

State of Oregon EMS Mass Casualty Incident Plan

Stakeholder Meeting



Welcome

- Oregon DHS EMS & Trauma System
 - Technical Team
- OHSU Office of Rural Health
- Short timeline

Purpose

Planning for a coordinated response in the event of a major medical situation that exceeds local and regional EMS resource capability.

Significant Questions

- What is the role of DHS EMS before, during, and after a catastrophe?
- How do we organize large scale ambulance and patient movement around the state?
- How can we address populations with special needs?
- What are our barriers?

Consolidating all information
into one plan... that is usable.

Basic Assumptions

- Local Control First
- Local Plans
- County → Regional → **State** → Federal

Work to Date

- Review existing plans
 - Local
 - County
 - ATAB
 - Regional
 - Other states

Work to Date

- Stakeholders
 - “Brainstorm” Sessions
 - Oregon Fire Chiefs Board
 - Oregon Ambulance Association
 - County Fire Defense Boards
 - HPP Regional Coordinators
 - Numerous Individuals and Agencies

Critical Areas in Need of Discussion...

Today's agenda.

Management Structure (And Funding)

Fire Marshal vs. DHS EMS

EMS Protocols

Local vs. Statewide Protocols

State Mandated Minimum Requirements

Role of DHS EMS

Operations?

Credentialing, Training,
Management?

Overhead / Incident Management Teams

Ambulance Operations Overhead
Team Concept

Liability

Provider

Agency

Relief of Obligations

Hospital Integration

Regional Medical Resource Concept
State Managed?

Communications

Ability to add frequencies?

Common Statewide EMS MCI
Frequency?

Next...

- Compile comments from stakeholder conversations
- Revise Draft Document June 2008
- DHS EMS and Rural Health Review

After June 2008

**2008/09 Series of Exercises
Fall or Winter 2010 Revision**

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