



NSW RURAL FIRE SERVICE



OP1.2.19 OPERATIONAL PROTOCOL FOR MEDICAL EVACUATION OF FIRE FIGHTING PERSONNEL

Document control

Release history

Version	Date	Author	Summary of changes
1.1	November 2013	Steve Yorke	Original document
1.2	8 January 2016	Alison Moad	Revision of agency names and contact details. Update to new template.
	15 February 2016	Kylie Sugar	Additional minor edits prior to production.

Reviewed by

Name	Title	Date
Peter McKechnie	Manager, State Operations	14/01/2016

Approved by

Name	Title	Date
Steve Yorke	Director, Response and Coordination	16/01/2016

Related documents

Document name	Version

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1 Links

Nil.

2 Superseded procedure

No procedures superseded.

3 Purpose

The purpose of this Operational Protocol is to provide Incident Controllers (ICs), Incident Management Team (IMT) members and Officers in Charge (OICs) with guidelines for medical assistance and/or transport from the fire ground of NSW RFS and other Agency personnel.

The primary goal of this Medical Evacuation Response Protocol and associated Medical Plan (MERP) is to provide incident management personnel with the guidelines necessary to manage incidents where injuries occur to firefighting personnel, as quickly and safely as possible.

4 Hazards and precautions

Ensuring appropriate and timely patient care will address a range of risks:

- Risks to the injured firefighter/s (immediacy of treatment and assessment of life threatening injuries, arranging appropriate medical assistance).
- Risks to assisting firefighters (managing an incident within an incident).
- Risks to parties involved in providing medical assistance transport (ambulance and crew, helicopter and crew, firefighters).

5 Personal protective equipment

Personal Protective Equipment is full NSW RFS Personal Protective Clothing and any relevant NSW RFS first aid equipment available at an incident.

6 Operational procedures

6.1 Reducing the risks through better planning

The IC of a medium or large incident or prescribed burn, in consultation with NSW Ambulance (NSWA) where possible, will develop a Medical Evacuation Response Plan (MERP). The MERP is to be included as a part of the Incident Action Plan (IAP) and any incident briefings.

In the event of a medical emergency the MERP will be used. Personal details of any injured firefighter/s should not be relayed over the radio; however accurate incident information must be reported to the IC. In the event of a fatality, the scene should be treated as a crime/investigation scene and the individual/s and their equipment are not to be moved, except to accomplish rescue work or to protect the health and safety of others and/or after approval by the investigative authority.

6.2 In the event of an injured firefighter

Clarity in communication with the “000” NSWA Operator is essential – if available provide a point of contact on the fireground, preferably a person with the patient.

The IC and IMT will ensure that the following actions are taken and information is obtained and recorded during medical emergencies:

- Determine and confirm the nature of the medical injury/illness emergency.
- In consultation with the fireground and NSWA personnel, determine if the injury/illness is life threatening.
- If the injury is life threatening, designate a communication plan (radio frequency, phone etc.) for emergency communications; this detail should also be capture in the MERP.

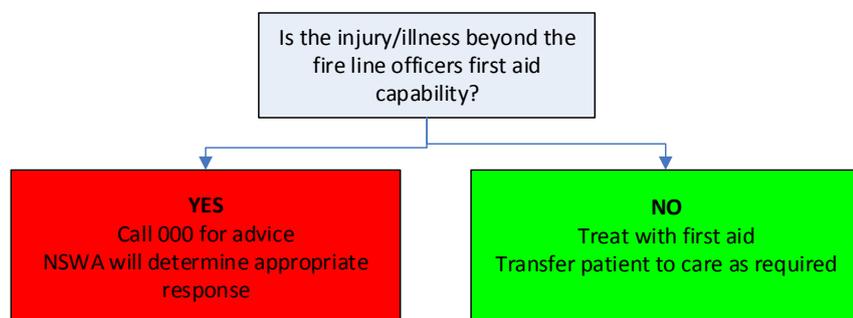
- Identify and confirm an on-scene Officer in Charge (OIC) by position and last name (i.e. Medivac OIC Smith).
- Identify and confirm on-scene medical personnel by position and last name (i.e. First Aider Jones).
- Ensure that State Operations is contacted immediately.
- Identify the number injured and confirm patient location (geographic and/or GPS coordinates).
- Determine and confirm preferred method of patient transport with NSWA.
- Determine if any additional resources and/or equipment are needed.
- Document all information received and transmitted on the radio or phone.
- Document any changes in command or medical personnel as they occur.

6.3 Triage of injured firefighters

Appropriate medical triage to determine life or limb threatening injury is very complex and beyond the capability of personnel with basic First Aid training.

If the injury/illness is beyond the fireground officer's first aid capabilities, advice from NSWA should be sought immediately.

The "000" NSWA Operator should determine the best course of action – bringing care to the patient, or possibly transporting the patient to an accessible area for ambulance pick up.



6.4 Determining the appropriate means of evacuation

Patient transport coordination is critical, the IC and IMT should ensure that liaison with NSWA is maintained to provide the most efficient and effective outcome.

