

County of Santa Clara Countywide Medical Response System

County EMS Agency Field Operations Guide

An operational guidance document for EMS Agency Personnel, EMS Duty Chief, EMS Commander, and EMS Director

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Santa Clara County Emergency Medical Services Agency 976 Lenzen Avenue San Jose, California 95126





Table of Contents

Emergency Management Mission	3
Contact Information	4
Position Descriptions	5
Standard EMS Agency Notifications	8
Alerting and Notification	12
EMS Duty Chief Coverage	13
Uniform and Identification	16
Emergency Vehicle Operations	17
Still Alarm	20
Documentation	21
Operational Area Mutual Aid	22
Region II Mutual Aid (Outside of the OA)	24
Medical-Health Command Staff Assignments	26
Supervisor/Management Assignments	27
Expanded Medical-Health Dispatch Operations	28
Expanded System Status Management Operations	29
Available (Medical-Health Resources)	30
FAA Alert II & IIL Response	31
FAA Alert III & Aircraft Down	33
Hospital Internal Disaster	35
Medical-Health Mutual Aid Requests Received	36
Patient Care Facility Evacuation	37
Care Facility Heat Event	40
Policy Deviation/Compliance	42
Health Department/Physicians Alert	44
MPMP Local Alert	45
MPMP Countywide Alert	46
MPMP Level I and II Activations	47

EMERGENCY MANAGEMENT MISSION

General Description

The Santa Clara County Emergency Medical Services Agency (Agency) shall insure the sound operation of the Emergency Medical-Health Services System within the Operational Area as authorized by the California Code of Regulations, Health and Safety Code, Government Code, and County Ordinance Code.

The Agency will operate in accordance with the National Incident Management System and the California Standardized Emergency Management System.

In most cases, personnel will serve as an Agency Liaison or Agency Representative when working on the scene of a response. Based on the nature of the event, Agency personnel may be part of a Unified or Area Command.

Agency personnel may respond as an agent of the County Health Officer/Public Health Department based on the nature of an incident.

CONTACT INFORMATION

General Description

EMS field units (EMS 2-6/Squad1), EMS Duty Chief, EMS Commander, EMS Director may be contacted as identified below.

Description	Detail
Telephone	Santa Clara County Communications 408-998-3438
Radio	Station Call Sign: Med-91 Transmit: 811.4375 PL: 210.7 Receive: 856.4375 PL: 192.8 Station Call Sign: Command-92 Transmit: 812.4375 PL: 94.8 Receive: 857.4375 PL: 225.7 County Communications may receive requests through multiple radio frequencies.
Operational Area Medical Health Branch (when activated)	Medical Health Branch Operations 408-808-7740 408-808-7741
OASIS Satellite Telephone System	Received through the County Emergency Operations Center
California Health Alert Network (CAHAN)	 Notification of any of the following positions: Emergency Management Coordinator Medical Health Operational Area Coordinator Terrorism Coordinator Local Emergency Medical Services Agency

Position Descriptions

General Description

In order to maintain the sound operations of the Santa Clara County Medical-Health System, the following standardized positions are filled by representatives of the Public Health Department/Emergency Medical Services Agency.

Health Officer

The Health Officer is responsible for the overall health and welfare of the citizens and visitors of the County of Santa Clara and fills the role of the Medical-Health Operational Area Coordinator (MHOAC), in cooperation with the Director of Emergency Medical Services. The Health Officer reports administratively to the Director of the Public Health Department. During significant events, the Health Officer may respond to the County Operational Area Emergency Operations Center (OA-EOC) and serve as the Medical Health Branch Director or to the Public Health Department Medical-Health Operations Center (MHOC).

The Health Officer or a Deputy Health Officer remain on-call at all times and are available by phone. Deputy Health Officers report to the Health Officer for delegated responsibilities and to a Public Health Division Director administratively. Under the majority of circumstances, the Health Officer is not deployed to the field setting. If a field deployment is necessary, the EMS Duty Chief, EMS Commander, or EMS Director will provide response support and coordination.

In the absence of the Health Officer or Deputy Health Officers, the Health Officer of a neighboring County may be consulted until a local representative is identified. Under most circumstances, this coverage will be pre-arranged between the two physicians. In the event that an arrangement is not in place and the local Health Officer/Deputy Health Officers are not available, the Medical-Health Mutual Aid System will be accessed via the Regional Disaster Medical Health Specialist/Coordinator, State Operations Center, or DHS/EMSA Duty Officer.

The Health Officer may delegate any appropriate duties to other appropriate County staff. In addition to the Deputy Health Officers, various authorities are delegated to the Director of Emergency Medical Services, EMS Commander, and/or EMS Duty Chiefs. The Health Officer may also provide medical direction to the Santa Clara County Emergency Medical Services System when appropriate. Whenever possible, this shall be accomplished in conjunction with the EMS Medical Director.

The Health Officer and/or Deputy Health Officers are available through the County Communications Center.

Emergency Medical Services Director

The Director of Emergency Medical Services reports to the Director of the Public Health Department and also serves cooperatively as the Medical Health Operational Area Coordinator (MHOAC) with the Health Officer. The Director is responsible for the executive management of the Santa Clara County Emergency Medical Services System and Public Health Department Medical-Health Operations Center (MHOC) oversight.

The Director is on-call at all times and remains available for telephone/remote consultation. In his/her absence, the Director may appoint a lead Manager to maintain the daily operations of the Emergency Medical Services Agency. However, in relation to Medical-Health/Disaster Operations, the Senior EMS Specialist (EMS Commander) shall be the lead operational manager for all emergency operations (EMS/Public Health).

In most cases, the Director shall provide public policy-level guidance and direction to the EMS Commander and consult with other Executive Managers in the County. The Director responds to either the Operational Area Emergency Operations Center (OA-EOC) to serve as the Medical-Health Branch Director or to the Public Health Department Medical-Health Operations Center (MHOC).

The Director is equipped with an unmarked emergency vehicle and may respond to the field setting to assist in mitigation, response, and/or recovery operations.

EMS Commander

The EMS Commander is normally the Senior EMS Specialist of the Emergency Medical Services Agency. However, other qualified personnel may fill this role. The EMS Commander reports to the Director and provides council to command/Executive Managers as appropriate. The Commander is responsible for the operational aspects of the EMS and Public Health Response Systems and is on-call at all times for consultation and supervision of EMS field personnel.

The Commander serves as the Medical Health Mutual Aid Coordinator and reports cooperatively to the Medical Health Operational Area Coordinator. In the absence of the Health Officer and/or the EMS Director, the Commander may fill this role. The Commander may also fill the role of the Medical-Health Branch Director at the OA-EOC or as the Director or Operations Chief in the MHOC. In the absence of the Commander (out-of-service), the EMS Duty Chief reports directly to the Director of Emergency Medical Services. The Director or the EMS Commander remains available at all times.

The Commander has the authority to make any necessary modifications to the EMS/Public Health Response Systems as appropriate. This may include policy modifications, issuance of orders, system restrictions, etc. The Commander consults with the Director, Health Officer, and other appropriate personnel when managing the operational aspects of the system.

The Commander is equipped with an unmarked emergency response vehicle and may respond to the field setting.

EMS Duty Chief

The EMS Duty Chief is the primary manager of the daily operations of the EMS and Public Health System. Staff assigned to EMS Duty Chief/emergency operations roles report to the EMS Commander.

The EMS Duty Chief primarily serves as a facilitator, technical reference specialist, and agency representative. They work closely with public and private responders and provide council to command as appropriate. The EMS Duty Chief may provide transportation and support to Health Department personnel (Health Officers, Outbreak Teams, Public Information, etc.).

EMS Duty Chief coverage is accomplished through a standard rotation of qualified personnel. When assigned to coverage, the EMS Duty Chief is the primary contact for all EMS/Medical-Health issues that are under the authority of the Public Health Department. During this time, the EMS Duty Chief is required to be able to respond to inquiries within ten minutes of notification. At least one EMS Duty Chief is scheduled at all times (should an unforeseen event occur, the EMS Commander and/or Director may fill multiple roles).

