# Comprehensive Emergency Management Plan (CEMP)

CITY OF SHORELINE

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# Table of Contents

**I. Introduction**
Mission
Purpose
Scope and Applicability
Incident Management Activities
Authorities
Key Concepts

**II. Planning Assumptions and Considerations**

**III. Roles and Responsibilities**

**IV. Concept of Operations**
General
Overall Coordination of Incident Management Activities
Concurrent Implementation of Other Plans
Organizational Structure
Principal Incident Management Organizational Elements
Emergency Response and Support Teams (Field Level)
Defense Support of Civil Authorities
Law Enforcement Assistance

**V. Incident Management Actions**
Actions
Notification and Assessment
Activation
Requests for Assistance
Pre-Incident Actions (Prevention)
Response Actions
Recovery Actions
Mitigation Actions
Demobilization
Operations under Homeland Security Advisory System (HSAS) Threat Conditions

**VI. Ongoing Plan Management and Maintenance**
Coordination
Plan Maintenance
NIMS Integration

**Appendices**

A. Definitions
B. Acronyms
C. Authorities and References
D. Training, Drills, and Exercises
E. Distribution List
F. Record of Changes

**Emergency Support Function Annexes**

ESF #1 – Transportation
Appendix A ..... Transportation Resource Staging Areas
Appendix B ..... King County Transportation Recovery Plan

ESF #2 – Communications, Information Systems, and Warning
Appendix A ..... Shoreline Auxiliary Communications Service
Appendix B ..... Radio Guidelines

ESF #3 – Public Works and Engineering
Appendix A ..... Public Works Checklist
Appendix B ..... Utility Emergency Contact Information
Appendix C ..... Disaster and Situation Information Checklist
Appendix D ..... Damage Assessment
Annex 1 ..... Rapid Damage Assessment Forms & Routes

ESF #4 – Firefighting
Appendix A ..... Mutual Aid Resources

ESF #5 – Emergency Management
Appendix A 1 ..... Proclamation of Local Emergency
Appendix A 2 ..... Proclamation of Local Emergency
Appendix B ..... Emergency Operation Center Handbook
Appendix C ..... Emergency Operations Center Activation Manual
Appendix D ..... Lines of Succession
Appendix E ..... Emergency Staffing Plan

ESF #6 – Mass Care, Housing, and Human Services
Appendix A ..... Standard Operating Procedure for Temporary Shelters
Appendix B King County CEMP ..... Regional Shelter Operations Incident Annex
Appendix C ..... Puget Sound Region Evacuation and Sheltering Plan

ESF #7 – Resource Support
Appendix A ..... Volunteer Emergency Worker Registration Guidelines

Appendix B ..... Volunteer Emergency Worker Registration Card
Appendix C ..... Volunteer Emergency Worker Identification Card
Appendix D .....Form EMD-078Volunteer Emergency Worker Daily Activity Report
Appendix E .....Volunteer Management Plan
Appendix F .....Donation Management Plan
Appendix G..... Finance Handbook

ESF #8 – Public Health and Medical Services
Appendix A..... King County All Hazards Mass Fatality Management Plan
Appendix B ..... King County Mass Causality Incident Plan
Appendix C ..... Puget Sound Region Pre-Hospital Emergency Triage and Treatment
Appendix D ..... King County Long Term Care Facilities Mutual Aid Plan
Appendix E ..... Mass Fatality Management Deaths Occurring Out of a Healthcare Facility
Appendix F ..... Catastrophic Fatality Management Guidelines for Cites
Appendix G ..... Decedent Tracking Information

ESF #9 – Urban Search and Rescue
Appendix A..... Urban Search and Rescue Volunteer Emergency Workers Guidelines

ESF #10 – Hazardous Materials Response
Appendix A.....Vulnerability to Hazardous Materials and Waste
Appendix B ... Hazardous Material Incident Response Levels and Action Classifications

ESF #11 – Agriculture and Natural Resources
Appendix A..... Points of Distribution/Staging Areas

ESF #12 – Energy
Appendix A.....Energy Services Emergency Contact Information

ESF #13 – Public Safety, Law Enforcement, and Security
Appendix A..... Police Department Disaster Incident Checklist

ESF #14 – Long-Term Community Recovery and Mitigation

ESF #15 – Public Affairs
Appendix A..... Public Information Emergency Checklist
Appendix B .....Public Information Officer Press Release Worksheet
Appendix C ..... Media Contact List
Appendix D..... Public Information Media Strategies

ESF # 16 – Evacuation
Appendix A ..... Evacuation routes and Maps
Appendix B ..... Standard Operating Procedures

Incident Annex's
Cyber Attack Incident Annex

# I. INTRODUCTION

## A. Mission

To provide an emergency management organization that meets or exceeds Federal, State and County requirements and to provide resources to minimize loss of life; protect property and natural resources; and restore the proper operation of the City of Shoreline (City) in the event of a major natural or man-made disaster.

## B. Purpose

This Comprehensive Emergency Management Plan (CEMP) has been designed to emulate the National Response Framework, Washington State Comprehensive Emergency Management Plan, and King County Comprehensive Emergency Management Plan and establish the structure for an organized and effective response to emergencies and disasters that occur within the city. The plan defines common assumptions and policies, establishes a shared concept of operations, and pre-assigns functional responsibilities to appropriate disciplines, private and nonprofit organization and government agencies. Through the implementation of this plan, the resources and capabilities of the public, private, and non-profit sectors can be more efficiently utilized to minimize the loss of life and property and to protect the environmental and economic health of the City.

## C. Scope and Applicability

It is the policy of the City, in order to protect lives, property and environment, and in cooperation with other elements of the community, to carry out preparedness and mitigation activities, respond to natural and manmade emergencies and disasters, and coordinate the recovery efforts for such events.

The plan establishes a mutual understanding of authority, responsibilities and functions of local government and provides a basis for incorporating essential non-governmental agencies and organizations into the emergency management organization.

All directions contained in this plan apply to preparedness and emergency response activities, undertaken by the City and supporting organizations, necessary to minimize the effects of a disaster and facilitate recovery activities.

The City's CEMP supports and is compatible with the King County Comprehensive Emergency Management Plan, and the emergency plans of the State of Washington and the Federal government. This document provides

support to other plans required by the State and Federal governments. Any conflicts will be handled on a case by case basis.

City government has the primary responsibility for disaster mitigation, prevention, preparedness, response, and recovery activities within the City. The City will plan for disasters, direct operations, mobilize and control resources, and mitigate the impact of disasters in the city within the limits of available resources and capabilities.

No guarantee as to the completeness of preparedness and response activities is expressed or implied by this plan or any part therein. The City government assets and resources are vulnerable to disasters. In addition, the City is severely limited in the extent of its resources for coping with a major disaster. Fire, Police, and utilities are provided by special purpose jurisdictions, under contract, or by King County. These services may be unavailable during a disaster and resources from the State and Federal governments may also be unavailable or delayed. The City will respond to the extent possible, given the situation, available information and resources.

The City will make a reasonable effort, but cannot guarantee, to meet the requirements of the Americans with Disabilities Act (ADA) during emergency preparedness, response, recovery, and mitigation.

## D. Organizational Structure

1. The City operates under a Council/Manager form of government. City Council members establish City policies and laws, adopt an annual budget, approve appropriations, contract for services and grant franchises. City Council members serve staggered four-year terms; roughly half the Council is up for election every two years. The City Council chooses a Mayor and Deputy Mayor from among its members at the first meeting of the new year following an election. The Mayor presides at Council meetings and represents the City at ceremonial functions and inter-governmental meetings. The Deputy Mayor presides in the Mayor's absence.

   The City Council hires a professionally trained manager to oversee the delivery of public services. The City Manager is the only employee hired by the City Council. The City Manager implements the City Council's policies and oversees all City departments.

   The Continuity of Government Act RCW 42.14 establishes provisions for the continuation of government in the event its leadership is incapacitated. RCW

42.14 provides for filling vacancies of elected and appointed officials in the City. (See ESF # 5 - Emergency Management and the City of Shoreline Continuity of Government Plan).

