

EMERGENCY RESPONSE:

**USING THE INCIDENT COMMAND SYSTEM
TO RESPOND TO DISASTERS
IN LARGE RETIREMENT COMPLEXES,
LARGE RESIDENTIAL CARE FACILITIES FOR THE ELDERLY, AND
SKILLED NURSING FACILITIES**

November, 1993

EARTHQUAKE PROGRAM
CALIFORNIA OFFICE OF EMERGENCY SERVICES

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IV. EMERGENCY RESPONSE

THE INCIDENT COMMAND SYSTEM

The Incident Command System (ICS) is a method for managing emergencies which is widely used by emergency responders throughout the State of California. The system provides for an organized response to meet the demands of emergency incidents and larger disasters in a rapid and efficient manner. ICS is a practical method for dividing labor and responsibilities when responding to these events.

The following version of ICS has been adapted to meet the needs of large retirement complexes and large residential care facilities for the elderly. It can also be used by skilled nursing facilities which are co-located with retirement complexes as well as large free-standing care homes. It is important to note that:

- ◆ In large retirement complexes, ICS positions will be filled primarily by residents since most facilities do not have on-site staff other than the administrator and possibly maintenance personnel.
- ◆ In large residential care facilities, staff will assume ICS response roles, possibly supplemented by residents, if appropriate.
- ◆ In skilled nursing facilities, staff will assume all ICS response roles and may need a higher than normal staff-to-patient ratio to maintain patient care.

Skilled Nursing Facilities lend themselves to having a significant first aid function due to staff's medical capability. During disasters, this care could extend to the surrounding community, much like a medical clinic. In addition, the facility could receive and care for patients transferred to it from acute care hospitals.

The ICS is flexible and allows for the use of people present at the time of an incident. For planning and training purposes, it is preferable to assign people to perform each function so that they develop an understanding of what will be required in responding to an emergency.

A. DESIRABLE CHARACTERISTICS OF ICS TEAM MEMBERS

In retirement complexes, each resident assigned as either a Section Chief or support person within ICS sections should be an individual who is resourceful, remains calm during emergencies, is well organized, a "team" player, and free of disabilities which might interfere with his/her functioning. Also designate "back up" people for each assigned person in case injuries or absence prevent them from assuming their responsibilities.

In residential care facilities and skilled nursing facilities, assigning staff to ICS functions should take into consideration the personal characteristics listed above as well as each individual's job related skills and responsibilities. Medical care should be performed by those with the best, most current skills, regardless of rank.

Badges or colorful vests with designated titles will identify members of the ICS team as the people charged with ensuring the health and safety of residents during the disaster.

B. ORGANIZATION OF THE ICS--ROLES AND RESPONSIBILITIES

The Incident Command System provides a process for managing the response and recovery efforts following a disaster. It consists of a chain of command which incorporates four sections--Plans, Operations, Logistics, and Finance--under the overall leadership of an Incident Commander. Each of the four sections operates under its own Section Chief and has its own tasks or job descriptions (described in the Job Action Sheets which follow in this supplement). The tasks identify priorities that arise during a disaster event (see pp. 19-20, and 64-65 of the original *Guidelines*) and provide for a uniformly structured response and recovery effort.

1. INCIDENT COMMANDER

One person manages the overall response effort: the **Incident Commander**. Usually the person assigned to that job is the facility administrator. In the absence of the administrator, a resident, or another staff member may be designated to act in that role until the administrator is able to assume the position. Specific responsibilities are then systematically

divided among other capable and competent people. Each ICS team leader is referred to as a **Section Chief**. The **Incident Commander** oversees the Section Chiefs and coordinates the response activities as follows:

- ✓ Activates and manages the Command Center
- ✓ Implements the Response Plan
- ✓ Establishes overall priorities and assigns personnel to designated positions
- ✓ Ensures that all of the functions of the ICS are carried out either directly or by assigning them to ICS sections
- ✓ Reviews situation with Section Chiefs and sets priorities for actions, resource allocation and short term recovery
- ✓ Communicates with authorities regarding facility/resident situation and needs

2. PLANS CHIEF

The **Plans Chief** provides current information on the facility situation and projects short and longer term needs for recovery and return to normal operation. S/he is responsible for the following:

- ✓ Collects information on the emergency from the **Operations Chief** and **Logistics Chief** and generates disaster situation reports
- ✓ Identifies and displays essential elements of information
- ✓ Maintains overview of available and needed resources
- ✓ Communicates and cooperates with other Section Chiefs
- ✓ Identifies recovery needs and develops plans for resuming normal operations

3. OPERATIONS CHIEF

The **Operations Chief** directs the carrying out of initial response functions, reporting results and situation status to the **Incident Commander** and other Section Chiefs, as follows:

- ✓ Ensures carrying out of the site security function, including damage assessment, utility checks and "turn-off" as necessary
- ✓ Ensures suppression of fires when possible, contacting the Fire Department, if necessary/possible
- ✓ Directs search and rescue teams
- ✓ Directs first aid function. In skilled nursing facilities, directs Triage Unit and expanded first aid function
- ✓ Notes and tracks injuries, treatment and fatalities
- ✓ Accounts for all residents, staff and visitors
- ✓ Oversees evacuation and relocation of residents, if necessary
- ✓ Receives and documents all team reports, providing information to the **Incident Commander** and other Section Chiefs

4. LOGISTICS CHIEF

The **Logistics Chief** coordinates the use of *existing* and the procurement of *needed* resources to ensure the health and safety of residents, staff and volunteers. Responsibilities include the following:

- ✓ Provides and updates a summary of resources and supplies availability, depletion and allocation to the **Plans Section**
- ✓ Projects, with information from other Section Chiefs, supplies and assistance needed and works to obtain them
- ✓ Provides for the materiel and personnel support to the ICS as needed, including establishing staffing schedules with other Sections and the **Incident Commander**
- ✓ Receives and catalogues incoming resources from individual, public and private sources and maintains a **Resource Status Board**
- ✓ Works closely with **Plans** to anticipate, plan for and obtain supplies and services needed for recovery and return to normal operations
- ✓ Documents all transactions and costs, retaining all cost information for the **Finance Section**

5. FINANCE CHIEF

The **Finance Chief** is responsible for overseeing, processing and documenting all costs associated with the disaster:

- ✓ Tracks all costs associated with the response effort
- ✓ Handles and documents all cash exchanges
- ✓ Processes all purchase orders, payment of checks and other accounting documents
- ✓ Maintains all financial records of the incident

6. OTHER FUNCTIONS

There are a number of other functions which the Incident Commander should address in planning stages:

- Media/public relations
- Community liaison
- Psychological support and assistance for both residents and other staff until outside assistance is available
- Management of volunteers
- Child care for staff

In a small facility with minimal staff, people may have to be responsible for more than one section. The Incident Commander, for example, might have to act as Operations Chief and Media/Community Liaison.

C. COMMAND CENTER/EMERGENCY OPERATIONS CENTER

Set aside a space for the ICS team to carry out its job. Ideally, the room should be somewhat removed from the confusion in the main living area and furnished with tables and chairs for team members. An alternate area should be identified in the event that the primary location becomes either unavailable or inaccessible. At minimum, the room or space should be equipped with the following:

- Flip Charts with marking pens, masking tape, thumb tacks/push pins or dry ink board with special pens
- Detailed street maps and freeway maps of the area
- Job Action packets containing assignments and check lists (see section on Supplemental Training Materials)
- Badges and/or colorful vests
- Rotary file with telephone numbers and addresses of local vendors, pharmacies, contractors, etc.
- Flashlights/lightsticks, extra batteries
- Portable radio
- Walkie-talkies (at least 2 sets) to use inside the building
- Portable/cellular telephones
- Message pads, pens, pencils
- Facility Food/Supplies Inventory
- Drinking water, snacks and food for ICS Team
- Extra First Aid kit(s)
- First Aid book
- FAX machine

These supplies can be stored in a carton or wheeled trash container in the **Command Center** so that they are readily available. If the materials are properly stored, the room can be used for other purposes during non-emergencies and easily converted when necessary.

1. STAFFING SCHEDULE

Shifts for team members should be scheduled for six to eight hours and include break periods.

The team must be aware that they will be meeting current needs while planning for future needs. Each shift should plan at least six hours ahead so that when the new shift takes over they will be able to continue the work that is being done and will have the benefit of the information posted on the walls to provide a picture of the most current situation (e.g., number of

residents injured, location of damages, availability of drinking water, etc). It is important to remember that the situation will be changing and the planning will need to be flexible to adjust to and reflect these changes.

