



Who's in charge? **Fire**, Police, **EMS**

- Person in a burning car?
- Person on a cliff/tower?
- Person laying on a sidewalk?
- Person that has been shot?
- A working barn fire involving animals?
- A burning chemical storage facility?
- A person trapped under a tractor?



© 2022 RF-DASH

We are trained to deal with this...

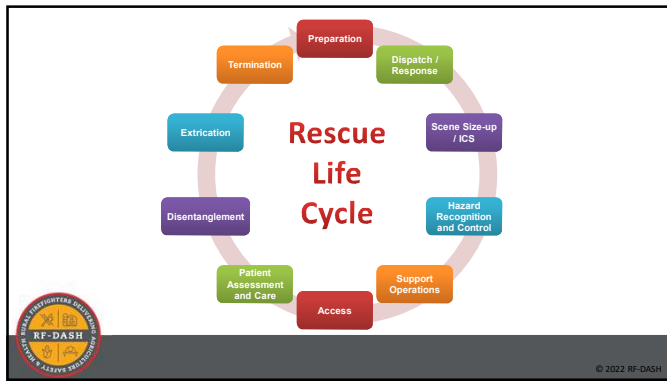


© 2022 RF-DASH

But can we deal with this???




© 2022 RF-DASH



1. Preparation


- Training
- Education
- Preplanning / Pre-Incident Plan
- SOP/SOG development
- Tool and equipment maintenance
- Apparatus and personnel readiness



© 2022 RF-DASH

2. Dispatch/Response

- Getting from point A to point B in a timely, safe manner
- Most efficient route of travel, based on circumstances
- Request resources based on effective preparation
- **On average, 20%-25% of FF LODD's occur responding to, or returning from, calls.**

© 2022 RF-DASH

3. Scene size up (situational assessment) & Incident Command

- Complete 360° scene assessment
- Designed to ID hazards and value (patients/property)
- Determines the need and urgency for support operations and/or additional resources



© 2022 RF-DASH

4. Hazard Recognition and Control of risks

- Risk/benefit analysis
- Ability to control
- Options for Risk Mgt
 - Avoid
 - Eliminate/mitigate
 - Request tech help



© 2022 RF-DASH

5. Support Operations

- Additional resources needed to complete the task
 - Lighting
 - Additional EMS
 - Air medical support
 - Specialty services



© 2022 RF-DASH

6. Access

- Simple procedures work the best
- **Be smarter than the equipment you're dealing with!**
- Work from the simple to the complex
- Beware of stored energy



© 2022 RF-DASH

7. Patient Assessment & Care

- Initiate patient assessment immediately.
- Initiate care as soon as safe to do so.
- Provide care prior to, during, and post disentanglement.



© 2022 RF-DASH

8. Disentanglement

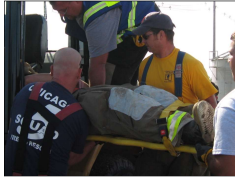
- Removal of entrapment from around the patient may not be possible
- Piece of machine may need to stay with patient
- Amount of disentanglement needed varies based on patient's condition
- Always have a "plan B" (and C, D, E, etc.)



© 2022 RF-DASH

9. Extrication

- Remove the packaged patient
- Transfer the patient
- Methods employed vary depending on patient condition, position, and injuries
- Needs to be organized
- Patients don't come with handles!



© 2022 RF-DASH

10. Termination

- Often the most overlooked phase
- Everything is returned to service
- Equipment readiness
- Scene is returned to pre-scene conditions
- Post incident review/analysis
- Critical Incident Stress Management (CISM)
- Documentation / After action report



© 2022 RF-DASH

Whose Role?

- Hazards acknowledged - *by who?*
- Hazards controlled/mitigated - *by who?*
- Patient condition and care concerns - *by who?*
- Patient treatment - *by who?*
- Extrication concerns - *by who?*
- Extrication procedures - *by who?*

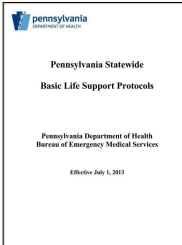


© 2022 RF-DASH

Farm Accident Victim Treatment

- Trauma / Medical Protocols
- Mechanism of Injury
- High Index of Suspicion
- Golden Hour - Patient care protocols are based on our ability to get patients to definitive care within the "golden hour".

What if we can't accomplish this?



© 2022 RF-DASH

Summary

- Tremendous opportunity for "unique" farm emergencies.
- Bad ones will summon emergency services.
- The expectation is things will be better as a result.
- Response to agricultural related incidents will require a multi-disciplined / multi-agency response...



© 2022 RF-DASH



© 2022 RF-DASH

Feed/commodity storage



© 2022 RF-DASH

Why target farms?

- Criminal Activity – Agro-/Eco-Terrorism
 - While terrorism may not be a high priority to farmers crime prevention is.
 - Crime prevention = Terrorism prevention

“Terrorism” versus **“Crime”**



© 2022 RF-DASH

Farms are typically **easy** targets



© 2022 RF-DASH

How could this picture be used to plot a crime against the farm?



© 2022 RF-DASH