Shoreline Municipal Code 2.50 established the emergency management organization. The City Manager serves as the appointed Director of Emergency Management and delegates the responsibility of coordinating emergency preparedness and management activities within the City.

The day-to-day organizational structure of City departments will be maintained as much as possible during major emergency and disaster situations. Other public and private organizations, school districts, and volunteer organizations may, under a mutual agreement, decide to also operate in coordination with this plan.

The emergency management organization will be compatible with the existing City organization and will provide clear lines of authority and channels of communication. It will provide for the incorporation of existing staff having emergency response capabilities and those having support roles.

2. Other Agencies & Jurisdictions

    a. King County Office of Emergency Management

        The King County Office of Emergency Management (OEM) may provide guidance, as appropriate, to the City's CEMP development and ongoing maintenance and related emergency management activities within the city. The King County OEM will provide overall coordination with outside agencies and organizations involved in emergency planning and response; and manage the KCECC during activation and interact with outside agencies and organizations to coordinate emergency support activities. The KCECC will help coordinate requests for outside assistance through county, state and federal agencies. KCECC will also coordinate dissemination of emergency warning information through the Central Puget Sound Emergency Broadcast System and available resources. A King County OEM representative may respond to and assist at the City's EOC during localized emergencies, when requested. Guidance and assistance is also provided to the City for Preliminary Damage Assessment (PDA) processes moving into the recovery phase of a disaster.

    b. Zone 1 Regional Emergency Coordination

The Zone 1 Regional Emergency Coordination is provided by the Zone 1 Emergency Management Coordinator as provided for by Washington State Homeland Security Program funds. Zone 1 is one of three regional coordination zones established in King County. The Zone 1 Coordinator will be utilized to coordinate a broad range of disaster functions within the geographical area as outlined as Zone 1 in the King County Regional Disaster Framework. The King County ECC (KCECC) will serve as an information clearinghouse among the zones and oversee resource management county-wide.

# II. POLICIES

## A. Authorities

The City's CEMP has been developed under the authority of the following local, state, and federal statutes and regulations.

1. Revised Code of Washington 38.52, 36.30, 39.34; 35.33.081, 35.33.101, 42.14
2. Washington Administrative Codes 118 and 296-62-3112
3. U.S. Codes 5121-5202 Disaster Relief Act of 1974, as amended, 2301-2303 Improved Civil Defense 1980
4. King County Charter and County Code 1.28, 2.16, 2.56, 12.52
5. Shoreline Municipal Code 2.50

## B. Key Concepts

This plan details the key concepts utilized by the City in mitigation, preparation, response and recovery efforts relating to emergencies and disasters in accordance with RCW 38.52.070 and the National Incident Management System (NIMS). This includes but is not limited to: disaster and emergency responsibilities and procedures, training, and community education activities.

The CEMP, including its appendices, checklists and supporting documents, provides for the coordination of operations during emergencies and disasters and the proper utilization of all resources available to the City.

Emergency Contracts and Mutual Aid Agreements should include a clause that both parties agree to make a reasonable effort to meet the requirements of Title II of the American with Disabilities Act (ADA).

### C. Limitations

The City understands that during an emergency or disaster event, there are certain limitations the City will be faced with. The City may not have access to all of its staff or equipment due to the nature of the event, when the event occurs, where staff is coming from and the day to day condition of the City's equipment. The City may need to rely on Mutual Aid from neighboring cities that have not been impacted.

The City is a signatory of the King County Regional Disaster Framework and can request support through that plan. If the event is beyond that capacity the City will utilize the Washington Mutual Aid System (WAMAS) to request assistance coordination of Washington State Emergency Management Operations Center, through the King County Office of Emergency Management.

## III. SITUATION

### A. EMERGENCY/DISASTER CONDITIONS AND HAZARDS

The City has been affected and will be affected by various types of situations that could lead to a significant emergency situation. The City is vulnerable to both natural and man-made hazards as outlined in the City of Shoreline Hazard Mitigation Plan. The City recognizes the hazards identified within the Washington State Hazard Identification and Vulnerability Assessment (HIVA) and King County HIVA. These hazards include, but are not limited to: wind, rain, snow storms, earthquakes, flooding, landslides, common and private carrier accidents, urban search and rescue emergencies, civil disturbance, terrorist activities, explosion, structural collapses, hazardous material incidents, major fires, and major emergency and/or utility systems failure.

The City has a separate Hazard Mitigation Plan that addresses the hazards specific to Shoreline and the mitigation strategies that the City is working on to minimize the impacts of our risks. This information, which was developed with community input, is utilized in the City's Comprehensive Emergency Management Plan as staff developed the Essential Support Functions and their supporting appendixes and annexes. (Refer to the City of Shoreline Hazard Mitigation Plan for detailed information on the process utilized to do the HIVA and the specific mitigation strategies staff is currently working on completing).

### B. PLANNING ASSUMPTIONS & CONSIDERATIONS

This plan recognizes that any of the noted situations could create significant property damage, injury, loss of life, and disruption of essential services. These

situations may also create significant financial, psychological, and sociological impact on citizens of the community and the local government organization.

In the event of a widespread disaster, it is unlikely that the City will receive any significant assistance from nearby communities, county, state, or federal agencies, or human services organization for 72 hours or longer. In this situation, the initial response activities will rely on available City resources and those of private organizations, businesses, and residents within the city. The City will however seek support, if possible, through mutual aid, the King County Regional Disaster Framework, and WAMAS.

Shoreline may also be requested to provide support to other jurisdictions with staffing, resources, points of distributions, sheltering and a variety of other tasks during emergencies and disasters if unaffected.

The information and procedures included in this plan have been prepared utilizing the best information and planning assumptions available at the time of preparation. There is no guarantee implied by this plan or any part therein, that in the event of a disaster the response and recovery activities will occur as described within this document. As a result of a disaster or emergency, the City's response resources may be overwhelmed and essential systems may be nonfunctioning. For this reason, the City will respond in the best manner possible based on the situation and the information and resources available at the time the situation occurs.

## III. ROLES AND RESPONSIBILITIES

The City government has the primary responsibility for disaster mitigation, prevention preparedness, response, and recovery activities with the jurisdiction. The City will plan for disasters, direct operations, mobilize and coordinate resources, and mitigate the impact of disasters within the limits of available resources and capabilities. It is the responsibility of residents to educate themselves on preparedness activities and ensure that they have the supplies and resources to sustain themselves for at least three days; however, the City recommends a week (seven days).

### A. Mayor / City Council

1. Provide policy direction through the City Manager/Director of Emergency Management.

2. Adopt emergency management mutual aid plans and agreements and such ordinances, resolutions, rules and regulation as are necessary to implement emergency plans and agreements.

3. Approve, at the earliest practical time after issuance, rules and regulations reasonably related to the protection of life and property, such rules and regulations having been made and issued by the Emergency Management Director.

4. Approve proclamation of emergency as requested by the Emergency Management Director.

5. Responsible for assuring that emergency preparedness, mitigation, response and recovery activities are carried out within the City, through the CEMP.

6. Provide visible leadership to the community.

7. Recognized by the governor as the Director of the City for purposes of military law.

8. Appropriate funds to provide emergency preparedness programs and mitigation activities within the City.

## B. Director of Emergency Management/City Manager

1. Serve as Chief Executive Officer of the City.

2. Serve as the Director of Emergency Management and manage City staff in their emergency management duties.

3. Prepare Proclamations of Local Emergency.

4. Issue notices of evacuation as appropriate.

5. Appoint an Emergency Management Coordinator.

6. Appoint an Incident Commander, if applicable.

7. Enforce and administer provisions, laws, and ordinances governing the City.

8. Plan, coordinate, and direct the work of City departments to prepare for, mitigate against, respond to and recover from a disaster.

