COMMAND & CONTROL POLICY

Document No.  SOP2013-010
File No.  10/314-03 (D13/4845)
Date issued  15 March 2013

Policy Statement  Command & Control

Guideline

Attachment
A – Single Ambulance Response + Flowchart
B – Multiple Ambulance Response and/or Level 1 response + Flowchart
C – Multiple Ambulance Response Level 2/3 response + Flowchart
D – Special Operations Response (SOT / SCAT) + Flowchart
E – Aeromedical Response (Control Centre activated Air / Road) + Flowchart
F – Aeromedical Response RLTC activated + Flowchart
G – Aeromedical Tasking – Australian Maritime Safety Authority (Search) + Flowchart

Flowcharts  As per attachments

Author Branch  Operations
Branch Contact  Executive Staff Officer
Division  Operations
Summary  Details rational and process for Command & Control of incident response and management in an operational environment
Applies to  All NSW Ambulance Staff including Paramedics, Patient Transport Officers, Doctors, Nurses, Volunteers, Control Centre and Aeromedical Operations

Review Date  March 2015
Previous Reference  Nil
Status  Active
Approved by  Chief Executive

Revision History

<table>
<thead>
<tr>
<th>Version (Circular #)</th>
<th>Amendment notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 March 2013 (SOP2013-010)</td>
<td>Endorsed by Chief Executive</td>
</tr>
</tbody>
</table>

Compliance with this policy directive is mandatory
Standard Operating Policy

Command and Control Policy Statement
The introduction of this Command & Control Policy is to ensure that NSW Ambulance response to incidents and on scene incident management is consistent across the organisation.

Further, this policy clearly identifies who is in command of an incident from initial call receipt and until the incident is declared complete.

Definitions
- **Control** – The individual who has responsibility for all resources deployed to the incident until a resource arrives on scene.
- **Commander** – The individual who is responsible for all ambulance resources at an incident site.
- **Ambulance Resource** – Any operational paramedic, paramedic crew, aeromedical or patient transport crew to be deployed to an incident.
- **Senior Paramedic** – (a) Paramedic with highest operational rank or (b) the driver of the first ambulance on scene. (AMBPLAN 2005, Action card 2; page 36)

  **NB. At no time is an intern to hold the responsibility of senior paramedic.**

Operational Command & Control
The Control Centre is charged with the responsibility of ensuring demand for ambulance services are met and therefore assumes total command and control of all ambulance resources not engaged in the care of a patient. In doing so, paramedic crews must be in a position to efficiently and effectively respond to requests from the Control Centre at all times.

Conversely, paramedics assume command from arrival on scene through to patient separation. During this period, paramedics are responsible for ensuring the patient’s clinical and physical needs are met and the Control Centre is to facilitate this process by acting upon requests from paramedic crews or the designated Commander of an incident. Requests by paramedics and commanders for resources must be weighed against all demands on ambulance. The Senior Control Centre Officer (SCCO) is responsible for arbitrating competing requests.

Guiding Principals
- In all instances, the SCCO or delegate is in control of an incident until the first ambulance resource arrives on scene.
- The SCCO, or delegate is responsible for notification and/or escalation of an incident as outlined in the attachments to this policy document.
- Upon arrival at an incident, the senior paramedic is the delegated Ambulance Commander.
- For multiple resource responses, the senior paramedic remains the Commander until such time as an ambulance manager attends the scene and assumes command.
- **At no time are ambulance resources to self respond to an incident.**

**RESCUE**
“the safe removal of persons or domestic animals from actual or threatened danger of physical harm”
(SERM Act 1989)

In the context of this SOP, the responsibility to initiate a rescue response first rests with the SCCO (Control) and transfers to the Commander on scene once it is identified that a rescue is required.
Operational Responsibility and Accountability

All ambulance responses are tasked via the Control Centre and it is the Control Centre who maintains accountability for the incident until an ambulance resource arrives on scene and assumes command.

Should an incident escalate or is of a size that requires more than one resource to be deployed, the senior paramedic or ambulance manager is the designated commander, and by extension accountable for all NSW Ambulance activities pertaining to the incident.

The escalation of an incident to the Duty Operations Manager (DOM), or higher is described in the attached documents.