The EMS Duty Chief is equipped with a marked emergency vehicle and is able to respond to support field operations. The EMS Duty Chief may also staff other emergency/support vehicles and staff.

EMS Field Supervisors/Managers (Private Services)

Santa Clara County Accredited EMS Field Supervisors/Managers are responsible for the management of their individual services daily operations. These supervisors/managers provide council to the EMS Duty Chief and are the key link to routine operational practices within the Emergency Medical Services System. These supervisors and managers are not government employees, and therefore, hold no power or authority of the County. However, they are required to adhere to the National Incident Command System (NIMS) and Standard Emergency Management System (SEMS).

In some cases, various authorities may be delegated to private service EMS managers and/or supervisors in accordance with appropriate authorities.

EMS/Fire/Law Enforcement Supervisors/Managers (Government)

These public service supervisors and managers are responsible for the daily management and mitigation of emergency incidents occurring within their jurisdiction. Other than regulatory authority, the EMS Agency and Public Health Department most often serve as agency representatives, technical reference specialists, or fill any assigned appropriate position.

In some cases, various authorities may be delegated to other government service managers and/or supervisors in accordance with appropriate authorities.

Medical-Health System Operational Area Management Emergency/Disaster Operations

	Medical Health Operational Area Coordinator (Health Officer and/or EMS Director)	Deputy Health Officers
Public Health Department Emergency Response Personnel	EMS Commander	EMS Agency Emergency Response Personnel
	EMS Duty Chief	
	Applicable Field Personnel	

STANDARD NOTIFICATIONS

General Description EMS Agency personnel shall be notified of the following events/conditions.

Standard	
Description	Detail
EMS Duty Chief Notifications	ALRTL, ALRTL2, ALRTL3 events at San Jose International Airport and equivalent events at Moffett Field. Small aircraft events do not need to be dispatched to the EMDC unless a response is requested by a public safety jurisdiction; this does not include Code 1000 events.
	All aircraft crashes (Code 1000).
	Multiple Patient Management Plan <u>Activations</u> . "Local Alerts" do not require EMDC notification.
	An "Emergency" status button has been activated (medical community) and dispatch is unable to confirm status or the emergency is verified.
	Any traffic collision involving an ambulance (including out-of county ambulances) or a private EMS vehicle of which County Communications is notified when (1) transporting a patient, (2) persons are injured, or (3) the incident may be high profile (damage to property, media interest, etc.).
	A hospital has advised of an internal emergency ("Black" EMSystem Status).
	Critically low ambulance system levels when one or more 911 calls are holding.
	A failure of the Base Hospital or other communications system (radio frequency failure, known loss of another PSAPs communications system, etc.).
	Requests for Medical-Health/EMS Mutual Aid or for the Medical Health Operational Area Coordinator (MHOAC) from another county, state, or federal partner.
	Two or more units are placed on standby for a 911 incident.

Any public safety agency requests notification or dispatch of the EMS Duty Chief.
Multiple responses to the same incident location, in a short period of time, for like signs and symptoms not related to an MPMP event (multiple responses to a school, heat illness, care facility, government institution, custodial facility, etc.)
Notification of a "Biowatch" or biological sensor activation by a governmental or governmental-appointed agency.
Notification of Bio Defense System (BDS) activation by a governmental or governmental-appointed agency.
Multiple alarm structure or wildland fires.
When two or more Trauma Centers have implemented "Trauma Bypass/Red" status.
When Communications personnel request Expanded Dispatch within the medical community or when County Fire has implemented Expanded Dispatch.
Significant law enforcement activity that may result in illness or injury to citizens or responders (barricade situations, civil unrest/violence, bomb unit operations, etc.). At times it may not be appropriate to dispatch these events over the air, in such cases; the EMDC shall be dispatched and advised to contact Communications for details.
Communication with the on-call county health officer (HLTH) has been attempted, but no response has been received by County Communications after sixty (60) minutes.
Tier 3 or 4 Air Resource requests. (Tier 1 and 2 removed).
Unusual or difficult responses to the San Antonio Valley or other remote/wilderness area that may result in extended response of EMS units (air units not able to fly, response times in excess of 45 minutes, multiple patients, etc.). This should include closures of Mount Hamilton Road (snow), Pacheco and Hecker Pass, Highway 35 (Summit/Skyline), Highway 17, etc. when known to County Communications.

Receipt of a "Tsunami Warning", "Tsunami Alert", or "Sea Surge" from a governmental partner (State OES, Region 2, etc.).
Anytime that the Watch Commander or County Communications personnel believe notification is warranted or when a request to modify system operations occurs.
Known threats to critical infrastructure such as potential/actual dam breech, loss of widespread critical public services (water, power, etc.).
Generally, the EMS Duty Chief will advise Communications when contact/notification with the EMS Commander is indicated. However, at times this may not be possible; therefore the following notifications should be made as appropriate:
Failure of the EMDC to respond to a dispatch within 20 minutes.
EMDC or other EMS unit (EMS 2-6/Squad1) are involved in a traffic collision or advises of injury.
Level 3 Multiple Patient Management Plan Activations or Countywide Alerts.
All aircraft crashes (Code 1000) or ALRTL3.
An "Emergency" status button has been activated by the EMDC and dispatch is unable to confirm status or the emergency is verified.
Any unresolved issue related to the performance of the EMS Duty Chief at the time of an incident.
When requested by the Watch Commander or other public safety partner.
When the EMS Duty Chief is committed to a response (ie: fire at a skilled nursing facility, etc.), all EMDC notifications shall be directed to the Commander when the Commander has "Assumed Command of the EMS System". In such cases, the EMDC will manage the medical-health components of the on- scene activities and the Commander will manage EMS System operations.

EMS Director Notifications	Generally, the EMS Commander (CMDR) will advise Communications when contact/notification with the EMS Director is indicated. However, at times this may not be possible; therefore the following notifications should be made as appropriate:
	Failure of the CMDR to respond to a dispatch within 30 minutes.
	CMDR is involved in a traffic collision or advises of injury.
	An "Emergency" status button has been activated by the CMDR and dispatch is unable to confirm status or the emergency is verified.

ALERTING AND NOTIFICATION

General Description

All EMS Specialists, Senior EMS Specialists, and the EMS Director maintain varied degrees of on-call responsibilities. Minimum alerting standards are provided for standard emergency response assignments. Any variation must be approved by the Senior EMS Specialist or EMS Director.

Description	Detail
EMS Specialists	 Alphanumeric pager set to alert (may be directed through a smart phone such as the County provided Blackberry). Mobile phone with WPS service. Unit logged-on (EMS3-5) with County Communications (unless on authorized time off). County Communications shall be notified when personnel are out of County when the field response time exceeds forty-five (45) minutes.
Duty Chief	 Alphanumeric pager set to alert (may be directed through a smart phone such as the County provided Blackberry). Mobile phone with WPS service. Unit logged on (EMDC) with County Communications County Communications shall be notified when personnel are out of County when the field response time may exceed forty-five (45) minutes. Radio-pager set to alert. Portable EMS Communications System radio.
Commander	 Alphanumeric pager set to alert (may be directed through a smart phone such as the County provided Blackberry). Mobile phone with WPS service. Unit logged-on (CMDR) with County Communications. County Communications shall be notified when the Commander is out of County.
Director	 Alphanumeric pager set to alert (may be directed through a smart phone such as the County provided Blackberry). Mobile phone with WPS service. Unit logged-on (DIR) with County Communications.

EMS DUTY CHIEF COVERAGE

General Description

The EMS Duty Chief serves as the primary County-level medical-health system manager. The EMS Duty Chief remains available for response 24-hours per-day, 7-days per-week, 365-days per-year.

The EMS Duty Chief reports to the EMS Commander or the EMS Director in the absence of the Commander.