2. BEFORE HELP ARRIVES: EMERGENCY RESPONSE CHECK LIST

There is, of course, the possibility that at the time of the event, the person in authority at the site is confused as to what to do first. The "Emergency Response Check List" suggests prioritized procedures to follow until the ICS procedure can go into effect.

The check list appears in each of the attached "Scenario" sections. An enlarged version of the form also appears in the ICS Forms Section. It might prove helpful for staff or residents finding themselves temporarily "in charge" following a disaster if these instructions are enlarged further, laminated, placed on either end of corridors and next to elevators on each floor.

IN-SERVICE TRAINING

The materials that follow are provided 1) to assist you in developing an earthquake preparedness plan which covers a number of contingencies; and 2) to assist you in carrying out a "table top" exercise using the scenarios to test your planning and response procedures.

A. PRESENTATION

Prior to the training exercise, review "Introduction to the Incident Command System," the Job Action Sheets and suggested forms. Designate team members and section chiefs and ensure that there are sufficient copies of Job Action Sheets and Disaster Forms available for teams.

- ◆ Select the Scenario appropriate for your type of facility (Sections D, E, or F)
- ◆ Read and discuss the description of the facility and its Scenario for the earthquake.
- ◆ Read and enact the "Procedure" which follows.

- ◆ Provide Section Chiefs with "Job Action Sheets" and forms appropriate for their section. *Remember, some individuals might need to take on one or more than one job action, so it is a good idea for each team member to be familiar with the other jobs.*
- ◆ For each scenario, read **Situation Report #1** and respond to the section "Procedure/Considerations."
- ◆ Incident Commander reads subsequent scenarios (**Situation Reports #2-5**) at reasonable intervals, i.e., 30 minutes, while **relevant** new information from each scenario is noted on Status Boards. Information about the situation in the outside community which will affect facility's operation, such as road closure, etc., should be noted as well as updated information about the situation in the facility. Sections should transfer information appearing in the Scenario to the appropriate form. Each Situation Report repeats general information provided previously, with **new** information appearing underlined and in bold print.

Following the exercise, conduct an evaluation of the response (see pp. 37-38 of the *Guidelines*), encouraging team members to critique the effort without being critical of individual performances. Periodically, repeat the exercise, making it more realistic by having members actually performing their roles with residents participating, and conduct relocation and evacuation procedures. You might want to personalize the threat to your facility by changing the scenario to describe your own population and structure.

B. SUPPLEMENTAL TRAINING MATERIALS

- **Job Action Sheets:** Incident Commander, Plans Section Chief, Operations Section Chief, Logistics Section Chief, and Finance Section Chief

The initial job assignments for each ICS team member are spelled out in a **Job Action Sheet**. For Retirement Complexes, it is suggested that the Administrator meet with the Resident Council to discuss job assignments and the nomination of other residents for the ICS team.

- **Incident Command System Worksheet**
- **Scenario for Large Retirement Complexes--Section D**

continued 

- **Scenario for Large Residential Care Facilities for the Elderly--
Section E**
- **Scenario for Skilled Nursing Facilities--Section F**
- **Staff Work Schedule for Large Residential Care Facility for the
Elderly**
- **Staff Work Schedule for Skilled Nursing Facilities**
- **Emergency Procedures**
- **Emergency Response Check List**
- **Training Scenario for Large Complexes**
 - Situation Report #1**
 - Situation Report #2**
 - Situation Report #3**
 - Situation Report #4**
 - Situation Report #5**
- **Training Scenario for Residential Care Facilities for the
Elderly**
 - Situation Report #1**
 - Situation Report #2**
 - Situation Report #3**
 - Situation Report #4**
 - Situation Report #5**
- **Training Scenario for Skilled Nursing Facilities**
 - Situation Report #1**
 - Situation Report #2**
 - Situation Report #3**
 - Situation Report #4**
 - Situation Report #5**
- **Emergency Message Form**
- **Physical Injury/Fatality Information Sheet**
- **Structural Damage List**
- **Non-Structural Damage List**
- **Inventory (Supplies/Services) List**
- **Emergency Response Check List (enlarged)**

C. JOB ACTION SHEETS

Incident Command System Job Action Sheet

(Read this entire Job Action Sheet before doing anything)

Title: **Incident Commander**

Position Assigned To: _____

Authority: Full authority to make emergency expenditures, personnel assignments and the decision to evacuate and relocate to **preserve life and property.**

Responsibility: Overall management of incident; supervise all other functions; authorize evacuation and relocation, if needed.

Immediate Actions: Activate Incident Command System by setting up Command Post. Select planned or alternate location.

Appoint all other Section Chiefs and distribute four Section Packets for: Planning, Operations, Logistics and Finance. Each packet should contain: identifying badge or vest, Job Action Sheet and forms needed to support actions.

Hold meeting with Section Chiefs to assess current situation and decide on priority actions.

Ongoing Actions: Meet as often as necessary with Section Chiefs to monitor situation, set new priorities and authorize expenditures and personnel work schedules.

Incident Command System Job Action Sheet

(Read this entire Job Action Sheet before doing anything)

Title: **Plans Section Chief**

Position Assigned To: _____

Authority: Under supervision of the incident commander, directs action taken by the planning section and supervises section staff.

Responsibility: Monitor changes in the situation; identify and/or anticipate future needs in the short-range (1-2 days) and long-range (1-2 weeks) or as appropriate to the incident; track and document activities.

Immediate Actions: Receive appointment/badge from Incident Commander.
Receive briefing from Incident Commander on current situation.
Brief staff of Plans Section on current situation

Ongoing Actions: **Do the following tasks (or assign people to do them and report back to you):**
Gather information from Operations Section on current situation. Continue to do this on a regular basis.
Gather information from Logistics Section on current status of resources/supplies. Continue to do this on a regular basis.
Display changes in the situation and resources on the Status Board or flip chart for use by all Sections.
Generate periodic written **Situation Reports** and **Resource Status Reports** and give to Incident Commander and all Section Chiefs.
Gather information from community responders (fire service, law enforcement) on status of external disaster. Include this information in **Situation Reports** and on **Status Boards**

Incident Command System Job Action Sheet

(Read this entire Job Action Sheet before doing anything)

Title: Operations Section Chief

Position Assigned To: _____

Authority: Under supervision of the Incident Commander, directs actions taken by the Operations Section and supervises the Section staff.

Responsibility: Protect the health and safety of the building occupants.

Immediate Actions: Receive appointment/badge from the Incident Commander.

Receive briefing from the Incident Commander on current situation.

Assign people to do the following tasks and report back to the **Operations Section Chief**:

Put out small fires. Attempt to call fire department.

Check for utility outages: gas (if leaking, turn off), electrical power (is back-up generator working?), water (if pipes are leaking, turn off).

Do search and rescue with at least **two-person** teams for purpose of safety. Assist victims, if possible. Account for all residents, recording names, locations and indicating physical condition (e.g., "OK", "MEDIC NEEDED", "Injured left arm but otherwise OK" etc.).

If capable, administer first aid and record action for other responders.

If in SNF, direct Triage Unit and expanded first aid function.

Do a damage assessment/survey of building recording findings by floor and room.

NOTE ALL FINDINGS ON CHECK LIST AND BRING TO ATTENTION OF INCIDENT COMMANDER

Incident Command System Job Action Sheet

(Read this entire Job Action Sheet before doing anything)

Title: Logistics Section Chief

Position Assigned To: _____

Authority: Under supervision of the Incident Commander, directs action taken by the Logistics Section and supervises Section staff; makes expenditures within authority granted by Incident Commander.

Responsibility: Obtain personnel, supplies (medical and general) and equipment; determine need for fuel, food, water, alternate light/power sources; order and arrange for delivery or pick-up of needed items; monitor longer term needs (beyond 3 days) and share information with Plans Section.

Immediate Actions: Receive appointment/badge from the Incident Commander.

Receive briefing from Incident Commander on current situation.

Obtain list of vendors with addresses and telephone numbers.

Ongoing Actions: **Do the following tasks or assign people to do them and report back to you:**

Identify supply needs as damage, injuries and general situation status is determined by the Operations Section.
Check with Operations as often as necessary.

Identify personnel needs of both paid staff and volunteers; manage the "labor pool".

Determine availability of supplies and equipment from known sources (use attached resource/vendor lists).

Obtain supplies and equipment; arrange for their delivery or pick up and store in safe location(s).

Track resources and personnel as they are requested, obtained and used. Share this information with the Plans Section.