From time to time, it is not always possible that a DOM will be able to respond to undertake on site command of an incident. Once notified of an incident and the DOM elects not to attend, the DOM is deemed to hold accountability for all NSW Ambulance activities pertaining to the event. The DOM will remain in command regardless of physical location. However, in such scenarios, the DOM will designate an attending paramedic as a Forward Commander at the incident location to ensure immediate management of the scene is maintained. It may be necessary for the DOM to arrange for a closer manager to attend the incident and take command.

The decision to call out a closer manager should be escalated to the Zone Manager; however, this action should not be at the expense of delaying any response.

The attached Command & Control response directives describe the purpose and procedure for all incidents:

A  Single Ambulance Response
B  Multiple Ambulance Response and/or Level 1 Response
C  Multi Ambulance Response (Level 2/3 response)
D  Special Operations Response (SCAT & SOT)
E  Aeromedical Response Aircraft (Control Centre Activated Aircraft &/or Road) - Primary
F  Aeromedical Response Aircraft (Rapid Launch Co-ordinator activated) - Primary
G  Aeromedical Tasking by Australian Maritime Safety Authority (Search) - Primary

**Escalation & Notification**

<table>
<thead>
<tr>
<th>Escalation Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Escalation</td>
<td>Single Ambulance response to Triple Zero call</td>
</tr>
<tr>
<td>Level 1</td>
<td>Zone / Sector</td>
</tr>
<tr>
<td>Level 2</td>
<td>Sector / Division (and Level 1)</td>
</tr>
<tr>
<td>Level 3</td>
<td>Division / State Operational Executive (plus Level 1 &amp; 2)</td>
</tr>
</tbody>
</table>
Level 1
All incidents meeting the below criteria must be notified/escalated to the relevant Level 1 group and the on-call or duty DOM for the area.
- Persons trapped
- SCAT, SOT or helicopter responses
- Greater than three Ambulance resources being required at an incident
- Any prolonged incident
- Any primary incident requiring an urgent MPV response

Level 2
All incidents meeting the below criteria must be notified/escalated to the relevant Level 2 and Level 1 groups.
- Siege situations
- Any incident involving more than three (rural) or eight (urban) patients
- Incidents that present significant risk to Ambulance employees
- Any Ambulance, Health or emergency services employee (including volunteers) being injured on duty
- Accidents involving ambulance vehicles where any person is injured or any vehicle requires towing
- Large industrial or bush fires
- Incidents of political or media interest
- Response to, or transport of, notable persons (e.g. media identities, politicians)
- Interruptions to Control Centre systems resulting in a partial loss of CAD functionality

Level 3
All incidents meeting the below criteria must be notified/escalated to the Level 3 group and the relevant Level 2 and Level 1 groups.
- Fires threatening or involving health facilities (including nursing/group homes)
- Large scale evacuations
- Suspicious substance reports and HAZMAT incidents
- Incidents of significant political or media interest
- Large scale public disorder incidents
- Any Ambulance or Health employee (including volunteers) being assaulted on duty
- Interruptions to Control Centre systems resulting in a full loss of CAD functionality

PLEASE NOTE:
Admin Standard AS 1.3.1 remains current and should be considered in support of this SOP.
Admin Bulletin AB2010-022 remains current and should be considered in support of this SOP.
Attachment A

Command and Control
Single ambulance response

(Generally no escalation or notification required)

Purpose:
To provide a consistent process for Command and Control at a single ambulance response to an incident.

Procedure:
- Initial notification of incident received by Control Centre
- Control Centre allocates ambulance resource to respond to scene. Until ambulance crew arrive at scene, the Control Centre remains in Control. There is no self-responding to incidents. All responses are to be directed/approved by the Control Centre
- First Ambulance arrives at scene.
- Senior paramedic aboard that ambulance is in Command at that incident until incident is finalised or another senior officer arrives to take command.
- On arrival at the scene the senior paramedic MUST notify the Control Centre they are in Command and immediately assess the situation and provide a comprehensive ETHANE report via radio to the Control Centre as soon as possible.
- Should it be determined by the commander that a Duty Operations Manager is required, this request must be escalated via the Control Centre.
- If another senior paramedic is taking Command, notification MUST occur via the radio to the Control Centre, including the officer’s call sign/name

