

# Bus Triage



## Just-In-Time (JIT) Training

Louisiana Department of Health and Hospitals  
Office of Public Health



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# Overview/Purpose of the Just-In Time Training Packet

**Purpose:**

This document is designed to give appropriate volunteers the necessary information to successfully participate in the Louisiana Department of Health and Hospitals (DHH) Bus Triage Exercise.

**Target Audience:**

Volunteers (Medical and Non-medical)

**Exercise Purpose, Scope, and Objectives:**

The purpose of this exercise is to triage citizens being evacuated on mass transit vehicles (buses). This exercise will focus on the following objectives:

- Evaluate the operational state of readiness of the Bus Triage Plan.
- Assess potential problems for buses finding their way to the site.
- Identify gaps in facilities, equipment, supplies, & personnel (including volunteers).
- Assess security needs.
- Assess sustainability for personnel (food, water, etc.) for long operations.
- Test the process for use of the manifest and the patient transfer forms.
- Test the communications plan.
- Drill the triage process.
- Drill the patient transfer process.

**Exercise Scenario:**

Scenario is focused around patients being bused from hurricane evaluation sites as they are quickly evaluated to determine if it is safe for them to continue on their journey.

# Just-In-Time (JIT) Checklist

*Please use checklist as a guide to ensure that information is reviewed by designee during briefing/orientation.*

- Welcome**
- Identify points of interest (bathroom, safety area, etc.)**
- Discuss sign-in and out requirements**
- Discuss security check points and required identification**
- Identify supervisor and provide organizational chart**
- Provide Job Action Sheet**
- Allow time for review and questions**
- Describe work shift hours**
- Discuss when staff expected to return to work**
- Thank for participation**