Standard	
Description	Detail
Requests for Service	The Duty Chief shall respond to all requests for service within ten (10) minutes (this does not include field response).
Field Response	When a response is requested or necessary, the Duty Chief shall respond within forty-five (45) minutes of the request.
Requesting Service	Requests for the Duty Chief shall be routed through County Communications.
Availability	• The Duty Chief shall insure the ability to be contacted at anytime. In some situations, this may entail notifying County Communications of temporary alternate contact means (radio watch, satellite phone, landlines, etc.).
	 The Duty Chief shall not leave the County when response back into the County is in excess of sixty (60) minutes unless approved by the EMS Commander or Director.
	• The Duty Chief shall be provided with a vehicle equipped to respond with red lights and siren during scheduled rotations. The vehicle must be maintained in a ready fashion and be easily access able should a field response be required.
	 In the event that the assigned Duty Chief is unable to respond for a period of time, they shall make immediate arrangements with another available Duty Chief. If another Duty Chief is not available, the EMS Commander should be contacted for direction.

Variances	 Duty Chiefs may trade hours and shifts as necessary. In the event that a Duty Chief requests time off from a scheduled shift, but is unable to find an appropriate coverage, the scheduled Duty Chief must cover the shift unless the time off is approved by the EMS Commander.
	• The Director or EMS Commander may elect to place the Duty Chief out of service as appropriate. In such cases, County Communications shall be notified of an appropriate contact should a request for the EMS Duty Chief be received.
	 In the event that the scheduled Duty Chief becomes incapacitated, the EMS Commander shall assign any other appropriate person to fill the vacancy. This will normally be covered by the EMS Commander but may also be assigned to other EMS Specialists (EMS Duty Chief qualified).
	 In the event that an emergency vacancy occurs, the EMS Commander or the Director may assume the role of EMS Duty Chief, place the unit out-of-service, or implement an interim solution. This may include facilitating coverage through other public safety officials or authorized designees.
	 Additional personnel may be placed on-call for significant scheduled events and gatherings such as New Years Eve, Fourth of July, etc. which may result in an unusual EMS/Medical-Health system occurrence.
	 The EMS Commander will announce additional staffing needs as necessary. Filling of vacant positions will occur first by volunteers and then by seniority (scheduled time off requests will also be considered).
	 In the event that an EMS Specialist is assigned to Duty Chief Coverage on a County holiday; the Commander may authorize "holiday worked" hours, based duties to be performed that exceed routine on-call activities (field presence for scheduled events (Independence Day, etc.). Use of "holiday worked" hours must be approved in advance.

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Training Status	 EMS Specialists that are training for independent duty will be partnered with a qualified EMS Specialist or Senior Specialist. Specific training programs will vary based on the knowledge, experience, and abilities of the EMS Specialist. An EMS Specialist that has not been released from training status may not cover scheduled rotations, unless approved by the EMS Commander or Director.
Readiness	 All EMS Specialists must remain ready for emergency field response. This includes having ready access to all equipment and supplies necessary for such response (radios, personal protective equipment, etc.). In most cases, equipment and supplies shall be maintained at the employees workstation, vehicle, or other appropriate location.
Chain of Command	The Commander may assume Medical-Health System Command from the Duty Chief as appropriate. The Director may assume Medical-Health System Command from the Commander as appropriate.
	 In the event that multiple Specialists are activated to fill Duty Chief duties at the same time, the Commander or/Director will assign specific duties and areas of responsibility.

UNIFORM AND IDENTIFICATION

General Description EMS Agency personnel don appropriate uniforms and identification as necessitated by the nature of the incident.

Description	Detail
Identification	All personnel shall display a Santa Clara County Emergency Medical Services System Identification Card when serving in any official capacity.
Uniforms	Personnel shall wear an authorized uniform when responding to and working on the scene of an incident. Personnel shall determine the specific components based on the nature of the event, time of day, safety, and environmental conditions. Only approved uniform items may be worn.
Personal Protective Equipment	Personnel shall wear the provided personal protective equipment as appropriate for the incident. This may include helmet, jacket, gloves, goggles, and hearing protection.
	Air Purified Respirators (APRs) and Self Contained Breathing Apparatus (SCBA) are provided for personnel that are required to work in specialized environments.
	Ballistic vests are provided for passive protection.
	All personnel are provided with Level B and C equipment. Level A equipment is available as required.

EMERGENCY VEHICLE OPERATIONS

General Description

Public Health and EMS Agency personnel shall operate emergency vehicles in a safe and prudent fashion at all times.

Description	Detail
Readiness	Personnel assigned a vehicle are responsible to insure that the assigned emergency response vehicle is ready for response at all times.
Notification	Agency staff shall notify and maintain status with County Communications when responding to a call.
Emergency Driving and Use of Lights and Siren	 Qualified and approved EMS Agency personnel may operate vehicles with red lights and siren when appropriate.
	 The Agency staff shall follow all emergency driving guidelines and adhere to all applicable vehicle laws related to the operation of emergency vehicles.
	• The Agency staff shall discontinue the use of red lights and siren operation whenever it may create an undue hazard to the general public or the operator. This includes weather, citizen confusion/safety (civilian is following a code-three vehicle, etc.).
	• When responding with red lights and siren, the emergency vehicle shall come to a full and complete stop at all red lights prior proceeding through the intersection. This is more restrictive than the vehicle code.
	• The vehicle operator (and any other passengers) shall don the provided hearing protection/intercom system headset prior to red lights and siren operation.
	 Only authorized County personnel or other authorized emergency service personnel may operate the EMS Agency emergency vehicles.

Vehicle	 All EMS Agency vehicles shall be secured when unoccupied.
	 Whenever possible, the vehicle shall be parked in fashion that enables rapid response and movement (backing into parking spaces, leaving maneuvering room, etc.).
	 The public address system shall only be used for providing emergency directions when appropriate.
	 All equipment and supplies carried in Agency vehicles shall be maintained and in an operable fashion.
	 Vehicle operators must be able to operate all equipment and supplies carried in Agency vehicles.
	 All vehicles shall be maintained with no less that one half tank of fuel at all times.
	 The vehicle shall be clean and free of debris at all times.
	 Vehicles shall be serviced in accordance with County policy.
Specialized Equipment and Supplies	Some EMS Agency vehicles carry specialized equipment and supplies. Only authorized and qualified personnel shall use these items.
Non-County Employee Passengers	If the need to respond to a call arises and another party other than a County employee is in the vehicle, the operator must cause the following to occur:
	 The party must be advised to limit distractions to the vehicle operator during response.
	• The party must remain in the vehicle upon arrival at the scene of an emergency (unless a safety issue arises requiring evacuation) or it is safe to enter the scene with an escort.

 The party shall be instructed of the units call sign and how to call for emergency assistance should the operator become incapacitated.
 If the party is a pre-approved ride-along or observer, they may exit the vehicle and enter the scene when under direct supervision of the operator. The party shall be clearly identified by appropriate means. Minors and those who do not wish to respond must exit the vehicle prior to response.

STILL ALARM

Still Alarm

A still alarm is any event that may require public safety services, has not been dispatched, and presents to responders.

EMS Agency personnel primarily serve in a command and control position, not a provider of emergency medical care. As such, Agency staff shall insure the appropriate medical-care response to attend to the needs of those who may be ill, injured, or in need of assistance.

✓	Description
	Once the EMS Agency staff have determined that an incident has occurred, the primary role shall be to ensure the safety of the general public and those involved in the incident, with due regard to their own safety.
	Agency staff shall position in the vehicle in a fashion that provides for the safety of the staff and for those involved in the incident (ie: blocking traffic, securing a roadway, etc.). As appropriate for safety, Agency staff may take all appropriate actions while inside the vehicle or until other emergency responders arrive on the scene.
	Agency staff shall notify County Communications of the incident location and request any immediate need resources. As soon as is possible, the Agency staff shall provide a report on conditions to County Communications and make any additional resource requests.
	Agency staff shall don appropriate protective equipment prior to accessing an emergency incident.
	Agency staff shall direct bystanders, with due regard to their safety, to provide basic first aid as appropriate. Agency staff shall not to provide medical care unless absolutely necessary. The primary role of the Agency staff is to control the scene and insure the response of appropriate emergency services.
	Upon the arrival of public safety personnel, the Agency staff shall transition Incident Command, including a face-to-face report on conditions, and then fill any appropriate role assigned. If the first unit on-scene is a private resource, Agency staff may retain command and then direct the resource to provide medical care as indicated.