Keep records and receipts of expenditures and personnel time. Share this information with the Finance Section.

Incident Command System Job Action Sheet

(Read this entire Job Action Sheet before doing anything)

Title: **Finance Section Chief**

Position Assigned To: _____

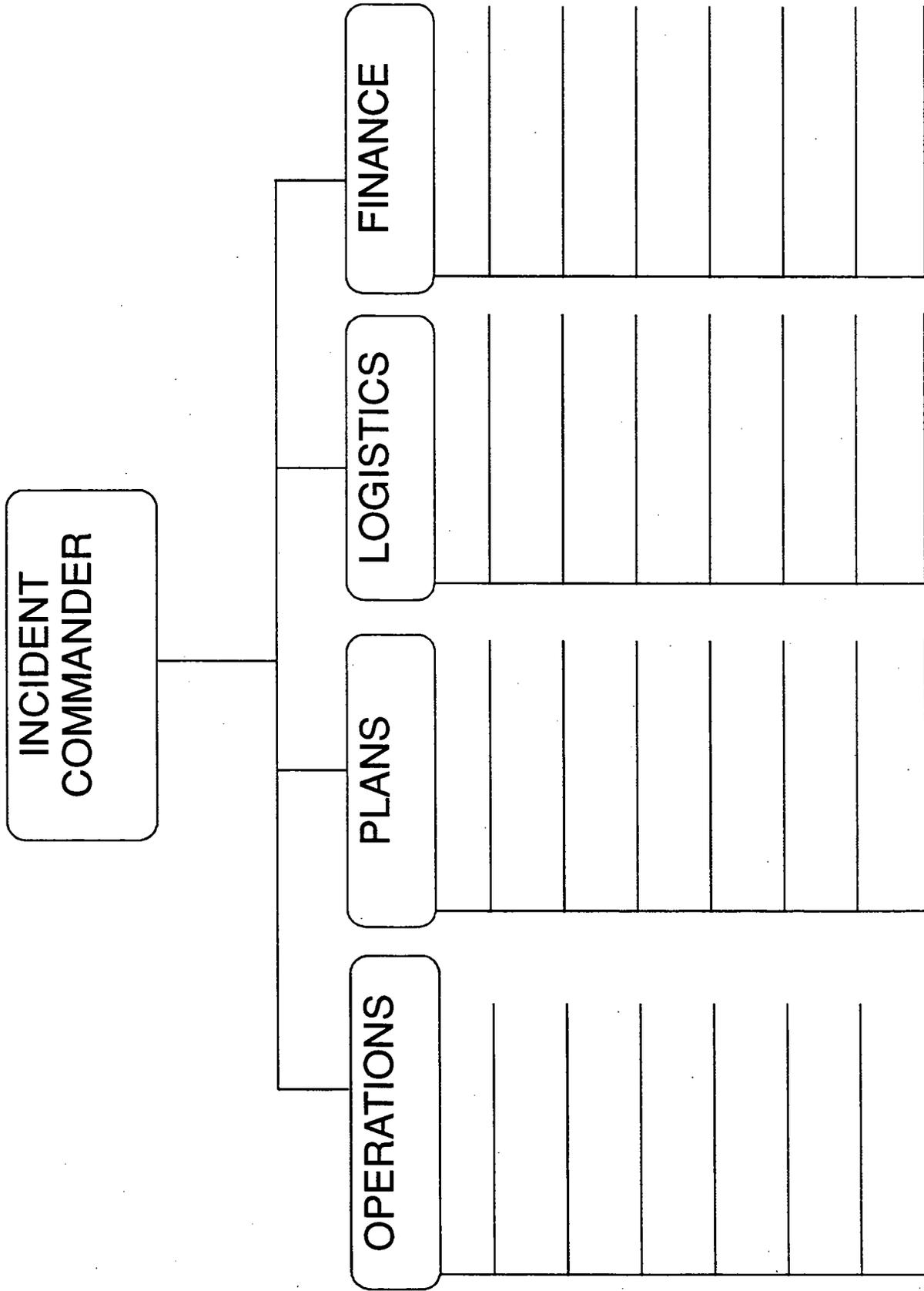
Authority: Under supervision of the Incident Commander, directs actions taken by the Finance Section and supervises Section staff; makes payments within authority granted by Incident Commander.

Responsibility: Keeps receipts and processes payments of expenses charged to the incident. Monitors longer term needs (beyond three days) and shares with Plans Section.

Immediate Actions: Receive appointment/badge from Incident Commander.
Receive briefing from Incident Commander on current situation.

Ongoing Actions: **Do the following tasks or assign people to do them and report back to you:**
Assist Logistics Section in keeping track of expenditures.
Use emergency payment methods such as cash to obtain emergency supplies if normal channels are unavailable (i.e. banks are closed for an extended period of time or ATMs not working).
Arrange for emergency payroll distribution if normal channels unavailable (i.e., electronic payroll system is inoperative).

INCIDENT COMMAND SYSTEM Staffing Worksheet for Elder Care Facilities



**D. EARTHQUAKE SCENARIO FOR A
LARGE RETIREMENT COMPLEX**

D. Earthquake Scenario
for
A Large Retirement Complex

Greenwood Manor is a large retirement complex with 80 units, housing 125 residents. A three story stucco building, it is located on Route 124, 12 miles from Verdeville, population 6300.

The facility administrator is present from 9am through 6pm, Monday through Friday and is available by pager evenings, off-hours, and on weekends.

It is 7:32pm on Friday, November 5, 1993. Dinner is finished and most of the 125 residents have returned to their rooms with the exception of eight residents who are watching television in the lounge area.

Suddenly, there is a low rumbling sound, the pictures in corridors begin to move on walls, overhead chandeliers shake and the floor begins to shudder. The lights suddenly go out and there is a sound of glass shattering.

The shaking lasts for approximately 20 seconds. Residents call for help and some residents, stuck in the elevator, bang on the elevator doors. A few minutes later, there is rumble and shudder and the building begins to shake.

EMERGENCY PROCEDURES

1. Go to Emergency Operations Center.
2. Turn on portable radio.
3. Round up all flashlights/lightsticks and extra batteries.
4. Activate Incident Command System.
5. Provide briefing based on information at hand.
6. Test telephones and walkie-talkies.
7. Determine priorities and begin to act on them.
8. Schedule meetings at regular intervals to share updated information.

EMERGENCY RESPONSE CHECK LIST

If you are alone or with limited staff during an emergency, undertake the response in the following manner:

1. Get flashlight.
2. Check utilities:
 - ◆ If you smell gas, hear gas hissing, or the gas line is broken--**SHUT OFF GAS** at the meter, otherwise **DO NOT SHUT OFF GAS**.
 - ◆ If electrical wires are crackling and/or you see sparks or there is a gas leak, **SHUT OFF ELECTRICITY AT MAIN SWITCH**.
3. Suppress small fires with fire extinguisher.

Relocate residents, if necessary, to another, safer area and call fire department, if telephones are working.

If fire cannot be suppressed, evacuate the residents and call fire department or 9-1-1, if possible.
4. Knock on every door on every floor to determine if residents are okay.

If available, assign other staff and/or capable residents to cover each floor, preferably in teams, for safety reasons.
5. Provide first aid; for those more seriously injured, call 9-1-1, if possible.
6. Calm residents.
7. Turn on battery-operated radio; test telephone.
8. Assess damage to building.

SITUATION REPORT #1

Fri., 11/5/93, 8:00pm

The Event

At approximately 7:32 pm, the county sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

Situation at Greenwood Facility

- No electricity; there is an emergency generator, but no fuel.
- Elevators are not functioning and there are residents trapped inside.
- Telephones are not working.
- Light fixtures and ceiling tiles have fallen.
- Water leak in laundry room.
- One resident appears to be in cardiac distress.
- There is no report of serious injuries sustained by other residents.
- Several residents are hysterical and wandering through corridors calling for help.
- The glass door in the front lobby has shattered, strewing large shards of glass across the entrance.
- Smell of gas in kitchen area.

Procedure/Considerations

1. Establish priorities--what will you do first? Why?

SITUATION REPORT #2

Fri., 11/5/93, 9:00pm

NOTE: New information is underlined.

The Event

At approximately 7:32 pm, the county sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

The Community

Radio reports several fires burning out of control in community; bridge leading out of city has collapsed; reservoir providing water to community, including facility has sustained damage; in some areas, telephone circuits are jammed, in others, telephones are inoperable.