9. Report to the City Council on general conditions, disaster circumstances, and the financial condition of the City.

10. Advise the City Council regarding emergency policies for the City.

11. Represent the City regarding the coordination of emergency response, mutual aid agreements, inter-local agreements, disaster recovery, etc.

12. Oversee the development, implementation, and maintenance of continuity of government plans.

13. Interact with county-wide Mayors/City Managers to make joint decisions on issues that impact the region.

14. Appoint a Recovery Task Force Coordinator to lead the City's Recovery Task Force efforts.

15. May amend the CEMP as needed.

16. Ensures the City's Continuity of Operations Plan (COOP) is maintained and updated as needed.

## C. Assistant City Manager

1. Assume the duties of the City Manager in his/her absence.

2. Assist in intergovernmental coordination of emergency response and recovery.

3. Assist in recovery planning and operations and continuity of government planning.

4. May be appointed lead for ESF # 14, Long Term Community Recovery and Mitigation.

## D. Community Services Division (CSD) Manager (Oversight of: Emergency Management, Customer Response Team, Human Services and Office of Neighborhoods)

1. Oversight of the Emergency Management Coordinator and the emergency management function.

2. Monitor disaster-related budget expenditures; oversee emergency contracting procedures.

3. Services as the primary back up to the EMC during and EOC activation or exercise.

4. Oversees all coordination of emergency management activities with the various city departments and functions.

## E. Emergency Management Coordinator/Office of Emergency Management

1. Reports to the CSD Manager

2. Manage the operations of the EOC during a disaster and serves as the EOC Manager at the EOC.

3. Provide expert technical assistance and information to the Director and City Departments regarding emergency management, disaster response operations, and recovery.

4. Assure that the CEMP and supporting procedures are reviewed at least annually and updated as needed.

5. Coordinate with FEMA, State of Washington Emergency Management Department, King County and neighboring jurisdictions regarding emergency management and planning.

6. Locate, configure, and equip an EOC and ensure the EOC is operationally ready.

7. Develop procedures for activating, operating, and managing the EOC.

8. Assist in developing and implementing a training program in emergency management tasks for City employees and volunteers and maintaining the Emergency Management Training Guide.

9. Ensures and authorizes by authorizing their worker identification cards that all emergency management volunteers are registered by the City as emergency workers.

10. Develop and conduct periodic emergency management exercises.

11. Prepare a post-disaster After Action Review Plan that includes plan for improvement for the Director and submit it to the Washington State Office of Emergency Management.

12. Develop and coordinate a Community Education and Preparedness Program.

13. Draft a Disaster Proclamation for signature and promulgation by the City Manager.

14. Chair the City's Emergency Management Council.

15. Coordinate King County regional planning efforts and Zone 1 activities.

16. Act as liaison to enact the King County Regional Disaster Framework coordinator.

17. Coordinate mitigation and preparedness activities through the City's Hazard Mitigation Plan.

18. Lead for ESF 5 – Emergency Management

## F. Customer Response Team Supervisor

1. Provide emergency response for routine City problems.

2. Ensure customer requests and services are tracked on the Hansen system.

3. Coordinate with other departments for emergency/disaster service delivery.

4. Coordinate disaster information handling.

## G. Neighborhood and City Volunteer Coordinator(s)

1. During an emergency serve in the Logistic Section of the EOC as the Volunteer Management liaison.

2. When appropriate oversee the activation of a Volunteer Coordination Center.

3. Assist in mobilizing and managing volunteers through the neighborhood associations and other liaisons.

4. Assist in implementing a Family and Neighborhood Preparedness Program.

## H. Human Services/Community Services Manager

1. Coordinate the implementation of social services programs, as appropriate, during emergency operations.

2. Coordinate with social service organizations, relief agencies, faith-based organizations, non-profits, and the Red Cross, as needed.

3. Maintain liaison with organizations that outreach to at risk populations; the elderly, people with disabilities, and/or those who do not speak English to identify ways to meet their needs during an emergency.

4. Assists the Human Resource and Parks Director in identifying volunteers, who can assist with language barriers or people with special needs.

5. Assist Park's Department with ESF #6, Mass Care and Human Services, if special needs are identified.

## I. City Clerk

1. Serve as custodian of official records and perform official certification.

2. Supervise Records Management Program for the City.

    a. Identify critical documents and essential records;
    b. Assist departments in identifying, managing, and storing essential records;
    c. Develop and implement a disaster recovery program for essential records.

3. Oversee the preparation and publishing of official legal notices.

4. Maintain City Council databases of ordinances, resolutions, minutes, policies, etc.

5. The City Clerk serves as the Documentation Unit Lead in the Planning Section in the EOC when it is activated.

## J. City Attorney

1. Serve as chief legal advisor to the City.

2. Provide legal advice to the City Council, City Manager, and department directors regarding emergency response and recovery operations.

3. Interpret laws, rulings, and regulations and issue legal opinions.

4. Prepare ordinances, resolutions, contracts, and other documents relating to emergency operations.

## K. Communications Coordinator – City Manager's Office

1. Serve as the Public Information Officer when the EOC is activated by preparing and disseminating emergency public information to include establishing and coordination of the Joint Information Center or participating in one formed by another cooperating agency.

2. Set up/coordinate press conferences that the city may choose to utilize to inform citizens.

3. Ensure the city's WEB Site, Cable TV, and mass communication capabilities are utilized, if available, to maximize the ability to communicate current information to the community.

4. Support emergency messaging by utilizing the City's Social Media sources and the Regional Public Information Network, RPIN.

5. Working with the EMC and the Registered Disaster Workers, set up points throughout the city to disseminate information during times when there are power outages.

6. Lead for ESF 15 Public Affairs and assist Fire with ESF # 8 and Parks with ESF # 11.

## L. Management Analyst - City Manager's Office

1. Serve as the back-up PIO for the city and performs all associated tasks as identified above.

## M. Intergovernmental Program Manager & Economic Development Manager

1. Provide for the coordination of information from representatives from other jurisdictions, governments, and from the private sector. Examples of these are Utilities, Metro, School District, and business owners whose property we may need to access or have been impacted.

2. Serve as the Liaison Officer in the EOC.

3. Contact and brief assisting/cooperating agency representatives and mutual aid cooperators.

4. Interview agency representatives concerning resources and capabilities, and restrictions on use and provide this information at planning meetings.

5. Work with Public Information Officer and Incident Commander to coordinate media releases associated with inter-governmental cooperation issues.

## N. Administrative Services Director

1. Supervise the City's records, finance and informational technology staff and functions of the City.

2. Manage and supervise the finance, accounting, and reporting operations of the City during a disaster, including all financial controls, audits, and reports. Ensure that proper documentation is maintained for all emergency-related expenditures.

3. Supervise and direct the City's cash management functions; oversee the City's funds; maintain necessary banking relationships.

4. Develop and implement emergency financial and procurement procedures as required. Coordinate with the City's bank and major vendors.

5. Establish a unique project number for each disaster for all disaster-related expenses.

6. Prepare and report data for recovery of disaster relief funds.

7. Establish provisions for emergency signature authority for City checks during an emergency.

8. Coordinate with the City's bank to establish emergency provisions for cash and lines of credit.

9. Gather, interpret, and report information on emergency costs and expenditures.

10. Project the costs of various disaster recovery options; prepare fiscal plans and projected budgets for disaster recovery.

11. Maintain databases on emergency resource providers (equipment and material).

12. Manage the City's Risk Management functions.

13. Serve as the Administrative/Finance Section Chief in the EOC, when it is activated

14. Support the City's continuity of government planning

15. Oversee any donation management function that may be activated during a disaster.

16. Lead with HR on ESF #7 – Resource Support

## O. Human Resources Director

1. Develop and implement personnel policies and procedures for emergency operations, to include any special considerations for those employees with disabilities.

2. Maintain master personnel files, to include current employee emergency notification information, that are accessible during an emergency, ensuring confidentiality of materials in accordance with state and federal laws.