The IC in consultation with the Safety Officer and NSWA will identify and prioritise transport options and contingencies based on resource availability and capability, efficiency and location in accordance with the MERP.

A NSWA Paramedic and/or "000" NSWA Operator should determine the best course of action and under what circumstances it would be appropriate to use an operational firefighting aircraft or a fire appliance for patient transport.

Significant injury is likely to require treatment during transport; hence transport with a Paramedic is generally essential.

NSWA Officers entering a fireground must have an escort, unless NSWA Special Operations Teams (SOT) are in attendance.

NSWA SOT personnel may fly in non-agency aircraft subject to appropriate NSWA approval. In an emergency situation where the patient/s could be exposed to fire or other danger, the NSW RFS will take whatever measures it deems necessary to preserve the safety of personnel.

The IC, Safety Officer or designee will ensure that in consultation with NSW RFS State Operations, Major Incident Coordination provision of Critical Incident Support Service (CISS) and/or Chaplaincy for any affected personnel as a result of the incident.

The procedures contained in the MERP must be communicated to the entire incident and any external partners/co-operators involved with the incident.

7 Operational guidance

In order to provide a MERP you should:

- Be prepared as a component of any Incident Action Plan or prescribed burn plan.
- Provide concise information to the IMT and fireground personnel of the procedures to follow in the event of a firefighter injury.
- Give clear role definition, direction and responsibility for the fireground and IMT personnel in the event of an injury.
- Include advice to the local NSW Manager of fires and/ or fire suppression operations.
- Consider deploying NSW resources, including Special Operations Team members for RART/RAFT deployments, at Staging Areas and at Base Camps.
- Consider appointing a NSW Liaison Officer in the IMT, whenever NSW personnel are deployed, and notifying the local NSW Sector office (not Ambulance Station) of any significant fireground operation whenever NSW personnel are not engaged.
- Be updated and approved after each Planning Meeting by the IC and/or the Safety Officer, in consultation with NSW personnel, as appropriate.
- Include estimated travel timeframes (ETDs and ETAs) from and to specific locations (ie incident location to medical facilities).
- Include GPS coordinates for key locations such as Base Camps, Staging Areas, helipads, landing strips, NSW locations, Hospitals etc.
- List all potential evacuation resources and/or equipment assigned to the incident.
- List communications protocols to be followed.
- Identify other resources and/or equipment (types, capabilities, availability) not assigned to the incident but possibly available, if requested.
- Identify contingencies (alternate plan or procedure if the preferred option becomes unavailable or identified resources cannot perform the mission).
- Identify specific concerns by location (division, group, geographic area or location).
- Identify environmental influences or factors and resource status changes that might keep the preferred option from working.

Any injury on the fireground should be managed as an incident within an incident.

Appendix 1 – Template for a MERP

The IMT should train to understand and practice the medical emergency procedures outlined in this Protocol. Incident simulations exercises at IMT workshops will help achieve a clear understanding of how the IMT will respond to a medical emergency.

Procedural checklist

- Has a MERP been prepared for the incident/prescribed burn? Yes No
- Is the MERP included in IAP briefings? Yes No
- Has a NSWA resource been deployed to Staging? Yes No
- Has a NSWA Liaison Officer appointed to the IMT? Yes No
- Has the NSWA Sector office been advised of the incident? Yes No
- In the event of injured personnel, have the following steps been taken:
 - Determine and confirm the nature of the medical injury/illness emergency Yes No
 - In consultation with the fireground and NSWA personnel, determine if the injury/illness is life threatening Yes No
 - If the injury is life threatening, designate a communication plan (radio frequency, phone etc.) for emergency communications. This detail should also be captured in the MERP Yes No
 - Identify and confirm an on-scene OIC by position and last name (i.e. Medivac OIC Smith) Yes No
 - Identify and confirm on-scene medical personnel by position and last name (i.e. First Aider Jones) Yes No
 - Ensure that State Operations is contacted immediately Yes No
 - Identify the number injured and confirm casualty location (geographic and/or GPS coordinates) Yes No
 - Determine and confirm preferred method of casualty transport with NSWA Yes No
 - Determine if any additional resources and/or equipment are needed Yes No
 - Document all information received and transmitted on the radio or phone Yes No
 - Document any changes in command or medical personnel as they occur Yes No
- Has transport of injured personnel been determined by the “000” NSWA Operator, NSWA paramedic or NSWA LO? Yes No
- Are any NSWA personnel on the fireground being escorted by NSW RFS members or NSWA SOT? Yes No
- Has the MIC or State Operations been notified of the incident? Yes No
- Has CISS been offered to any personnel affected by the incident? Yes No

Appendix 2 – Medical plan

- The Medical Plan provides information on incident medical transportation options, hospitals, and medical emergency procedures.
- The Medical Plan is prepared by the IMT in consultation with NSWA and reviewed by the Incident Controller and/or Safety Officer to ensure ICS coordination.
- The Plan should be duplicated and attached to the Incident Action Plan and given to all IMT personnel and Divisional Commanders as part of the Incident Action Plan (IAP) and Briefings.