Primary means of communication must be through the radio.
## Command and control – single ambulance response

<table>
<thead>
<tr>
<th>Control Centre in control</th>
<th>Senior paramedic (1) in command</th>
<th>Senior paramedic (2) in command</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receipt of incident</td>
<td>Crew respond to scene</td>
<td>Continue scene management</td>
</tr>
<tr>
<td>Control Centre allocates ambulance response</td>
<td></td>
<td>(senior paramedic in command)</td>
</tr>
<tr>
<td></td>
<td>Crew arrive on scene and senior paramedic takes command</td>
<td>Is incident complete?</td>
</tr>
<tr>
<td></td>
<td>ETHANE report provided to Control Centre by Senior Paramedic</td>
<td>Does incident require escalation?</td>
</tr>
<tr>
<td></td>
<td>Is another senior paramedic taking control of scene?</td>
<td>Follow level 1 response flowchart</td>
</tr>
<tr>
<td></td>
<td>Yes → Notify Control Centre via radio</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No → Continue to manage scene</td>
<td>No → Crew leave scene (Control Centre in control)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes → Follow level 1 response flowchart</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Flowchart:**
- **Receipt of incident**
- **Control Centre allocates ambulance response**
- **Crew respond to scene**
- **Crew arrive on scene and senior paramedic takes command**
- **ETHANE report provided to Control Centre by Senior Paramedic**
- **Is another senior paramedic taking control of scene?**
  - Yes → Notify Control Centre via radio
  - No → Continue to manage scene
- **Does incident require escalation?**
  - Yes → Follow level 1 response flowchart
  - No → Continue to manage scene
- **Is incident complete?**
  - Yes → Crew leave scene (Control Centre in control)
  - No → Continue scene management (senior paramedic in command)
- **Does incident require escalation?**
  - Yes → Follow level 1 response flowchart
  - No → Continue scene management (senior paramedic in command)
- **Is incident complete?**
  - Yes → Crew leave scene (Control Centre in control)
  - No → Continue scene management (senior paramedic in command)
Command and Control
Multiple Ambulance Response and/or Level 1 Response

Purpose:
To provide a consistent process for Command and Control at a multiple ambulance response (Level 1 response) to an incident

Procedure:
- Initial notification of incident received by Control Centre
- Control Centre allocates ambulance/s to respond to scene. Until ambulance crew/s arrive at scene, Control Centre remains in **Control. There is no self-responding to incidents. All responses are to be directed/approved by the Control Centre.**
- First Ambulance arrives at scene.
- Control Centre to nominate the senior paramedic on scene is in **Command** of that incident until it is finalised or another senior officer takes command of the incident. If a different senior paramedic is taking **Command**, notification **MUST** occur via the radio to the Control Centre, including the officer’s call sign/ name.
- Upon arrival at the scene the senior paramedic (who becomes known as the Ambulance Commander) **MUST** notify the Control Centre that they are in **Command** and immediately assess the situation and provide a comprehensive ETHANE report via radio to the Control Centre as soon as possible.
- Escalation processes must be followed as per AS 1.3.1 Notification and Escalation – Incident Management to a Level 1 notification and escalation.
- Duty Operations Manager (DOM) contacted by Control Centre. Assessment & decision to attend and take **Command** or leave **Command** with senior paramedic on scene **MUST** occur between DOM/DCCO or SCCO and must be documented in VisiCAD.
- Where it is determined that a DOM is not attending the scene the Control Centre **MUST** inform the current commander on scene that **Forward Command** remains with them. However the DOM remains accountable for this incident regardless of their location.
- Should a DOM be attending scene they: **MUST** upon arrival inform Control Centre via radio that they are taking **Command** of the incident (Ambulance Commander). The DOM remains in **Command** of incident until finalised or another more senior officer takes command of the incident (if escalated to Level 2).
- The DOM **MUST** ensure timely and accurate ETHANE reports are provided within appropriate time frames relevant to the incident via the radio.

