Planning

Advancing Professional Rescue

Introduction >>>

The focal point of this module is on tactical planning. However, it is essential that you are familiar with your service's operational pre-plans. This is the case so that you are conversant with local risks, protocols and guidance in the event of a large-scale incident.

These pre-plans include ensuring that you have the appropriate equipment, receive the right training and can adopt suitable safe systems of work. You should also make yourself aware of the principles established by the Joint Emergency Service Interoperability Programme, often referred to as JESIP. As a member of the emergency services, we all should be familiar with the interoperability framework. You may even argue that the JESIP principles are more prevalent at a technical level of a Road Traffic Collision than any other type of incident because they nearly always involve a multi-agency approach.

The Importance of Planning >>>

Before we consider the importance of planning, we first must gain an understanding of the fundamental principles. Simplistically, planning is the process of identifying a series of actions that are required to achieve the desired goal. It involves the creation and the implementation of a plan, the development of which requires situational awareness and conceptual skills. An important, albeit often ignored aspect of planning, is the relationship it holds to forecasting. Forecasting is a prediction of what the future looks like, whereas plans anticipate how to get there. Planning combines forecasting with the preparation of scenarios and how to react to them, preparing a sequence of actions to achieve a specific goal within the necessary time.

A plan is like using a map, follow the route to progress towards your goals, and you can estimate how far away it is to the destination. Heraclitus, the Greek philosopher, stated that the only constant in life is 'changes'. In other words, preparation does not guarantee success, yet it is necessary. Effective planning limits change, help predict results and thereby mitigate problems. Since things change, plans need to be monitored and updated; in fact, it should be a continuous process of observing that allows you to adjust course, keep on track and to make accomplishing your goals more likely. An Incident Commander who sticks rigidly to their plans and is unwilling to adapt on receipt of new information or unforeseen circumstances, will at some point be met with significant problems which impact on the success of the rescue.

Although subject to debate, there are three steps in the planning process:

1) Identifying a destination – at a road traffic collision, this is how to safely, remove the casualty from the vehicle in a manner that is beholden to their needs.
2) Evaluate options – gather information about the environment, vehicle and patient.
3) Decide the specific course of action – In this case, we are determining the extrication pathways.

Following this process helps an Incident Commander to establish priorities, set objectives, provide clear direction and maintain control. These are not the only benefits, by planning you can also identify the limitations of what is achievable and determine the required resources. Regardless of the size of the incident, these outcomes provide clarity to emergency service responders ensuring organisational protocols link together, support interoperability and safe systems of work. In a nutshell, planning tells us how, when and what actions to take.

Types of Plan >>>

At the scene of a road traffic collision, the aim of tactical planning is straightforward. It generally involves the removal of casualties from their vehicles so they can be transported to definitive care while maintaining their welfare, protecting other road users and the

environment.

Although there may be some variation on the theme due to incident specific issues, generally there are three different medical states that you should plan for:

1) A critically ill patient that needs to be immediately extricated from the vehicle and transported to definitive care.
2) A stable casualty who requires an appropriate amount of attention so as not to exacerbate any injuries.
3) A stable casualty whose condition deteriorates and therefore require immediate extrication and urgent transport to definitive care.

To prepare for these scenarios, Incident Commanders should format appropriate plans dependant on the circumstances. With a critically ill patient, the implementation of an Immediate extrication plan may be a requirement. The medic requests an immediate extrication when the risks of an uncontrolled rescue outweigh the benefits of the patient receiving the appropriate treatment. Conversely, a stable casualty of injuries that would be aggravated by any uncontrolled movement would require the implementation of a Full plan. This creation of space is commensurate with the patient's injuries. Dependent on the circumstances, this could be a case of merely opening a door if the vehicle has been in a low-speed impact and the casualty's injuries are benign. On the other hand, a full roof removal may be appropriate if the patient has suffered more severe injuries.

Finally, there is the Emergency plan which requires enough space to quickly remove the casualty from the vehicle with some degree of control. Generally, this is because the casualty's condition has deteriorated and the change in circumstances now mean that they need to be removed from the vehicle to receive the appropriate care. Due to the potential for a patient's condition to suddenly start deteriorating is always present, the implementation of an Emergency Plan is a priority. The Emergency Plan includes the releasing of any physical entrapments and proof that the extrication pathway is viable. The actual implementation of the Emergency plan only occurs if the patient's condition starts to deteriorate to such an extent that the medic makes the clinical decision to remove the casualty from the vehicle so that they can receive definitive treatment. On proving that the Emergency plan is viable by validating the casualty's extrication pathway, work can then begin on the mainstay of casualty extrication, the implementation of maximum space creation, the Full Plan.