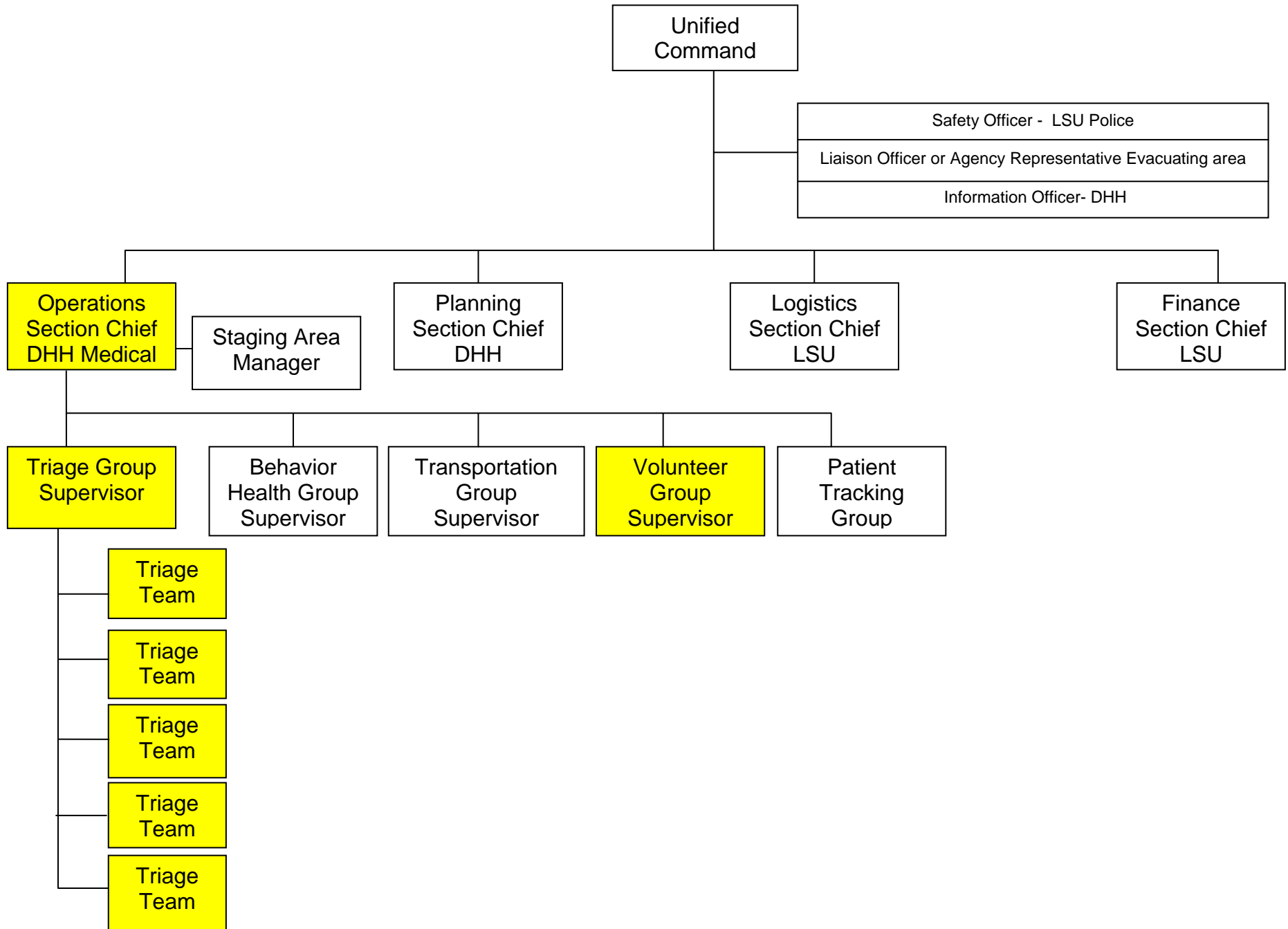
# Bus Triage Overview

The mission of the Bus Triage Drill is to evaluate patients on buses that have met the requirements to be on the bus and quickly determine if it is safe for them to continue on their journey on the bus to designated General Population Shelter or Medical Special Needs Shelter (MSNS). If it is not safe for the patient to remain on the bus, then the patients should be removed and placed on a transport vehicle and taken to 1) MSNS at Pete Maravich (PMAC) on the campus of Louisiana State University or 2) hospital for acute care stabilization. The focus of this process is speed and efficiency to get the buses back on the road as fast as humanly possible. Triage is a system used by medical or emergency personnel to ration care when the number of casualties needing care exceeds the resources available to perform care. It is designed to help those who can most benefit from the available care.

Louisiana's bus triage plan is designed for medically unstable clients on mass transit vehicles (buses) during evacuations. Triage is performed at an intermittent site while the bus is en route to its destination. Louisiana's plan emphasizes speed and efficiency to get the buses back on route as soon as possible while determining if it is medically safe for clients to continue on their journey on the bus to designated Critical Transportation Needs Shelters, General Population Shelters, or Medical Special Needs Shelters (MSNS). If it is not medically safe for the client to remain on the bus for the duration of the journey, then the client will be removed and placed on a transport vehicle and taken to a MSNS or a hospital for acute care stabilization. The triage plan incorporates the National Incident Management System/Incident Command System (NIMS/ICS) principles and consists of units of healthcare professionals operating in accordance with a footprint and guidelines specific for this mission. The plan is mobile and thus can be incorporated at other venues.