Situation at Greenwood Facility

- No electricity; there is an emergency generator, but no fuel.
- Elevators are not functioning and there are residents trapped inside.
- Telephones are not working. Telephones still not working.
- Light fixtures and ceiling tiles have fallen.
- Water leak in laundry room. Laundry Room is flooded. Water main has been shut off.
- One resident appears to be in cardiac distress. Resident was hyperventilating; now resting quietly.
- There is no report of serious injuries sustained by other residents.
- Several residents are hysterical and wandering through corridors calling for help. Wandering residents now quieted and in one place.
- The glass door in the front lobby has shattered, strewn large shards of glass across the entrance. Operations reports that west wing of facility is strewn with debris, including ceiling tiles and broken glass.
- Smell of gas in kitchen area. Gas main shut off.
- Facility administrator has arrived.
- Operation Chief reports suppression of small fire in Unit 212.
- An adult child of one of the residents has arrived to volunteer her services.
- Insufficient supply of flashlights and batteries for all residents.
- Insufficient first aid supplies for minor injuries sustained by several residents.

Procedure/Considerations

1. Determine priorities
 - how will you handle injuries, residents trapped, etc.?
2. Continue effort to establish contact with outside community.
3. What else do you need to consider?
4. How will you handle volunteer(s)?
 - who will assign tasks and supervise?
5. Do you have maps of the area so that you can determine what alternate routes exist?
6. What is status of facility supplies?

SITUATION REPORT #3

Fri., 11/5/93, 10:00pm

NOTE: New information is underlined.

The Event

At approximately 7:32 pm, the county sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

The Community

Radio reports several fires burning out of control in community; bridge leading out of city has collapsed; reservoir providing water to community, including facility has sustained damage; in some areas, telephone circuits are jammed, in others, telephones are inoperable.

Radio reports that there have been landslides strewing large boulders on the major highway, crushing an ambulance and fire truck.

Community hospital has had major structural damage; patients are being evacuated; injured people are appearing at the hospital and are being diverted to a Casualty Collection Point.

The community-designated shelter is filled to capacity; people are requested not to bring their pets to the shelter.

Fire services are stretched beyond their capability and are requesting mutual aid from other local jurisdictions.

A number of local communities have sustained major damages and are unable to provide assistance to one another.

County administrators are requesting assistance from the State.

Situation at Greenwood Facility

- No electricity; there is an emergency generator, but no fuel. Telephones, electricity still out.

- Elevators are not functioning and there are residents trapped inside. 5 Residents are still trapped in elevators. Efforts to contact 911 by volunteer's cellular telephone unsuccessful because telephone circuits are overloaded.

- Light fixtures and ceiling tiles have fallen.

- Water leak in laundry room. Laundry Room is flooded. Water main has been shut off.

- There is no report of major injuries sustained by other residents. Major Injuries: 4; Minor Injuries (cuts/abrasions, sprains, etc.): 10, treated injuries although lacking sterile bandages and splints.

- Insufficient first aid supplies for minor injuries sustained by several residents.

- The glass door in the front lobby has shattered, strewing large shards of glass across the entrance. Operations reports that west wing of facility is strewn with debris, including ceiling tiles and broken glass. Structural Damage: West wing walls sustained severe cracks. Laundry room remains flooded; windows broken in several rooms and along corridors on floors 2 and 3.

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- Smell of gas in kitchen area. Gas main shut off.
- Facility administrator has arrived.
- Operation Chief reports suppression of small fire in Unit 212.
- An adult child of one of the residents has arrived to volunteer her services. **3 more adult children of residents have arrived to volunteer their services.**
- Insufficient supply of flashlights and batteries for all residents.
- **Operations team checked every floor and noted findings on Check List.**
- **Drinking water supply limited to 1 day; Operations assessing other sources of water in facility (water heater, etc).**

Procedure/Considerations

1. Determine priorities.
2. Who is attending to residents who are anxious and upset?
3. Are you continuing with efforts to contact outside community? How?

SITUATION REPORT #4

Fri., 11/5/93, 11pm

NOTE: New information is underlined

The Event

At approximately 7:32 pm, the County sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

The Community

Radio reports several fires burning out of control in community; bridge leading out of city has collapsed; reservoir providing water to community, including facility has sustained damage; in some areas, telephone circuits are jammed, in others, telephones are inoperable.

Radio reports that there have been landslides strewing large boulders on the major highway, crushing an ambulance and fire truck.

Community hospital has had major structural damage; patients are being evacuated; injured people are appearing at the hospital and are being diverted to a Casualty Collection Point.

The community-designated shelter is filled to capacity; people are requested not to bring their pets to the shelter.

Fire services are stretched beyond their capability and are requesting mutual aid from other local jurisdictions.

A number of local communities have sustained major damages and are unable to provide assistance to one another.

County administrators are requesting assistance from the State.

No power, no telephones.

Radio reports fires under control.

Several main roads are closed and damage is widespread.

Two buildings in downtown area have collapsed.

Twelve fatalities have been confirmed and 150 serious injuries reported.

One of two local hospitals is being evacuated.

Situation at Greenwood Facility

- No electricity; there is an emergency generator, but no fuel. Telephones, electricity still out. Volunteer brings small emergency generator and minimal lighting is available in the Command Center.

- 5 Residents are still trapped in elevators. People trapped in elevator have been rescued.

- Efforts to contact 911 by volunteer's cellular telephone unsuccessful because telephone circuits are overloaded.

- Light fixtures and ceiling tiles have fallen.

- Water leak in laundry room. Laundry Room is flooded. Water main has been shut off.

- Major Injuries: 4; Minor Injuries (cuts/abrasions, sprains, etc.): 10, treated injuries although lacking sterile bandages and splints.

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- Insufficient first aid supplies for minor injuries sustained by several residents.
- The glass door in the front lobby has shattered, strewn large shards of glass across the entrance. Operations reports that west wing of facility is strewn with debris, including ceiling tiles and broken glass. Structural Damage: West wing walls sustained severe cracks. Laundry room remains flooded; windows broken in several rooms and along corridors on floors 2 and 3. **The decision has been made to evacuate the West Wing until it can be inspected by a structural engineer. 31 residents are affected.**
- Smell of gas in kitchen area. Gas main shut off.
- Facility administrator has arrived.
- Operation Chief reports suppression of small fire in Unit 212.
- An adult child of one of the residents has arrived to volunteer her services. 3 more adult children of residents have arrived to volunteer their services.
- Insufficient supply of flashlights and batteries for all residents.
- Operations team checked every floor and noted findings on Check List. **Everyone accounted for.**
- Drinking water supply limited to 1 day; Operations assessing other sources of water in facility (water heater, etc). **Inventory of the facility and residents' resources finds sufficient food and supplies on hand for two full days, if shared. Water will be needed by noon of 11/6.**
- **Many people are without flashlights. Some are using candles!**
- **Several residents have reported a short supply of medications. Three cases would pose life threatening situations if not refilled within 6-8 hours of running out.**

Procedures/Considerations

1. Determine priorities.
2. What are your priorities for the next morning?
3. How will you work out shifts for the ICS team and others working on the response effort?

SITUATION REPORT #5

Sat., 11/6/93, 1am

NOTE: New information is underlined.

The Event

At approximately 7:32 pm, the county sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

The Community

Radio reports several fires burning out of control in community; bridge leading out of city has collapsed; reservoir providing water to community, including facility has sustained damage; in some areas, telephone circuits are jammed, in others, telephones are inoperable.

Radio reports that there have been landslides strewing large boulders on the major highway, crushing an ambulance and fire truck.

Community hospital has had major structural damage; patients are being evacuated; injured people are appearing at the hospital and are being diverted to a Casualty Collection Point.

The community-designated shelter is filled to capacity; people are requested not to bring their pets to the shelter.

Fire services are stretched beyond their capability and are requesting mutual aid from other local jurisdictions.

A number of local communities have sustained major damages and are unable to provide assistance to one another.

County administrators are requesting assistance from the State.

No power, no telephones.

Radio reports fires under control.

Several main roads are closed and damage is widespread.

Two buildings in downtown area have collapsed.

Twelve fatalities have been confirmed and 150 serious injuries reported.

One of two local hospitals is being evacuated.

Reports of wide-spread damage continue.

Power and telephones are out in many areas.

State and Federal assistance are beginning to come in.

Over 1500 people are in shelters.

National Guard water trucks and tents will be in place by 5pm. Locations for water and tents will be given.

Utilities companies estimate 3-5 weeks to restore full power and gas.

Telephones are working intermittently.

A 4.3M aftershock hit at 10:22am with little additional damage.