3. Assist with reviewing and registering all spontaneous unaffiliated emergency management volunteers as emergency workers.

4. Is the Human Resource Unit Lead of the Planning Section in the EOC and as such will ensure there are check-in activities in place, maintain the status of all incident human resources, ensure staff are assigned to any task have the knowledge, skills, and abilities to do the task, ensure work place safety, to include hours worked, and assist in identifying needed staff for upcoming operational period.

5. Develop and implement an educational program in emergency management tasks for all City employees and volunteers.

6. Develop a program to support the safety and well being of City employees' families during a disaster.

7. Lead with Administrative Services Department on ESF # 7 – Resource Support

## P. Information Technology Manager

1. Develop and maintain a program for protection and recovery of the City's data processing resources during/after a disaster.

2. Oversee the restoration and support of City technology services during a disaster.

3. Provide software, hardware, maps, and administrative support for the Geographical Information System.

4. Ensure daily backup and secure storage of centrally-managed/cloud based data.

5. Control data security as defined in City policies.

6. Provide computer assistance to City staff, network backup, and maintenance of the local area network.

7. Support and ensure operational readiness of all technologies that support the activation of the EOC.

## Q. Police Chief

Police Services are provided under contract by the King County Sheriff's Office. The Chief may serve as the Incident Commander or as part of a Unified Command Team or as the Operations Section Chief depending on the nature of the incident. While the Chief may serve in the EOC as part of the policy group, police functions and responsibilities also include:

1. General Law enforcement duties

2. Traffic and crowd control

3. Staging and perimeter security

4. Explosive ordinance disposal

5. Protection of critical facilities (including the EOC and shelters)

6. Evacuation management

7. Crime scene control

8. Search and rescue management

9. Coordination of investigation of acts of terrorism

Lead on ESF's # 2 Communications, # 9 Urban Search and Rescue, # 13 Public Safety, Law Enforcement, and Security, and # 16 Evacuation

## R. Fire Chief

Fire Services are provided by the Shoreline Fire Department. The Fire Chief may serve as the Incident Commander or as part of a Unified Command Team or as the Operations Section Chief depending on the nature of the incident. Fire functions and responsibilities include:

1. Fire prevention

2. Fire suppression

3. Emergency Medical Services

4. Emergency rescue

5. Damage assessment

6. Hazardous Materials preparedness and response

7. Evacuation management

8. Lead on ESF's # 4 Fire Fighting, # 8 Public Health and Medical Services, # 10 Hazardous Materials Response

## S. Planning and Community Development Director

1. Serve as the Planning Section Chief when the EOC is activated and organize and carry out both short-term and long-range planning during emergency operations and recovery.

2. Manage the gathering, analyzing, interpreting, and reporting of disaster-related information, including disaster damage and assessment reporting, response capabilities, regional disaster conditions, so as to be able to prepare situation reports and an Incident Action Plan for the next operational period.

3. Ensure that City ordinances, codes, and regulations are followed as much as possible in disaster response and recovery; recommend necessary and appropriate revisions to meet disaster conditions.

4. Ensure compliance with the Growth Management Act, zoning requirements, Critical Area Ordinance, State Environmental Policy Act, and State Emergency Management requirements.

5. Maintain and manage planning and development assets.

6. Manage, coordinate and perform building and structural inspections of residential and commercial buildings for safety and habitability following a disaster. Close facilities or restrict occupancy/use as required.

7. Coordinate inspections and recommendations with utility districts, FHA and other government entities. Provide enforcement of codes, occupancy policies, and other site safety and demolition as appropriate.

8. Assist Public Works in the coordination of damage assessment and reporting.

9. Review building plans for code compliance and manage the inspection of construction activities.

10. Manage and maintain the permit tracking and database system.

11. Assist Public Works as lead department with ESF #3

## T. Parks, Recreation, and Cultural Services Director

1. Serve as the Logistic Section Chief when the EOC is activated.

2. Coordinate and manage the use of the community centers and other appropriate facilities as emergency shelters as necessary.

3. Oversee all Logistical support for emergency/disaster event that supports the response to the event. To include staffing, equipment, resources, and coordination with King County ECC or Washington State Emergency Operations Center for resources we do not have and with the Finance Section for procuring what is needed from outside venders.

4. Oversee the Shelter/Mass Care and Volunteers Functions during an emergency.
5. Identify parks and other open areas that could be used for emergency debris deposit sites, staging areas, and Points of Distributions (PODs).

6. Maintain and manage parks assets.

7. Lead department for ESF's # 6 Mass Care and #11 Agriculture and Natural Resources

## U. Public Works Director

1. May serve as the Incident Commander or as part of a Unified Command Team or as the Operations Section Chief depending on the nature of the incident of why the EOC is activated.

2. Maintain and manage public works' assets.

3. Provide technical assistance to Emergency Management Leadership Team and City staff during disaster response and recovery operations.

4. Oversee the operations of contractors, service providers, and emergency response agencies regarding public works projects and assets.

5. Maintain master files of public works' projects, development construction records, street operations and maintenance, and other relevant documents.

6. Advise the Director of Emergency Management regarding codes, policies, and procedures for any response or recovery activity involving City roads, rights-of-way, or facilities.

7. Provide oversight for Public Works crews, to include CRT operations staff and Park Maintenance Staff; and liaison with other agencies, like utilities, that are engaged in emergency response and recovery activities. This

includes coordinating with those agencies that the city has signed Interlocal Agreements and/or contracts with like the Fire Department, King County Public Works and all of the agencies providing utilities within the city, to assist them in responding to and recovering from emergencies. Examples of these needs are: repair of water mains, pumps, motors, valves, fire hydrants, storage tanks, etc.; operating and servicing heavy road and construction equipment and vehicles; cleaning and repairing ditches, culverts, and catch basins; traffic control; repairing streets; repairing traffic control signs and signals; clearing ice, snow, or debris from streets.

8. Oversight of damage assessment and reporting.

9. Provide periodic response and recovery work progress reports to the EOC.

10. Provide on-site direction and guidance to City employees and emergency volunteer workers during emergency operations; inspect work in progress to ensure compliance with codes and safety practices.

11. Maintain liaisons with all utility providers within the city to allow for ease of working relationships during emergency situations.

12. Lead Department for ESF's #1 Transportation, #3 Public Works, and #12 Energy.

# IV. CONCEPT OF OPERATIONS

## A. General

The City has institutionalized the utilization of the Incident Command System (ICS) per the National Incident Management System (NIMS) for all natural and manmade disasters. Under the guidance of NIMS, this plan addresses the full spectrum of activities related to local incident management, including, prevention, mitigation, preparedness, response, and recovery actions.

This plan has been developed to emulate the National Response Framework (NRF), the NIMS, Washington State Comprehensive Emergency Management Plan (WA CEMP), and the King County Regional Disaster Plan (RDP).

1. It is the policy of the City to conduct emergency and disaster preparedness and mitigation activities in accordance with the National

Incident Management System (NIMS) in an effort to minimize the effects of a major emergency or disaster.

2. It is the policy of the City to utilize ICS as the incident management system in all operational field activities. An Incident Commander for an event and the operational period will be named. In some cases this will done through Unified Command with Police and Fire.

3. The City utilizes the concepts of ICS to structure the city's EOC. An EOC organization chart assigns staff to their positions in the EOC and is updated as personnel change.

4. The City adopts the NIMS recommendations for ICS training for those staff both assigned to the EOC and those assigned to operations duties in the field to ensure we work to have good situational awareness and work for a common operation picture between those working in the field and those working to support them in the EOC. Those training requirements include at a minimal the following IS and ICS training for staff and for their seconds if they are in a leadership/supervisor position:

    a. ICS 400 all operations Incident Commanders, Emergency Management Director, EOC Manager, Command Staff (Liaison Officers and PIO) and General Staff (Section Chiefs of Operations, Planning, Logistics, and Finance/Administration).

    b. ICS 300 all operations lead staff, EOC Unit, Team, or Group Leaders.

    c. ICS 200, 100, IS 700 for all applicable field and EOC staff that may have a role in supporting an emergency response for the City.

    d. In addition to these training, specific positions are required to take additional emergency management training as identified in the Emergency Management Training guide maintained managed by the Office of Emergency Management.

