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Airline Ground Disaster Integrated Planning Saves Lives

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A disaster resulting from a runaway collision between a 747 with 400 passengers and a DC-10 carrying 170 could result in literally hundreds of survivors with widely varying injuries. Such an incident is certainly not imaginative. In 1958, two multiengine aircraft, one a freighter, the other a scheduled airliner about to board 130 passengers, were engulfed in flames when the freighter lost control on takeoff, striking the passenger plane on the ramp. In today's reference, such an incident involving two jumbo jets with their greater struc-



Deputy Inspector Littlejohn

tural integrity could produce mind-boggling casualties.

"Black Sunday" at Tenerife focused worldwide attention on the need for more adequate handling of air crashes at both large and small airports and communities. With more than 500 deaths in one "incident," the time has long-passed for administrative footdragging. To make the matter even more urgent are recently disclosed plans to double-deck jumbo jets, such as the 747, increasing their capacity to 700 passengers per plane.

On June 3, 1978, the control tower of John F. Kennedy International airport received a transmission from an aircraft 1 minute out of final approach. The pilot reported, "I have lost all power in number 3 and 4 engines." The pilot then sent a second message to the tower, "I am having difficulty with the stability of the aircraft and must land immediately." The pilot then advised, "There are 200 passengers on board."

The control tower activated the emergency telephone system which indicates that there would be a possible incident. This situation was part of a training operation designed to test a coordinated response to an air disaster. Participating in this exercise were units from Port Authority Police, New York City Police, New York City Fire Department, U.S. Army, U.S. Air Force, and U.S. Coast Guard.

The scenario continues. The aircraft touches down and the tower observes the left wing hit the runway with such force that it breaks away from the fuselage. The aircraft breaks open behind the wing section and fire bursts from it. At this point, emergency units are notified of the incident. This scenario vividly portrays the need for a well-coordinated approach designed to facilitate rescue operations.



Commissioner Robert J. McQuire



U.S. Coast Guard assists in evacuation of injured.



Simulated injuries,

The integrated planning process must explore certain key items which are essential in carrying out the actual rescue operation. The following items will be succinctly addressed:

Emergency Response Routes Marshaling Area Joint Command Post Information and Press Center Medical Evacuation Temporary Morgue

Emergency Response Routes

The key to the timely arrival of emergency units depends to a large degree upon the proper policing of predetermined emergency response routes. Normally, there is heavy traffic on arteries near airports. This problem is compounded by the curiosity seekers who interminale with emergency vehicles responding to the crash site. Predesignated control points should be established to exclude nonemergency vehicles from the emergency response routes. Timeliness and efficiency is paramount at this point in the rescue operation, for failure to police emergency response routes properly could delay the rescue operation and ultimately cost lives.

Marshaling Area

This area should be designated by the officer in charge at the scene of the emergency. The area must be close enough to the scene for the expeditious movement of vehicles and personnel. However, it must be located so as not to interfere with the rescue operation. Often at the scene of a major disaster, vehicles driven by responding personnel are abandoned and seriously congest the entire area. Vehicles must be systematically parked in the marshaling area, identifying signs must be placed in the window, and keys must either be left in the vehicle or collected and properly marked by an attendant. Another consideration should be the refueling of emergency equipment, which is essential when emergency operations extend for prolonged periods of time. Tankers containing mogas, diesel, and iet propulsion fuels should also be available.

Joint Command Post

At the outset of a disaster involving more than one agency, a joint command post should be established. It represents the command and control element for directing, monitoring, and controlling the operation. Representatives from each agency should function within the joint command post. Communication elements, which serve as the nerve center for maintaining coordination and control, must also be located within the post. The radio bands for each agency should be located in an area where the noise does not add to an already tense and confused atmosphere. In addition, a logistics officer should monitor, record, and request equipment and supplies as needed.

Information and Press Center

This center, normally the responsibility of the local law enforcement agency, should be designed as a channel for all information concerning the disaster. It will handle all notifications and inquiries. The center should be situated in a location that does not interfere with rescue operations, but should be close enough to maintain current and accurate information. Members of the press should be directed to this location for briefings.

Medical Evacuation

Major hospitals should be incorporated into the disaster plan. At the signal of a crash, *predesignated* specialist trauma teams should assemble at each hospital to be airlifted by helicopter to the airport. The hospitals so designated should have an outside helipad or a landing area nearby. Helicopters for this purpose can be prearranged from several sources: Local police, airlines, U.S. Coast Guard, U.S. Army, or private helicopter companies.

Since an overwhelming number of injuries may be assumed in the kind of disaster under discussion, it is obvious that hospitals, even in a city the size of New York, would experience tremen-



dous difficulty in providing immediate definitive care. Therefore, consideration should be given to the use of a mobile inflatible unit which accompanies the fire units and has a capability of 60 to 80 patients, all under cover. This unit should be located at the scene in proximity to the mobile "hospital," and serve as an ideal triage area (a system of assigning priorities of medical treatment to battlefield casualties on the basis of urgency), as well as an additional treatment area for those not requiring immediate surgical procedures.

The responding specialist trauma teams from various hospitals should immediately be dispatched to the scene. Definitive operative treatment can then begin in the mobile hospital van.

In using this mobile hospital, it is possible to treat and care for some injuries for periods of time from hours to a day or more. The result is proper stabilization of victims prior to evacuation to hospitals as beds become available. Triage is done by physician teams; but severe burn cases which must be sent to a pediatric or geriatric hospital can be a disaster in their own right. While triage and treatment are being implemented, the medical director at the scene determines the number of injuries. At the same time, hospitals within the disaster area provide information about available beds in categories, such as burns, fractures, neurosurgical, etc. Evacuations can then begin to these centers after the patient has been stabilized. Transportation is accomplished by helicopter or ambulance, depending upon road and traffic conditions.

Temporary Morgue

This should be located in close proximity to the crash area. Under the auspices of the medical examiner, bodies must be sorted and tagged for identification.

After reviewing this multifaceted approach to disaster recovery; it is quite apparent that a well-planned and integrated operation is essential. The assorted elements of a rescue operation are like building blocks, remove one and the others fall. The agencies are interdependent, operating together toward the ultimate goal—SAVING LIVES. **FBI**

