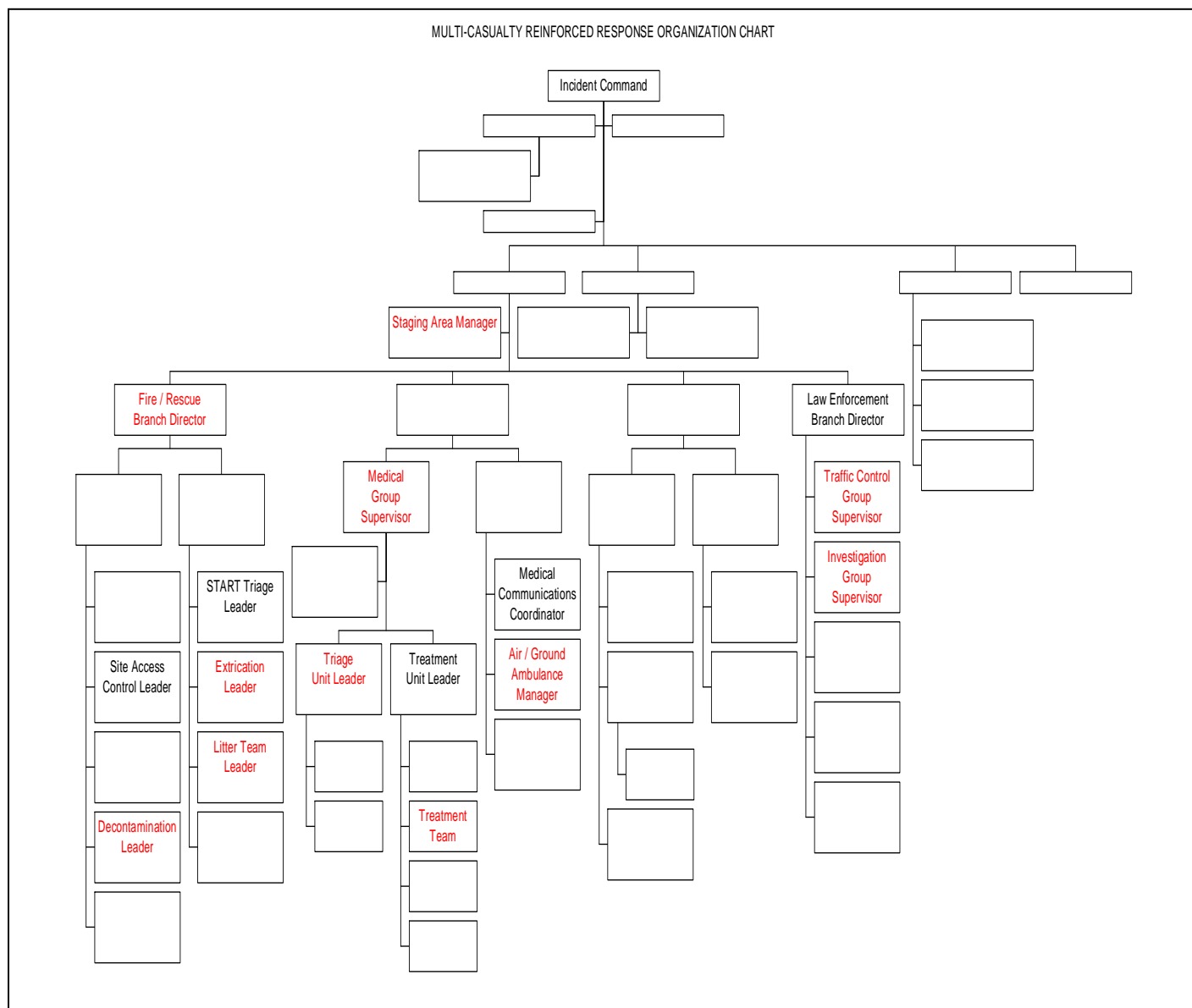
- a. The first arriving resources should assess the scene for hazards and conduct START triage.
- b. If hazardous materials or WMD are suspected, designate a Site Access Control Leader to establish control lines and to isolate and deny access until control or mitigation can be accomplished. Fire resources typically perform these activities.
- c. The first arriving resource with the appropriate communications capability should establish communications with the coordinating hospital or other coordinating facility and become the Medical Communications Coordinator (Med Com).
- d. The Treatment Unit Leader should be established to supervise a treatment area and perform secondary triage of victims. Med Com and Treatment are typically performed by an ambulance resource.
- e. Law Enforcement should be part of Unified Command and/or establish a Law Branch to supervise law resources that may arrive to ensure close coordination with Incident Command.