**Primary means of communication must be through the radio**
Command and control – multiple vehicle and / or level 1 response

<table>
<thead>
<tr>
<th>Control Centre in control</th>
<th>Senior paramedic in command</th>
<th>DOM in command</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receipt of incident</td>
<td>Crews respond to scene</td>
<td></td>
</tr>
<tr>
<td>Control Centre allocates ambulance response</td>
<td>Crew arrive on scene and senior paramedic takes command</td>
<td>ETHANE report provided to Control Centre by Senior Paramedic</td>
</tr>
<tr>
<td>Notify Control Centre via radio</td>
<td>Is another senior paramedic taking control of scene?</td>
<td>Does incident require escalation?</td>
</tr>
<tr>
<td>Is incident complete?</td>
<td>Continue to manage scene</td>
<td></td>
</tr>
<tr>
<td>DDCC / SSCG to discuss incident command with DOM</td>
<td>Crew leave scene (Control Centre in control)</td>
<td>DOM takes command upon arrival at scene and notifies Control Centre</td>
</tr>
<tr>
<td>Is DOM taking command of incident?</td>
<td>Submit timely ETHANE report to Control Centre</td>
<td></td>
</tr>
<tr>
<td>Notify Ambulance Commander on scene to remain in commander</td>
<td>Does incident require escalation to level 2?</td>
<td>Follow escalation process AS 1.3.1 to Level 2</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td>Continue to manage scene</td>
</tr>
<tr>
<td>Is incident complete?</td>
<td></td>
<td>Crew leave scene (Control Centre in control)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Is incident complete?</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td>No</td>
</tr>
</tbody>
</table>

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Attachment C

Command and Control
Multi Ambulance Response (Level 2/3 response)

Purpose:
To provide a consistent process for Command and Control at a multiple ambulance response (Level 2) to an incident.

Procedure:
- Initial notification of incident received by Control Centre
- Control Centre allocates ambulance/s to respond to scene. Until ambulance crew/s arrive at scene, Control Centre remains in **Control. There is no self-responding to incidents.**
- First Ambulance arrives at scene.
- Control Centre to nominate the senior paramedic on scene is in **Command** of that incident until incident is escalated to Duty Operations Manager and DOM attends scene and takes Command.
- Upon arrival at the scene: senior paramedic (Ambulance Commander) **MUST** notify the Control Centre that they are in **Command** and immediately assess the situation and provide a comprehensive ETHANE report to the Control Centre via radio as soon as possible.
- The DOM attending the scene is to assume Command and **MUST** notify Control Centre via radio they have taken **Command**.
- Assessment and Incident escalated to Level 2.
- Escalation processes must be followed as per Administrative Standard AS: 1.3.1 Notification and Escalation – Incident Management to a Level 2 notification and escalation.
- Zone Manager (ZM) contacted by DOM. Assessment & decision to attend and take **Command** or leave **Command** with DOM on scene **MUST** occur and be documented.
- Where it is determined that a Zone Manager is not attending the scene the Control Centre **MUST** be informed that **Command** remains with the Duty Operations Manager (Ambulance Commander) on scene.
- The Zone Manager once notified of the incident is accountable for all aspects pertaining to the incident until such time as the event is declared complete.
- Zone Manager attending scene: upon arrival the Zone Manager **MUST** inform Control Centre that they are taking **Command** of the incident (Ambulance Commander).
- The Zone Manager remains in **Command** of incident until finalised or another more senior officer takes command of the incident (if escalated to Level 3).
- The Zone Manager **MUST** ensure timely and accurate ETHANE reports are provided within appropriate time frames relevant to the incident over the radio.

**Primary means of communication must be through the radio.**
Should an incident be escalated to a Level 3 escalation response, the above processes are to be followed in regard to the notification and/or activation of the Deputy Director Operations and Control Centre Manager. Consideration should also be given in regard to the activation of AMPLAN.

All notifications MUST follow Chain of Command Standard Operating Policy

Notifications:

<table>
<thead>
<tr>
<th>Level</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>DOM</td>
</tr>
<tr>
<td>2</td>
<td>Zone Manager</td>
</tr>
<tr>
<td>3</td>
<td>Deputy Director Operations</td>
</tr>
</tbody>
</table>
Attachment D

Command and Control
Special Operations Response (SCAT & SOT)

Purpose:
To provide a consistent process for Command and Control at an incident scene where Special Operations Team skills are required.