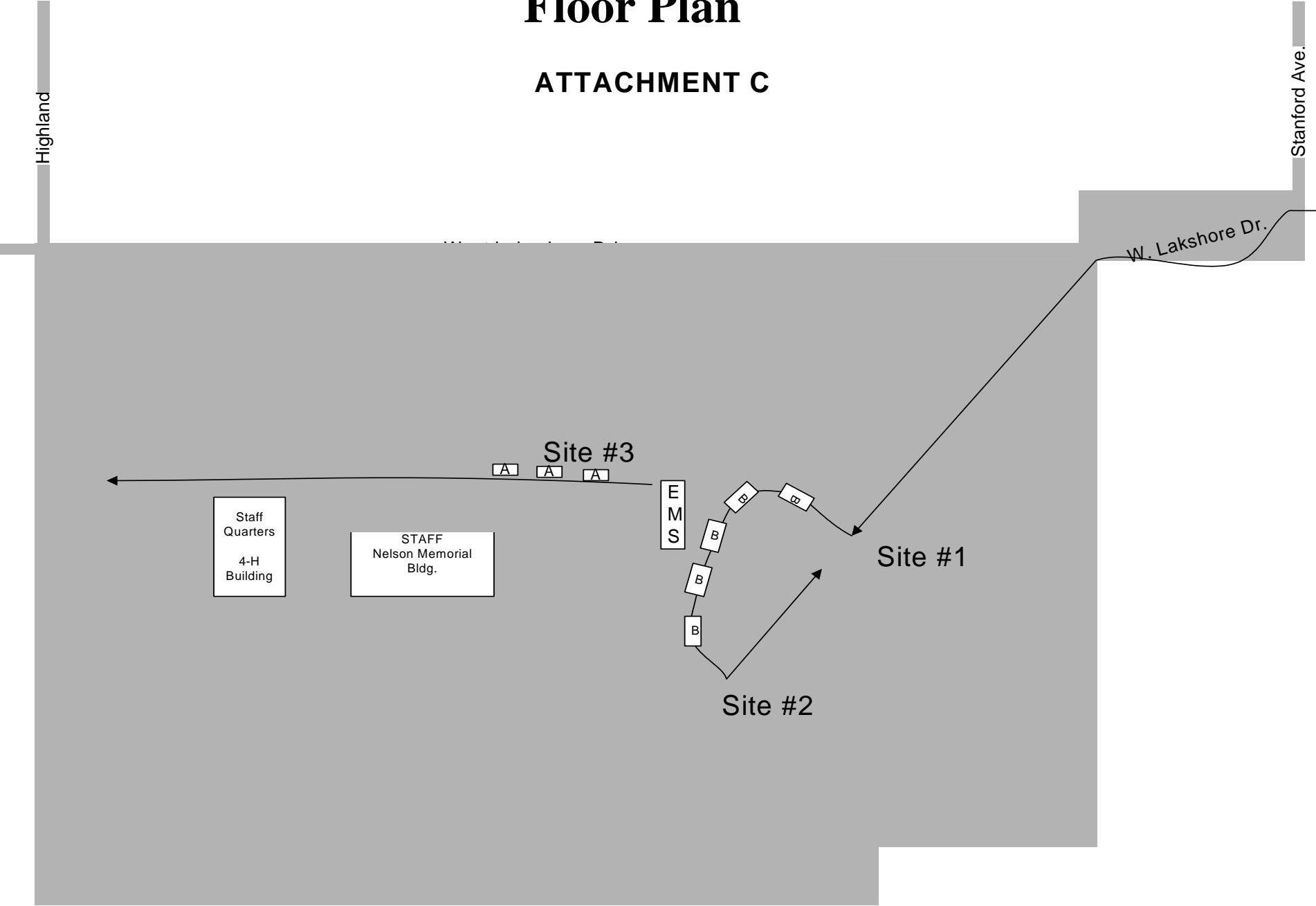
Triage strike teams will be tasked with rapid evaluation of patients on each bus. Once this is done, then the triage strike teams will request lifting and transportation help as needed from some of the volunteers. The very sick patients will be placed on an ambulance and will be sent to a local area hospital, the others that are not as sick will be transported to the PMAC MSNS via ambulance, wheelchair accessible bus or van. Those remaining on the bus will continue on to their destination.

# Command Structure Organizational Chart



# Floor Plan

## ATTACHMENT C



# **Body Mechanics**



# Tips for Good Body Mechanics

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Anytime your body is not in a fairly straight line (alignment), you are putting strain on your back. By keeping your body in good alignment and by using good body mechanics in daily living situations, you can help decrease the stress on your back.

## Sitting:

- Your feet should be able to touch the floor.
- Your knees and hips should be level.
- Sit up tall, and do not bend your head forward.
- Use a low back support in your chair.
- It is best to have armrests to lay your arms on.
- Make sure your work is straight in front of you so you do not have to look up or down.
- Do not remain in one position for too long. Get up and stretch often.

Yes



No



## Standing:

- Always stand close to the job that you are doing.
- Avoid standing for a long time. If you have to stand for a long time, place one foot up on a small stool.

Yes



No



## Walking:

- Walk with good posture. This means keeping your head high, your chin tucked in, and your back straight.

Yes



No



- Avoid high heels if you are going to be on your feet for a long time. High heels places the strain on your lower back.
- Push objects rather than pull them. Put one foot in front of the other, bend at your hips and knees and walk forward. Pulling places the strain on your lower back.

## Lifting:

- Avoid lifting heavy objects. If something is more than half your body weight, get help or use equipment.
- When lifting, bend your knees not your waist. Keep your back straight.

Yes



No



- Do not twist your back as you lift. To turn when lifting, pivot your feet.
- Do not lift an object above waist level. This increases the arch in your back.