Although on the face of it, it may appear this is unnecessary, the Emergency and Full plans are integrated, with any space created only serving to benefit both the rescuers and the casualties. For incidents that involve multiple or mass casualties, these principles still apply, however, there is a greater emphasis on operational and strategic planning. You should consult local guidance for further information on how to manage incidents of this nature.

Plan Influencers >>>

At the scene of a road traffic collision, three overriding factors influence the casualty extrication plans:

- The casualty's condition and level of entrapment
- The environment
- The vehicles involved.

These three factors are interlinked and influence one another. For example, the position the vehicle has come to rest significantly affects access, the casualty's injuries, their place in the vehicle and, therefore, the tactical planning considerations. Generally, the tactical planning process starts on-route to the incident with the initial information helping to form a preconceived image of what the plan may include. Often based on the experience gained after attending an incident of a similar nature, these pre-conceptions are influenced by the number and types of vehicles involved, the number of casualties, time of day and weather conditions.

Once in attendance, the Incident Commander will, where possible complete a 360-degree assessment. The outcomes of which stimulate the initial actions. Overlaying the information gathered about the environment is the data about the vehicle, its position, the type, the make and model, it's shape, cargo, and possible access points. This process of gathering information influences both tactical planning and the dynamic risk assessment. Moving on, a closer external inspection of the vehicle reveals its fuel type, the type of glazing, and construction, as well as any available access points. Once access has been gained, detailed information from the casualty can start to be obtained, as can the remaining influencers from inside the vehicle. The vehicle safety systems, how the seats operate, which doors open, steering column adjustment may all have a bearing on the tactical planning. The focus can now shift to gathering information about the casualty, their position in the vehicle, their size, their condition and level of entrapment also affect the tactical planning. This final and crucial piece of the jigsaw influences the pathways and the overall urgency of the extrication.

Communication and planning >>>

In the previous section, we talked about obtaining the information to inform the Incident Commander's decision-making process. Secondary to this is the communication procedure; the incident ground is often a highly emotional and pressured environment which requires a degree of control. Having protocols that provide a clear channel of communication is an essential component of any incident, and in the case of a road traffic collision, influence the care of the patient and the speed of extrication. The process of gathering information is very much a team affair, with each roll, having predefined areas to assess and data to collect.

On completion of the 360-degree assessment, the Incident Commander provides direction to their medic and tool operators. The level of casualty response is a priority piece of information at this stage as it determines the next tasks. A non-responsive patient generally requires a quicker reaction than one that is communicating and alert. This initial information should be disclosed to the incident commander but is worth sharing with the rest of the team. Once the scene is stabilised, and entry gained the medic completes a primary assessment, and the tool operators evaluate the vehicle. The outcome of these checks should lead to the Incident Commander receiving a full brief on the casualty's condition, level of physical entrapment and proposed extrication pathways from the medic. This information is added to by the tool operators with information about the vehicle. The Incident Commander is now fully armed with all the information about the environment, the vehicle and, most importantly the casualty.

Taking all of this on board, the Incident Commander can make fully informed decisions and discuss, formulate and communicate the proposed plans. Dependant on the situation the Incident Commander may brief all the plans or take a staged approach, instructing the emergency plan. This has the advantage of allowing additional time to gather information and reflect, although it also has the disadvantage of potentially reducing the opportunity to carry out simultaneous activity. Therefore, potentially increasing the extrication time. At the core of any decision is the needs of the patient, this includes the time taken to undertake a given procedure and the exposure to risks for emergency service personnel. Taking on board any guidance from the medic and tool operators is also good practice and often influences any final decisions.

Summary >>>

- As part of your preparation for attending incidents you should make yourself aware of the principles established by the Joint Emergency Service Interoperability Programme, often referred to as JESIP.

- Planning is a series of actions that are required to achieve the desired goal.

- It involves the creation and the implementation of a plan, the development of which requires situational awareness and conceptual skills.

- There are three steps in the planning process:
    - Identifying a destination
    - Evaluate options
    - Decide the specific course of action

- Broadly there are three different medical states that you should plan for:
    - A critically ill patient
    - A stable casualty
    - A stable casualty whose condition deteriorates.

- To prepare for these scenarios, Incident Commanders should format appropriate plans dependant on the circumstances:
    - Immediate extrication plan
    - Full plan
    - Emergency plan

- A Plan is influenced by:
    - The casualty's condition and level of entrapment
    - The environment and
    - The vehicles involved.

- The process of gathering information is very much a team affair, with each role having predefined areas to assess and data to collect. Once gathered the information fully informs the Incident Commander to enable sound decisions to be made before communicating the plans.