Medical evacuation

Preparedness

Ambulance Service advised of operation	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Special Operations Ambulance Officer (SOT) embedded in RAFT	NA <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/>
Ambulance deployed	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Ambulance location		
Ambulance contact number		
Medivac at night additional considerations (Free text, describe options and limitations)		

Steps to follow if a person is injured

(refer to section 6 of the OP)

1. Determine if the injury is beyond the fireground officer/s first aid capability:
 - **NO** - Treat with first aid; transfer casualty to care with fire appliance or other ground transport.
 - **YES** – “000” advice is required; NSWA will determine medivac or patient transfer requirements in consultation with IC and Safety Officer.
2. Advise the IC and IMT of the nature of the emergency, number injured, casualty assessment(s) and location (geographic and GPS coordinates).
3. Identify and establish single points of contact, both on-scene and in the IMT, to manage the injury/s as an ‘incident within an incident’.
4. Request that a designated radio frequency be cleared for emergency traffic.
5. The IMT Point of Contact calls 000 and relays information between the on-scene point of contact and the “000” NSWA Operator.
6. Where there is telephone reception at the fireground, the NSWA “000” Operator should be provided with the on scene Point of Contact so that advice can be provided directly to scene.
7. The “000” NSWA Operator will advise the preferred method of medivac or patient transport (e.g. Ambulance/EMS helicopter/Fire Appliance/combo).
8. Request any additional resources and/or equipment needed (e.g. an Ambulance entering a fireground must have an escort).
9. Document all information received and transmitted on the radio or phone.
10. Identify any changes in the on-scene or IMT points of contact or medical personnel as they occur.

Ambulance meeting point

Location description	
Mapped	Yes <input type="checkbox"/> No <input type="checkbox"/>
UBD reference	
Grid reference	
4WD ambulance required	Yes <input type="checkbox"/> No <input type="checkbox"/>
Potential helicopter landing point	
Location description	
Mapped	Yes <input type="checkbox"/> No <input type="checkbox"/>
Lat/Long	
Grid reference	
Hazards	
Aerial medivac considerations (Hazards – powerlines, trees etc)	
Nearest hospital – name	
Nearest hospital – address	
Nearest hospital – phone	

Medical Plan (adapted from ICS 206 and amended for NSW RFS)

1. Name assigned to incident:

2. Operational period: Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.

Date from	Time from	Date to	Time to

3. Medical aid staging areas: Enter the following information on the incident medical aid staging area(s):

Staging area name	Staging area call sign	Location (e.g., Staging Area, Base Camp)	Staging area contact number(s)/ Frequency	Paramedics on site Yes/No	Resource type: SOT LO/ St John first aid/ paramedic / SOT paramedic/ NSWA aircraft	Details on how the resource was requested and tasked (e.g. "000" / NSWA control/ NSWA LO/ NSW RFS State Ops
				Yes <input type="checkbox"/> No <input type="checkbox"/>		
				Yes <input type="checkbox"/> No <input type="checkbox"/>		
				Yes <input type="checkbox"/> No <input type="checkbox"/>		
				Yes <input type="checkbox"/> No <input type="checkbox"/>		
				Yes <input type="checkbox"/> No <input type="checkbox"/>		
				Yes <input type="checkbox"/> No <input type="checkbox"/>		

4. NSWA contact details: Enter the following information for ambulance services available to the incident:

Name	Location of NSWA service	Contact number(s) and frequency for NSWA	Role/Capability (eg LO, IC, SOT LO etc)

5. Hospitals: Ambulance use only. Enter the following information for hospital(s) that could serve this incident:

Hospital name	Physical address of the hospital	Hospital contact number(s) and/or comms frequency(s)	Date and method of notification of operation	Date and method of local HSFAC notification	Helipad
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>

6. Special medical emergency requirements

Note any special emergency instructions for use by incident personnel, including

- a. who should be contacted,
- b. how should they be contacted; and
- c. who manages an incident within an incident due to a rescue, accident, etc. Include procedures for how to report medical emergencies.

7. Prepared by: To be completed NSW RFS and NSWA officers.

Position	Name	Signature	Date (DD/MM/YYYY)	Time (HH:MM)
NSWA LO				
IMT/Safety Officer				

8. Approved by

Position	Name	Signature	Date (DD/MM/YYYY)	Time (HH:MM)
Incident Controller				

IAP Page	Date/Time

Refer Section 7 for assistance preparing the MERP

Appendix 3 – Contact details of NSW sector offices for notification of fire activity

- North Coast Sector office - 02 4947 5471
- Hunter and New England Sector office - 02 4964 6999
- Metropolitan Operations North – Hunter New England - 02 4964 6999
- Southern Sydney Sector office - 02 4655 2320
- Sydney West Sector office - 02 4731 2167
- Greater Western Sector office - 02 6841 2672
- Southern Sector office - 02 4827 0402
- Northern Sydney Sector office - 02 9487 8056
- South West Sydney Sector office - 02 4655 2320