**Yes**



**No**



- Keep objects close to your center of gravity (belly button) when you are lifting or carrying things.
- Tighten your stomach muscles when you lift.
- Avoid reaching for objects. Do not:
  - ▶ Reach across a table to grasp an object
  - ▶ Reach across to make a bed
  - ▶ Lean over to open a window
  - ▶ Bend over to get an object out of the trunk of a car

### **Driving:**

- Make sure that your hips and knees are level.
- Do not lean back and drive with outstretched arms.
- Place a lumbar support or a rolled up towel behind your lower back to provide support.
- When you are on car trips that last over one hour, stop every hour to walk and stretch.

**Yes**



**No**



## Sleeping:

- The best positions for sleeping are:
  - ▶ On your back with a pillow under your knees
  - ▶ On your side
- Do not sleep on your stomach or on soft, sagging non-supporting mattresses or cushions.

Yes



No



Yes



No



<http://medicalcenter.osu.edu/pdfs/PatientEd/Materials/PDFDocs/exer-reh/physical/bod-tips.pdf>

# **Hand Hygiene**

# Wash Your Hands

After a disaster, staying clean can be hard to do. You may not have running water. But staying clean helps you stay healthy.

## Things you can do to stay clean and healthy

- Wash your hands with soap and clean water. If you don't have soap and water, you can use hand cleaners with alcohol in them.
- Wash your hands many times each day.



## Times to wash your hands are

### BEFORE

- making food
- eating
- touching a sick person
- touching a cut, sore, or wound.

### AFTER

- using the bathroom
- blowing your nose, coughing, or sneezing
- touching things that may carry germs, like
  - diapers or a child who has used the toilet
  - food that is not cooked (raw food)
  - animals or animal waste
  - trash
  - things touched by flood water
  - a sick person
  - cuts, sores, and wounds.



# **Psychological First Aid**

# Managing Stress

Feeling emotionally exhausted, being too tired to think clearly, and experiencing a general sense of being overwhelmed by recent events are normal responses to chaotic incidents such as the recent hurricanes. Being “stressed-out” is a normal response to an abnormal event. Even though experiencing high levels of stress is normal, if ignored, stress can decrease your normal abilities to cope with every day life events. You may find you have a harder time dealing with things than you did before the event. If ignored, overwhelming stress responses can lead to increased risk of physical and emotional disorders.

Any individual can suffer from stress overload. No one is immune. Here are some things you might notice in yourself & others around you in the days and weeks ahead.

## Some Signs of Stress Overload

Physical	Thinking	Feeling
<ul style="list-style-type: none"> <li>• Faster heartbeat &amp;/or breathing</li> <li>• Sweating</li> <li>• Nausea</li> <li>• Decreased appetite</li> <li>• Increase in eating</li> <li>• Sleep difficulties (getting to sleep or staying asleep)</li> <li>• Increased use of medications or drugs.</li> <li>• Increased use of alcoholic beverages</li> </ul>	<ul style="list-style-type: none"> <li>• Racing thoughts</li> <li>• Impaired concentration</li> <li>• Not thinking clearly</li> <li>• Confusion</li> <li>• Memory Loss</li> <li>• Can't solve simple problems</li> <li>• Disorientation-losing track of time or tasks you're doing</li> </ul>	<ul style="list-style-type: none"> <li>• Anger</li> <li>• Fear/Anxiety</li> <li>• Agitation</li> <li>• Grief</li> <li>• Numbness</li> <li>• Surreal-not really happening</li> <li>• Withdrawal/Isolation</li> <li>• Irritability</li> <li>• Hopelessness</li> </ul>

**Delayed Reactions May Include:** Loss of sleep, nightmares, flashbacks, loss of desire to perform normal functions, unfocused fears, depression, anxiety, loss of interest in activities you normally enjoy doing

### What can you do if you notice these symptoms?

- Take care of yourself even when you don't feel like it; it helps your mind, body and emotions adjust to the stress.
- Eat a balanced diet. If you can't eat full meals, try 'grazing'. Eat smaller amounts of healthy food at more frequent intervals.
- Stick to your normal sleep/wake routines as much as possible. Rest helps your body recover.
- A brisk 20-30 minute walk can be helpful even if you aren't normally a big exerciser. Exercise helps release some of the physical stress.
- Talk about how you feel with co-workers and family. Give yourself the gift of releasing some of the pressure verbally.
- Journaling about thoughts and feelings is helpful to some people. This is especially true if you aren't comfortable talking about your feelings or can't identify anyone with whom you are comfortable talking.
- Stick to your normal life as much as possible. Now is not the time to make big, major, irreversible life decisions if you can avoid it.
- Do those things and make those decisions that give you a feeling of control in your life.
- Speak with a counselor. An individual with emotional distance from the event may be able to offer a different perspective or one not yet considered.