DOCUMENTATION

General Description

Santa Clara County EMS Agency personnel shall complete appropriate documentation related to medical-health events within the Operational Area or when associated with mutual aid responses.

Description	Detail
EMS Agency Incident Record	 An Incident Record must be completed by each unit assigned to a response or incident. Incident Records must be complete and submitted to the EMS Commander within 72 hours of the closure of an event.
Standardized Emergency Management System (SEMS)/National Incident Management System (NIMS)	 All personnel shall comply with applicable SEMS/NIMS documentation requirements. This includes the completion of applicable ICS forms such as the ICS-214 Unit Log, etc. All documents must be complete and submitted to the EMS Commander within 72 hours of the closure of an event.
Patient Care Records (PCR)	 EMS Agency personnel should not complete patient care reports. If a PCR is required, personnel shall dispatch appropriate medical resources.
	 Any first aid care that is provided by Agency staff shall be documented on the EMS Agency Incident Record.
Storage and Disposition of Records	 All documents shall be reviewed by the EMS Commander and/or EMS Director as appropriate.
	 Documents shall be maintained and stored as prescribed by Public Health Department Policy.
	 Documents shall be released and/or shared in accordance with Public Health Department Policy.

OPERATIONAL AREA MUTUAL AID

General Description

This document provides guidelines for the EMS Commander/EMS Director or other health official when using medical-health mutual aid within the Santa Clara County Operational Area. Use of these resources must be approved by the EMS Commander/EMS Director or Medical-Health Operational Area Coordinator (unless provisions have been approved in advance by the EMS Agency).

Туре	Fill Order
ALS Ambulances (non-disaster state)	 The contracted EOA providers shall have the first opportunity to fill any ALS ambulance requests. Other ambulance services with permitted ALS units will then be requested – both public and private. Municipalities with Supplemental Transport
	Ambulance Resources (STARs) will be notified to use their ALS transport as appropriate within their jurisdiction.
	 When both of the above items have not resulted in adequate numbers of ALS units, a SEMS mutual aid request will be made by the EMS Commander as appropriate.
ALS Ambulances (disaster state)	 When all actions above have been exhausted, a SEMS mutual aid request will be made by the EMS Commander as appropriate.
BLS Ambulances (non-disaster state)	 All requests for BLS ambulance use shall be made by the County to all of the private service providers. Those able to respond will be placed into the 911 System.
	 A SEMS mutual aid request will be made by the EMS Commander when appropriate.
BLS Ambulances (disaster state)	 All private ambulances (BLS) will be mandated to be placed into service, in accordance with County Ordinance, for assignment.
	 A SEMS mutual aid request will be made by the EMS Commander as appropriate.
Hospital Support (personnel, equipment,	 Hospitals shall implement provisions contained in existing disaster plans.
and supply)	 Hospitals shall implement provisions contained in existing hospital mutual aid agreements.

Medical-Health Supervisors Field Operations Guide

Туре	Fill Order
	 When these items are not adequate to meet the needs of the hospital, the County will assist in providing appropriate resources.
Medical Supply and Equipment	 Agencies shall exhaust all provisions for medical supplies and equipment contained in their disaster and continuity of operations plans.
	 If the need surpasses the provisions above, the County will attempt to fill the need through local caches and stores.
	 If the need surpasses the resources available in the Operational Area, a SEMS mutual aid request will be made as appropriate.
Health Officer	 Deputy Health Officers will be contacted in the absence of the Health Officer.
	 If a Deputy Health Officer can not be located, the EMS Commander will contact a Health Officer from a local Operational Area, if appropriate. In some cases, arrangements may be in place for county-to-county Health Officer coverage.
	 If an adjacent Operational Area Health Officer is not available, a SEMS request will be made.
Personnel (Medical-Health)	 Agencies shall exhaust all provisions for additional personnel/staffing contained in their disaster and continuity of operations plans.
	 If the need surpasses the provisions above, the County will attempt to fill the need through local resources opportunities.
	 If the need surpasses the resources available in the Operational Area, a SEMS mutual aid request will be made as appropriate.

REGION II MUTUAL AID (OUTSIDE OF THE OPERATIONAL AREA)

General Description

This document provides guidelines for the EMS Commander/EMS Director or other health official when using medical-health mutual aid outside of the Santa Clara County Operational Area. Use of these resources must be approved by the EMS Commander/EMS Director or Medical-Health Operational Area Coordinator (unless provisions have been approved in advance by the EMS Agency).

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Туре	Fill Order
ALS Ambulances (non-disaster state)	 The contracted EOA providers shall have the first opportunity to fill any ALS ambulance requests. Other ambulance services with permitted ALS units will then be requested – both public and private.
	 Municipalities with Supplemental Transport Ambulance Resources (STAR's) will be notified to use their ALS transport as appropriate within their jurisdiction.
	 When both of the above items have not resulted in adequate numbers of ALS units, a SEMS mutual aid request will be made by the EMS Commander as appropriate.
ALS Ambulances (disaster state)	 When all actions above have been exhausted, a SEMS mutual aid request will be made by the EMS Commander as appropriate.
BLS Ambulances (non-disaster state)	 All requests for BLS ambulance use shall be made by the County to all of the private service providers. Those able to respond will be placed into the 911 System. A SEMS mutual aid request will be made by the
	EMS Commander when appropriate.
BLS Ambulances (disaster state)	 All private ambulances (ALS and BLS) will be mandated to be placed into service, in accordance with County Ordinance, for assignment. A SEMS mutual aid request will be made by the EMS Commander as appropriate.

Medical-Health Supervisors Field Operations Guide

Туре	Fill Order
Hospital Support (personnel, equipment, and supply)	 Hospitals shall implement provisions contained in existing disaster plans. Hospitals shall implement provisions contained in existing hospital mutual aid agreements. When these items are not adequate to meet the needs of the hospital, the County will assist in providing appropriate resources.
Medical Supply and Equipment	 Agencies shall exhaust all provisions for medical supplies and equipment contained in their disaster and continuity of operations plans. If the need surpasses the provisions above, the County will attempt to fill the need through local caches and stores. If the need surpasses the resources available in the Operational Area, a SEMS mutual aid request will be made as appropriate.
Health Officer	 Deputy Health Officers will be contacted in the absence of the Health Officer. If a Deputy Health Officer can not be located, the EMS Commander will contact a Health Officer from a local Operational Area, if appropriate. In some cases, arrangements may be in place for county-to-county Health Officer coverage. If an adjacent Operational Area Health Officer is not available, a SEMS request will be made.
Personnel (Medical-Health)	 Agencies shall exhaust all provisions for additional personnel/staffing contained in their disaster and continuity of operations plans. If the need surpasses the provisions above, the County will attempt to fill the need through local resources opportunities. If the need surpasses the resources available in the Operational Area, a SEMS mutual aid request will be made as appropriate.

MEDICAL-HEALTH COMMAND STAFF ASSIGNMENTS FILL ORDER

General Description

In order to provide adequate support to various Medical-Health System events, the following shall provide the standard recommended response compliments for filling various medical-health positions (countywide).

Туре	Fill Order
Field Events	EMS Duty Chief (Field)
	EMS Commander (Communications)
Field Event with DEOC	EMS Duty Chief (Field)
Activation	EMS Commander (Communications)
	EMS Director (DEOC)
	EMS Agency Staff (DEOC)
	Level I DEOC Staff Activation (DEOC)
Field Event with DEOC	EMS Duty Chief (County Communications)
and EOC Activation	EMS Commander (EOC)
	EMS Director (DEOC)
	Level I DEOC Staff Activation (DEOC)
	Level II DEOC Staff Activation (DEOC)
	Health Officer (EOC)
EOC Only	EMS Commander
	EMS Director
	Health Officer
DEOC Only	EMS Director
	EMS Commander
	Health Officer

SUPERVISOR/MANAGEMENT ASSIGNMENTS FILL ORDER

General Description

In order to provide adequate support to various Medical-Health System events, the following shall provide the standard recommended response compliments for filling various medical-health positions.

