EXERCISE 5 – RESPONDING TO A MASS CASUALTY INCIDENT

I. CONCEPT NOTE

1. Title
RESPONDING TO A MASS CASUALTY INCIDENT

2. Type of exercise
Functional exercise

3. Phase of the disaster response
Operational

4. Purpose
The purpose of this exercise is to practice the team response to a mass casualty incident (MCI) during an EMT deployment. During disasters EMTs have to be prepared for the management of possible MCI happening in the area. Competencies such as coordination, communication, triage and clinical management of cases should be exercised so all team members are organised and prepared in the event of an MCI.

5. Scope
In this exercise a MCI event will be simulated, following an aftershock in Montyland. The whole team will have to organise to deal with the high number of casualties arriving at the EMT facility, while constantly communicating with the EMTCC and other partners in the area.

6. General objectives
- To effectively communicate with the EMTCC for situation awareness and coordination of a MCI
- To appropriately organise as a team and manage a MCI

See the complete table with learning objectives in the annex ‘Exercise 5 - Learning Objectives’.

7. Exercise description

EXERCISE 5 - SCRIPT		
Approximate time required	**Task**	**Instructions for delivery**
15 min	**Exercise briefing**	Deliver out of role. The trainers will explain the scenario in which the exercise is set to allow participants to get immersed in the role. The trainers will also tell EMT members they are going to receive some considerations in case an MCI is simulated. Trainers will: - Present the casualty cards and explain how to read and interpret them - Highlight participants should only use the parameters provided in the casualty cards - Inform about the resources and communication means they would have in such case (radio/phone, provide the number) *Simulated setting:* 2 pm, 6 days after deployment. The team is working at the EMT facility in Montyland.
5 min	**Information about an aftershock in the area**	All EMT members should be at the EMT facility, as if they were working on their normal activities. *Add inject 1:* The team leader will received a call form the Red Cross informing about an aftershock in the area and possible casualties soon arriving to the EMT. The team should get ready for the arrival of casualties.
10 min	**First casualties arrive**	*Add inject 2:* The first 11 casualties will arrive at the EMT facility. The team will start triaging and treating the first wave of casualties.
10 min	**First communica-tion with the EMTCC**	While the team is managing the first wave of casualties, the team leader should keep in communication with other partners in the area: *Add inject 3:* The team leader will received a call from the EMTCC officer, who asks the EMT to work as a first triage and treatment facility.
5 min	**Second communi-cation with the EMTCC**	*Add inject 4:* The team leader will received a call from the EMTCC officer, who informs about more casualties arriving. The team should continue treating the patients in the facility and prepare for a second wave of casualties.
30 min	**The rest of casualties arrive**	*Add inject 5:* The second wave of casualties arrive.

		The team will continue working to deal with all the casualties.
15 min	**Medical evacuation to Hiking hospital**	*Add inject 6:* The EMT-CC request medical evacuation to Hiking hospital. The team will continue managing the casualties and prepare to transfer the patients. The exercise will continue for 15 minutes more, or until all casualties have been admitted in the facility and under treatment.
30 min	**Exercise debriefing**	Delivered out of role. Refer to the annex 'Exercise debriefing'.
Total (approx.): 2 h		

8. Injects

Exercise 5 – INJECT MATRIX			
Inject number	When?	To whom?	Inject summary
1	At the start of the exercise	To the team leader, via phone/radio	Message from the Red Cross about an aftershock in the area
2	5 min after inject 1	To all team	First casualties arrive
3	10 min after inject 2	To the team leader, via phone/radio	First communication with the EMTCC - EMT to be a triage facility
4	10 min after inject 3	To the team leader, via phone/radio	Second communication with the EMTCC - More casualties arriving
5	5 min after inject 4	To the EMT facility	Rest of casualties arrive (spaced)
6	30 min after inject 5	To the team leader, via phone/radio	Third communication with the EMTCC - Evacuation to Hiking hospital

See the detailed description of the injects in the annex 'Exercise 5 - Injects'.