### For Family Members, Friends and Co-Workers

- Follow their lead about how much & how soon they want to talk about the event.
- Listen carefully. Allow them to tell their stories if they want or need to, but don't force it.
- Spend time with them if they want that; allow them the time & space they need if that is desired.
- Ask them, 'what do you need from me now?' Do what they perceive as helpful from you. That's not always the same as what would be helpful to you.
- Don't take their strong intense emotions personally
- Don't tell them it could be worse.

*Louisiana Spirit* HURRICANE RECOVERY  
... Helping Hands

If you would like to learn more about managing stress...  
call the DHH and Human Service Districts/Authorities Employee Helpline

**1-866-310-7977 • 225-342-9524 • 225-342-2800 • [www.dhh.louisiana.gov](http://www.dhh.louisiana.gov)**

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# Stressed? Sad?

Some stress is normal.



- You may cry a lot
- You may feel cranky
- You may feel helpless
- You may not think clearly
- You may have trouble sleeping
- You may feel tired a lot

You have family and friends. You can help each other through this. Watch for friends and family who seem very sad. Let them know you care. Ask them to get help.

**Call 1-800-749-COPE**

(1-800-749-2673)

or

**1-800-273-TALK**

(1-800-273-8255)

**1-866-326-9393**

**Find Missing Friends and Family**

**You are not alone.**



# **Cultural Sensitivity**

Prejudice

# Cultural Sensitivity <sup>Ethnocentrism</sup>

What is Culture?

Culture is the distinctive life-way of a people united by a common language and governed by rules and models for their beliefs and behavior.

In layman's terms, culture is what we live by everyday and what we bring with us to the workplace.

Stereotype

Sexism

## CULTURAL SENSITIVITY:

The ability to be open to learning about and accepting of difference cultural groups.

Discrimination

Ethnicity

## CULTURE:

A body of learned beliefs, traditions, principles, and guides for behavior that are shared among members of a particular group.

Multiculturalism

## WAYS TO FACILITATE COMMUNICATION ACROSS CULTURAL BOUNDARIES:

Racism

Cultural Sensitivity

- Recognize differences
- Build Your Self Awareness
- Describe and Identify, then interpret
- Don't assume your interpretation is correct
- Verbalize your own non-verbal signs
- Share your experience honestly
- Acknowledge any discomfort, hesitation or concern
- Practice politically correct communication
- Give your time and attention when communicating
- Don't evaluate or judge

Race

Internalized Oppression

Culture

Heterosexism



# **Bodily Fluids**

## Blood & Body Fluids Exposure (Hepatitis B, Hepatitis C and HIV)

### What is considered an exposure?

- A prick from a used needle
- A cut from a used sharp object
- Any contact of blood or body fluids with broken skin (open wound, cut or rash)
- A splash of blood or body fluid into the eyes, nose or mouth

### What should I do if there is an exposure?

- Wash the exposed skin surface with soap and water
- If the area is bleeding, allow it to bleed freely
- Do not use a styptic pencil, liquid or powder
- If the eyes, nose or mouth have been exposed, flush the area with water for 5 minutes
- After cleaning the wound, cover loosely using a dressing or bandage

### Records for each client should be kept and must include:

- Name, address and phone number of the client and name of the personal service worker
- Date of exposure
- Circumstances and details surrounding the exposure
- The incident should be documented and the record kept for a minimum of one year or as indicated by a by-law

### Important Facts

- Blood-borne diseases such as Hepatitis B, Hepatitis C and HIV virus are transmitted from person to person through infected blood and body fluids (see chart below)
- You do not have to see blood or body fluids on instruments for an infection to occur

	<b>Lives in blood</b>	<b>Body part affected by virus</b>	<b>Survival outside of body</b>	<b>Is vaccine available?</b>
Hepatitis C	Yes	Liver	Up to 7 days	No
Hepatitis B	Yes	Liver	Up to 28 days	Yes
HIV	Yes	Immune system	A few hours	No

<http://www.peelregion.ca/health/topics/personal-services/fluids-expo.htm>

# **Use of Personal Protective Equipment (PPE)**

**Proper Use of Equipment**  
**Walker**  
**Wheelchair**

# "Proper Techniques for Using a Walker"



When you are getting someone to a standing position, you move the person forward. You position their feet appropriately so their feet are below their knees. You have the person keep their back straight but lean forward. Assist you as much as they can by pushing down on the arms of the chair if there are arms on the chair.