Type	Fill Order
Field Supervisors	Contractors ALS Field Supervisor (first-due)
	Contractors ALS Field Supervisor (second-due)
	Contractors BLS Field Supervisor
	Contractors Acting Supervisors (additional)
	Non-Contracted Field Supervisor Fire A gauge (intra equation mutual aid)
	Fire Agency (intra-county mutual aid) Mutual Aid Field Supervisore
	Mutual Aid Field Supervisors
911- Ambulance Contractors - Manager	Contractors Operations Manager (AMR-100)
Contractors - Manager	Contractors Administrative Supervisor (AMR-101)
	Contractors ALS Field Supervisor
	Contractors Director of Operations
EMS Duty Chief	EMS Duty Chief
	EMS Commander
	EMS Director
	EMS Staff (EMS-3,4, or 5)
EMS Commander	EMS Commander
	EMS Director
EMS Director	EMS Director
	EMS Commander
Health Officer	Health Officer (HO1)
	 Deputy Health Officer (HO1 or HO2)
	 Out of County Health Officer via EMS Commander or EMS Director

Expanded Medical-Health Dispatch Operations

General Description

In order to maintain the sound operation of the Santa Clara County Medical-Health System, it may be necessary for a representative of the EMS Agency and/or the Public Health Department to assist County Communications personnel with the prioritization and allocation of medical-health resources during times of EMS/Public Health System surge.

System Management

The EMS Commander is responsible for executing Expanded Medical-Health Dispatch activities. In most cases, the Commander will respond to County Communications and work with the Watch Commander (or designee) to implement System modifications. This may include the implementation of Standard Dispatch Orders, use of intra/intercounty mutual aid, etc.

The Commander will work closely with the contracted EOA ambulance provider. The EOA ambulance provider is responsible for management of company units, system deployments, addressing personnel recall, and implementing company contingency plans.

The EMS Duty Chief may fill this role in the absence of the Commander or when assigned.

Expanded Dispatch Criteria

Expanded Medical-Health Dispatch should be considered in any of the following circumstances:

1	Requested by the County Communications Watch Commander or EMS Duty Chief
2	Multiple Standard Dispatch Orders are in effect
3	When the EOA contractors actions have not failed to meet system needs.
4	MPMP Level 3, 4, or 5 Activations
5	Occurrence of a significant event that may (or has) impact the EMS/Public Health System. May be in support of a scheduled activity or identified hazard.
6	When County Fire Implements Expanded Dispatch
7	When Activated by the EMS Director or EMS Commander

EXPANDED SYSTEM-STATUS MANAGEMENT OPERATIONS (EOA CONTRACTOR)

General Description

In order to maintain the sound operation of the Santa Clara County Medical-Health System, it may be necessary for a representative of the EOA Ambulance Service Contractor (EOA Agency Representative) to assist the County and County Communications personnel with the coordination of EOA resources and deployment.

System Management

The EMS Commander is responsible for executing Expanded Medical-Health Dispatch activities. In most cases, the Commander will respond to County Communications and work with the Watch Commander (or designee) to implement System modifications. This may include the implementation of Standard Dispatch Orders, use of intra/intercounty mutual aid, etc. The EMS Duty Chief may fill this role in the absence of the Commander or when assigned.

The Commander will work closely with the contracted EOA ambulance provider. The EOA ambulance provider is responsible for management of company units, system deployments, addressing personnel recall, and implementing company contingency plans. The EOA ambulance provider shall work under the EMS Commander or other County personnel assigned to manage various aspects of the Medical-Health System.

Expanded System Status Management Criteria

Expanded System Status Management should be considered in any of the following circumstances:

1	Requested by the County Communications Watch Commander
2	Multiple Standard Dispatch Orders are in effect
3	Low EOA Ambulance System Levels
4	All Levels of MPMP Activation
5	Occurrence of a significant event that may (or has) impact the EMS/Public Health System. May be in support of a scheduled activity or identified hazard.
6	When receiving out-of-county medical-health mutual aid
7	When Activated by the EMS Director or EMS Commander

Available Resources

~	Available Reso	urces	
1	Public Health/EMS Squad 1: Available through the EMS Duty Chief		
2	MCI/Field Treatment Site Trailers:		
	Trailer ID	·	Host Jurisdiction
		Field Treatment Site Trailer	Santa Clara County EMS PH
		Field Treatment Site Trailer	Santa Clara County EMS PH
	EMS UTL 153		Sunnyvale Public Safety
		Field Treatment Site Trailer	Santa Clara County Fire
		Field Treatment Site Trailer	Gilroy Fire Department
		Field Treatment Site Trailer	American Medical Response
		Field Treatment Site Trailer	Mountain View Fire
		Field Treatment Site Trailer	
		Field Treatment Site Trailer	
		Field Treatment Site Trailer	
		Field Treatment Site Trailer	
		Medical Reserve Corp Trailer Cabana Trailer	
3	Electronic Trac	king System Use	
4	Local Pharmac	eutical Cache	
5	Chempack		
6	Trauma/Burn C	aches:	
	San Jose Regio	onal Medical Center	
	Valley Medical	Center	
	Stanford Medic	al Center	
7	WMD Antidote	Kits	

