

“MIMMS”

– a personal experience of
its application.
(Indian Embassy bombing,
Kabul, July 2008)

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Scope

- MIMMS:
 - What it is and does.
 - An outline.
- Military application (MiMIMMS):
 - Why are military personnel ideal exponents.
- A personal experience:
 - What happens when it goes right and (horribly) wrong!



MIMMS

- Major Incident Medical Management and Support.
- MIMMS exists:
 - to teach the nature and management of the major incident.
 - and how to deliver the medical support needed.
- Note: key developer and proponent is Senior Army Medical Officer (Brigadier Tim Hodgetts).



MIMMS

WHAT IT DOES.....

- Provides a structured approach to major incidents
- Major incident – In Health Service terms, can be defined as any incident where location, number and severity, or type of live casualties requires extraordinary resources.



Incidents

- **Natural**
- **Manmade**
- **Simple** – where infrastructure (e.g. roads, hospitals, LoC) remain intact....
- **Compound** – infrastructure damaged....
- **Compensated** – “load is less than the capacity”.
- **Uncompensated** – “load exceeds the capacity” (MASCAL). (Overwhelming)



Incident Phases

- One
 - Preparation
- Two
 - Response
- Three
 - Recovery



Phase One

- Preparation
 - Planning
 - Equipment
 - Training



Phase Two

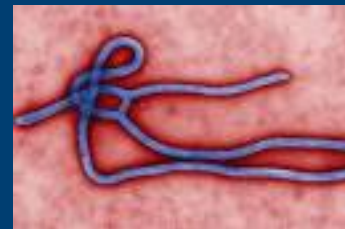
Response (CSCATTT):

Command
Safety
Communication
Assessment
Triage
Treatment
Transport



Correlation to Military

- Effects of war and combat operations:
 - Afghanistan
- Military support to disaster and/or humanitarian need:
 - Home and Abroad
 - Flood, Famine, earthquake and Ebola



Military Approach

- Similarity = 4C' s:
 - Confirm
 - Clear
 - Cordon (Contain)
 - Control



Military Exponents

- Military personnel, especially medical*, Regular and Reserve are ideally suited to MIMMS:
 - Uniformed
 - Disciplined
 - Trained (annual mandatory)
 - Communications skills
 - ‘Conditioning’ – familiar with
 - ‘Experienced’ – operations
- Reservists = ‘dual’ qualified...

*But equally Fire, Police (MP) and other personnel of the military emergency services.



“CIMIC” (in other words)

- Military and Civilian interaction/cooperation:
- First responder schemes
- CBRN
 - Exercises and mutual training
 - HART (Hazardous Area Response Teams)
 - Nuclear Emergency Organisation (NERO/
NARO)
- Military Aid to Civil Powers



2008 Indian embassy bombing in Kabul

- Suicide bomb attack
- Indian Embassy, Kabul, 7 July 2008
- 8:30 AM local time
- Killed 58 people
- Wounded 141



What went wrong...

Preparation.....

- (Check) understanding – didn't
 - Confirm (cross check) – didn't
 - Preparation (check got everything) – didn't
 - Comms (can you communicate, equipment, language...) – forgot (assumed)
- All because....Turned Left when should have turned Right.....”



On Scene...

Think CSCATTT!!



Command, Safety, Communication, Assessment, Triage, Treatment, Transport

COMMAND

- Command and control
- Cornerstones of Major Incident management
- Not always present!!



SAFETY

- Thinking outside the box... secondary IED.... Sniper....
- Self, Scene, Survivors....



Communications

Wanted:

- Directional
- Structure
- METHANE, (AT)MIST or 9-LINER

Got:

- No radio, phone, runners (English speaking)
- Lack of Information, Confirmation, Coordination
- Poor comms discipline = poor liaison