Procedure:
- Initial notification of incident received by Control Centre
- Control Centre allocates ambulance/s to respond to scene. Until ambulance crew/s arrive at scene, Control Centre remains in Control.
- First Ambulance arrives at scene.
- Ambulance Commander takes Command at that scene (either Senior paramedic, Duty Operations Manager, Zone Manager or Deputy Director Operations).
- Ambulance Commander MUST notify Control Centre via radio that they are taking Command of that incident.
- Special Operations Team member/s is tasked to attend incident by Control Centre.
- If on duty resources not available, Special Operations Unit following consultation with Control Centre sources off duty crew/s.
- Resources are handed over to Control Centre and process must be documented in the VisiCAD Incident Report. (Refer to Control Centre procedures)
- Special Operations Team member/s MUST notify Control Centre via radio where they are responding from and an ETA.
- There is no self-responding to incidents.
- Special Operations Team member/s attend scene and MUST notify Control Centre that they are on scene.
- Special Operations Team member/s come under the Command of the Ambulance Commander on scene until the incident is finalised or they are released for other duties by the Ambulance Commander, cognisant of their specialist skills.

Primary means of communication must be through the radio.
## Command and control – Special Operations Response (SCAT & SOT)

<table>
<thead>
<tr>
<th>Control Centre in control</th>
<th>Ambulance Commander (DOM, ZM, DDO) in command</th>
<th>SOT member(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receipt of incident</td>
<td>Control Centre tasks SOT to incident</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Control Centre allocates ambulance response</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Crew respond to scene</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Crew arrive on scene and Ambulance Commander takes command and notifies Control Centre</td>
<td></td>
</tr>
<tr>
<td></td>
<td>SOT notifies Control Centre that they are on scene</td>
<td></td>
</tr>
<tr>
<td></td>
<td>SOT crew arrive on scene and fall under command of Ambulance Commander</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Continue to manage incident</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Is incident complete?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Crew leave scene (Control centre in control)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
Command and Control
Aeromedical Response Aircraft / Road (Control Centre Activated)

Purpose:
To provide a consistent process for Command and Control at an incident scene where an Aeromedical response is requested via an Ambulance Control Centre.

Procedure:
- Initial notification of incident received by Control Centre
- Control Centre allocates ambulance/s to respond to scene. Until ambulance crew/s arrive at scene, Control Centre remains in Control. Senior paramedic on scene takes Command as Ambulance Commander.
- Control Centre notifies Aeromedical Operations Centre (AOC)/Medical Retrieval Unit (MRU) of incident and documents in VisiCAD Incident Report
- AOC conducts assessment and documents assessment.
- No Tasking (i.e. Not suitable/Unavailable) AOC MUST notify Control Centre of no tasking and rationale.
- Tasking available: AOC notifies/activates aircrew.
- AOC MUST notify Control Centre that aircrew activated which aircraft and the eta.
- There is no self-responding to incidents.
- Control Centre notifies Ambulance Commander on scene.
- Aircraft MUST call airborne on State 1 and then to Control Centre operational channel.
- Until arrival on scene the Control Centre is in Command
- Aircraft MUST notify any status changes. Aircraft MUST notify Control Centre when on scene.
- Upon arrival at scene, all aeromedical resources are under the Command of Ambulance Commander until the incident is declared complete or transport is affected by aircraft.

Primary means of communication must be through the radio.

(Consideration should be given by the Ambulance Commander of use of the Doctor to perform a triage role – if required. This is supporting the use of ambulance personnel skill set to undertake a range of tasks at an incident scene)
Attachment F

Command and Control
Aeromedical Response Aircraft (Rapid Launch Trauma Coordinator Activated)

Purpose:
To provide a consistent process for Command and Control at an incident scene where an Aeromedical response is activated by the Rapid Launch Trauma Co-ordinator (RLTC).