FAA ALERT II & II-L RESPONSE

[•] S – Supervisor Role; D – EMS Duty Chief Role

✓ Description 1 FIELD SUPERVISOR (First Due) Upon dispatch, respond and prepare to assume Ground Ambulance Staging Manager, Transportation Group Supervisor, or other appropriate position upon arrival, if assigned. FIELD SUPERVISOR A scene response is not indicated. Primary responsibility is to manage the daily 911 System operations based on the needs of the event. DUTY CHIEF Upon dispatch, determine the need to respond or to monitor. Absent known risk factors (unknown if aircraft will make the field, hazmat cargo, et.), a field response for an ALERT II is not generally indicated. However, it is generally expected that a field response will occur for an ALERT II-L. 2 Acknowledge Dispatch (SD) 3 Attain System Levels (SD) 4 Attain Hospital Status (SD) 5 Attain Ambulance EMS Resource Response to the Incident and to the 911 System (SD) 7 Assign an EMS Command Tactical Channel as Necessary (EMS CMD 94) (SD) 8 Monitor Appropriate Fire Command Channel (D) 9 Norman Y. Mineta (San Jose) International Airport Stage and Contact SJFD Med-30 – Advise System Status and Receive Assignment (Provide T-Card) (SD) 10 Provide Report on Conditions to County Communications (SD) 11 Prepare EMSystem/Provide Notifications/Query as Appropriate (D)	-	S-Supervisor Role, D-EIVIS Duly Chier Role
 Hield Supervised (Harbote) Upon dispatch, respond and prepare to assume Ground Ambulance Staging Manager, Transportation Group Supervisor, or other appropriate position upon arrival, if assigned. FIELD SUPERVISOR A scene response is not indicated. Primary responsibility is to manage the daily 911 System operations based on the needs of the event. DUTY CHIEF Upon dispatch, determine the need to respond or to monitor. Absent known risk factors (unknown if aircraft will make the field, hazmat cargo, et.), a field response for an ALERT II is not generally indicated. However, it is generally expected that a field response will occur for an ALERT II-L. Acknowledge Dispatch (SD) Attain System Levels (SD) Attain Hospital Status (SD) Attain Ambulance and Supervisor Units Attached (SD) Assure Appropriate EMS Resource Response to the Incident and to the 911 System (SD) Assign an EMS Command Tactical Channel as Necessary (EMS CMD 94) (SD) Monitor Appropriate Fire Command Channel (D) Norman Y. Mineta (San Jose) International Airport Stage and Contact SJFD Med-30 – Advise System Status and Receive Assignment (Provide T-Card) (SD) Moffet Field and Municipal Airports (San Martin/Reid Hillview) Stage and Contact Operations Chief – Advise System Status and Receive Assignment (Provide T-Card) (SD) Provide Report on Conditions to County Communications (SD) Provide Report on Conditions to County Communications (SD) 	\checkmark	Description
FIELD SUPERVISOR A scene response is not indicated. Primary responsibility is to manage the daily 911 System operations based on the needs of the event. DUTY CHIEF Upon dispatch, determine the need to respond or to monitor. Absent known risk factors (unknown if aircraft will make the field, hazmat cargo, et.), a field response for an ALERT II is not generally indicated. However, it is generally expected that a field response will occur for an ALERT II-L. 2 Acknowledge Dispatch (SD) 3 Attain System Levels (SD) 4 Attain Hospital Status (SD) 5 Attain Ambulance and Supervisor Units Attached (SD) 6 Assure Appropriate EMS Resource Response to the Incident and to the 911 System (SD) 7 Assign an EMS Command Tactical Channel as Necessary (EMS CMD 94) (SD) 8 Monitor Appropriate Fire Command Channel (D) 9 Norman Y. Mineta (San Jose) International Airport Stage and Contact SJFD Med-30 – Advise System Status and Receive Assignment (Provide T-Card) (SD) 10 Provide Report on Conditions to County Communications (SD)	1	Upon dispatch, respond and prepare to assume Ground Ambulance Staging Manager, Transportation Group Supervisor, or other appropriate position
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5 Attain Ambulance and Supervisor Units Attached (SD) 6 Assure Appropriate EMS Resource Response to the Incident and to the 911 System (SD) 7 Assign an EMS Command Tactical Channel as Necessary (EMS CMD 94) (SD) 8 Monitor Appropriate Fire Command Channel (D) 9 Norman Y. Mineta (San Jose) International Airport Stage and Contact SJFD Med-30 – Advise System Status and Receive Assignment (Provide T-Card) (SD) Moffet Field and Municipal Airports (San Martin/Reid Hillview) Stage and Contact Operations Chief – Advise System Status and Receive Assignment (Provide T-Card) (SD) 10 Provide Report on Conditions to County Communications (SD)	3	Attain System Levels (SD)
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 Assure Appropriate Line Resource Response to the incident and to the sith System (SD) Assign an EMS Command Tactical Channel as Necessary (EMS CMD 94) (SD) Monitor Appropriate Fire Command Channel (D) Norman Y. Mineta (San Jose) International Airport Stage and Contact SJFD Med-30 – Advise System Status and Receive Assignment (Provide T-Card) (SD) Moffet Field and Municipal Airports (San Martin/Reid Hillview) Stage and Contact Operations Chief – Advise System Status and Receive Assignment (Provide T-Card) (SD) Provide Report on Conditions to County Communications (SD) 	5	Attain Ambulance and Supervisor Units Attached (SD)
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 ⁹ Norman Y. Mineta (San Jose) International Airport Stage and Contact SJFD Med-30 – Advise System Status and Receive Assignment (Provide T-Card) (SD) Moffet Field and Municipal Airports (San Martin/Reid Hillview) Stage and Contact Operations Chief – Advise System Status and Receive Assignment (Provide T-Card) (SD) ¹⁰ Provide Report on Conditions to County Communications (SD) 	7	
10 Provide Report on Conditions to County Communications (SD) 10 Provide Report on Conditions to County Communications (SD)	8	Monitor Appropriate Fire Command Channel (D)
Stage and Contact Operations Chief – Advise System Status and Receive Assignment (Provide T-Card) (SD) 10 Provide Report on Conditions to County Communications (SD)	9	Stage and Contact SJFD Med-30 – Advise System Status and Receive
		Stage and Contact Operations Chief – Advise System Status and Receive
¹¹ Prepare EMSystem/Provide Notifications/Query as Appropriate (D)	10	Provide Report on Conditions to County Communications (SD)
	11	Prepare EMSystem/Provide Notifications/Query as Appropriate (D)

Medical-Health Supervisors Field Operations Guide

✓	Description
12	Don Protective Equipment Prior to Any On-Scene Operations (SD)
13	Fill Assigned Positions (Refer to Position Check Lists) and Advise County Communications (SD)
14	Recommend Resources as Appropriate (SD)
15	Notify EMS Commander As Appropriate or if a "working event" (D)
16	Recommend MPMP Alert or Activation as Appropriate (SD) -Local Alert Recommendation to Operations Chief through Medical Branch/Group (SD) - <i>Switch to MPMP Position Check Lists</i> -Countywide Alert/Activations 3-5 advise Operations Chief, make request through EMS Commander. (SD) - <i>Switch to MPMP Position Check Lists</i>
17	Complete Incident Record and ICS 214 (if appropriate) (SD)
18	Complete an ICS 214 (if appropriate) (SD)
19	Upon Arrival On-Scene, ensure Personnel Accountability and Safety (SD)
20	Provide Regular Updates to EMS Duty Chief (S)
21	Provide Regular Updates to EMS Commander (D) (Based on nature of the response, early notification should be considered).
22	Consider EMSystem Informational Broadcast (SD)
23	Consider Health Officer Response/Consult As Appropriate
24	Consider EMSystem Hospital MCI Query (D) (If expected to be a Level 3 MPMP Activation)
25	Consider EMSystem Hospital Bed Query (D) (If expected to be a Level 3 or greater MPMP Activation)
26	Consider Request to Issue a CAHAN Alert through the EMS Commander (SD)

FAA ALERT III & AIRCRAFT DOWN

• S – Supervisor Role; D – EMS Duty Chief Role

•	S –Supervisor Role; D – EMS Duty Chief Role
✓	Description
1	FIELD SUPERVISOR (First Due) Upon dispatch, respond and prepare to assume Ground Ambulance Staging Manager, Transportation Group Supervisor, or other appropriate position upon arrival, if assigned.
	FIELD SUPERVISOR
	A scene response is not indicated. Primary responsibility is to manage the daily 911 System operations based on the needs of the event.
	DUTY CHIEF
	Upon dispatch, determine the need to respond or to monitor (single occupant vs. multiple souls, health hazards, etc. However, it is generally expected that a field response will occur for an ALERT III that may cause an impact to the EMS System.
2	Acknowledge Dispatch (SD)
3	Attain System Levels (SD)
4	Attain Hospital Status (SD)
5	Attain Ambulance and Supervisor Units Attached (SD)
6	Assure Appropriate EMS Resource Response to the Incident and to the 911 System (SD)
7	Assign an EMS Command Tactical Channel as Necessary (EMS CMD) (SD)
8	Monitor Appropriate Fire Command Channel (D)
9	Norman Y. Mineta (San Jose) International Airport Stage and Contact SJFD Med-30 – Advise System Status and Receive Assignment (Provide T-Card) (SD)
	Moffet Field and Municipal Airports and Non-Airport Area's
	Stage and Contact Operations Chief – Advise System Status and Receive Assignment (Provide T-Card) (SD)
10	Provide Report on Conditions to County Communications (SD)
11	Prepare EMSystem/Provide Notifications/Query as Appropriate (D)
12	Don Protective Equipment Prior to Any On-Scene Operations (SD)

Medical-Health Supervisors Field Operations Guide

✓	Description
13	Fill Assigned Positions (Refer to Position Check Lists) and Advise County Communications (SD)
14	Recommend Resources as Appropriate (SD)
15	Notify EMS Commander (D)
16	Recommend MPMP Alert or Activation as Appropriate (SD) -Local Alert Recommendation to Operations Chief through Medical Branch/Group (SD) - <i>Switch to MPMP Position Check Lists</i> -Countywide Alert/Activations 3-5 advise Operations Chief, make request through EMS Commander. (SD) - <i>Switch to MPMP Position Check Lists</i>
17	Complete Incident Record and ICS 214 (if appropriate) (SD)
18	Complete an ICS 214 (if appropriate) (SD)
19	Upon Arrival On-Scene, ensure Personnel Accountability and Safety (SD)
20	Provide Regular Updates to EMS Duty Chief (S)
21	Provide Regular Updates to EMS Commander (D) (Based on nature of the response, early notification should be considered).
22	Consider EMSystem Informational Broadcast (SD)
23	Consider Health Officer Response/Consult As Appropriate
24	Consider EMSystem Hospital MCI Query (D) (If expected to be a Level 3 MPMP Activation)
25	Consider EMSystem Hospital Bed Query (D) (If expected to be a Level 3 or greater MPMP Activation)
26	Consider Request to Issue a CAHAN Alert through the EMS Commander (SD)