Situation at Greenwood Facility

- No electricity; there is an emergency generator, but no fuel. Telephones,

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electricity still out. Volunteer brings small emergency generator and minimal Lighting is available in the Command Center. Power and water will probably be out for another 2-3 days.

- Efforts to contact 911 by volunteer's cellular telephone unsuccessful because telephone circuits are overloaded. Once in a while, a call comes into the regular phones, but getting a dial tone out is not possible.
- Light fixtures and ceiling tiles have fallen.
- Water leak in laundry room. Laundry Room is flooded. Water main has been shut off.
- Many residents are very upset and need assistance and direction. Several people seem to have left without letting anyone in an official capacity know where they were going.
- Major Injuries: 4; Minor Injuries (cuts/abrasions, sprains, etc.): 10, treated injuries although lacking sterile bandages and splints. Insufficient first aid supplies for minor injuries sustained by several residents.
- The glass door in the front lobby has shattered, strewn large shards of glass across the entrance. Operations reports that west wing of facility is strewn with debris, including ceiling tiles and broken glass. Structural Damage: West wing walls sustained severe cracks. Laundry room remains flooded; windows broken in several rooms and along corridors on floors 2 and 3. The decision has been made to evacuate the West Wing until it can be inspected by a structural engineer. 31 residents are affected. A structural engineer has checked the West Wing and OK'd reoccupying.
- Clean-up and repair have become issues
- Smell of gas in kitchen area. Gas main shut off.
- Facility administrator has arrived.
- Operation Chief reports suppression of small fire in Unit 212.
- An adult child of one of the residents has arrived to volunteer her services. 3 more adult children of residents have arrived to volunteer their services. Several more volunteers have arrived.
- Insufficient supply of flashlights and batteries for all residents.
- Operations team checked every floor and noted findings on Check List.
- Drinking water supply limited to 1 day; Operations assessing other sources of water in facility (water heater, etc). Inventory of the facility and residents' resources finds sufficient food and supplies on hand for two full days, if shared. Water will be needed by noon of 11/6. Food is becoming a concern.
- Many people are without flashlights. Some are using candles!
- Several residents have reported a short supply of medications. Three cases would pose life threatening situations if not refilled within 6-8 hours of running out. Residents have many questions about remaining in their units, and express concerns about obtaining food, water medications, etc.
- A few calls have come through from anxious relatives; some have called the facility when they get no answer from residents' rooms.

Procedures/Considerations

1. What information will you need on residents who are leaving?
2. How will you communicate with residents and update them on latest information and plans?
3. How will you obtain supplies and make payment?
4. Are you making *longer* term plans? What are they?

**E. EARTHQUAKE SCENARIO FOR A
RESIDENTIAL CARE FACILITY FOR THE ELDERLY**

E. Earthquake Scenario
for
A Residential Care Facility for the Elderly

Goldenwood Manor is a residential care facility located on Route 124, 12 miles from Orobridge, population 6300. The "Manor" is a three - story stucco building housing 125 elderly residents, 12 of whom are non-ambulatory and dependent upon the use of three-pronged canes or walkers. The non-ambulatory residents live on the first floor.

From 6:00am until 2pm, staff consists of an aide, cook, relief cook who doubles as custodian/maintenance worker, and two waitress/housekeepers. The facility administrator is present from 9am through 6pm; the Activities Director is present from 9am until 11:30am. At 2pm, there is a shift change: the day aide leaves and another aide comes on duty. From 2pm until 6pm, staff consists of the administrator, an aide, 1 waitress/housekeeper and the cook. At 6pm, there is another shift change and all of the staff leave with the exception of one aide ; either the administrator or another aide is "on call". At 10pm, there is another change of shift and the evening aide leaves with a new aide relieving her.

It is 7:32pm on Friday, November 5, 1993. Dinner is finished and most of the residents have returned to their rooms with the exception of eight residents who are watching television in the lounge area.

Judy Wilson, the evening aide, started working at Goldenwood on October 18, 1993. On the evening of our scenario, she is "on rounds" on the third floor, passing out medication to the residents. As she raises her hand to knock at the door of Room 305, she hears a low rumbling sound, the pictures in the corridor begin to move on the wall, an overhead chandelier shakes and the floor begins to shudder. The lights suddenly go out and she hears the sound of glass shattering, loses her balance and falls, dropping her tray of medication.

The shaking lasts for approximately 20 seconds. As she struggles to her feet, she hears residents calling for help and the sound of residents banging on the elevator doors. A few minutes later, there is another rumble and shudder and once again, the building begins to shake.

STAFF WORK SCHEDULE

	6AM-9AM	9AM-2PM	2PM-6PM	6PM-10PM	10PM-6AM
Administrator		X	X		
Activities Director		X			
Aide #1	X	X			
Aide #2			X	X	
Aide #3					X
Waitress/Housekeeper	X	X			
Waitress/Housekeeper	X	X			
Cook	X	X			
Relief Cook/ Maintenance		X	X		

EMERGENCY PROCEDURES

1. Go to Emergency Operations Center.
2. Turn on portable radio.
3. Activate Incident Command System.
4. Provide briefing based on information at hand.
5. Round up all flashlights/lightsticks and extra batteries.
6. Test telephones and walkie-talkies.
7. Determine priorities and begin to act on them.
8. Schedule meetings at regular intervals to share updated information.

EMERGENCY RESPONSE CHECK LIST

If you are alone or with limited staff during an emergency, undertake the response in the following manner:

1. Get flashlight.
2. Check utilities:
 - ◆ If you smell gas, hear gas hissing, or the gas line is broken--**SHUT OFF GAS** at the meter, otherwise **DO NOT SHUT OFF GAS**.
 - ◆ If electrical wires are crackling and/or you see sparks or there is a gas leak, **SHUT OFF ELECTRICITY AT MAIN SWITCH**.
3. Suppress small fires with fire extinguisher.

Relocate residents, if necessary, to another, safer area and call fire department, if telephones are working.

If fire cannot be suppressed, evacuate the residents and call fire department or 9-1-1, if possible.
4. Knock on every door on every floor to determine if residents are okay.

If available, assign other staff and/or capable residents to cover each floor, preferably in teams, for safety reasons.
5. Provide first aid; for more serious injuries, call 9-1-1, if possible.
6. Calm residents.
7. Turn on battery-operated radio; test telephone
8. Assess damage to building.

SITUATION REPORT #1

Fri., 11/5/93, 8:00pm

The Event

At approximately 7:32 pm, the county sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

Situation at Goldenwood Facility

- No electricity; there is an emergency generator, however, no fuel.
- Elevators are not functioning and there are residents trapped inside.
- Telephones are not working.
- Light fixtures and ceiling tiles have fallen.
- Water leak in laundry room.
- One resident appears to be in cardiac distress.
- There is no report on injuries sustained by other residents.
- Several residents are hysterical and wandering through corridors calling for help.
- The glass door in the front lobby has shattered, strewn large shards of glass across the entrance.
- Smell of gas in kitchen area.

Procedure/Considerations

1. Establish priorities--what will you do first? Why?

SITUATION REPORT #2

Fri., 11/5/93, 9:00pm

NOTE: New information is underlined.

The Event

At approximately 7:32 pm, the county sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

The Community

Radio reports several fires burning out of control in community; bridge leading out of city has collapsed; reservoir providing water to community, including facility has sustained damage; in some areas, telephone circuits are jammed, in others, telephones are inoperable.

Situation at Goldenwood Facility

- No electricity; there is an emergency generator, however, no fuel.
- Elevators are not functioning and there are residents trapped inside.
- Telephones are not working. Telephones still not working.
- Light fixtures and ceiling tiles have fallen.
- Water leak in laundry room. Laundry Room is flooded. Water main has been shut off.
- One resident appears to be in cardiac distress. Resident was hyperventilating and is now resting quietly.
- There is no report on injuries sustained by other residents.
- Several residents are hysterical and wandering through corridors calling for help. Residents have been corralled and quieted.
- The glass door in the front lobby has shattered, strewing large shards of glass across the entrance. Operations reports that west wing of facility is strewn with debris, including ceiling tiles and broken glass.
- Smell of gas in kitchen area. Gas main shut off.
- Facility administrator has arrived.
- Operation Chief reports suppression of small fire in Unit 212.
- An adult child of one of the residents has arrived to volunteer her services.
- Insufficient supply of flashlights and batteries for all residents.
- Insufficient first aid supplies for minor injuries sustained by several residents.