You're going to assist them to standing by using the walker. It's best to put one hand in the middle of the walker and one on the arm of the chair. If you put your hands on the edges of the walker or the walker handles, it can tip to one side or the other.

So you want them to reach forward. Push down on the center of the walker. Push down with their arm that is on the armrest leaning forward and you're going to assist them to stand by assisting at the hip.

Once they are standing again, give them a moment to adjust to that position. Put their hands on the walker. Once they have adjusted to being upright and standing, they can move the walker ahead about six inches; this is a rolling walker--some you have to lift up. And then they will move their feet forward to meet the walker.

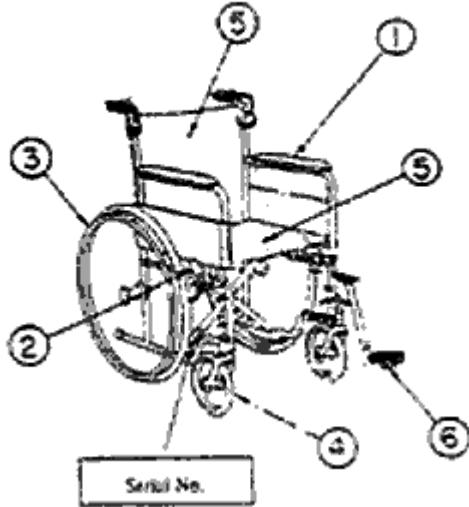
Something that is important to know when using an assistive device is that it must be fitted appropriately to the person. When using a walker or a cane, you want to have a little bit of bend at the elbow. So that the person can push down to lift their weight off their legs so if they are in pain or there's a problem. The way to test that is to just a little bend at the elbow or if their wrist hits the handle bar of the walker when their arms are extended. You know that you have the walker fitted appropriately to them. If it's too short, they will lean on it. And if it is too tall, they will have difficulty moving forward. So a slight bend in the elbow, wrists at the handle of the walker.

To walk, they're going to move that walker a little bit forward. And, depending on what disability that they have, they will press down on the handles of the walker and then move their feet forward to meet the walker. And repeat those steps moving forward slightly.

[http://military.coastline.edu/classes/gero130/unit16-proper\\_techniques\\_using\\_walker.htm](http://military.coastline.edu/classes/gero130/unit16-proper_techniques_using_walker.htm)



# Wheelchair Nomenclature



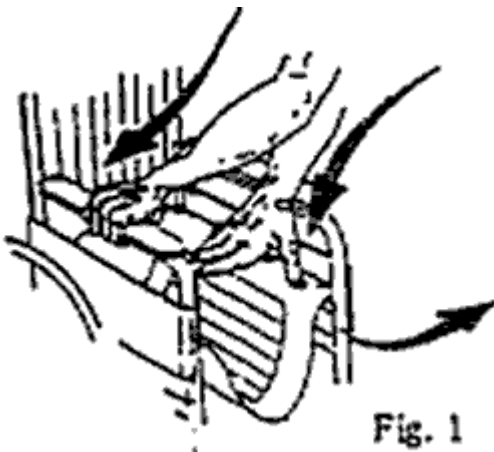
1. Armrests
2. Wheel Locks
3. Wheel and Handrim
4. Casters
5. Seat/Back Upholstery
6. Footplates

The following represents the varying weights, lengths, and widths of wheelchairs, both electric and manual, with a person in it. The American National Standards Institute states that doorway widths should be 32 inches.