5. The City has a primary and an alternate Emergency Operations Center where emergency management activities will be conducted. These Centers are referenced in ESF 5.

6. It is the policy of the City that each department will take an active role in emergency planning and develop policies, procedures, or standard operating guidelines (SOGs), if identified to ensure operational readiness

and continuity of service. It is the responsibility of the Director of each City department to:

a. To actively participate in the preparation and maintenance of the City's CEMP.

b. Establish a departmental line of succession to activate and carry out emergency disaster responsibilities.

c. Develop the capability to continue operations during an emergency or disaster and to carry out the responsibilities outlined in this plan.

d. Ensure City staff receives the appropriate level of training in National Incident Management System (NIMS) and Incident Command System (ICS) and other related training that is commensurate to their job function and responsibilities.

7. City government, acting from the City EOC if activated, will be the focal point of the emergency management organization of the City. Mitigation and preparedness actions will be developed and implemented by the appropriate City personnel prior to any event and as an on-going nature of their city work assignment. During and after a disaster, the City's emergency management organization will act from the EOC to mobilize and coordinate l City personnel and resources to respond and recover from disaster effects. (For longer term Recovery activities refer to City of Shoreline Recovery Plan and ESF 14).

8. It is the policy of the City that all departments will make staff and resources available at the request of the Director of Emergency Management for training activities and emergency operations assignments.

9. Immediately following any emergency or disaster, all City departments will notify the EOC of their status including, level of readiness, availability of resources, resource requirements and any other pertinent information. All departments are to provide this information to the EOC immediately following a head count and preliminary building inspection. The City may use their Mass Notification system to help assist in this accountability. The City also maintains a 24 hour employee telephone hotline that, if operable, will give directions to staff and take messages of staff status.

10. When a major emergency or disaster occurs, City department management shall use the following general checklist as a basis for managing disaster operations:

    a. Account for personnel.

    b. Report to the pre-determined site to manage department operations.

    c. Assess personnel and resources available.

    d. Assess damages to facilities.

    e. Assess problems and needs.

    f. Report situation, damages and capabilities to the Emergency Operations Center through approved channels.

    g. Send designated representatives to the Emergency Operations Center to participate as members of the EOC staff.

    h. Carry out departmental responsibilities and assigned tasks.

    i. Continue assessment of department resources, needs, and actions.

    j. Continue reports to the EOC regarding actions, problems, needs, damages, etc.

    k. Keep detailed and accurate records, document actions, costs, situations, etc.

    l. Conduct operations utilizing the National Incident Management System.

11. Activation of the EOC may be done by the following: the City Manager/ Director of Emergency Management, Assistant City Manager, Emergency Management Coordinator, Community Services Manager or any city department Director or designee when the level of operations requires it. Designated staff report to the EOC to coordinate response efforts and support field operations. All or part of the EOC and its staff may be activated during a disaster. The level of activation will be determined by the nature and extent of the disaster. (See ESF #5 Appendix B Emergency Operations Center Handbook for activation criteria and checklists).

12. The EOC staff, in consultation with field operations, shall be responsible for evaluating the situation to determine if a Proclamation of Local Emergency is necessary. This request is authorized through the Director of Emergency Management/City Manager.

13. City departments are expected to carry out their responsibilities outlined in this plan, utilizing their best judgment and in a coordinated manner. The Director of Emergency Management/City Manager and EOC staff will work to provide overall coordination and resource support to those responding to the disaster and maintain situational awareness to ensure effective decision making.

14. When a major emergency or disaster occurs, it is anticipated that City departments and other responding organizations will organize their areas of responsibilities into manageable units, assess damage and determine needs. If agency resources cannot meet the needs created by the disaster, additional assistance may be requested through existing mutual aid or through the EOC. In the event of a Proclamation of Local Emergency the deployment of resources will normally be coordinated through the City's EOC. Resources to be utilized to support City operations may be placed at staging areas until specific assignment can be made.

15. In the event a situation is, or will become, beyond the capabilities of the resources of the City and those provided through mutual aid; the Director of Emergency Management may request assistance from the King County Emergency Coordination Center (KCECC), utilize the King County Regional Framework and/ or the WAMAS, through the Washington State Emergency Operations Center, via the State Duty Officer.

16. During a disaster, common communication tools such as cellular phones and 800 MHz radios may fail. This failure would prevent incident command posts throughout the city from communicating with the EOC. To reestablish communication, all alternative communication resources will be used, including but not limited to, satellite phones, email, VHF radio, utilizing the City of Shoreline Auxiliary Communications Systems Team, SMMs, and employee/volunteer runners.

17. The registration of permanent emergency workers and other volunteers will be coordinated through Emergency Management Coordinator prior to an event. Primarily these will be the members of the Shoreline Auxiliary Communications Services (ACS) Team and the Shoreline Community Emergency Response Team (CERT). Temporary emergency

workers will be assessed and, if qualified, registered through the City's Volunteer Coordinator and the Human Resources Department.

## B. Overall Coordination of Incident Management Activities

In order to minimize the effects of a disaster, provide emergency response capabilities and facilitate recovery efforts, the various elements of Shoreline's emergency management organization and City departments shall endeavor to provide services in the areas of mitigation, preparedness, response and recovery from disasters to the best of their ability during all operational time phases.

1. Mitigation Phase - Mitigation consists of actions taken prior to a disaster to prevent the occurrence of a disaster or to reduce the effects of a disaster should it occur. Mitigation activities taken by the City may include, but are not limited to the following (Refer to the City of Shoreline Hazard Mitigation Plan for further detail):

    a. Develop a mitigation plan that complies with Federal and State regulations.

    b. Pursue risk management and insurance programs

    c. Conduct structural and non-structural mitigation programs, as appropriate.

    d. Review hazard and risk analysis and develop capabilities and resources to enhance ability to respond to disaster situations.

    e. Conduct mitigation activities to protect City supplies, services and properties as funding and circumstances allow.

    f. Conduct public education to enhance citizen self sufficiency and inform of possible hazards and the affects of such events.

2. Preparedness Phase - Preparedness activities are necessary to the extent that mitigation measures cannot fully prevent disasters or eliminate their effects. Organizations develop plans and procedures to save lives and minimize damage by enhancing disaster response actions. Preparedness actions taken by the City may include, but are not limited to:

    a. Develop and maintain the City's CEMP.

    b. Develop appropriate contingency plans and standard operating guidelines in support of the CEMP.

c. Implement and maintain the City's Hazard Mitigation Plan

d. Facilitate inter-local agreements, mutual aid agreements, and contracts for emergency management assistance, as appropriate.

e. Coordinate with other local, county, state, and federal agencies to assure cohesive working relationships and compatible emergency plans.

f. Obtain and maintain City resources and equipment

g. Coordinate with volunteer organizations to assure cohesive working relationships and coordinated response.

h. Conduct training and exercise activities to enhance response capabilities.

i. Conduct educational outreach with identified vulnerable populations that reside in Shoreline.

j. Pre-register Volunteer Disaster Workers; typically there are members of the Shoreline CERT, Amateur Radio members from the Shoreline Auxiliary Communications Services, and the Shoreline Police Volunteers.

k. Provide Public Education to community members to enhance the readiness of individuals, neighborhoods, business, schools, and all community partners so they have the knowledge, skills, and equipment to take care of them during a prolonged disaster.