9. Resources

Human resources

3 trainers (one of them will be the training manager)

3 facilitators (one will take the role of the Red Cross colleague and EMTCC officer, one or two should be coordinating the casualties).

2 actors to take the roles of local red cross volunteers (at least)

55 Actors to take the role of casualties

Make-up professional

Materials

- EMT full facility
- Casualty cards
- Triage tags
- 2 stretchers
- Radios or phone
- Make up materials
- *Optional:* Ambulance

10. General considerations

Before starting the exercise make sure:

Trainers and facilitators have carefully read the exercise objectives and description

The EMT facility is ready for the simulation

All the needed materials (see Resources section) are available

All the casualties (roles players) are appropriately dressed and have understood their role and actions during the exercise

Basic health and safety procedures are applied during the exercise. Provide information to the role players about possible health and safety threats (e.g. lifting people/stretchers, touching or handling medical or logistics material, etc.)

11. Key references/ Supporting documents

- FIRST AID in armed conflicts and other situations of violence. ICRC, 2006. https://www.icrc.org/sites/default/files/topic/file_plus_list/first_aid_leaflet.pdf

12. Annexes

Exercise 5 - Learning objectives
Exercise 5 - Injects
Exercise 5 - Casualty Storyboards
Exercise 5 - Dynamic Casualty cards
Exercise 5 - Makeup info
Exercise 5 - Data collection cards (optional)
Exercise 5 - Exercise debriefing

II. LEARNING OBJECTIVES

General Learning objectives	Specific learning objectives	Performance learning objectives
1. To effectively communicate with the EMTCC for situation awareness and coordination of a MCI	1.1. To communicate with the EMTCC from the first patients arriving at the EMT facility 1.2. To maintain communication throughout the incident management 1.3. To provide information to EMTCC in order to facilitate incident management and coordination 1.4. To provide information on victims' health status to agree on evacuation priorities and destinations	- The team leader gathers necessary information to deliver the first report to the EMTCC and alert the system of the impending MCI - The team leader is in charge of maintaining communications with the EMTCC - The team leader ensures that communication facilitate incident management and coordination - The team leader coordinates with the EMTCC evacuation priorities and destinations
2. To appropriately organise as a team and manage a MCI	2.1. To establish an incident command system 2.2. To create a triage zone and assign staff to receive and triage the casualties arriving 2.3. To assign staff to cover different tasks and areas within the EMT facility 2.4. To prioritize treatment and evacuation of casualties 2.5. To apply appropriate apply MCI managerial and clinical procedures and protocols 2.6. To appropriately manage the resources available 2.7. To adapt to the changing conditions during the management of the event	- The team performs optimal triage of the casualties according to pre-selected triage algorithm - The team leader establishes roles within the team, including chain of command and control - The team prioritizes medical treatment and evacuation priorities - The team puts in place the existing MCI managerial and clinical procedures and protocols - The team identifies available resources and means of utilizing them for incident management - The team adjusts the space and staff available according to victim flow and changing capacities

III. INJECTS

Inject 1: Message from the Red Cross about an aftershock in the area

The team leader will receive a call from someone at the local Red Cross. The person with the role of the Red Cross worker will give the following message to the team leader:

> *'In the last hour a significant aftershock have stricken the area where the EMT is allocated. According to information from civilians in the area, casualties are running towards your EMT facility to seek medical help. They will provide more information about what had happened.'*

Inject 2: First casualties arrive

A first wave of 11 casualties will arrive at the EMT facility, including the following mix of severity of injuries: 8 green, 2 red, 1 yellow. The red and yellow casualties will be carried into the facility by the other green casualties. The casualties should mentioned the following information to the EMT staff:

- A residential building collapsed about several hundred meters away from the EMT facility (If asked for exact location mention "the apartment building in the road junction between Ice lane and Lapen street)
- If asked provide the following information:
  - In the building usually live 100 residents, but you do not know how many were there at the time of the aftershock
  - You did not see any fire or any other hazard (like gas leak), only a collapsed building
  - The route to the collapsed building is accessible; the aftershock did not damage the roads further
- Casualties should reply "I don't know" to any further question.

