



In a situation with more than one incident in progress, the incident that has the higher level of need will determine the alert issued. For example, Incident #1 is a Level 1 MCI Alert and Incident #2 is a Level 2 MCI Alert. The Incident Commander will select a Level 2 MCI Alert – the higher level of the two possible alerts.

Section 3.5 EMS, 911 Dispatch and Hospitals Communications

1. The Incident Commander on scene radios a Situation Report on the initial Control Channel to DEC (911 Dispatch) within the first 15 minutes that includes:
 - Yellow or Red Alert
 - If Red Alert – the alert level,
 - Location of Incident and Name of Command,
 - Type of Incident/Nature of Incident;
 - Hazards (if present),
 - Number of victims (estimated or actual number),
 - Command Post and Staging Locations,
 - Initial route of Ingress (best route to enter) and Egress, and
 - Additional and / or Specialized Resources if needed.
2. SFFD Officers located at DEC relays the initial situation report to hospital Emergency Departments via Reddinet and an open channel on B13/ B14*. A Reddinet bed poll is also initiated. The SFFD Rescue Captain may assist in some of these functions with support from the Lieutenant, Battalion Chief, and civilian supervisors.
3. During a MCI, all Emergency Department Charge Nurses are required to:
 - Monitor Reddinet and the 800 MHz radios for the duration of the MCI;
 - Input the number of available ED beds for Immediate (Red), Delayed (Yellow) and Minor (Green) patients **within the first 15 minutes or less;** and
 - Update the number of available ED beds as appropriate for the duration of the MCI.
4. SFFD Officer located at DEC radios on B15*, the information reported on Reddinet on the number and types of MCI patients that each hospital can take to the Medical Group Supervisor or Patient Transport Officer.
5. Medical Group Supervisor or Patient Transport Officer will radio back to the SFFD Officer located at DEC which hospitals will receive patients, how many, what type, and any special needs (pediatrics, hazmat). Updates will be provided every 30 minutes or anytime there is a significant change in the MCI incident.



6. SFFD Officer located at DEC radios by an open channel on B13 / B14* hospitals will receive patients, the number, type, and any special needs.
7. Hospitals will surge their operations as necessary to prepare for the receipt of the MCI patients.
8. SFFD Officer located at DEC will announce to hospitals, ambulances and other field providers when the alert is secured and the incident is closed.

**Radio channel designations may change based on operational needs.*

Section 3.6 Medical Branch / Group Operations

3.6.1 Medical Branch Director

A Medical Branch Director has overall command of EMS field operations if a full branch response is initiated. The Medical Branch Director may supervise several Medical Group Supervisors and reports to either the Incident Commander Operations Section Chief if an Operations Section is activated.

3.6.2 Medical Group Supervisor

The Medical Group Supervisor(s) ensures command and control of all activities within the Medical Group and the integration of those activities with the overall operational response. This includes assuring that adequate personnel and resources are available to the Medical Group to accomplish its assigned objectives.

3.6.3 Ambulance Staging Area

DEC will announce to all in-coming ambulance crews the location of the Staging Area when it is established. Initial supervision of this area may be assigned to the first unit arriving in the Staging Area.

In-coming crews will park in the Ambulance Staging Area and report to the Ambulance Staging Manager who will give them their assignments. If **NO** Ambulance Staging Manager is designated, crews will report into the Transport Unit Leader (or Medical Group Supervisor, if necessary). Crews will stay with their vehicles in the Ambulance Staging Area while awaiting assignment.