3. Response - Response activities following a disaster include providing assistance for casualties, seeking to reduce the occurrence of secondary damage, and enhancing the speed of recovery operations. Response actions taken by the City may include, but are not limited to:

a. Make appropriate notifications and initiate actions to place emergency plans into effect.

b. Activate and staff the EOC as required for the situation.

c. Disseminate public information and emergency warnings as appropriate.

d. Initiate actions necessary to preserve life, the environment, and property utilizing any and all available resources.

e. Utilize the ICS as established in the NIMS.

f. Carry out initial damage assessment and evaluate overall situation.

g. Restore essential services and facilities

h. Coordinate response and support functions with outside agencies and volunteer organizations.

i. Coordinate operations, logistics, and planning functions.

j. Compile event status information and report to appropriate agencies.

k. Prepare and maintain detailed documentation of events and activities.

l. Prepare Proclamation of Local Emergency as appropriate.

m. Initiate when resources allow outreach to known identified vulnerable populations to ensure what their unmet needs are.

n. Deploy Registered Disaster Workers as needed to support the response.

4. Recovery Phase – Recovery activities taken by the City are detailed in the City of Shoreline's Disaster Recovery Plan. Broad areas include, but are not limited to (Refer to the City of Shoreline Disaster Recovery Plan for further detail):

a. Appoint a Recovery Task Force Coordinator and task force members.

b. Carry out damage assessment functions and assess community needs.

b. Prioritize recovery projects and assign functions accordingly.

c. Coordinate recovery efforts and logistical needs with supporting agencies and organizations.

d. Prepare documentation of the event, including event log, cost analysis and estimated recovery costs.

f. Assess special community needs and provide information and assistance where appropriate.

g. If needed, facilitate the establishment of Federal and State disaster assistance offices to assist private business and citizens with individual recovery.

h. Evaluate and modify as needed, local zoning and building codes, development standards, permit requirements, etc.

i. Review and update all plans and documents associated with emergency preparedness and response in accordance with information obtained from the actual disaster, including hazard analysis, CEMP, SOGs, etc.

## C. Concurrent Implementation of Other Plans

The City utilizes this CEMP, which has been developed to emulate the Federal, State, and King County emergency plans, for all major disasters. All plans will be implemented simultaneously depending on the severity of the incident. The City's plan supersedes all other plans during operations within the City's boundaries. Any conflicts between plans will be reviewed on a case-by-case basis.

## D. Principal Incident Management Organizational Elements

Protection of life, public and private property, the economy, and natural resources are the primary concerns of City government. City personnel will take all possible actions, within the limits of available resources, to mitigate the effects of a disaster and to assist response and recovery.

When a disaster occurs, all necessary steps will be taken by appropriate personnel to alleviate suffering and protect life and property. The magnitude of the disaster will dictate the specific coordinated actions taken.

Normal organizational structures and reporting authority will be maintained as much as possible given the severity of the situation.

Citywide emergency management activities will be coordinated by the EOC. Direction and control of overall activities occur in a linear progression beginning with the Director of Emergency Management. Policy recommendations flow from the Director of Emergency Management to the City Council for policy actions as appropriate.

Overall direction, control and coordination will normally be conducted through the EOC in order to support the overall community response to the disaster and to best coordinate efforts with County, State and Federal Agencies (see ESF #5 – Emergency Management).

The City's EOC was developed to be activated at various levels as appropriate to coordinate a sufficient level of disaster operations. The level of staffing will be determined by the Director of Emergency Management (see ESF #5 Emergency Management).

The Incident Commander (IC) will be responsible for the management and coordination of field activities. The IC will be supported by the EOC and its staff to facilitate an efficient and effective response.

The field command will act in coordination with the EOC and in accordance with the City's CEMP, the NIMS and the National Response Framework (NRF). All City departments will coordinate activities with the IC and will utilize the field command post to coordinate with the EOC. The City recognizes that a single field command post may not be sufficient and will utilize area command posts as needed and will operate within a joint field command post when appropriate.

## E. Emergency Response and Support Teams (Field Level)

Specialized teams, such as the Seattle Fire Hazardous Materials Team, the Eastside Hazardous Materials Team and the State Hazard Mitigation Assistance Team (SHMAT), may be available to respond to incidents within the city. The special response teams are designed to assist with incident management, set up emergency response facilities, or provide specialized expertise and capabilities. These teams should be trained and certified to the standards published by the NIMS Integration Center. Response and support teams are available from various jurisdictions within King County, the State of Washington and the Federal government. Teams from King County Zone 1 are available through the Washington Mutual Aid System and the King County Regional Disaster Framework and can be activated or requested either directly from the agency or through the King County ECC or facilitated by the Ste of Washington. Resource teams from outside Zone 1 may be requested King County ECC or directly from the Washington Emergency Management Department (EMD).

## F. Defense Support of Civil Authorities

All defense related support will be coordinated through the KC ECC and the Washington EMD to access the Washington National Guard. Activation of the Washington National Guard requires Governor's approval before those resources can be deployed within the state. Other defense resources can be requested from the Department of Defense (DOD) through the Washington EMD. DOD resources can only be utilized within the United States for incidents of national significance.

## G. Law Enforcement Assistance

Law enforcement assistance may be available from the King County Sheriff's Office (KCSO). Requests for assistance will be submitted to the Shoreline Police Department for coordination with the KCSO. Mutual Aid can be requested of area Police Departments. The Washington State Patrol may also be available to assist the City's Police Department and should be coordinated through the Washington EMD or through the statewide mutual aid compact.

Federal law enforcement agencies may be requested to provide public safety and security support during incidents of national significance. ESF #13 – Public Safety, Law Enforcement and Security provides further guidance on the integration of public safety and security resources to support the full range of incident management functions.

# V. INCIDENT MANAGEMENT ACTIONS

## A. Actions

This section describes incident management actions ranging from initial threat identification to early coordination efforts to assess and disrupt the threat, to preparatory activation of the Emergency Support Functions (ESF) structure and deployment of resources in support of incident response and recovery operations. These actions do not necessarily occur in sequential order; many may be undertaken concurrently in response to single or multiple threats or incidents.

It is the policy of the City that all departments prepare and maintain an updated list of its personnel, facilities and equipment resources. Any or all of these resources may be called upon during disaster and emergency situations.

All incident management actions within the city will be conducted in accordance with the NIMS and will utilize the ICS.

The City will be required by State and Federal agencies to submit reports on disaster situations with information concerning nature, magnitude and impact for use in evaluating needs and coordinating appropriate response resources and services. These reports include but are not limited to:

1. Situation Reports

2. Proclamation of Local Emergency

3. Requests for Assistance

4. Damage Assessment Reports

5. Mitigation and Recovery Costs

No services or assistance will be denied on the basis of race, color, national origin, religion, sex, economic status, age or disability.

Local activities pursuant to the Federal/State Agreement for major disaster recovery will be carried out in accordance with RCW 49.60-Laws Against Discrimination and Title 44, CFR 205.16 - Nondiscrimination. Federal disaster assistance is conditional upon compliance with this code.

## B. Notification and Assessment

The City will communicate information regarding actual or potential threats either natural or manmade to the Federal Emergency Management Agency (FEMA) and/or Homeland Security Operations Center (HSOC) through established reporting mechanisms in coordination with county and state government officials.

Upon submitting notification to the KCSO, King County Emergency Coordination Center (KC ECC), Washington State Patrol and the Washington EMD, the City will make appropriate notifications to City personnel and initiate actions to initiate emergency plans. The EOC and required staff may be activated at the appropriate level required by the situation. The EOC will disseminate emergency warnings as appropriate and will utilize all resources available to accomplish this task, including but not limited to the Emergency Alert System.

## C. Activation

Once the City is made aware of a threat or potential threat, the City Manager, as Director of Emergency Management, will determine the need to activate components of this CEMP to conduct further assessment of the situation, initiate activation of the EOC, and/or coordinate information with regional and county agencies. Additionally, the Director of Emergency Management will determine whether the threat or potential threat meets the criteria established for a Proclamation of Local Emergency.

Designated staff will report to the EOC to coordinate response efforts and support field operations. All or part of the EOC may be activated during a disaster. The level of activation will be determined by the nature and extent of the disaster.