Inject 3: First communication with the EMTCC

Following the arrival of casualties, the team should contact the EMTCC. The EMTCC officer answering the call will give a message including the following information:

> *'We have directed the local Red Cross to assess the scene and start evacuation the patients. Since the Hiking hospital is overwhelmed and needs time to organize itself to receive the casualties, we ask your EMT to act as a first triage and treatment facility.'*

NOTE: IF the team leader does not call the EMTCC, the EMTCC officer will call the team leader and say they were informed by the Red Cross about the aftershock and casualties. Then the EMTCC officer will deliver the same message as above. deliver the same message.

Inject 4: Second communication with the EMTCC

Either initiating the call or replying to a call from the EMT team leader, the EMTCC will provide the following information on a second call:

> *"The situation is of a MCI. There are approximately 50-60 casualties from the collapsed building incident. The local Red Cross is not trained to perform primary triage and they are evacuating the casualties according to their own evaluation of severity. The evacuation procedures are being put in place, and you should expect to receive additional casualties within minutes."*

If asked which casualties are sent over reply: *'The local Red Cross will evacuate in accordance with the priorities for medical evacuation'.*

Inject 5: Rest of casualties arrive

The rest of the casualties will start arriving to the EMT facility, but not all at the same time. Casualties will arrive in groups of 3-4 every couple of minutes.

The most severe casualties will be carried by the local Red Cross colleagues in the stretchers.

Inject 6: Third communication with the EMTCC

The EMTCC officer will call the team leader again and deliver the following information:

- The Hiking hospital is now ready to receive casualties so the EMT can start medical evacuation of casualties to the hospital
- If asked about number of available ambulances for evacuation answer: 'We can provide 3 ambulances with no medical personnel, only volunteers.'
- If asked about estimated time of arrival answer: '20 minutes'
- EMTCC cannot provide any other resource, if asked to do so

IV. DEBRIEFING TOOL

Debriefing steps	Actions	Proposed steering questions
1. Recognise and express the emotions generated by the exercise	- Encourage participants to share the feelings and emotions experienced during the exercise (e.g. stress, concern, reward, excitement, challenge)	- How did you feel during the exercise? - Did you feel stressed or overburdened by the sudden and high influx of patients? - Did you feel the situation was under controlled by the team?
2. Analyse team performance during the exercise	- Encourage participants to reflect about their performance during the exercise - Encourage participants to reflect on the factors that lead to positive outcomes (e.g. good leadership, collaborative work, experience team members) or negative outcomes (e.g. lack of information, lack of previous training or experience, bad communication) - Encourage participants to think about ways to improve their performance in the future	- How did you functioned as a team? - Do you think the team communicated and organised effectively to deal with the MCI? - Do you think you acted timely giving the situation? - Do you think you make the most out of the space and resources (materials and HR) available to treat the patients? - What would you do differently in the future?
3. Acknowledge views and impressions from observers outside the team	- Trainers share their observations about team performance during the exercise (the performance objectives should be considered) - Facilitators and role players share their impressions and feelings while interacting with the team during the exercise	

4. Summarise main lessons learnt	- Encourage participants to briefly highlight the main lesson(s) learnt during the exercise - Trainers can summarize the main take-home messages, if needed	- What did you learn from this exercise? - Do you feel prepared to respond to MCI in a situation like this?

The **trainer/facilitator leading the debriefing session** should:

Before the session

- - Prepare notes about the team performance in relation to the established performance objectives
- Explain the aim of the debriefing session (E.g. Debriefing is a crucial part of the learning process. It provides a safe space for trainees to share the feelings arose during the exercise, reflect about their performance and use this reflection to learn and improve performance in the future)
- Place participants in a comfortable position so they can share their feelings and ideas freely – organise it in a casual way, avoid a formal setting

During the session

- Ensure discussions stay within the focus of the debriefing exercise
- Avoid confrontation between participants - this is not a blaming exercise
- Share information about best performance when needed

After the session

- Provide participants with available tools and resources that could contribute to their learning and development in the topic - supporting material recommended in the TEAMS package, specific EMT protocols and SOPs and training opportunities