

# HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Correction  
Division Of Prisons

SECTION: Care And Treatment Of Patient

POLICY # TX I-11

PAGE 1 of 2

SUBJECT: Mass Casualties

EFFECTIVE DATE: July 2007

SUPERCEDES DATE: NONE

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## PURPOSE

The purpose of this policy is to provide guidelines in the event of non-emergent trauma related to an accident, fire or natural occurrence involving two or more inmates. This policy is not to negate the established sick call policy.

## POLICY

In the rare event of a non-emergent accident, fire or natural occurrence, every inmate involved will be assessed for injuries by a registered nurse as soon as possible. Nurses are not to go to the accident/incident site to conduct the assessment. Inmates are to be taken to the medical department for evaluation.

## DEFINITIONS

Non-emergent trauma – An event that did not necessitate the calling of Emergency Medical Services. Examples of a non-emergent trauma – minor van crash, waste paper receptacle fire that smoked up the dorm, a tree falling through the roof of a dorm, etc.

Casualties – victims or persons present at the event. Being a casualty does not constitute sustaining an injury.

Natural Occurrence – an event brought on by nature but would not rate as a natural disaster, such as a wind storm that caused a tree to fall through the roof of a dorm.

## PROCEDURE

1. Nurse Managers of facilities with less than 24 hour/7 day a week RN coverage will develop a calling tree of facility registered nurses, the Regional Nurse Supervisor and Assistant Director of Nursing.
2. In the event of a minor MVA or an accident at a DOC worksite such as an Enterprise Operation (or farm, on-site industrial class such as welding,) the officers will bring the inmates to the facility's medical department for assessment by a registered nurse. If no registered nurse is on duty, the LPN/CHA II or OIC will call the Telephone Triage Nurse as per Telephone Triage policy TX I-8. The triage nurse will treat according to protocols, refer to the emergency room or advise to implement the calling tree.
3. In the event of a fire or natural occurrence, each inmate present in the effected structure will be assessed by a registered nurse. The OIC will call the Telephone Triage Nurse to report the incident. The triage nurse will treat injured inmates according to protocols or refer to the emergency room. The triage nurse will also advise the OIC to implement the calling tree so all inmates who deny injury will be assessed. The OIC will implement the calling tree until a registered nurse is reached. If circumstances prevent the nurse from reporting for duty, the OIC will continue the calling tree. Once a registered nurse is identified who can report for duty, they will do so as soon as possible but time between notification and reporting to work should not to exceed 8 hours. If an inmate, who previously denied injuries, now complains of an injury but before the RN arrives at the facility, the OIC will call the triage nurse. The triage nurse will treat the injured inmates according to protocols, refer to the emergency room or may advise to wait until the RN arrives.

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4. The Registered Nurse will document the assessment in each inmate's medical record. The Registered Nurse will complete a Medical Incident Report form (DC- 798) on the event itself, summarizing the number of inmates evaluated. In addition, a Medical Incident Report form (DC-798) will be completed on each inmate who required treatment. The facility nurse manager will review the medical incident reports on the next medical business day and forward to their Regional Nurse Liaison.



7/31/07

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Paula Y. Smith, MD, Director of Health Services      Date

SOR: Director of Nursing