Procedure:
- Initial notification of incident received by Control Centre
- Control Centre allocates ambulance/s to respond to scene. Until ambulance crew/s arrive at scene, Control Centre remains in **Control**. Senior paramedic on scene takes **Command** as Ambulance Commander.
- RLTC (Aeromedical Operations Centre) identifies incident on VisiCAD Incident screen.
- AOC **MUST** contact Control Centre re incident to discuss aeromedical response.
- Control Centre dispatches road response.
- Senior paramedic on scene takes **Command** as Ambulance Commander.
- AOC conducts assessment and documents assessment.
- **No Tasking decision** (i.e. Not suitable/Unavailable) AOC **MUST** notify Control Centre of no tasking and rationale.
- Aeromedical resource unavailable must be communicated to the Commander.
- **Tasking available**: AOC notifies/activates aircrew.
- AOC **MUST** notify Control Centre that aircrew activated, which aircraft and eta.
- **There is no self-responding to incidents**.
- Control Centre notifies Ambulance Commander on scene.
- Aircraft **MUST** call airborne on State 1 and then Control Centre operational channel.
- Until arrival on scene the Control Centre is in **Command**
- Upon arrival at scene, aeromedical resource deployed is under the **Command** of Ambulance Commander.
- No Ambulance Commander at scene: The senior paramedic on the aircraft is in **Command** until the arrival of a road ambulance. **Command** is then handed over to the senior paramedic on that road ambulance.

*Primary means of communication must be through the radio*

(Consideration should be given by the Ambulance Commander of use of the Doctor to perform a triage role –if required. This is supporting the use of ambulance personnel skill set to undertake a range of tasks at an incident scene)
Command and Control
Aeromedical Response Aircraft (AMSA Tasking)

Purpose:
To provide a consistent process for Command and Control at an incident scene where an Aeromedical response is activated by Australian Maritime Safety Authority (AMSA).

Procedure:
• AMSA contacts AOC and requests aeromedical asset
• AOC teleconferences AMSA and RCO and SCCO to determine requirements of tasking, including location of Command Post/staging area and if land response is also required.
• SCCO creates an incident in VisiCAD.
• Should a land based response be required, details are entered into VisiCAD.
• Control Centre dispatches road response & Duty Operations Manager responsible for geographical area of incident contacted and takes Command as Ambulance Commander.\(^1\)
• AOC conducts assessment and documents assessment.
• **AOC** notifies/activates aircrew.
• AOC **MUST** notify Control Centre that aircrew activated, which aircraft and eta.
• **There is no self-responding to incidents.**
• Control Centre notifies Ambulance Commander.
• Aircraft **MUST** call airborne on State 1 and then to Control Centre operational channel.
• Until arrival on scene the Control Centre is in **Command** of the aircraft
• Upon arrival at scene, aeromedical resource deployed is under the **Command** of Ambulance Commander.\(^2\).

Once activated, primary means of communication must be via radio

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\(^1\) Only if determined that a land response is required.

\(^2\) This is either the Pilot (no land response) or Ambulance Commander – land response
## Command and Control – Aeromedical Response (AMSA tasking)

<table>
<thead>
<tr>
<th>Control Centre</th>
<th>Commander on scene</th>
<th>Aeromedical Operations Centre</th>
<th>AMRU Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incident created in VisiCAD</td>
<td>Incident created in AOC VisiCAD</td>
<td>Establish teleconference between AMSA, RCO &amp; SCCO</td>
<td>Aircraft calls airborne on State 1</td>
</tr>
<tr>
<td>Road resources dispatched, DDN notified</td>
<td>Conduct incident assessment</td>
<td></td>
<td>Notify Control Centre operational channel on responding</td>
</tr>
<tr>
<td></td>
<td>Notify / activate air crew</td>
<td>Notify SCCO of air crew activation</td>
<td>Notify Control Centre of any status changes</td>
</tr>
<tr>
<td>Crew arrive on scene and senior paramedic takes command (Ambulance Commander)</td>
<td></td>
<td></td>
<td>Advise Control Centre when on scene</td>
</tr>
<tr>
<td></td>
<td>Continue to manage incident</td>
<td></td>
<td>Is there a land based response?</td>
</tr>
<tr>
<td>Is incident complete?</td>
<td>Crew leave scene (Control Centre in control)</td>
<td>Report to Ambulance Commander when on scene</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Air crew arrive on scene and take command (Ambulance commander)</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>Crew leave scene (Control Centre in control)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>