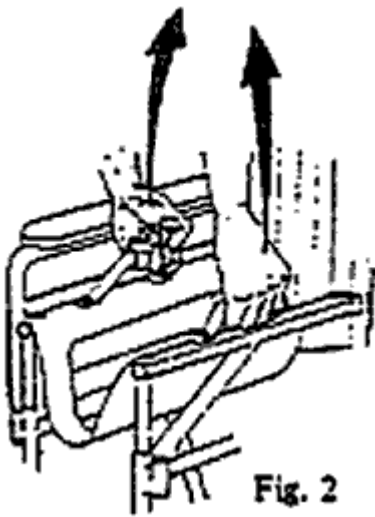
Weight	Length	Width
200 Pounds	48 inches	25 inches
360 Pounds	50 inches	26 inches
375 Pounds	63 inches	63 inches

## General Operational Guide

### How To Open/Fold Wheelchairs:



TO OPEN CHAIR: Tilt chair to one side, push down on seat rails (fig 1).



**TO FOLD CHAIR:** Fold up the footplates, tilt chair to one side, lift upward on seat rail or on upholstery next to seat rail. For chairs with detachable or offset arms (fig.2), fold by lifting carrying straps.

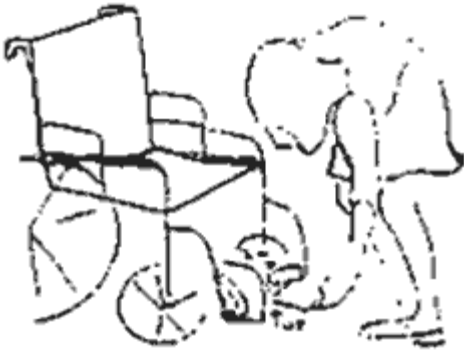


Figure 3. When folding the wheelchair be sure the foot plates are all the way up against the leg frames.

### **Curbs and Single Steps:**

There are generally two methods which can be used to assist a person in a wheelchair over a curb or single step. The wheelchair can be rolled down off the curb or the step, backwards or forwards. The method used depends upon the preference of the user, the environmental situation, the strength of the assisting person, and the confidence the wheelchair user has in the assistant. As in all activities, if the wheelchair user does not have sitting balance, a seat belt should be attached to the wheelchair and used.

#### **A. BACKWARD:**

The least taxing method on the assisting person and usually the safest for the wheelchair user, is to turn the wheelchair around until it can be rolled off the step or curb backwards.

Figure 4. When the wheelchair is being rolled backwards off a curb, support it by lightly pressing against it.



**PROCEDURE:**

1. Just before reaching the edge of the curb or step turn the wheelchair around so that it is facing away from the edge.
2. Holding tightly to the handles, back the wheelchair down off the curb. Let the rear wheels roll down over the edge. Additional support can be furnished by pressing a hip against the back of the chair as it comes off of the edge. (See figure 4.)
3. To prevent the front wheels coming down with a jar that could throw the wheelchair user out of the chair, press a foot on the anti-tipping bar as the chair is backed away from the curb. Then gently lower the front wheels to the ground.
4. Turn the wheelchair around, being careful not to clip the ankle of a passer-by and proceed on your way.

**B. FORWARD:**

**This method is effective if the assisting person is experienced in handling wheelchairs.** It is most useful on crowded street corners and places where the wheelchair can not be turned around to go off an edge backwards. The wheelchair user should have on a safety belt or be holding to the chair to prevent being thrown forward out of the wheelchair.

**PROCEDURE:**

1. As the curb is approached, place one foot on the anti-tipping bar and tip the wheelchair back on the large wheels. This keeps the wheelchair user securely in the chair as the chair rolls off the edge. The assisting person should not be supporting the weight of the wheelchair user, but just keep the wheelchair balanced on the large wheels.
2. Once the front wheels are up, remove the foot from the anti-tipping bar. Continue rolling the wheelchair off the edge with the front wheels up.
3. After the large wheels are off the edge, allow the front wheels to drop down gently by pressing a foot on the anti-tipping bar as the wheels come down.

### **Rolling on the Rear Wheels:**

Can be used to roll the wheelchair over the following types of terrain: going over railroad tracks and grates embedded in the street or sidewalks; soft lawns, sand, snow, etc., even deep-pile carpets. These types of terrain tend to throw the front wheels aside or cause them to sink in, making the progress difficult if not impossible. **Lifting the front wheels of the surface gives the assisting person more control over the wheelchair.**

If the assisting person is not strong enough (although it actually takes little physical strength if the wheelchair is kept balanced) or doesn't feel confident, it is advisable to turn the wheelchair around and go backwards over rough terrain. This also puts the front wheels out of the way as they are following rather than guiding the wheelchair. Remember not to tilt the chair too far backwards.

# Notes



