Medical Emergency Response

*Hendro Wartatmo*
Pusbankes – 118
(Centre of Emergency Support)
-Collaboration of Emergency Dept. of all hospitals in Jogjakarta Province.
-Networking of Pre-hospital Emergency Services

Medical Emergency Response

Local management
Initial Assessment

• M = major incident standby / declared
• E = exact location
• T = type of injury
• H = hazard, present and potential
• A = Access
• N = number of casualties
• E = emergency services, present and required
Major Injury Medical and Management Support

- Command
- Safety
- Communication
- Assessment

- Triage
- Treatment
- Transport

Regional Management

- Coordinating Team
- Medical team
- Surveillance
- Management back up
Disaster Plan

- Pre Hospital Disaster Plan
  - M = major incident
  - E = exact location
  - T = type of injury
  - H = hazard,
  - A = Access
  - N = number of cases
  - E = emergency services, present and required

- Hospital Disaster Plan
  - Command
  - Safety
  - Communication
  - Assessment
  - Triage
  - Treatment
  - Transport

- Regional Disaster Plan
  - Coordinating Team
  - Medical team
  - Surveillance
  - Management backup

Partisipasi masyarakat pd penanggulangan bencana

- Tingkat pengendali
- Tingkat pimpinan satuan kerja
- Tingkat pelaksana

- Fase tanggap darurat
- Fase Pemulihan
- Fase Kesiagaan

- Military
- Government
- Non Government Organization (NGO)
- Private Sector
- Academia

- Profesional,
- Petugas,
- Relawan
Response of Health Sector

Control and Coordination

Medical Responses
Administration Back up
Logistics Management
Public Health Responses

Trunkey’s curve

Trauma deaths

Immediate deaths
Early deaths
Late deaths

0 1 2 3 4 5 6
hours
1 2 3 4
weeks
Lesson Learnt from Merapi eruption, 1994

No victims attended by medical personnel during evacuation

No pre-hospital emergency system

Time needed: 2 years
Leader: Director of GenHosp
National meeting: 4
Local meeting: ?
Strategy: joint corp..

Pusbankes - 118

Pusbankes – 118

- ATLS* (1996)
- ACLS* (1996)
- Basic Life Support (1996)

- Road accident
- Airplane crash
- Riot
- Fire

1994 - 2003
Meulaboh, 2004

**Isolated City:**
- Blocked communication
- Destroyed land roads
- Destroyed runway
- Insecure situation
- Distance
- Finance
- Professionalism

**Low resilience:**
- Lack of buffering & absorbing capacity
- No pre-existing emergency system / networking
- Lack of Health Services
- No preparedness

**Delay of Responses**

Relatively Slow Recovery And Development

Bantul, 2006

- Good transportation
- Good communication
- Pre-existing of emergency services networking
- Quick response of local, regional and international team

**Rapid Responses but Uncoordinated Works**

Quick recovery
Lessons Learnt

from Bengkulu Earthquake, 2007
from Padang Earthquake, 2007

Lessons Learnt:

- “The problem of disaster response was not lack of any single resource but inadequate management.”

Regional Management!
Disaster Response Team

- SARS, 2003
- Bali Bombing I, 2003
- Tsunami, Aceh, 2004
- Landslide, Banjarnegara, 2005
- Earthquake, Bantul, 2006
- Tsunami, West Java, 2006
- Earthquake, Bengkulu, 2007

2003 - 2007

Military – Civil Collaboration during Disaster Response: a Lessons learnt from volunteer’s perspective.

Hendro Wartatmo
Center of Public Health Management
Faculty of Medicine – Gadjah Mada University

HAD R / TX, Aromatix – US Navy PACFLEET, 2009
Advantages of Military

- Secure budget
- Specialized equipment
- Trained and quickly deployable workforce
- Self sufficient
- Highly organized and hierarchical structure

(Damon P Coppola, 2007: Introduction to International Disaster Management)

- Tradition of publishing their work

Surgical Response to Disaster. Surgical Clinics of North America, June 2006, vol 86, No 3
Guest ed.: LTC Robert M Rush, Jr, MD

Disadvantages of Military Role

- Can not be absolutely neutral
- Fixed command
- Difficult access for volunteer
- Difficult personal approach to local people
- Mistaken image / perception of community
When more than 2000 victims and their families surged the hospital within 10 hours, transfer of victims and pile of garbage became the problem which needs more personnel. This shortage of personnel can not be fixed by the arm forces because there was no order to do it. The volunteer then fixed it.

What Expected from Civil (Volunteer) – Military Collaboration

- Open policy concerning the collaboration in the form of:
  - Coordination
  - Transportation support
  - Protection / Safety
  - Data sharing
  - Joint operation
- Expected to take places not only during acute phase, but also during preparednes
Management Course

- Non Degree
- S1
- S2, S3

Summary

1. Disaster Responses must be relied on Local capacities. Local networking is mandatory.
2. All aids activities should be conducted to support the local capacities, not to replaced it.
3. Volunteers have a special place in disaster response
4. Evaluation and Development of the National concept and guideline on DRR must be performed systematically.
Thank You