

needed medical transportation arrangements and/or other logistical needs for moving patients to out-of-county hospitals.

Section 3.12 Patient Distributions in a Level 4 MCI (Red) Alert

A Level 4 MCI is a catastrophic event. For planning purposes, it is assumed that there is a complete disruption of the city response and communications infrastructure. The ability for a formal emergency response and patient distribution system to be organized will be determined at the time of the incident based upon the presenting circumstances. A decentralized command structure using Emergency District Coordination Centers may be invoked by SFFD when central dispatch is interrupted. Ambulance response units may be organized through the Emergency District Coordination Centers until the dispatch communications infrastructure and central command are restored. Patient distributions may be directed through the Emergency District Coordination Center with the overall goal of executing mass medical evacuations. See Appendix B Battalion Control for additional details.

Section 3.13 Alternate Care Sites

The Department of Public Health may set up free-standing alternative care sites with their disaster tents. The MHOAC and Department of Public Health - Health Officer will determine the role of free-standing alternative care sites in supporting the medical system and/or field operations and what outside support is needed (e.g. state or federal Disaster Medical Assistance Teams).

Section 3.14 Mass Medical Evacuations

3.14.1 Procedures

Mass medical evacuations may be undertaken when all in-county medical and health facilities are at capacity or compromised due to damage to their infrastructure. Due to the resource intensive nature of medical care, mass medical evacuations may also be done when there is significant damage to non-medical infrastructures or utilities (e.g. water, etc.) that interferes with the ability to provide critical support services to medical facilities to keep them open.

The MHOAC, in consultation with the Health Officer, city leadership, and the medical facilities will determine whether to undertake mass medical evacuations after weighing its benefits versus risks. The MHOAC with support from the EOC's Public Health & Medical Services Group will work through the RDMHC and California Dept of Public Health/State EMS Authority Joint Emergency Operations Center (JEOC) to secure transportation and out-of-county destinations. Possible transportation options include but are not limited to: