

Objective #13 Medical Facilities Demonstrate, or discuss in a tabletop exercise, the adequacy of procedures and/or guidelines, facilities, and equipment to receive and treat victims involved in a hazardous materials incident.
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A Basic Intent

Medical facilities (hospital or free standing ED) within the County and in surrounding areas differ in their ability to support chemical incidents. This Objective is best suited to evaluate those medical facilities that have trained staff and established procedures and/or guidelines to receive and treat victims of a chemical incident. The facility should have procedures and/or guidelines to establish appropriate contamination controls, have the capability to research the chemical hazards, and be able to provide their personnel with suitable PPE.

B Discussing the Points of Review

1. *Were appropriate actions taken to coordinate patient arrival with the arriving emergency medical squads, to include equipping personnel to safely handle arriving patients?*

The medical facility should have a pre-designated area where victims would be delivered and should be confirmed with EMS personnel before the first patient arrives. This is done to limit the chances that a critical area of the facility will be closed due to contamination. Some sites use alternate entrances rather than going straight into the emergency room. Victims may arrive after being decontaminated on-scene or they may arrive on their own without going through a decontamination process. Medical facility personnel should be equipped to protect themselves from possible exposure to any chemicals remaining on the arriving victims. Internal procedures and/or guidelines may dictate that a specific level of PPE will be worn regardless of the situation. Personnel should be trained on the proper manner to don and wear the PPE chosen. The medical facility should also inform EMS or the IC when no more victims can be accepted at the site.

2. *Were arriving patients and EMS personnel safely received, handled, and treated based on injuries and contamination levels?*

Once EMS personnel arrive with victims, the medical facility should have personnel in-place and suited to handle and treat victims. They should be ready to decontaminate victims as needed. They should evaluate EMS personnel for signs of exposure and treat them accordingly. Squad members should be questioned as to how they feel and what precautions were taken when handling this victim. They should have procedures and/or guidelines in-place to remove and isolate contaminated clothing if needed. They should determine whether to treat the injuries while wearing PPE or move the patient to other medical personnel after the patient is decontaminated. Those not contaminated should be moved directly to a clean area for immediate treatment.

3. *Were security measures in-place to control access to the receiving, treatment, or other potentially contaminated areas?*

As victims arrive, the receiving area should have a controlled access that limits the possibility of contamination outside of the area. Procedures should be in-place to transfer a patient from a contaminated area into a clean area. Medical personnel should not freely move between each area. Control measures may include closing off access, removing or covering non-

essential equipment, and isolating ventilation systems. Outside of the receiving and treatment areas, access should be limited to only essential personnel. Security may even be needed outside of the medical facility to manage the arriving squads, the general public, and possibly media groups.

4. *Was the medical facility able to communicate with the Incident Command and/or EMS personnel?*

This process requires adequate communications with personnel on-scene. The medical facility should have direct communications to the scene's EMS personnel or the incident Command Post. This may be through cellular phone, dedicated radios, or relayed via dispatchers. The facility should also be proactive to request information rather than waiting for the scene or individual squads to provide information. Internally, the medical facility should have communications to coordinate activities if the receiving area is isolated from other operations. Communications should permit the exchange of equipment and information from the receiving area and the rest of the facility.

5. *Were procedures and/or guidelines followed to safely contain and dispose of contaminated materials?*

A process should be used to decontaminate those personnel who treated patients and thus may have been exposed to the victims. Runoff from the process should be properly contained for disposal. This process should also address how to handle a patient's personal items or EMS equipment that may be contaminated. Finally, the process should confirm the area is clean before it returns to normal operations.

6. *Were records kept to document resources expended and actions taken?*

Personnel within the medical facility should take note of various actions relating to this event. This may include notes on what materials were involved, which patients received decontamination on-site, what types of PPE was issued, who wore the PPE and for how long, and how the decontaminated wastes were managed.

7. *Were the actions taken based on existing plans and/or operating procedures?*

The LEPC plan is required to contain the procedures used by medical facilities to support on-scene operations. These concerns may already be addressed in the medical facility's SOPs. It is also noted that OSHA requires Operations Level training for those hospital whose personnel will conduct decontamination operations at the facility.

C Exercise Design and Control Issues

Obviously, this Objective requires the medical facility to receive and treat victims of a chemical incident. The victims should have varying types of injuries and chemical exposures. The number of arriving victims should be enough to fully test the facilities ability to handle the patient load. If multiple facilities are to participate, each should receive a variety of patients. The Exercise Design Team could also arrange for some victims to arrive as walk-in patients. The walk-ins can simulate the evacuated public who believes they were exposed to an airborne chemical.

For Tabletop exercises, the exercise Controller will need to outline the injuries of each victim so the Players can respond accordingly. The Controller should provide victim information for a

few patients at a time to reflect the reality of how many victims will arrive via squad. This discussion may stem naturally from the discussion of response operations and victim rescue/treatment by entry, decon, and EMS personnel.

For Functional or Full-Scale exercises, there will need to be ample victims to fully test Medical facility personnel. EMS personnel need to relay victim's injuries and status before arrival at the medical facility. There should also be a good mix of injuries and levels of contamination. Some victims may even be staged to arrive at the medical facility on their own and thus challenge medical facility procedures and/or guidelines. If there are not sufficient EMS squads to transport victims, the victims may be staged in the medical facility parking lot and then sent to the ER at pre-coordinated intervals.

As a side note, victims should be prepared to be decontaminated by the medical facility. This means they should wear clothing that can be removed or cut from the body. A bathing suit should be worn under the clothing to permit washing during the decontamination. Dry clothing should be pre-staged at the facility to allow victims to change after their role is complete. The Exercise Design Team should also make arrangements to pick-up and/or return victims who arrived to the facility from off-site via EMS squad.

Finally, a real emergency may arise for the medical facility and so there should be a procedure to terminate operations if needed. Some facilities may wish to continue playing the exercise along with managing the real emergency. Some will need to temporarily terminate exercise play and continue after the real emergency is terminated. The Exercise Design Team will need to clearly pre-establish how the decision to halt the exercise will be made.

D Evaluation Needs and Issues

The Evaluator should be familiar with medical facility operations. This can be an emergency room doctor, nurse or emergency manager from the facility or from a neighboring medical facility. This could also be an EMS Personnel with Operations Level training. The Evaluator will be located within the medical facility where victims will be received and treated.

This Objective can be evaluated along with Objective #12. In this case, the Evaluator will first observe the EMS function on-scene and then may go with an EMS squad to the medical facility to observe those procedures.

County: _____	Date: _____
Evaluator Name: _____	Evaluation Location: _____
Title: _____	Phone Number: _____

OBJECTIVE 13 MEDICAL FACILITIES: Demonstrate, or discuss in a tabletop exercise, the adequacy of procedures, facilities, and equipment to receive and treat victims involved in a hazardous materials incident.

POINTS OF REVIEW (Hospital Services)

	Yes	No	N/A
1. Were appropriate actions taken to coordinate patient arrival with the arriving emergency medical squads, to include equipping personnel to safely handle arriving patients?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: _____			

2. Were arriving patients and EMS personnel safely received, handled, and treated based on injuries and contamination levels?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: _____			

3. Were security measures in place to control access to the receiving, treatment, and other potentially contaminated areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: _____			

4. Was the medical facility able to communicate with the Incident Command and/or EMS personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: _____			

5. Were procedures followed to safely contain and dispose of contaminated materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: _____			

6. Were records kept to document resources expended and actions taken?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: _____			

7. Were the actions taken based on existing plans and/or operating procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: _____			

Recommendations: _____

POINTS OF REVIEW (Hospital Services)

Yes No N/A