Procedure/Considerations

1. Determine priorities
 - how will you handle injuries, residents trapped, etc.?
2. Continue effort to establish contact with outside community.
3. What else do you need to consider?
4. How will you handle volunteer(s)?
 - who will assign tasks and supervise?
5. Do you have maps of the area so that you can determine what alternate routes exist?
6. What is status of facility supplies?

SITUATION REPORT #3

Fri., 11/5/93, 10:00pm

NOTE: New information is underlined.

The Event

At approximately 7:32 pm, the county sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

The Community

Radio reports several fires burning out of control in community; bridge leading out of city has collapsed; reservoir providing water to community, including facility has sustained damage; in some areas, telephone circuits are jammed, in others, telephones are inoperable.

Radio reports that there have been landslides strewing large boulders on the major highway, crushing an ambulance and fire truck.

Community hospital has had major structural damage; patients are being evacuated; injured people are appearing at the hospital and are being diverted to a Casualty Collection Point.

The community-designated shelter is filled to capacity; people are requested not to bring their pets to the shelter.

Fire services are stretched beyond their capability and are requesting mutual aid from other local jurisdictions.

A number of local communities have sustained major damages and are unable to provide assistance to one another.

County administrators are requesting assistance from the State.

Situation at Goldenwood Facility

- No electricity; there is an emergency generator, however, no fuel. Telephones, electricity still out.
- Elevators are not functioning and there are residents trapped inside. 5 Residents are still trapped in elevators.
- Efforts to contact 911 by volunteer's cellular telephone unsuccessful because telephone circuits are overloaded.
- Light fixtures and ceiling tiles have fallen.
- Water leak in laundry room. Laundry Room is flooded. Water main has been shut off.
- There is no report on injuries sustained by other residents. Major Injuries: 4; Minor Injuries (cuts/abrasions, sprains, etc.): 10, treated injuries although lacking sterile bandages and splints.
- Insufficient first aid supplies for minor injuries sustained by several residents.
- The glass door in the front lobby has shattered, strewing large shards of glass across the entrance. Operations reports that west wing of facility is strewn with debris, including ceiling tiles and broken glass. Structural Damage: West wing walls sustained severe cracks. Laundry room remains flooded; windows broken in several rooms and along corridors on floors 2 and 3.
- Smell of gas in kitchen area. Gas main shut off.

- Facility administrator has arrived.
- Operation Chief reports suppression of small fire in Unit 212.
- An adult child of one of the residents has arrived to volunteer her services. **3 more adult children of residents have arrived to volunteer their services.**
- Insufficient supply of flashlights and batteries for all residents.
- **Operations team checked every floor and noted findings on Check List.**
- **Drinking water supply limited to 1 day; Operations assessing other sources of water in facility (water heater, etc).**

Procedure/Considerations

1. Determine priorities.
2. Who is attending to residents who are anxious and upset?
3. Are you continuing with efforts to contact outside community? How?

SITUATION REPORT #4

Fri.,11/5/93, 11pm

NOTE: New information is underlined

The Event

At approximately 7:32 pm, the County sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

The Community

Radio reports several fires burning out of control in community; bridge leading out of city has collapsed; reservoir providing water to community, including facility has sustained damage; in some areas, telephone circuits are jammed, in others, telephones are inoperable.

Radio reports that there have been landslides strewing large boulders on the major highway, crushing an ambulance and fire truck.

Community hospital has had major structural damage; patients are being evacuated; injured people are appearing at the hospital and are being diverted to a Casualty Collection Point.

The community-designated shelter is filled to capacity; people are requested not to bring their pets to the shelter.

Fire services are stretched beyond their capability and are requesting mutual aid from other local jurisdictions.

A number of local communities have sustained major damages and are unable to provide assistance to one another.

County administrators are requesting assistance from the State.

No power, no telephones.

Radio reports fires under control.

Several main roads are closed and damage is widespread.

Two buildings in downtown area have collapsed.

Twelve fatalities have been confirmed and 150 serious injuries reported.

One of two local hospitals is being evacuated.

Situation at Goldenwood Facility

- No electricity; there is an emergency generator, however, no fuel. Telephones, electricity still out. Volunteer brings small emergency generator and minimal lighting is available in the Command Center.

- Elevators are not functioning and there are residents trapped inside. 5 Residents are still trapped in elevators. People trapped in elevator have been rescued.

- Efforts to contact 911 by volunteer's cellular telephone unsuccessful because telephone circuits are overloaded.

- Light fixtures and ceiling tiles have fallen.

- Water leak in laundry room. Laundry Room is flooded. Water main has been shut off.

- There is no report on injuries sustained by other residents. Major Injuries: 4; Minor Injuries (cuts/abrasions, sprains, etc.): 10, treated injuries although lacking sterile

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bandages and splints.

- Insufficient first aid supplies for minor injuries sustained by several residents.
- The glass door in the front lobby has shattered, strewn large shards of glass across the entrance. Operations reports that west wing of facility is strewn with debris, including ceiling tiles and broken glass. Structural Damage: West wing walls sustained severe cracks. Laundry room remains flooded; windows broken in several rooms and along corridors on floors 2 and 3. **The decision has been made to evacuate the West Wing until it can be inspected by a structural engineer. 31 residents are affected.**
- Smell of gas in kitchen area. Gas main shut off.
- Facility administrator has arrived.
- Operation Chief reports suppression of small fire in Unit 212.
- An adult child of one of the residents has arrived to volunteer her services. 3 more adult children of residents have arrived to volunteer their services.
- Insufficient supply of flashlights and batteries for all residents.
- Operations team checked every floor and noted findings on Check List.
- Drinking water supply limited to 1 day; Operations assessing other sources of water in facility (water heater, etc). **Inventory of the facility and residents' resources finds sufficient food and supplies on hand for two full days, if shared. Water will be needed by noon of 11/6.**
- **Many people are without flashlights. Some are using candles!**
- **Several residents have reported a short supply of medications. Three cases would pose life threatening situations if not refilled within 6-8 hours of running out.**

Procedures/Considerations

1. Determine priorities.
2. What are your priorities for the next morning?
3. How will you work out shifts for the ICS team and others working on the response effort?

SITUATION REPORT #5

Sat., 11/6/93, 1am

NOTE: New information is underlined.

The Event

At approximately 7:32 pm, the county sustained a major earthquake registering 7.5 magnitude on the San Andreas fault which lasted 20 seconds. An aftershock of 6.2 magnitude followed at 7:40pm and lasted 10 seconds.

The Community

Radio reports several fires burning out of control in community; bridge leading out of city has collapsed; reservoir providing water to community, including facility has sustained damage; in some areas, telephone circuits are jammed, in others, telephones are inoperable.

Radio reports that there have been landslides strewn large boulders on the major highway, crushing an ambulance and fire truck.

Community hospital has had major structural damage; patients are being evacuated; injured people are appearing at the hospital and are being diverted to a Casualty Collection Point.

The community-designated shelter is filled to capacity; people are requested not to bring their pets to the shelter.

Fire services are stretched beyond their capability and are requesting mutual aid from other local jurisdictions.

A number of local communities have sustained major damages and are unable to provide assistance to one another.

County administrators are requesting assistance from the State.

No power, no telephones.

Radio reports fires under control.

Several main roads are closed and damage is widespread.

Two buildings in downtown area have collapsed.

Twelve fatalities have been confirmed and 150 serious injuries reported.

One of two local hospitals is being evacuated.

Reports of wide-spread damage continue.

Power and telephones are out in many areas.

State and Federal assistance are beginning to come in.

Over 1500 people are in shelters.

National Guard water trucks and tents will be in place by 5pm. Locations for water and tents will be given.

Utilities companies estimate 3-5 weeks to restore full power and gas.

Telephones are working intermittently.

A 4.3M aftershock hit at 10:22am with little additional damage.

Situation at Goldenwood Facility

- No electricity; there is an emergency generator, however, no fuel. Telephones,

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electricity still out. Volunteer brings small emergency generator and minimal lighting is available in the Command Center. Power and water will probably be out for another 2-3 days.

