### **WELCOME!**

### to the EMS Safety Foundation

at a PC/Laptop near you, December 12, 2011

Innovation, Collaboration and Knowledge Transfer and Policy
Starting at 2pm EST USA, Please do log in for sound checks from 1.15 pm

## Oslo bombing / Utøya shooting 22.07.2011

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### **Background:**

- EMS Safety Foundation has been established to fill a gap in
  - technical knowledge transfer
  - practical interdisciplinary R & D
  - evaluation and implementation of system safety enhancements for EMS and Medical Transport
- It is a not-for-profit institute



Innovation, Collaboration & Knowledge Transfer www.EMSSafetyFoundation.org

### In a nutshell

- EMS Safety Foundation is a not-for-profit multidisciplinary virtual think – tank and test bed for safety innovation and knowledge transfer
- It is a virtual network integrating the end users and the technical experts
- A tool to enhance the safety of delivery of EMS services

**EMS**Safety

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# R & D "Ripoff and Duplicate"

- Avoid reinventing the wheel at all costs
- Where are the best practices that we need to transfer knowledge from



Innovation, Collaboration & Hnowledge Transfer

### So what is a Webinar?

A Webinar is:

- Real time interactive web technology
- No other hardware is necessary aside from a computer connected to the internet and a microphone- if you choose to speak
- These interactive seminars can also be stored for later asynchronous use



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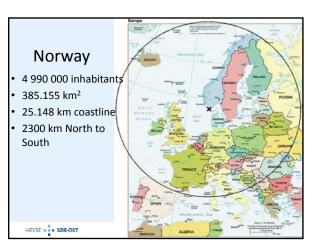




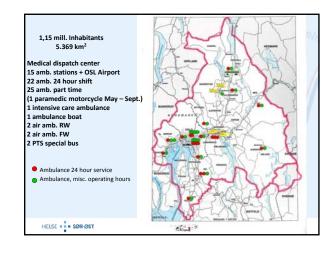






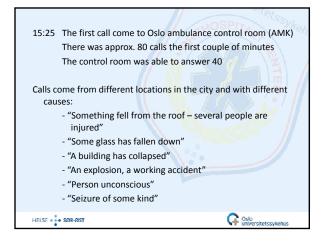


























### Respons to Oslo bombing

- Initially 13 units was dispatch to Oslo city
- After the severity became clear all available units was sent (15:31)
- 15:34 The first patient was ready to be loaded in to an ambulance.
- Ambulances and other resources was brought in from districts around Oslo:
  - 59 ambulances (incl. 2 PTS busses)
  - 3 air ambulances (RW)
  - 2 SeaKing S.A.R. Helicopters
  - 11 volunteer ambulances

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### Respons to Oslo bombing

- ~ 17:00 we stared to re-organize
- All patients was evacuated
- New search trough the bombed buildings found only dead people
- Units from other services started to return home
- For our crews; food, rest and resupplying the vehicles.

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### Respons to Oslo bombing

- 10 patients was taken to hospital
- 80 was treated at Oslo walk in clinic
- 8 people killed

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### Utøya

- A camp for politically active youths (14 to 18 ++ years)
- About 650 700 people on the island



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### Utøya

- 17:08 The perpetrator arrive on the island
- 17:24 The first call to AMK in Drammen
- ~ 17:30 a tsunami of calls
- The event develops while the callers are on the line
- 17:26 The first call to the local police department
- 17:28 The first call come to Oslo AMK

water, some with gunshot wound

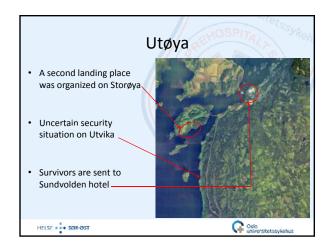
- ~ 17:57 The first ambulance at Utvika, they could hear gunfire from the island
- People start to come ashore, swimming from Utøya
- Locals with boats starts bringing in people from the

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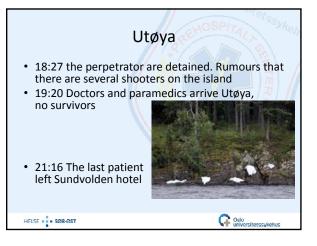












### Utøya

- 68 people was killed on the island
- 1 died later in the hospital
- 66 was wounded
- ~ 500 survivors who needs different levels of help.

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### Resources

- 42 ambulances
- 6 Air ambulances RW
- 2 Sea King S.A.R. helicopters
- 2 PTS busses (Helseekspress)
- + Docors, nurses, paramedics
- Sundvolden Hotel

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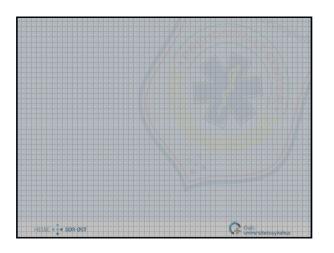












### Lesson learned

- We are quite sure that nobody died or was injuried because of our actions, but there are several issues that need to be improved
- · Risk assessments and plans has to be revised
- · Our logistic organisation need to be re-organized
- We have started a project to organize a special operational group that can execute USAR and work under CBRN condition

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### Lesson learned, communication

- There was a computer integration failure in our control room
- The new TETRA radio system worked perfect in Oslo
- Old VHF-radio system at Utøya
- Some problems with data communication between the ambulances and the control room
- At Utøya the young people used new ways of communication;
   Twitter, Facebook, SMS, MMS, mail etc. from there mobile devices
- · Many called mom and dad. They called their local emergency services
- The mobile phone system was in some periods used at 100%
- Some local control rooms had too few operator(s) on duty

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