## D. Requests for Assistance

When a major emergency or disaster occurs, it is anticipated that City departments and other responding agencies will organize their areas of responsibilities into manageable units, assess damages, and determine needs. If department resources cannot meet the needs created by the disaster, additional assistance may be requested through existing mutual aid agreement and mutual orders of understanding. In the event of a Proclamation of Local Emergency, the deployment of resources will be coordinated through the EOC. Resources to be utilized to support City operations may be placed at staging areas until specific assignments can be made

In the event the situation exceeds or is expected to exceed the resources within the city and those provided through mutual aid, the City may request assistance through the Zone 1 Coordinator. If resources are not available within Zone 1, the request can be made to KC ECC and/or the Washington EMD.

## E. Pre-Incident Actions (Prevention)

The EOC facilitates information sharing activities to enable the assessment, prevention, or resolution of a potential incident and coordinates with appropriate agencies and jurisdictions as required during developing situations to utilize resources and authorities to prevent an incident, as well as to initiate appropriate preparatory and mitigating measure to reduce vulnerabilities.

The preventive actions within the city are taken by first responders and City government officials and include efforts to protect the public and minimize damage to property and the environment, such as:

Public Health and Safety – Initial safety efforts focus on actions to detect, prevent or reduce the impact to public health and safety. Such actions can include environmental analysis, plume modeling, evacuations, emergency sheltering, air monitoring, decontamination, emerging infectious disease tracking, emergency broadcasts, etc. These efforts may also include public health education; site and public health surveillance and testing procedures; and immunizations, prophylaxis, and isolation or quarantine for biological threats coordinated by Seattle-King County Public Health Department.

Responder Health and Safety – The safety and health of responders is a high priority for the City. Actions that are essential to limit risks include full integration of deployed health and safety assets and expertise; risk assessments based upon timely and accurate data; and situational awareness that considers responder and recovery worker safety.

Property and the Environment – Responders may also take incident mitigation actions to protect public and private property and the environment. Such actions may include sandbagging in anticipation of a flood or booming of environmentally sensitive areas in response to a potential oil spill.

The City will coordinate with other local, county, state and federal agencies to assure cohesive working relationships and compatible emergency plans and will coordinate with volunteer organizations to assure cohesive working relationships and coordinated response.

Training will be provided to City personnel on a routine basis to enhance response capabilities and public education will be offered to enhance citizen self sufficiency.

## F. Response Actions

Once an incident occurs, the priorities shift from prevention, preparedness, and incident mitigation to immediate and short-term response activities that are necessary to preserve life, property, the environment, and the social, economic, and political structure of the City. In the context of a terrorist threat, simultaneous activities by the State and Federal government are initiated to assess regional and national-level impacts, as well as to assess and take appropriate action to prevent and protect against other potential threats.

Response actions may include but are not limited to, immediate law enforcement, fire, ambulance, and emergency medical service actions; emergency flood fighting; evacuations; transportation system detours; emergency public information; actions taken to minimize additional damage; urban search and rescue; the establishment of facilities for mass care; the

provision of public health and medical services, food, ice, water and other emergency essentials; debris clearance; the emergency restoration of critical infrastructure; control, containment, and removal of environmental contamination; and protection of responder health and safety. The use of mutual aid, the King County Regional Disaster Framework, and WAMAS are all additional ways to garner resources for response activities.

During the response to a terrorist event, law enforcement actions to collect and preserve evidence and to apprehend perpetrators are critical. These actions take place simultaneously with response operations necessary to save lives and protect property and are closely coordinated to facilitate the collection of evidence without impacting ongoing life-saving operations.

In instances where emergency work is performed to protect life and property, requirements for environmental review and permits may be waived or orally approved as provided in the State Environmental Policy Act, Hydraulics Act, Forest Practices Act, Shoreline Growth Management Act, and Flood Control Act.

Following a Proclamation of Local Emergency, the Director of Emergency Management has the authority to commandeer the services and equipment of citizens as necessary in response to the disaster. Those citizens are entitled to all privileges, benefits and immunities provided for emergency workers under state and federal emergency management regulations, RCW 38.52.110.

The City Manager or designee is authorized to contract with any person, firm, corporation or entity to provide construction or work, on an agreed upon cost basis during emergency or disaster response operations and throughout the recovery and mitigation operations, in accordance with RCW 38.52.390. This process allows City employees to operate within their normal roles and perform the day-to-day functions of local government as much as possible given the severity of the disaster.

## G. Recovery Actions

All recovery actions within the city will be coordinated as outlined in the City of Shoreline Disaster Recovery Plan. The City Manager will appoint a Recovery Coordinator to manage the City's recovery process prior to deactivation of the City's EOC. The EOC staff will prioritize recovery actions based on damage assessments and other information provided from the incident command posts throughout the city.

After the EOC is deactivated the City Manager will appoint a Recovery Task Force to assist the Recovery Coordinator with managing the ongoing aspects of recovery. The Task Force will be made up of key City staff people and

representatives from key organizations and community groups who have vested interest in the community's recovery. The task Force duties are outlined in the City of Shoreline's Disaster Recovery Plan.

The City recognizes recovery as the development, coordination and execution of services, site restoration plans, and the reconstitution of government operations and services through individual, private-sector, nongovernmental and public assistance programs.

The City will utilize resources available through King County Office of Emergency Management, Washington EMD, and, in the event of an Incident of National Significance, the Federal Joint Field Office (JFO) to coordinate available resources to assist with recovery efforts.

Repair and restoration of damaged facilities may require a critical areas alteration permit prior to final project approval, in compliance with applicable city, state, and federal regulations.

Properties of historic significance and archeological sites are protected by law. Non-time critical missions and recovery actions affecting these sites will be coordinated with the Washington Office of Archeology and Historic Preservation.

## H. Mitigation Actions

The City recognizes the need to use an all-hazard approach to mitigation. Within the City, mitigation involves reducing or eliminating long-term risk to people and property from hazards and their side effects. Following a disaster, the emergency management organization within the City will coordinate mitigation efforts with the King County OEM and the Washington EMD. In the event of a large scale disaster, the City will coordinate with the JFO which is the central coordination point among federal, state, local, and tribal agencies and non-governmental agencies for beginning the process that leads to the delivery of mitigation assistance programs.

If public assistance is needed after an incident, the City will work with the King County OEM and Washington EMD to provide public assistance programs to the residents of Shoreline. If the disaster qualifies for a Presidential Disaster Declaration, the City will also utilize the JFO's Community Recovery and Mitigation Branch which is responsible for coordinating the delivery of all mitigation programs within the affected area, including hazard mitigation for:

i. Grant programs for loss reduction measures
ii. Delivery of loss reduction building-science expertise;

iii. Coordination of federal flood insurance operations and integration of mitigation with other program efforts;
iv. Conducting flood recovery mapping to permit expedited and accurate implementation of both recovery and mitigation programs
v. Predictive modeling to protect critical assets
vi. Early documentation of losses avoided due to previous hazard mitigation measures
vii. Community education and outreach necessary to foster loss reduction.

In addition, City officials and the EOC staff will work with King County OEM and the Washington EMD to develop a long-term recovery strategy for the City.

### I. Demobilization

Once response and recovery efforts for an event requiring activation of the CEMP and/or the EOC have been completed all aspects of the response and recovery efforts will be transitioned back into normal day-to-day operations. This process will occur in stages and resources will be returned to normal functions once their responsibilities and/or tasks are completed or transferred to other personnel or groups. The EOC will remain activated until all resources have been demobilized and returned to their previous condition or previous position.

As a component of demobilization, incident debriefing will occur as soon as possible and an After Action Report will be developed to detail operational successes, problems, and key issues affecting incident management.

## VI. Ongoing Plan Management and Maintenance

### A. Coordination

All departments participate in the City's emergency management organization for the ongoing management and maintenance of the CEMP. All City departments will have a responsibility in the coordination of policy, planning, training, equipping, and other preparedness requirements related to the CEMP.

