

Section 6: Health & Medical

General Information

I PURPOSE

To describe in general how the health and medical needs will be met in Swift County following a disaster. The listed agencies may also provide assistance with special needs populations during a disaster.

II PRIMARY RESPONSIBILITIES

A. Hospital Care Facilities

Treatment of sick and injured (including stabilization of patients needing specialized care or transferal due to volume); coordination of medical staff with the National Disaster Medical System (MDMS) responders. In the event there is a need to provide facilities to decontaminate radiological, chemical or biological contaminated casualties contain the Swift County Benson Hospital (320) 843-4232 and/or Appleton Municipal Hospital at (320) 289-2422. (*32, *36)

B. Ambulance Services (*30, *31)

Transportation of sick and injured needing medical assistance or those who are unable to be transported by private vehicle. It also includes delivering injured to a care facility, transferring from one facility to another, and evacuation of non-mobile evacuees. (may augment with transportation of less injured or ill patients with other services).

C. First Responders

Initial care of injured or sick individuals until an ambulance service transports.

D. Mortuary Services

The County Coroner and Deputy Coroners for mortuary operations will be in charge of recovery and documentation of individuals, personal effects, and autopsies of the deceased. (*35).

E. County Health Services (*34, *36)

Countryside Public Health is responsible for serious or actual health problems, including epidemics, food and/or water contamination, unsafe living conditions, etc. Along with those responsibilities they will be in charge of inquiries and referral of questions associated with health risks. This is also outlined in Section 10, Congregate Care.

F. Red Cross (*33)

The Red Cross, in conjunction with Countryside Public Health, will make arrangements to care for victims due to mass casualties and/or disease outbreaks. This is also outlined in Section 10, Congregate Care.

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- G. Swift County Sheriff (*31, *43)
In the event that there is a requirement for the evacuation of handicapped and elderly persons, the Swift County Sheriff will assign responsibility to community agencies such as fire departments, city and local bus agencies and ambulances to assist in their evacuation. Ambulance units will only be used in those instances when there is a need to have medical assistance. Ambulances will only be used as a last resort.
- H. The Counseling Associates will be responsible for obtaining crisis counseling for all emergency workers.
- I. Salvation Army
Provide food, congregate care and personal needs.
- J. Transportation
Provided by local bus companies.
- K. Adult Day Care: Meadow Lane Healthcare Center, Homestead North and South (only if a vacancy exists).
- L. Response to a mass fatalities incident will be coordinated by the County Medical Examiner as described in the County Emergency Operations Plan. Family assistance may be rendered by the American Red Cross and or the Salvation Army.
- M. Serious Potential or actual health threats may be present in a disaster. Examples include:

<u>Health Threat</u>	<u>Assessing/Coordinating Organization</u>
Disease bearing pests	Countryside Public Health Local environmental health departments Minnesota Dept of Health Center for Disease Control & Prevention
Decontamination	Local fire departments & mutual aid Swift County Benson Hospital (320) 843-4232 and/or Appleton Municipal Hospital at (320) 289-2422
Detection of potential biological Chemical or radioactive agents	Local fire departments 55 th Civil Support Team State hazmat teams Local hospitals MN Dept. of Health Center for Disease Control & Prevention

Food contamination	Countryside Public Health Local environmental health departments MN Dept of Health
Respiratory protection	Local fire departments Local hospitals
Mass Care	Countryside Public Health MN Department of Health Swift County Benson Hospital (320) 843-4232 and/or Appleton Municipal Hospital at (320) 289-2422
Water purification/supplies	Local utilities Local vendors National Guard

Standard Operating Guide for Section 6 Health & Medical

I PURPOSE

This SOG is intended to provide assistance in the event of a natural or man-made disaster.

II SUPPORTING PLANS

- A. All hospitals will maintain their own disaster plan and training plan according to Department of Health criteria. Included in those plans will be their guidelines for dealing with chemical emergencies, information where to transfer patients needing specialized care or overload patients, and how to maintain supplies.
- B. Countryside Public Health will also maintain a plan to provide guidelines for their response in an emergency.
- C. The Swift County Coroner will acquire additional assistance from the Minnesota Funeral Directors Association (MFDA) and guidance from the Emergency Mortuary Response Plan developed by the MFDA. MN Department of Health can also be called upon for assistance.