- Elevators are not functioning and there are residents trapped inside. 5 Residents are still trapped in elevators. People trapped in elevator have been rescued.
- Telephones are not working. Telephones still not working. Efforts to contact 911 by volunteer's cellular telephone unsuccessful because telephone circuits are overloaded.
- Light fixtures and ceiling tiles have fallen.
- Water leak in laundry room. Laundry Room is flooded. Water main has been shut off.
- Many residents are very upset and need assistance and direction. Several people seem to have left without letting anyone in an official capacity know where they were going.
- Major Injuries: 4; Minor Injuries (cuts/abrasions, sprains, etc.): 10, treated injuries although lacking sterile bandages and splints. Insufficient first aid supplies for minor injuries sustained by several residents.
- The glass door in the front lobby has shattered, strewn large shards of glass across the entrance. Operations reports that west wing of facility is strewn with debris, including ceiling tiles and broken glass. Structural Damage: West wing walls sustained severe cracks. Laundry room remains flooded; windows broken in several rooms and along corridors on floors 2 and 3. The decision has been made to evacuate the West Wing until it can be inspected by a structural engineer. 31 residents are affected. A structural engineer has checked the West Wing and OK'd reoccupying.
- Clean-up and repair have become issues
- Smell of gas in kitchen area. Gas main shut off.
- Facility administrator has arrived.
- Operation Chief reports suppression of small fire in Unit 212.
- An adult child of one of the residents has arrived to volunteer her services. 3 more adult children of residents have arrived to volunteer their services. Several more volunteers have arrived.
- Insufficient supply of flashlights and batteries for all residents.
- Operations team checked every floor and noted findings on Check List.
- Drinking water supply limited to 1 day; Operations assessing other sources of water in facility (water heater, etc). Inventory of the facility and residents' resources finds sufficient food and supplies on hand for two full days, if shared. Water will be needed by noon of 11/6. Food is becoming a concern.
- Many people are without flashlights. Some are using candles!
- Several residents have reported a short supply of medications. Three cases would pose life threatening situations if not refilled within 6-8 hours of running out. Residents have many questions about remaining in their units, and express concerns about obtaining food, water medications, etc.
- Some calls are getting through from anxious relatives; many call the facility when they get no answer from residents' rooms.

Procedures/Considerations

1. What information will you need on residents who are leaving?
2. How will you communicate with residents and update them on latest information and plans?
3. How will you obtain supplies and make payment?
4. Are you making *longer* term plans? What are they?

**F. EARTHQUAKE SCENARIO FOR A
SKILLED NURSING FACILITY**

F. Earthquake Scenario
for
A Skilled Nursing Facility

Redwood Manor is a 99-bed skilled nursing facility located on Route 124, 12 miles from Rosebridge, population 6300. The "Manor" is a "U-shaped" stucco building with a three-story main section and two single-story wings around a central patio.

Resident Census:

- ◆ On November 5, 1993, 97 beds are occupied.
 - ◆ 10 residents are ambulatory with walker or cane (no assistance).
 - ◆ 90 residents are nonambulatory/need maximum assistance, of these:
 - 20 are bed-bound (need gurney/Geri-Chair to be moved).
 - 66 are ambulatory with assisted wheelchair.
 - 4 are bed-bound and in isolation for communicable infections.
- Universal precautions are in use.

Residents are about 60% incontinent. There are no Alzheimer's patients, although many are confused or disoriented.

Staffing:

Day Shift (8:00am - 4:00pm) consists of :

- 4 RNs/LVNs ("charge nurses")
- 12 CNAs
- 2 RNAs (for physical/movement therapy)
- 4 Kitchen staff
- 1 Maintenance Assistant
- 4 Housekeeping staff
- 1 Business Office staff
- 1 Admissions staff
- 7 Directors/Supervisors: Nursing, Staff Development, Dietary, Housekeeping, Maintenance, Admissions and Business Services

"PM" Shift consists (4:00pm - 11:00pm) consists of:

- 3 RNs/LVNs ("charge nurses")
- 6 CNAs
- 2 Kitchen staff
- 1 Maintenance Assistant (until 6pm; on pager until morning)
- 1 Housekeeping staff

Night Shift consists of:
2 RNs/LVNs ("charge nurses")
4 CNAs
2 Maintenance staff available by pager

It is 7:32pm on Friday, November 5, 1993. Most of the residents have finished dinner in their rooms and trays have been picked up and returned to the kitchen. 15 residents are in the dining room finishing their dinner and/or watching TV.

Judy Wilson, the evening RN, started working at Redwood two weeks ago. On the evening of our scenario, she is "on rounds" on the third floor, passing out medication to the residents. As she raises her hand to knock at the door of Room 305, she hears a low rumbling sound, the pictures in the corridor begin to move on the wall, an overhead chandelier shakes and the floor begins to shudder. The lights suddenly go out and she hears the sound of glass shattering. She loses her balance and falls, dropping her tray of medication.

The shaking lasts for approximately 20 seconds. As she struggles to her feet, she hears residents calling for help and the sound of banging on the elevator doors. A few minutes later, there is another rumble and shudder and once again, the building begins to shake.

Staff Work Schedule Monday - Friday

	Day Shift	PM Shift	Night Shift	
Staff Position	8 am-4 pm	4 pm-11 pm	11 pm-8 am	Comments
Nursing Home Administrator II	X			
Director, Resident Services/Marketing	X			
Assistant, Resident Services	X			
Director, Staff Development	X			
Director, Business Office	X			
Assistant, Business Office	X			
Director, Dietary	X			
Food Service Assistant 001	X			
Food Service Assistant 002		X		
Food Service Assistant 003	X			
Food Service Assistant 004	X			
Food Service Assistant 005		X		
Food Service Assistant 006	X			
Director, Housekeeping	X			
Housekeeper 001	X			
Housekeeper 002	X			
Housekeeper 003		X		
Housekeeper 004	X			
Housekeeper 005	X			
Director, Maintenance	X	on Pager	on Pager	
Assistant, Maintenance	X (till 6 pm)	on Pager	on Pager	
Director, Nursing	X			
Charge Nurse/RN 001	X			
Charge Nurse/RN 002		X		
Charge Nurse/LVN 003	X			
Charge Nurse/LVN 004			X	
Charge Nurse/LVN 005		X		
Charge Nurse/LVN 006	X			
Charge Nurse/LVN 007		X		
Charge Nurse/LVN 008			X	
Charge Nurse/LVN 009			X	
Certified Nursing Assistant 001	X			
Certified Nursing Assistant 002	X			
Certified Nursing Assistant 003			X	
Certified Nursing Assistant 004		X		
Certified Nursing Assistant 005	X			
Certified Nursing Assistant 006		X		

EMERGENCY PROCEDURES

1. Go to Emergency Operations Center.
2. Turn on portable radio.
3. Activate Incident Command System.
4. Provide briefing based on information at hand.
5. Round up all flashlights/lightsticks and extra batteries.
6. Test telephones and walkie-talkies.
7. Determine priorities and begin to act on them.
8. Schedule meetings at regular intervals to share updated information.

EMERGENCY RESPONSE CHECK LIST

If you are alone or with limited staff during an emergency, undertake the response in the following manner:

1. Get flashlight.
2. Check utilities:
 - ◆ If you smell gas, hear gas hissing, or the gas line is broken--**SHUT OFF GAS** at the meter, otherwise **DO NOT SHUT OFF GAS**.
 - ◆ If electrical wires are crackling and/or you see sparks or there is a gas leak, **SHUT OFF ELECTRICITY AT MAIN SWITCH**.
3. Suppress small fires with fire extinguisher.

Relocate residents, if necessary, to another, safer area and call fire department, if telephones are working.

If fire cannot be suppressed, evacuate the residents and call fire department or 9-1-1, if possible.
4. Knock on every door on every floor to determine if residents are okay.

If available, assign other staff and/or capable residents to cover each floor, preferably in teams, for safety reasons.
5. Provide first aid; for those more seriously injured, call 9-1-1, if possible.
6. Calm residents.
7. Turn on battery-operated radio; test telephone.
8. Assess damage to building.

SITUATION REPORT #1

Fri., 11/5/93, 8:00 pm

The Event

At approximately 7:32 pm, a major earthquake of magnitude 7.5 occurred on the San Andreas fault and lasted 20 seconds. At about 7:40 pm an aftershock of 6.2 followed and lasted 10 seconds.

Situation at Redwood Facility

- No electricity from regular sources; emergency generator is operating, but there is only 24 hours of fuel.
- Elevators are not functioning and there are people trapped inside.
- Telephones are not working.
- Light fixtures and ceiling tiles have fallen.
- Water leak in laundry room.
- Condition of Residents:
 - Many residents are calling out from their rooms.
 - 1 cardiac distress.
 - 1 head injury/unresponsive.
 - 1 fell on floor while being transferred onto bed.
 - 2 severe headaches in hypertensives.
 - No information on status of other residents.
- Condition of Staff:
 - Injured back (CNA) while doing chair-to-bed transfer.
 - 2 CNAs are outside, afraid to re-enter building.
 - No information on status of other staff.
- The glass door in the front lobby has shattered, strewn large shards of glass across the entrance
- Smell of gas in kitchen area

Procedures/Considerations

1. Establish priorities--What will you do first? Why?

SITUATION REPORT #2

Fri. 11/5/93, 9:00 pm

NOTE: New information is underlined

The Event

At approximately 7:32 pm, a major earthquake of magnitude 7.5 occurred on the San Andreas fault and lasted 20 seconds. At about 7:40 pm an aftershock of 6.2 followed and lasted 10 seconds.

