

SURVIVAL FACTORS HIGHWAY ATTACHMENT 16 EMS INTERVIEWS

HWY15MH006

(5 pages)

1. RESPONDER 1, AMR ALS 443

Interviewed by Phone 2/28/15 2:15pm

His partner is -----, and they switch off who is driving and who is doing patient care. At the time of this call, RESPONDER 1 was driving. They were dispatched late into the event, he believes they were the last ambulance on scene. They were dispatched at 7:12 p.m. and arrived on scene pretty quickly. There were no traffic problems and nothing blocking access to the scene. He felt that it may have been relatively easy because the scene was not in a congested area. When they arrived on scene he was impressed with the organization, and they were on scene only about 5 minutes. They were assigned 4 patients to be taken to Community Memorial Hospital in Ventura. All 4 walked to the ambulance. He believes they were the last 4 to be transported from the scene. He noted that AMR unit 445 arrived and departed the scene just before them. He described the injuries as general bumps and bruises, and did not see lacerations or deformities. He said one patient had left knee/left hip/left shoulder pain. Another had forearm pain, and another complained of neck injury while enroute and near the hospital. So when they arrived at the hospital, they applied a C-Spine brace to that patient. He was asked to describe how they are cleared to load and depart. He said that it's pretty easy to see who is in charge because they wear different color helmets (Captain is red, Chief is white), and he has 11 years experience and knows many of the crews. He said that the accident occurred in the Gold Coast section. The coast supervisor was AMR supervisor was ----- in EMS48. The triage manager was a paramedic, not sure who. He assigned them 4 patients. He said the triage manager call the local trauma center, Ventura County Medical Center, and they have "readnet" and nurse on staff (the MICN – not sure what it stands for) tells him the bed count for the local hospitals. There is a Patient Care Coordinator (PCC) at the trauma center who has to determine what the various hospitals have. I asked about any issues on scene, and he indicated that there were no facilities for the passengers, who were standing around for a while.

2. RESPONDER 2, Gold Coast ALS 664

Interviewed by Phone 2/28/15 3pm

He was the driver and his partner that day was ------. They were about the 2nd or 3rd ALS on scene. They were enroute at 5:51 and arrived around 6am. The traffic was bad in the direction they can because the police already had the road closed, so they drove up the wrong side of the road. The went Wooley to Rose to 5th. They transported 2 yellow tagged patients to Las Robles. One had leg injuries, the other back. He does not have too much detail because he was driving. They were walking wounded, but put on a backboard anyway. They were first assigned to triage/treatment, and so were not given patients until much later. He was outside overturned train cars and was handed patients coming out of the train and helped move them to the triage area. After this he went to the treatment area and started IV, did splints, gave O2. He heard there were about 18 ambulances total, and figured they left with their patients about half way through. They ended up leaving because a patient was put on their gurney, and so took that patient and another and left. He was asked how long it took to start transporting patients and he figured about 20 minutes. He said they helped lay

out the triage tarps. He said they helped package patients and there was a wait for more ambulances, but it was not long. He worked on the train engineer at the triage area, along with 3 other paramedics. He said that he got loaded pretty quick, and was in the triage area about 10 to 15 minutes. The wait was because he was being treated and because they were figuring out who should take him, and the engineer was one of the first to be transported from scene. He noted that the paramedic supervisor was ------ and the Medical Communicator was ----- and his partner ------ was triage coordinator, because they were the first ALS unut (662) on scene. He noted that the Medical Communicator process is to call the base hospital, in this case Venture County Medical Center, and obtain information about how many patients each area hospital can take. He clarified where he was while helping move people from the train to the triage area. He was near the two overturned cars on the North side of the tracks.

3. RESPONDER 3, EMS 48 (Supervisor)

Interviewed by Phone 2/28/15 4pm

He was dispatched from the second alarm and got there about 6pm. His role in the event as supervisor was treatment unit leader, and he assisted the transportation group supervisor coordinate transportation. He described that when he got there, there were about 4 red tags and 10 yellow on the tarps. He explained how the first ambulance crew on scene was assigned to do communication and triage work, and they retain this job through the event because it is too disruptive to try and switch these people out of the role when the supervisors arrive. He said it took about 10-15 minutes for the first wave of ambulances to arrive. He said they were able to get the hospital availability but the injured persons identity needs to be clearly determined so that they do not loose track of the patient. He noted there is no specific policy about when you can load the ambulances on scene, and that it depends on the circumstance. For example, they avoid putting 2 red patients in one ambulance because it creates too much work for the paramedic. He said they are careful before they load in order to do the patient tracking and match this with the destination, making sure red patients go to trauma centers and not to a standard hospital. He noted that if the EMS administrative supervisor is on scene, then he has the final say in when to load and transport. That supervisor was on scene and did not disrupt the paramedics, but he played a supporting role. The EMS administrator was on scene around 6 am because he lives nearby. He did not see anything that alarmed him about the response and felt like it went as good as one could have expected. He as 27 year total EMS experience, with 10 years as a paramedic and the rest as a supervisor. He explained the concept of first in, last out for the ALS crew in an MCI, and the choice to use this approach instead of using the first paramedics on scene to treat and transport patients is based on the number of patients. This event was clearly large enough that it was an easy decision. He described the issues with transferring the medical communication job from the first paramedic on scene to the arriving supervisor, explaining that to switch over would disrupt too much communication that is already in progress and it would take too much time for the arriving supervisor to get up to speed. He was asked if he knew how many ALS units were put into first in, last out service mode, and he note that he did not realize there were others besides the first couple.