IV ADDITIONAL INFORMATION IS OUTLINED IN THE FOLLOWING

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Mass Casualty Guide (*30)

First Responding Crew

EMS OPERATIONS CHIEF RESPONSIBILITIES

1. Any EMS individual arriving at the scene of a mass casualty incident first will assume the responsibility of EMS operations. All responsibilities for EMS functions at the scene will be his / hers. Delegation of these duties can and should be passed out as required, but are ultimately his / her responsibility.
2. Identify and establish contact with Fire and Police in command. If required, the command post will be set up and identified by some type of obvious marker.
3. In situations that have EMS, Law, and / or Fire concerns a unified command version of Incident Command will be used.
4. Quickly obtain initial information and identifying yourself as the EMS Operations Chief and contact the Law Enforcement Center Communications Officer as to:
 - A. The scope of the situation
 - B. Number and type of injuries
 - C. Additional resources required
 - D. Best route into area
 - E. Staging if required
5. Assign a Triage Officer and a Treatment and Transportation Officer.
6. Update Dispatch on casualties, approach route, and the staging area.
7. Request additional assistance from Law Enforcement, Fire, and other resources as needed.
8. Check with receiving hospitals for ability to receive patients.
9. Keep a running record of patients to include
 - A. Name Status
 - B. Type of injuries
 - C. Transportation destination
 - D. Incident relationship

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Mass Casualty Guide (Cont)

10. The EMS Operations Chief may relinquish his duties as EMS Operations Officer to any one who he / she feels can do the job given the circumstances. Dispatch, Command, and Section Officers must be informed of this change.

TRIAGE OFFICER RESPONSIBILITIES

1. Any EMS individual arriving on the scene with the first responding unit that is not the EMS Operations Officer or the next EMS individual arriving on the scene may become the Triage Officer.
2. The Triage Officer will assess all patients and categorize them into one of four categories
 - A. Red
requiring immediate care and transportation due to life threatening injuries.
 - B. Yellow
transportation can be delayed until patients with life threatening injuries have been cared for.
 - C. Green
patients with minor injuries.
 - D. Black
patients who are already dead or who are so severely injured that care given to them would deprive others who have a better chance of survival.
3. Establish a triage area that should meet the following criteria
 - A. Clear of hazards and obstructions
 - B. As safely close to incident as possible so that patients are not carried farther than necessary.
 - C. As close to Command as possible.
 - D. Easily identified by all responding units.
4. Relay information on numbers and status to EMS Operations Chief and Treatment & Transportation Officers if they have been assigned.
5. Direct incoming crews to patient assignments verbally or in large-scale operations by a tag system.

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Mass Casualty Guide (Cont)

TRANSPORTATION OFFICER RESPONSIBILITIES

1. Coordinate the transportation of all patients to receiving facilities in order assigned by triage and room availability. Ideally an ambulance could transport one 1 RED, 1 YELLOW, and 1 GREEN (in the cab).
2. Arrange and monitor the relocation of walking wounded and / or uninjured individuals to safer areas and or sheltering.
3. If required, develop a staging area for ambulances to await transportation assignments that has easy access for arrival and departure, and advise EMS Operations of their location.

TREATMENT OFFICER RESPONSIBILITIES

1. Coordinate the efforts of all individuals providing treatment within the triage area and extrication at the scene.
2. If necessary establish an equipment staging area to aid in the use and inventory of equipment. Acquire additional equipment from responding vehicles to provide care at the scene as allowed before transportation. The Treatment Officer will inform the EMS Operations Chief of this location.

Additional Responding Units

All other EMS units responding shall report to the EMS Operations Chief or staging area where they will be informed of:

1. Functions to perform
2. Best access
3. Where to locate their vehicle
4. Any other pertinent information deemed necessary

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The following facilities can be converted to Emergency Treatment Centers in the event of Mass Casualty or Disease outbreaks:

1. Our Redeemer's Church basement Fellowship Hall, Benson MN
2. Benson High School, Benson MN
3. K.M.S. High School, Kerkhoven MN
4. K.M.S. Elementary School, Murdock MN
5. National Guard Armory, Appleton MN

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No.	Patient	Tag No.	Color	Amb.	Hosp.	Time
1.						
2.						
3.						
4.						
5.						
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23.						

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EMS Mutual Aid Agreement (*08)

The following is the standard version of the mutual aid contract between the EMS services within Swift County. Mutual aid agreements with the following EMS providers:

1. Benson Ambulance
2. Appleton Ambulance Service
3. Kerkhoven Rescue Squad
4. Murdock First Responders
5. Danvers First Responders
6. Boondocks First Responders
7. Swift Falls First Responders

I PURPOSE

The purpose of this agreement is to identify and record the willingness of the above organizations to mutually assist each other during periods of ambulance system overload and to specify the terms of that assistance. Mutual Aid ambulance response coverage will be made, when requested, if the assisting service will not significantly jeopardize its ability to provide emergency response to its own community.

II SERVICE FEES

Each service agrees to be responsible for billing directly those patient(s) who are transported as a result of providing mutual aid for their reasonable and customary charges. It shall be the responsibility of the transporting agency to collect reimbursement for patient transport services rendered.

III LIABILITY COVERAGE

Each service agrees to provide and maintain its own appropriate liability, vehicle, workers compensation, and professional malpractice insurance in amounts that, at a minimum, are equal to those that are required by law and state licensure.

IV COMMUNICATIONS

Communications between EMS providers and their communications center(s) will take place on their customary dispatch channels.

V RECIPROCITY OF SIMILAR ASSISTANCE

It is the intent of this agreement that both services will provide the same type of reciprocal and mutual assistance to each other whenever possible.

If either party wishes to discontinue this agreement, the other party must be notified in writing 60 days in advance.