

BLUE RIDGE MOUNTAIN RESCUE GROUP

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September 5, 1987

To: Board of Directors, Appalachian Search & Rescue Conference Kevin Coyne, Vice Chairman ASRC From: Brian Wheeler, Secretary ASRC

RE: Conference alerting concerns and procedures

Members of the Board,

The following is a summary of recommendations to the Board from the current and several past Board members of the Blue Ridge Mountain Rescue Group regarding Conference alerting concerns and procedures. Recent discussion throughout the Conference reveals that some members are in favor of major revisions to the current ASRC alerting procedure. This letter hopes to address these dispatching concerns and communicate the importance of maintaining alerting in its current format.

During discussions on alerting at the December 1986 Board meeting in Blacksburg, the Board agreed that a document explaining the alerting process would greatly help ASRC groups in understanding the current system. Discussions among ASRC Board members relieved concerns at the time regarding ASRC alerting through BRMRG in Charlottesville. The Board asked Jim Rooney, then ASRC Operations Officer, to compile this document. Unfortunately, a ASRC Alert and Dispatch guide was never distributed. Chris Metzler, our new ASRC Operations Officer, will be putting this information together. In the mean time, I will briefly outline the most common ASRC alerting process so the Board will understand the importance of the points that follow.

After contacted with a request for ASRC assistance, Va. DES calls University of Virginia Hospital MEDCOM to alert the Conference. The MEDCOM dispatcher activates the BRMRG voice pagers to contact an ASRC Alert Officer (AO). The AO calls UVa. MEDCOM and/or Va. DES to collect the initial information on the incident. The AO might then contact the Responsible Agent.

> After obtaining information on the problem, the AO should evaluate the urgency of the situation... In general, urgency evaluation takes some experience and insight, and new AOs should seek input from others whenever possible...

> For a response, immediately try to find the ASRC member capable of acting as ASRC Incident Commander (IC) who can most rapidly respond to the incident site...

Initially, the ASRC AO will make a geographic judgement regarding which ICs they will attempt to contact first. During the alert, another IC may be assigned if they become available and can respond more rapidly to the incident.

If an IC from a group other than BRMRG can be onscene faster than one from BRMRG, then appoint him or her IC, give a briefing, and dispatch whatever resources and logistical support he requests (AND NO MORE!!). He or she will make decisions concerning resource allocation for the entire Conference...

- from BRMRG's Alert and Dispatch Officers Guide, 8 April 1987.

In the event of an overhead team request (OHT), every reasonable effort will be made to locate an IC. If one is not available, the Responsible Agent will be notified and the AO will make other arrangements. In addition, in the event that an ASRC IC cannot be assigned within two hours of a Callout, alternate resources will be dispatched and the RA advised.

The ASRC AO immediately alerts all other Groups and maintains a dispatch number for communications with DES, MEDCOM, and the RA. The AO also attempts to find another member (usually by voice or digital pager) who can begin determining his or her Group's availability. While this is only one alerting scenario, it is representative of the series of events that take place in an ASRC alert.

We have realized that it is in the best interest of the Conference and the subject, for alerting to continue to follow this format due to: the importance of the ASRC's relationship with UVa. MEDCOM; the availability of trained BRMRG AO's; the rapid change in alerting information among the Groups; and BRMRG's stable financial and membership base.

First of all, a thorough examination of the relationship with UVa. MEDCOM reveals many important reasons to maintain alerting as it is. MEDCOM provides Va. DES with a guaranteed 24-hour contact number. By using BRMRG's voice pagers, MEDCOM can expect at most only 5-6 incoming calls. We try to keep this to a minimum by activating the pagers again immediately after an AO has contacted MEDCOM. It is unlikely that Va. DES would be willing or enthusiastic about fielding multiple calls from AOs all over the Conference. Therefore, it is important to keep MEDCOM in the alerting chain.

MEDCOM also provides telephone and radio links directly to Va. EOC (On one occasion telephone communication was lost in the Richmond area during an alert. While BRMRG utilized UVa. Police Department's teletype to communicate with the EOC, MEDCOM's radios could be used on future occasions). The Conference's relationship with MEDCOM plays an integral role in the dispatching of BRMRG IC's through the Pegasus helicopter program. In addition, if Pegasus is not available during an incident request for a med-evac helicopter, our existing relationship with MEDCOM would simplify the request for another helicopter. The request could be handled more efficiently by MEDCOM, already familiar with our operation and expertise, to another med-evac agency who might be unaware of the Conference or skeptical of the need for air transport (The March 1986 simulation and actual helicopter evacuation provides a good example). While not necessarily unique to the ASRC/MEDCOM relationship, other privileges that our MEDCOM relationship provides includes: ready access to EMS information; ability to provide ALS care in the field without radio contact to medical command by standing orders through the ASRC Medical Director at UVa.; availability of their communications equipment for turnaround notices in areas not covered by DES; access to ER supplies; and an easy point of contact for local rescue squads and law enforcement agencies to callout the ASRC (in the past agencies have expressed the desire to not call DES to alert us). UVa. MEDCOM finds it politically advantageous to say that they alert the ASRC. Removing MEDCOM from the alert sequence could jeopardize all of these privileges.

BRMRG provides regular training sessions and certifies only those Alert Officers who meet the written qualifications. Maintaining ASRC alerting within BRMRG assures the ASRC that a pool of well trained AOs carrying BRMRGs pagers will answer the call. BRMRG members are constantly exposed to alert information and procedures throughout their training and by the fact that so many members spend time in the Group office.

Another important concern regarding spreading out the alert duties among the Groups relates to the flow of crucial alert information. At this time, any Group with a change in alerting information need only contact the BRMRG locker and leave a message with the update. The revision will immediately be added to BRMRG's DO guide. With alerting duties spread out among five Groups, it will be much more difficult to spread the information that every AO must have to efficiently conduct a callout.

BRMRG members availability as students provides another advantage for handling ASRC alerts. While every attempt will be made to locate the IC who can respond the quickest, incidents over the past several years show that BRMRG ICs tend to be more available and able to respond more rapidly than those among the other Groups. Therefore, the crucial time element in alerting is reduced because the IC is more often in the Group that handles the initial alert. Assigning an IC long distance requires additional time.

Finally, BRMRG has a stable financial and membership base to maintain the alert system. Regular income assures that substantial phone bills can be paid.

In summary, many members of BRMRG and the BRMRG Board of Directors feel Conference alerting should remain in its current format. The Conference's relationship with MEDCOM, BRMRGs trained and available AOs, the ability to funnel all alert updates to one location, and the Group's stable financial and membership base are examples which hopefully convey the importance of this opinion. This is not expected to be the last word on Conference alerting, but rather a statement from the Group that has been actively alerting the Conference for many years. It should provide some of the groundwork for the discussion of this topic at the next ASRC Board meeting.

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