HOSPITAL INTERNAL DISASTER (BLACK)

• S-Supervisor Role; D – EMS Duty Chief Role; C-Commander Role

\checkmark	Description
1	FIELD SUPERVISOR
	Support mitigation efforts as requested by the Duty Chief.
	DUTY CHIEF
	The Duty Chief is responsible to identify the nature of the problem, provide
	resources to the impacted facility, and to take actions to mitigate the impact
	to the System. Under most circumstances, a field response is not indicated.
	COMMANDER
	The EMS Commander is responsible for making any necessary policy
	modifications or additions, as necessary, based on specific events and/or the needs of the System.
2	Acknowledge County Communications or EMSystem Notification (D)
3	
5	 Contact ED Charge Nurse/House Supervisor for a Situation Report (D) Estimated time hospital expects to be in status
	 Determine if anticipated need for patient evacuation
	 Determine any Medical-Health resource needs
	 Ensure appropriate public safety agencies have been notified.
4	Determine if other "Diversion" Statuses may be Appropriate
	(recommendation made to the facility) (D)
5	Ensure that the facility is aware that they may not accept any patients during a "black status". This includes walk-ins to the emergency department.
6	One 911 System Ambulance and a Supervisor should be dispatched to the facility to care for/disposition walk-in patients. (SD)
7	Support Hospital via existing policy and resources as needed. (SD)
8	Determine if a Field Response is Necessary (SC)
9	Issue EMSystem Notice if Appropriate (to providers and hospitals)
10	Notify the EMS Commander if:
	 The facility will remain black for more than one hour.
	 Any patient evacuations are anticipated.
	 The EMS System will be impacted by the closure.
11	<i>If an evacuation is anticipated, follow the Medical Facility Evacuation</i> Check Sheet and Notify the EMS Commander.

MEDICAL-HEALTH MUTUAL AID REQUEST RECIEVED

• S – Supervisor Role; D – EMS Duty Chief Role; C-Commander Role

~	Description
1	FIELD SUPERVISOR
	Assist the County in preparing resources for deployment.
	DUTY CHIEF
	The Duty Chief will normally receive the actual request for medical-health mutual aid. The Duty Chief shall evaluate the request and system for the ability to fill the request. This information shall be provided to the Commander. The Duty Chief shall support the operational deployment of resources, as authorized by the Commander.
	COMMANDER
	The EMS Commander is responsible for authorizing the release of medical- health mutual aid resources as the designee of the Health Officer/EMS Director (MHOAC).
2	Attain request information: (D)
	 Confirm Official Request from Region II Requesting County
	 Type of Request (number and resource type)
	• Time Resource Needed
	Requestor Contact Information
3	 Approve Request and Attain Additional Information (C) OES Tasking Number
	 Staging or Incident Location
	 Duration of Time Resource is expected to be committed.
	• Who the resource will report to (position and contact information)
	 Incident Specific Information (scene safety, travel plan, etc.)
4	Document all contacts and actions. (SDC)
5	Assist in the deployment of approved resources (SD)
6	Notify the MHOAC (C)
7	Communicate with approved resource for regular check-in while committed (D)
8	Advise EMS Commander upon return of approved resources (D)

PATIENT CARE FACILITY EVACUATION (CRITICAL & NON-CRITICAL)

• S – Supervisor Role; D – EMS Duty Chief Role

CRITICAL EVACUATION

(Immediate need for the movement of patients such as fire, structural collapse, etc.)

~	Description
1	Respond to the Event (based on the size and nature of the incident, the EMDC and the first due FIELD Supervisor should be co-located at the scene to coordinate actions directed by the EMS Commander (system-wide patient routing) and on-scene command).
2	Coordinate with Medical Group Supervisor or other Appropriate ICS position (SD)
3	 Notify the EMS Commander (D) The EMS Commander will respond to the DEOC, EOC, or County Communications and assume management of patient routing. Until the EMS Commander has assumed management, the EMDC shall continue with this check-list.
4	Attain System Levels * (SD)
5	Attain Hospital Status* (SD)
6	Attain Ambulance and Supervisor Units Attached* (SD)
7	Assure Appropriate EMS Resource Response to the Incident and to the 911 System (SD)
8	Assign an EMS Command Tactical Channel as Necessary (EMS CMD) (SD)
9	Monitor Appropriate Fire Command Channel (D)
10	Provide Report on Conditions to County Communications (SD)
11	Prepare EMSystem/Provide Notifications/Query as Appropriate (D)
12	Don Protective Equipment Prior to Any On-Scene Operations (SD)
13	Fill Assigned Positions (Refer to Position Check Lists) and Advise County Communications (SD)
14	Recommend Resources as Appropriate (SD)
15	Recommend MPMP Alert or Activation as Appropriate (SD)
	-Local Alert Recommendation to Operations Chief through Medical Branch/Group (SD) - Switch to MPMP Position Check Lists
	-Countywide Alert/Activations 3-5 advise Operations Chief, make request through EMS Commander. (SD) - Switch to MPMP Position Check Lists

✓	Description
16	Complete Incident Record and ICS 214 (if appropriate) (SD)
17	Consider Need for Patient Management Sites or Direct Routing of Patients (DC)
	 Based on the number of patients in need of relocation, do adequate resources exist at this time? No Consider PMS
	 Determine which patients require the following means of transport:
	BLS Ambulance: ()
	ALS Ambulance: ()
	CCT Nurse Ambulance: ()
	Bus/Van/Non-Medical: ()
	Other (Spec. Need): ()
	 Determine any Medical-Health resource needs
	 Ensure appropriate public safety agencies have been notified
18	Upon Arrival On-Scene, ensure Personnel Accountability and Safety (SD)
19	Provide Regular Updates to EMS Duty Chief (S)
20	Provide Regular Updates to EMS Commander (D) (Based on nature of the response, early notification should be considered).
21	Consider EMSystem Informational Broadcast (SD)
22	Consider Health Officer Response/Consult As Appropriate
23	Consider EMSystem Hospital MCI Query (D)
	(If expected to be a Level 3 MPMP Activation)
24	Consider EMSystem Hospital Bed Query (D)
	(If expected to be a Level 3 or greater MPMP Activation)
25	Consider Request to Issue a CAHAN Alert through the EMS Commander (SD)
26	Consider early Region II Medical-Mutual Aid request and/or notifications. (DC)

✓	Available Resources
	Public Health/EMS Squad 1
	MCI/Field Treatment Site Trailers
	Electronic Tracking System Use
	Local Pharmaceutical Cache
	Chempack
	Trauma/Burn Caches
	WMD Antidote Kits
	American Red Cross/Sheltering
	MVDR Response
	Public Health Nursing Support
	Valley Medical Center Nursing/Physician Support
	VTA and Sheriff's Office Bus Use
	Tents
	Incident Dispatcher
	Heating/Cooling Measures

CARE FACILITY HEAT EVENT (Non-Licensed Facilities)

Resident Life-Safety Event

✓	Description
1	Respond to the Event
2	Make contact with the responsible party to determine conditions at the facility.
3	Assure Appropriate EMS Resource Response to the Incident and to the 911 System.
4	Follow Appropriate MPMP Check Lists.
5	Notify the EMS Commander.
6	The EMS Commander will notify the Health Officer and facilitate any additional actions necessary.
7	Implement Appropriate Standard Dispatch Orders.

Resident Non-Emergent Event

~	Description
1	Respond to the Event
2	Make contact with the responsible party to determine conditions at the facility.
3	Document responsible party contact information and conditions observed.
4	If temperatures are not reasonable for human occupation, notify the County OES on-call staff to respond or assist with providing a city representative.
5	 Assist the responsible party with determining appropriate cooling measures. This may include, but is not limited to: Air cooling (fans, air conditioning, shading, etc.) Access to cooling centers. Personal hydration. Facility reconfiguration. Patient release to custodians. Patient relocation by facility (distribute to other sites, facilities, etc.)
6	Assure that patients are aware of the situation and their options (if oriented) through the facility staff.