4. RESPONDER 4, Gold Coast ALS 662

Interviewed by Phone 2/28/15 5pm

Their unit was the first of any response units other than police to arrive on scene. The approached and saw the truck fire, and drove past to the train cars. They parked just past the last train car, away from the smoke and in an area that would have good accessibility. The assessed the scene and saw about 10 to 12 passenger that had been able to get out of the train with more coming out. He said the first fire engine arrived quickly after them and started attacking the fire with others coming to the train. They told any people walking out of the train to gather in an area, which would become the green area. His partner was assigned to be medical communicator, and he was assigned as triage leader. He figured it took about 10 minutes to the get red patients out. After the triage was complete, he was assigned to treatment, and then loading. Their unit did not end up transporting anyone. He noted that the yellow patients all appeared quite stable. He said that ALS 663 and 664 were also pulled into duty for triage and treatment of the reds, rather than info an immediate transport role. He described the reds as one female with a depressed skull fracture and neck and back pain. A male had a bilateral pneumothorax and two other males had fast breathing. He felt the that two reds with fast breathing did not appear as unstable as the other two. He was asked about what could have been done differently, and responded that in a perfect situation, wished they had a more clear and accurate count of exactly how many passengers were on the train. He was concerned that they accounted for everyone. He has about 3 year experience as an EMT and 5 years as a paramedic. He said they get a lot of MCI training, with 4hrs required when first licensed, and 1 to 2 hours each year after that, plus MCI drills.

5. RESPONDER 5, Gold Coast ALS 662

Interviewed by Phone 2/28/15 5:30pm

They were the first ALS on scene. They saw the fire and the arriving fire trucks started attacking the fire while they started triaging patients. They got this going and then he went to the supervisor's truck and got the triage tarps, setting out the red, yellow, and green. He was assigned as medical communicator. He assessed the scene as a level 2 event and called the Ventura County Medical Center. He noted there are different lines for paramedics calling in to report a transport versus the base line for the MICN to determine hospital availability for an MCI. He said the uninjured were sent to one area, the walking to a green tarp, and the others were being helped out by fire and brought to treatment by paramedics who had been assigned to triage/treatment. He said that ALS units 663 and 664 were assigned to tagging/treatment, ALS 483 was the first unit to transport injured. He was not sure, but thought they transported one red and one yellow. He said the first 2 reds were on the tarp pretty quickly, and transported from scene pretty quickly, a couple of minutes from the time they got to the red tarp. The other two reds, one female with a skull fracture and a male with chest injuries, took longer to get out of the train. He thinks the next to transport patients was 451, and left pretty quick. He said some patients were upgraded from green to yellow. He thinks there were about 8 or 9 sent to VCMC, about 8 or 9 to Los Robles, about 4 to Pleasant, 8 to

CMH, and 2 to St. Johns. He was asked to describe the communication with the MICN and said that at first she thought that everyone would go to trauma centers and just gave him the trauma center availability. He said that no, he needed information on all the area hospitals, and had to call her back to get this. He was asked if ambulances were sitting at scene with a delay for loading. He said there was not much of a delay for loading and departure, as they need to identify the right unit, the person and then got them out pretty quick. He did say there some ALS trucks sitting empty, because the crews or equipment were doing other jobs. His unit was not being used to transport because he and his partner were doing MCI duties, 663 was not being used at the time because it had been stripped of supplies and the crews were working the scene. He has 2 years experience as an EMT and 5 as a paramedic. He attended the last big airport MCI drill with about 100 simulated patients where they ran it the same way. H's been to real events with around 7 patients. He felt like this event went pretty smooth and followed the procedures they practiced in MCI drills. He was asked about how long the non-injured had to stay on scene. He noted that they were worried that everyone would not be accounted for, so they asked the police not let anyone leave, and that they needed to get a proper count. He was asked who coordinated the departure of the non-injured and said it was a fire captain. He described the situation where an individual could not wait to use the bathroom, and this prompted a fire fighter to look around notice the field worker porta potty trucks nearby. A field porta potty truck was brought over approximately an hour into the event. He said that when it was brought over, there were still 15 to 20 greens on scene, so it was about half way through the patient transport phase of the call.