The Community

- Radio reports several fires burning out of control.
- Bridge leading out of city has collapsed.
- Nearby reservoir has been damaged.
- Telephone circuits are jammed.

Situation at Redwood Facility

- No electricity from regular sources; emergency generator is operating, but there is only 24 hours of fuel.
- Elevators are not functioning and there are people trapped inside.
- Telephones are not working.
- Light fixtures and ceiling tiles have fallen.
- Condition of Residents:
 - Many residents are calling out from their rooms.
 - 1 cardiac distress.
 - 1 head injury/unresponsive.
 - 1 fell on floor while being transferred onto bed.
 - 2 severe headaches in hypertensives.
 - No information on status of other residents.
- Condition of Staff:
 - Injured back (CNA) while doing chair-to-bed transfer.
 - 2 CNAs are outside, afraid to re-enter building.
 - No information on status of other staff.
- The glass door in the front lobby has shattered, strewn large shards of glass across the entrance.
- Smell of gas in kitchen area. Gas main shut off.
- Administrator has arrived.
- Small fire in #212; has been put out.
- Water leak in laundry room; it is flooding.
- Water main has been shut off.
- West wing is strewn with debris
- A resident's daughter has arrived to volunteer.
- Not enough flashlights and batteries for all staff.
- "Disaster Book" with residents' MD orders, meds & contact emergency numbers is buried under office files, papers, books, etc. on floor of Nursing Director's office.

Procedure/Considerations

1. Determine priorities; integrate new information.
- how will you handle injuries, residents trapped, etc.?
2. Continue effort to establish contact with outside community
3. How will you handle volunteer(s)?
- who will assign tasks and supervise?
4. Do you have maps of the area so that you can determine what alternate routes exist?
5. What is status of facility supplies?

SITUATION REPORT #3

Fri. 11/5/93, 10:00 pm

NOTE: New information is underlined

The Event

At approximately 7:32 pm, a major earthquake of magnitude 7.5 occurred on the San Andreas fault and lasted 20 seconds. At about 7:40 pm an aftershock of 6.2 followed and lasted 10 seconds.

The Community

- Radio reports several fires burning out of control; Fire services are overwhelmed; getting mutual aid assistance from other counties.
- Bridge leading out of city has collapsed.
- Nearby reservoir has been damaged.
- Telephone circuits are jammed.
- Radio reports that there have been landslides strewing large boulders on the major highway, crushing an ambulance and fire truck.
- Community Hospital patients are being evacuated; injured people coming to hospital are being diverted to a Casualty Collection Point.
- The Red Cross shelter at the high school is full.
Pets are not allowed in the shelter.
- Several local communities have sustained major damage and are unable to provide assistance to one another.
- County government is requesting assistance from the state

Situation at Redwood Facility

- No electricity from regular sources; emergency generator is operating, but there is only 22 hours of fuel.
- Elevators are not functioning; 5 people are still inside.
- Telephones are not working. Cannot contact 911 by volunteer's cellular phone.
- Gas smell. Gas has been shut off.
- Light fixtures and ceiling tiles have fallen.
- Condition of Staff:
 - Injured back (CNA) while doing chair-to-bed transfer; OK for light duty.
 - 2 CNAs are outside, afraid to re-enter building; went home.
 - 3 dayshift CNAs have arrived to help.
- The glass door in the front lobby has shattered, strewing large shards of glass across the entrance.
- 3 more family members of residents have arrived to volunteer.
- Operations team finished surveying every floor; findings are noted on Check List.
- Major Injuries/Medical Concerns:
 - 1 cardiac distress, has died.
 - 1 head injury, is conscious, being watched.
 - 2 severe headaches in hypertensives, meds not located.
 - Diabetic has foot injury.
 - IV bottle is broken.

- 2 residents on respiratory isolation have been moved into a room with immunosuppressed resident because of room damage.
- Broken glass fell on bed during dressing change; wound is unattended.
- Minor Injuries/Medical Concerns:
 - 5 residents were being cleaned/changed; are unclothed.
 - Several residents lost glasses and hearing aids.
 - Amputee is stranded, needs assistance; condition unknown.
- Structural damage: West wing walls have severe cracks.
- Laundry room remains flooded.
- Windows broken in several rooms and in 2nd & 3rd floor halls.
- Drinking water supply limited to 1 day; Operations assessing other sources of water in facility (water heater)

Procedure/Considerations

1. Determine priorities.
2. Who is attending to residents who are agitated?
3. Are you continuing with efforts to contact outside community? How?

SITUATION REPORT #4

Fri. 11/5/93, 11:00 Pm

NOTE: New information is underlined

The Event

At approximately 7:32 pm, a major earthquake of magnitude 7.5 occurred on the San Andreas fault and lasted 20 seconds. At about 7:40 pm an aftershock of 6.2 followed and lasted 10 seconds.

The Community

- Radio reports several fires burning out of control; Fire services are overwhelmed; getting mutual aid assistance from other counties; fires under control.
- Bridge leading out of city has collapsed.
- Nearby reservoir has been damaged.
- Telephone circuits are jammed.
- Radio reports that there have been landslides strewing large boulders on our main highway, crushing an ambulance and fire truck; fire truck & ambulance were not damaged but they are stuck at the scene.
- Community Hospital patients are being evacuated; injured people coming to hospital are being diverted to a Casualty Collection Point.
- The Red Cross shelter at the high school is full.
Pets are not allowed in the shelter.
- Second shelter is open at Community Church.
- Several local communities have sustained major damage and are unable to provide assistance to one another.
- Governor has declared a State of Emergency; is sending help.
- Several main roads are closed and damage is widespread.
- Two buildings in "Old Town" downtown area have collapsed.
- Twelve (12) fatalities are confirmed and 150 serious injuries reported.

Situation at Redwood Facility

- No electricity from regular sources; emergency generator is operating, but there is only 20 hours of fuel.
- Gas has been shut off. Volunteer brought small emergency generator and minimal lighting is available in the Command Center.
- Elevators are not functioning; all 5 people are rescued.
- Telephones are not working. Cannot contact 911 by volunteer's cellular phone.
- Light fixtures and ceiling tiles have fallen.
- Condition of Staff: All present are healthy and functioning.
- The glass door in the front lobby shattered, strewing large shards of glass across the entrance.
- 3 family members of residents have arrived to volunteer; Total = 4.
- Major Injuries/Medical Concerns:
 - 1 cardiac distress, has died.
 - 1 head injury, is conscious, being watched.
 - 2 severe headaches in hypertensives, meds located and given.

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NON-STRUCTURAL DAMAGE LIST
(to building contents)

Date: _____ **Time:** _____ **Prepared By:** _____

1. Location: _____

What Damaged: _____

Describe Damage: _____

2. Location: _____

What Damaged: _____

Describe Damage: _____

3. Location: _____

What Damaged: _____

Describe Damage: _____

4. Location: _____

What Damaged: _____

Describe Damage: _____

5. Location: _____

What Damaged: _____

Describe Damage: _____

6. Location: _____

What Damaged: _____

Describe Damage: _____

EMERGENCY RESPONSE CHECK LIST (LARGE TYPE)

If you are alone or with limited staff during an emergency, undertake the response in the following manner:

1. Get flashlight.
2. Check utilities:
 - ◆ If you smell gas, hear gas hissing, or the gas line is broken--**SHUT OFF GAS** at the meter. Otherwise, **DON'T SHUT OFF GAS**.
 - ◆ If electrical wires are crackling and/or you see sparks, or there is a gas leak, **SHUT OFF ELECTRICITY AT MAIN SWITCH**.
3. Suppress small fires with fire extinguisher.

Relocate residents, if necessary, to another, safer area and call fire department, if telephones are working.

If the fire cannot be suppressed, evacuate the residents and call fire department or 9-1-1, if possible.
4. Knock on every door on every floor to determine if residents are okay.

If available, assign other staff and/or capable residents to cover each floor, preferably in teams, for safety reasons.
5. Provide first aid; for those more serious injuries, call 9-1-1, if possible.
6. Calm residents.
7. Turn on battery-operated radio; test telephone.