Reinforced Response Organization

In addition to the initial response, the Incident Commander:

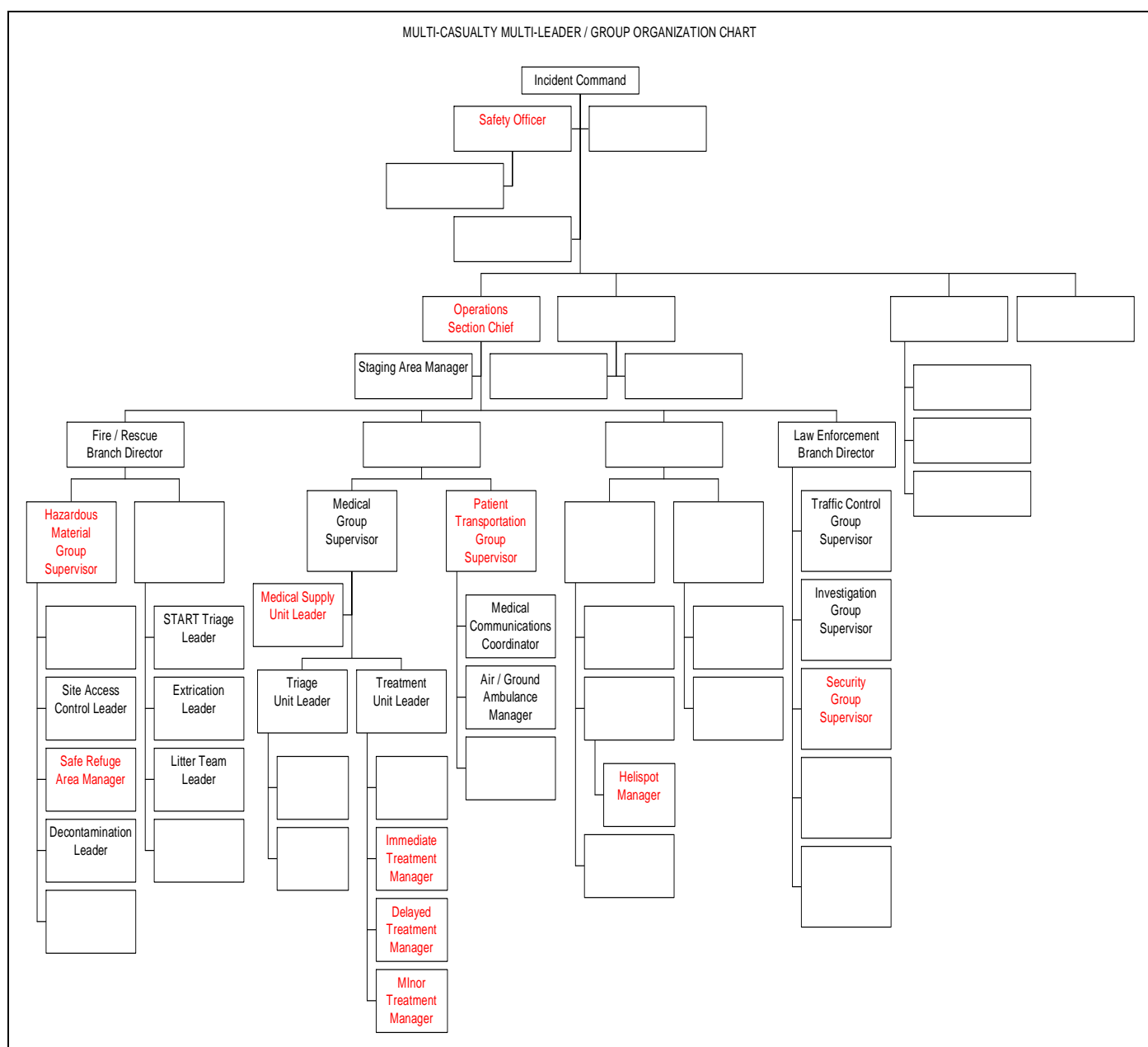
- a. Designates a Rescue Branch Director to control activities within the rescue area (which may be hazardous) who in turn assigns resources to extricate trapped victims and begin moving Immediate Patients to the Treatment Area using Litter Teams. Document patient locations to facilitate subsequent investigation activities.
- b. The Incident Commander has assigned a Medical Group Supervisor and resources to provide Secondary Triage and establish a safe Treatment Area.
- c. An Air/Ground Ambulance Manager is designated to establish an Ambulance Loading Zone and coordinate patient loading and transportation using air and ground resources.
- d. The Law Branch has designated officers to Traffic Control and to Investigation.
- e. The Incident Commander has designated a Staging Officer.
- f. When START primary triage has been completed, personnel assigned to that task can be reassigned to other tasks.
- g. If contaminated victims needing emergency decontamination are present a Decontamination Leader is designated to supervise this function.