✓	Description
7	Assure that custodians of patients not able to care for themselves are notified of the situation through the facility staff.
8	Consult with the EMS Commander and/or Health Officer as necessary.
9	Assure the safety of the patients at all times, implement any life-safety actions as required (immediate transports, evacuations, MPMP activation, etc.).
10	If the need for relocation or evacuation occurs, every effort shall be made to coordinate with the local emergency management agency (city), fire service, and public health department in SUPPORT of the facilities efforts.
11	Should a facility not cooperate with mitigating an extreme heat condition, the Health Officer shall be contacted for direction.

\checkmark	Available Resources
	Public Health/EMS Squad 1
	MCI/Field Treatment Site Trailers
	Electronic Tracking System Use
	Cooling Centers
	City OES Response Coordination
	County OES Coordination
	American Red Cross/Sheltering
	MVDR Response
	Public Health Nursing Support
	Valley Medical Center Nursing/Physician Support
	VTA and Sheriff's Office Bus Use
	AMR Medical Supply Utility
	Tents
	Incident Dispatcher
	Consider VTA (for cooling and transport via bus)
	PGE (financial and operational aspects)

POLICY DEVIATION/COMPLIANCE

• S – Supervisor Role; D – EMS Duty Chief Role

✓	Description
1	FIELD SUPERVISOR In the event that field or communications center personnel are not able provide policy direction to various stakeholders, the Field Supervisor shall serve as the first line facilitator. The Field Supervisor shall assist other stakeholders in being aware of policy and encouraging their compliance as appropriate.
	DUTY CHIEF The Duty Chief is responsible to address any issues that were not mitigated at lower levels. The primary role of the Duty Chief is to provide factual information related to policies that are in place. The Duty Chief shall assist other stakeholders in understanding how these policies are implemented and may make a recommendation to the EMS Commander to modify existing policies.
	COMMANDER The EMS Commander is responsible for making any necessary policy modifications or additions, as necessary, based on specific events and/or the needs of the System.
2	Acknowledge Notification (SD)
3	 Contact appropriate manager/supervisor to confirm situation (with the organization that may be in violation) (SD) Determine Problem or Situation (SD) Make organization aware of current policy (SD) ~Refer to website, fax, or email a copy as appropriate. Determine what assistance the organization may need in order to comply. (SD) Facilitate compliance efforts with the organization. Every effort should be made to mitigate the violation at the lowest level possible. (SD) Confirm appropriate next step actions with organization in order to garner compliance (request that the organization submit an Unusual Occurrence Report to the EMS Agency Compliance Officer within 24 hours). (SD) Those who disagree with policy shall be directed to contact the EMS Agency Compliance Officer during normal business hours. (D)
4	If unable to mitigate the incident to an acceptable level, notify the EMS Commander. After hours enforcement will only focus on significant events that may impact the smooth operation of the EMS System. The EMS

~	Description
	Commander may authorize policy deviations as appropriate. (D)
5	Document all contacts and actions. (SD)
6	Determine if a field response is necessary (D)
7	Issue EMSystem Notice if Appropriate (D)

HEALTH DEPARTMENT/PHYSICIANS ALERT

• S – Supervisor Role; D – EMS Duty Chief Role; C – Commander Role

✓	Description
1	FIELD SUPERVISORThe Field Supervisor is responsible for assisting the County with distribution of Alerts and addressing any questions or concerns from those they supervise.DUTY CHIEFThe Duty Chief is responsible to provide clarification to system stakeholders
	related to Physician Alerts and/or facilitate routing of inquires to appropriate public health personnel.
	COMMANDER Upon receipt of a Physician Alert, the Commander will determine appropriate medical-health system distribution (fire, EMS, law). If any question of appropriateness arises, the Commander will consult with the Health Officer or executor of the Alert.
2	Acknowledge Notification (S,D,C)
3	Determine need to route to Medical-Health Partners (D, C)
4	 Consider posting information via the following methods (D,C) EMSystem (D,C) CAHAN (C) Email notifications (D,C) APB via County Communications (C) Fax broadcast (C)
5	Document all contacts and actions. (SD)
6	Advise executor and/or Health Officer of notifications made

MPMP LOCAL ALERT

• S – Supervisor Role; D – EMS Duty Chief Role

~	Description
1	FIELD SUPERVISOR (First Due)
	Respond to the incident location and prepare to fill any assigned position.
	FIELD SUPERVISOR
	A scene response is not indicated. Primary responsibility is to manage the daily 911 System operations based on the needs of the event.
	DUTY CHIEF
	Upon dispatch, determine the need to respond or to monitor. Absent amplifying risk factors (evacuations, medically fragile, etc.); a field response is not generally indicated.
2	Acknowledge Dispatch (SD)
3	Attain System Levels (S)
4	Attain Hospital Status (S)
5	Attain Ambulance Units Attached (S)
loc	te: The majority of activities during a Local Alert should be occurring in the al PSAP. The County will prepare to fill resource requests and make ifications if appropriate.

MPMP COUNTYWIDE ALERT

• S – Supervisor Role; D – EMS Duty Chief Role

\checkmark	Description
1	FIELD SUPERVISORS, SERVICE MANAGERS, EMS DUTY CHIEF, EMS AGENCY PERSONNEL, AND OTHER STAKEHOLDERS
	Prepare to support activities authorized by the EMS Commander and/or Director
	EMS COMMANDER
	The EMS Commander shall take the operational lead in issuing appropriate Standard Dispatch Orders or other activities based on the needs of the Medical-Health System.
	EMS DIRECTOR and HEALTH OFFICER
	The EMS Director and Health Officer assume Command of the Medical- Health System, working in coordination with the EMS Commander.

MPMP LEVEL I & II ACTIVATIONS

[•] S – Supervisor Role; D – EMS Duty Chief Role

✓	Description
1	FIELD SUPERVISOR (First Due)
	Upon dispatch, respond and prepare to assume Ground Ambulance Staging Manager, Transportation Group Supervisor, or other appropriate position upon arrival, if assigned.
	FIELD SUPERVISOR
	A scene response is not indicated. Primary responsibility is to manage the daily 911 System operations based on the needs of the event.
	DUTY CHIEF
	Upon dispatch, determine the need to respond or to monitor. Absent amplifying risk factors (evacuations, medically fragile, etc.); a field response is not generally indicated.
2	Acknowledge Dispatch (SD)
3	Attain System Levels (SD)
4	Attain Hospital Status (SD)
5	Attain Ambulance and Supervisor Units Attached (SD)
6	Assure Appropriate EMS Resource Response to the Incident and to the 911 System (SD)
7	Assign an EMS Command Tactical Channel when Necessary (SD)
8	Monitor Appropriate Fire Command Channel (D)
9	Prepare to serve as an Agency Representative or Technical Specialist (D)
10	Provide Report on Conditions to County Communications (SD)
11	Prepare EMSystem/Provide Notifications/Query as Appropriate (D)
12	Don Protective Equipment Prior to Any On-Scene Operations (SD)
13	Fill Assigned Positions (Refer to Position Check Lists) and Advise County Communications (SD)
14	Recommend Resources to the IC as Appropriate (SD)
15	Notify EMS Commander (D)
17	Complete Incident Record and ICS 214 (if appropriate) (SD)
18	Facilitate ordering of ambulance resources (S,D)

\checkmark	Description
19	Upon Arrival On-Scene, ensure Personnel Accountability and Safety (SD)
20	Provide Regular Updates to EMS Duty Chief (S)
21	Provide Regular Updates to EMS Commander (D) (Based on nature of the response, early notification should be considered).
22	Consider EMSystem Informational Broadcast (SD)
23	Consider Health Officer Response/Consult As Appropriate (C)

✓	Available Resources
	Public Health/EMS Squad 1
	MCI/Field Treatment Site Trailers
	Electronic Tracking System Use
	Local Pharmaceutical Cache
	Chempack
	Trauma/Burn Caches
	WMD Antidote Kits