



Emergency Medical Services

Gaston County Emergency Operations Plan

Coordinating Agency: Emergency Medical Services

Cooperating Agencies:

- Rescue Squads
- Hospital
- Fire Departments
- Emergency Management
- Law Enforcement
- Others as required or requested

Attachments	
Attachment 1	Preparedness / Response Checklist
Also see	
Annex	Direction and Control
	Resource Management
Checklist	Aircraft Accidents
Plan	Catawba and McGuire Nuclear Plan

I. PURPOSE

This Annex provides guidance for assistance to the general public for administering medical services during a natural, man-made, or technological emergency.

II. SITUATION AND ASSUMPTIONS

A. Situation

1. Most emergency situations can lead to physical harm or bring about various medical problems.

2. A well-planned medical support network is essential during emergency situations.
3. Depending on the nature of the incident, complications may include traumatic injury or even death.

B. Assumptions

1. A large-scale emergency will result in increased demands on hospitals, medical, and emergency medical transport services personnel.
2. Many injuries, minor and relatively severe, will be self-treated by the public.
3. Many of the injured will be transported to medical facilities by people other than medical personnel.
4. Emergency Medical Service will be most critical within the first 30 minutes of the emergency. Mutual aid assistance will arrive after this critical period.
5. Resources available through area and regional medical services mutual aid agreements will be provided.
6. When local resources can no longer meet the demand of the situation, state agencies will be contacted to provide additional resources and/or assume control of the response.
7. Catastrophic disasters may affect large areas of the county and medical resources may be damaged, destroyed, or unavailable.
8. Standard operating guidelines will be developed to guide emergency medical responders in the treatment of patients and personnel involved with radiological and [hazardous materials incidents](#).

III. CONCEPT OF OPERATIONS

- A. Disaster operations for Emergency Medical Services (EMS) will be an extension of normal agency and facility duties.
- B. Coordination between Emergency Medical Services, rescue, and fire service providers is necessary to ensure emergency operational readiness. The [Emergency Medical Services Director](#) will be the lead coordinating person for this function.
- C. EMS will provide field medical care as needed during emergency situations and coordinate necessary medical transportation.
- D. EMS capabilities will be expanded by [volunteer rescue squads](#), [fire service](#) agencies with medical capabilities, and recall of off duty personnel.
- E. During mass casualty incidents, EMS will serve as lead agency and establish patient triage, holding, treatment and transportation areas.
- F. When necessary an Emergency Medical Service official will be located at an established command post to coordinate responding medical units and establish communication links with hospitals and the Communications Center.
- G. Transfer of authority on-scene will be in accordance with established procedures.

- H. During [Emergency Operations Center](#) operations the EMS Chief or their designee will be responsible for providing coordination for Emergency Medical Services and supplies. Requests from individual residents for non-emergency but urgent medical assistance will be funneled through this function.
- I. When needed the rescue squads, fire service, and law enforcement agencies can provide emergency transportation of essential medical supplies to home health care recipients.

IV. DIRECTION AND CONTROL

- A. The Emergency Medical Services Chief will direct and control EMS operations. For on-scene incidents, the senior officer will assume direction and control.
- B. The EMS Chief will maintain communications with their field forces and will keep the EOC informed of activities performed along with personnel and equipment needed to maintain adequate response and recovery efforts.
- C. The EMS Chief and the President of the Gaston County Rescue Association will coordinate efforts between the County EMS and the Volunteer Rescue Squads in the event of an emergency situation.

V. CONTINUITY OF GOVERNMENT

The line of succession is:

- A. Emergency Medical Services Chief
- B. Assistant Emergency Medical Services Chief
- C. Emergency Medical Services Major

Attachment 1 Emergency Medical Services Preparedness/Response Checklist

Emergency Medical Services Chief:

- Upon notification report to the [Emergency Operations Center](#).
- Receive a situational briefing from the EOC. Ask questions and address concerns during the briefing.
- Brief the EOC and/or the Incident Commander regarding:
 - Number of BLS and ALS units available
 - Number of personnel available to operate both BLS and ALS units
 - Status of hospitals and number of beds available or total persons that may have to be evacuated by EMS
 - Status of other medical or care facilities that may require EMS
 - Status and number of medical personnel that may be on call (EMS/Rescue/First Responders, etc.)

- Based upon briefing anticipate the number of units that will be necessary to carry out the EMS mission.
- Request mutual aid assistance if warranted.
- If mutual aid is not available from surrounding jurisdictions, request [additional resources](#) through the Emergency Management Administrator/Incident Commander.
- Brief EMS supervisors.

Emergency Medical Services Supervisors:

- Receive a situational briefing from the EMS Chief and/or Incident Commander. Ask questions and address immediate concerns.
- Prepare a briefing for BLS and/or ALS personnel and include:
 - Number of BLS and ALS units available.
 - Number of personnel available to operate both BLS and ALS units.
 - Status of hospitals and number of beds available or total persons that may have to be evacuated by EMS.
 - Status of other medical or care facilities that may require EMS.
 - Safety.
 - Location of replacement medical supplies if different from normal locations.
 - Special instructions, maps, charts or other information (i.e. evacuations are occurring or about to occur).
 - Current and forecasted weather.
- Inspect units and ensure they are properly equipped and supplied at the beginning of each shift.
- Carry out other duties that are "normal" day-to-day functions of a supervisor.
- Ensure accurate mileage records and personnel time records are kept, and during a disaster ensure copies are made and appropriate reports filed regarding overtime.
- Prepare and submit required or necessary reports to the Chief in a timely manner.
- Immediately report any death or injury of personnel to the Chief.
- Immediately report any unit damaged or in need of repair that may take it out of service.
- Establish and maintain communications with all units at all times.
- If not already established, prepare a staging area for EMS units that will be coming to assist and appoint a staging officer if one has not already been appointed.
- If staging has been established maintain communications with the Staging Officer and dispatch relief or additional units from the staging area as required.
- Ensure you or the Staging Officer briefs all units that will be coming to assist, and that they have a clear understanding of their mission assignments.

- Do not hesitate to inspect credentials of assisting personnel and/or equipment and supplies. Relieve any personnel that are not properly trained for the assignment or remove any unit from service that does not meet BLS or ALS standards.
- If, upon arrival at the scene of any emergency where multiple agencies are involved and Incident Command *has not* been established, establish Incident Command and assume the command function until relieved or the circumstances no longer require Incident Command.
- Carry out other functions as the circumstances dictate or by instruction of the Chief and/or Incident Commander.