Multi-Leader / Group Response Organization

To avoid span-of-control problems, Incident Command:

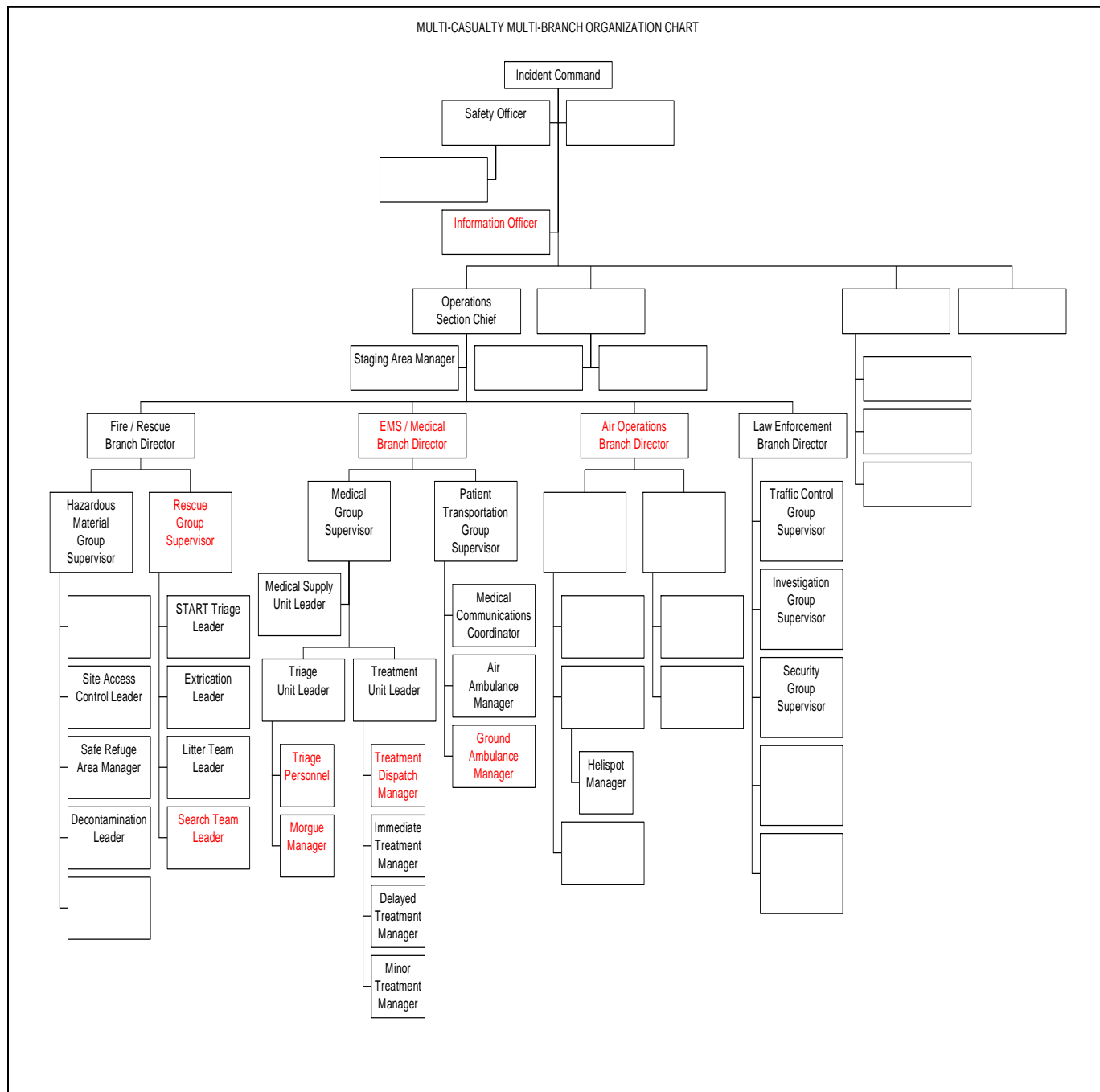
- a. Establishes a Patient Transportation Group Supervisor.
- b. The Medical Group Supervisor establishes a Medical Supply Unit Leader and a Manager for each treatment category.
- c. An Operations Section Chief is established to provide focus on tactical and strategic command functions and issues.
- d. A Helispot Manager is designated if transportation by helicopter is being done.
- e. An Incident Safety Officer has been designated.
- f. If a significant Haz Mat or WMD problem exists with numerous contaminated victims a Hazardous Material Group Supervisor is designated.
- g. A Safe Refuge Area Manager may also be needed to manage contaminated victims within the Hot (exclusion) zone.
- h. A Security Group Supervisor is added to ensure incident security.



Multi-Branch Response Organization

All positions within the EMS/Medical Branch and Patient Transportation Group are now filled as are most positions in the other groups.

- a. Four Branches are being utilized including an EMS/Medical Branch.
- b. The Air Operations Branch is shown to illustrate the coordination between the Air Ambulance Coordinator and the Air Operations Branch.
- c. A Hazardous Materials Group staffed by a qualified Hazardous Materials Response Team can easily be completed under the Fire/Rescue Branch Directed if needed.
- d. Additional law enforcement functions can also easily be added under the Law Enforcement Branch Director.



Multi-Section Response Organization

The Multi-Section organization shows the entire Multi-Casualty Organization along with Section Chiefs needed to begin support functions.

- Each Branch could be further sub-divided into Divisions to accommodate geographic separation except for the Patient Transportation Group. This is because all patient transportation is coordinated through one point to avoid overloading hospitals or other medical facilities.
- The Hazardous Materials Group is also shown as being completely staffed by a qualified Hazardous Materials Response Team.
- The Planning Section, Logistics Section and Finance Section can of course be expanded to meet incident needs.