Triage

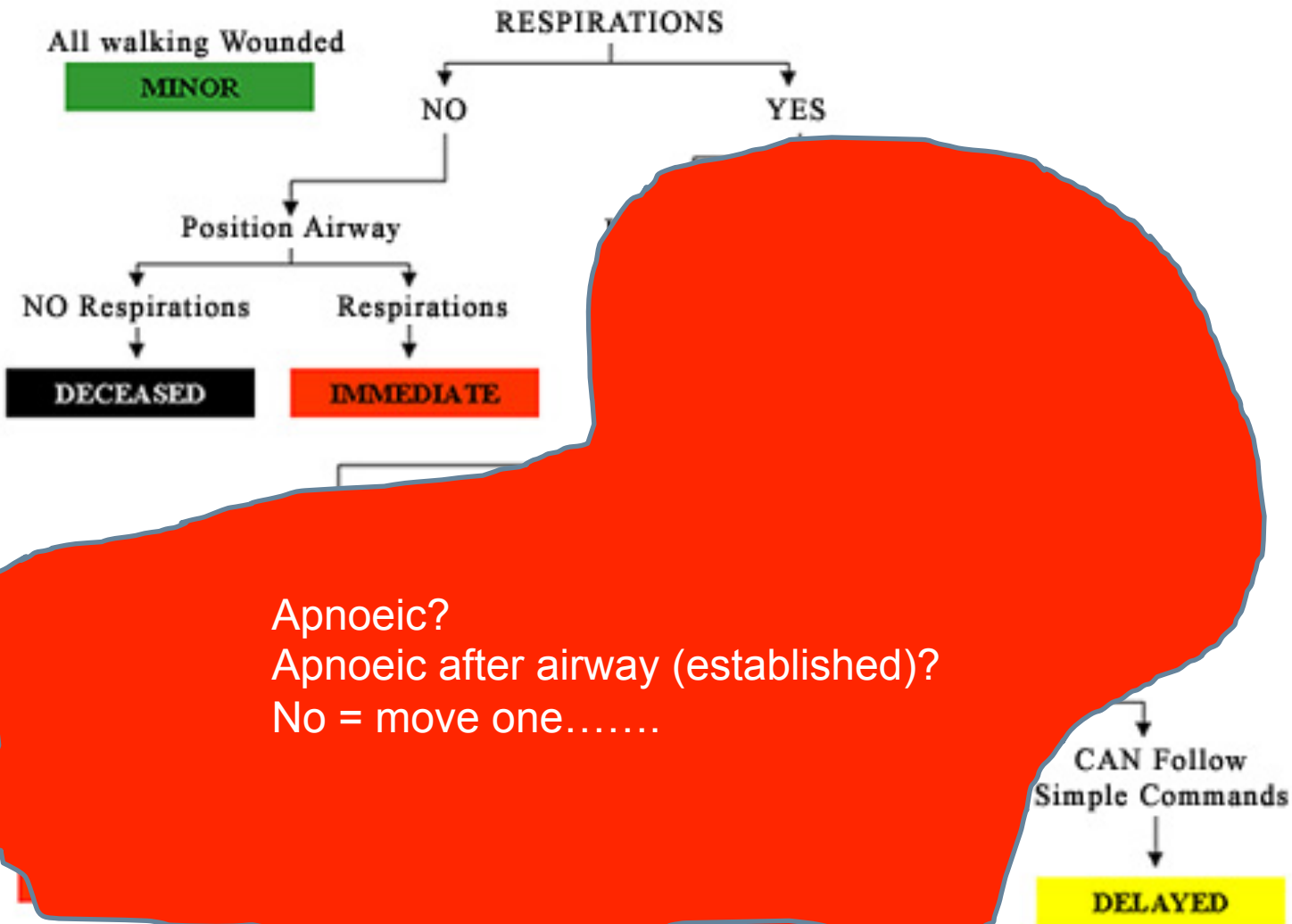
- Sieve then Sort.
- Be prepared to simplify.
- In this case I followed START....

Command, Safety, Communication, Assessment, Triage, Treatment, Transport



START

Simple Triage and Rapid Treatment



Treatment

- Virtually none.....at first....
- Priority was to diffuse chaos, transport, treat at facility...
- Remove from risk....



Evacuate – where?

 **ROYAL
AIR FORCE
RESERVES**



Transport

- Self refer
- Buddy, buddy
- What ever became available
- Military assets at risk.....



Recovery

The logo for the Royal Air Force Reserves, featuring a red dot in a blue circle above the text "ROYAL AIR FORCE RESERVES" in blue and red.



Any questions?

Cualquier pregunta?

Des questions?

Fragen?

Tutte le domande?