### B. Plan Maintenance

The Emergency Management Coordinator, under the direction of the Director of Emergency Management, will serve as the key person for the coordination of plan management and maintenance. The CEMP will be reviewed and updated

periodically as required to incorporate new Presidential directives, legislative changes and procedural changes based on lessons learned from exercises and actual events, but at a minimum of every four years as specified in RCW 38.52. This section establishes procedures for interim changes and full updates of the CEMP.

Types of changes – Changes include additions of new or supplementary material and deletions. No proposed change should contradict or override authorities or other plans contained in City resolutions or ordinance or county, state, or federal statute or regulation.

Coordination and approval – Any City department with assigned responsibilities under the CEMP may propose a change to the plan. The EMC will coordinate proposed modifications with primary and support departments and other stakeholders, as required. The EMC will coordinate review and approval for proposed modifications by the Director of Emergency Management, and submit revised/updated CEMP to WSEMD for review and filing.

### C. NIMS Integration

In accordance with the NIMS, the City's emergency management organization will utilize the NIMS Integration Center to ensure that the City's emergency management activities are in full compliance with federal requirements relating to incident management. The City will utilize the NIMS Integration Center's standards, guidelines, and protocols in preparedness and response activities unless those standards, guidelines, and protocols contradict established resolutions and ordnances of the City.

## VII. Appendices

### A. Definitions

### B. Acronyms

### C. Authorities and References

### D. Training, Drills and Exercises

### E. Distribution List

### F. Record of Changes

A CENTRAL COMPUTERIZED ENFORCEMENT SERVICE SYSTEM (ACCESS) - Statewide law enforcement data network controlled and administered by the Washington State Patrol. Provides capability to send warning and notification of emergencies from state to local jurisdictions.

ACCESS CONTROL POINT (ACP) - Road intersection or other logistically viable point on the relocation and food control boundaries, which enable law enforcement and other emergency workers to maintain access control of the respective area(s).

ADJUTANT GENERAL – TAG or Adjutant General is the senior military officer and de facto commander of a state's military forces. In WA State they are the commander of all Washington Army and Air National Guard forces and Director of the state's Emergency Management and Enhanced 911 programs.

ADVANCE ELEMENT OF THE EMERGENCY RESPONSE TEAM (ERT-A) - The portion of the Federal Emergency Response Teams that is the first federal group deployed to the field to respond to a disaster.

AERIAL RADIOLOGICAL MONITOR - A radiological monitor who utilizes aircraft and specialized aerial radiological instruments to acquire radiation exposure rate data on large areas at or between locations of special interest.

AEROSOL - Fine liquid or solid particles suspended in a gas such as fog or smoke.

AIR FORCE RESCUE COORDINATION CENTER (AFRCC) - The Rescue Coordination Center (RCC) operated by the U.S. Air Force at Langley Air Force Base, Virginia, which coordinates the federal response in search and rescue (SAR) operations within the Inland Search and Rescue Region. This Region is defined as the 48 contiguous states (see RCC definition).

AIR SEARCH AND RESCUE - Search and rescue operations for aircraft in distress, missing, or presumed down are conducted by the Washington State Department of Transportation, Aviation Division, under authority of Revised Code of Washington (RCW) 47.68 and Washington Administrative Code (WAC) 468.200. Related land SAR operations, including the rescue and/or recovery of victims of a downed aircraft incident, are the responsibility of the chief law enforcement officer in whose jurisdiction the incident site is located. Air search and rescue does not include air support of land search and rescue operations conducted under authority of Chapter 38.52 RCW. See also SEARCH AND RESCUE.

AMERICAN RED CROSS - Non-Profit organization that can provide Mass Care in disasters and/or emergencies. Also called Red Cross.

AMBULANCE STAGING: Designated parking area for patient transport vehicles. Operators and attendants will not leave their vehicles.

ANAEROBIC - Pertaining to a microorganism that can live and grow in the absence of oxygen.

ANIMAL - any live or dead dog, cat, nonhuman primate, guinea pig, hamster, rabbit, or any other warm blooded animal, which is being used, or is intended for use for research, teaching, testing, experimentation, exhibition purposes, or as a pet. This term excludes: Birds; rats of the genus Rattus and mice of the genus Mus bred for use in research; horses not used for research purposes; other farm animals including but not limited to livestock or poultry used or intended for use as food or fiber; livestock or poultry used or intended for use for improving animal nutrition, breeding, management, or production efficiency, or for improving the quality of food or fiber. With respect to a dog, the term means all dogs, including those used for hunting, security, or breeding purposes.

ALTERNATE CARE FACILITY: Location, preexisting or created, that serves to expand the capacity of a hospital in order to accommodate or care for patients when an incident overwhelms local hospital capacity. In an MCI, patients will be triaged and transported to the hospital not the ACF for definitive care.

ANTIBIOTIC - A substance that inhibits the growth of or kills microorganisms.

ANTHRAX - An acute bacterial disease that usually affects the skin, but which may also involve the intestinal or respiratory tract. Bacillus anthracis, the agent that causes Anthrax, is usually transmitted to humans through contact with infected animals or animal products. Depending on the mechanism of transmission, a cutaneous (skin) form (contact), a gastrointestinal form (food borne), or pulmonary form (airborne) may develop. Antibiotics are necessary for treatment.

AUTHORIZED OFFICIAL - An individual authorized under Chapter 38.52 RCW and
Chapter 118.04 WAC to direct the activities of emergency workers. These individuals are The Adjutant General of the Military Department or designee, the Director for the Emergency Management Division or designee, the Director or designee of a local emergency management agency, the chief law enforcement officer or designee of a political subdivision, or other such officials as identified in ESF 9 - Search and Rescue of a local comprehensive emergency management plan.

AUTHORIZED ORGANIZATION - A state or local agency authorized under
Chapter 38.52 RCW and Chapter 118.04 WAC to register and/or employ emergency workers. These agencies are: the Military Department, Emergency Management Division, local jurisdiction emergency management agencies, and law enforcement agencies of political subdivisions.

BASE**:** Designated parking area for apparatus that are assigned a task or function during an incident.

BACTERIA - Single celled organisms that multiply by cell division and that can cause disease in humans, plants or animals. Plural of bacterium

BIOLOGICAL WARFARE - The intentional use of biological agents as weapons to kill or injure humans, animals, or plants, or to damage equipment.

BLISTER AGENT (vesicants) - Category of chemical warfare agents that damage any tissue they contact. Vapor can affect the eyes, respiratory tract, and blister the skin. They may produce lethalities, but skin damage is their main casualty-causing effect. All these agents are persistent and can poison food and water, make other supplies and installations dangerous, and restrict the use of contaminated terrain. Blister agents include mustards, arsenicals, and urticants.

BLOOD AGENT - Cyanide-containing compounds that are absorbed into the body primarily by breathing. They poison the body's cytochrome oxidase system, preventing cell respiration and the normal transfer of oxygen from the blood to body tissues. Blood agents are rapid acting, causing effects within seconds and death within minutes. Typical agents include hydrogen cyanide (AC), cyanogen chloride (CK), and arsine (SA). All are highly volatile and therefore non-persistent even at low temperatures.

BRUCELLOSIS - A disease caused by one of several Brucella species that is characterized by fever, night sweats, anorexia, headache and back pain. Brucella is found naturally worldwide. Associated with infectious abortions in animals, the six species of Brucella are linked to chronic infections in animals and pose an occupational hazard to those who work with animals. Antibiotics are necessary for treatment.

CATASTROPHE - An expected or unexpected event in which a community, because of the severity of the event, is unable to use its resources or the need for resources has greatly exceeded availability disrupting the social or economic structure of the community, preventing the fulfillment of the community's essential functions, and rendering the community is incapable of responding to or recovering from the effects of the event without massive and prolonged outside help.

CACHE - A predetermined complement of tools, equipment, and/or supplies stored in a designated location, available for incident use.

CATASTROPHIC INCIDENT - Any natural or manmade incident, including terrorism, which results in extraordinary levels of mass casualties, damage, or disruption severely affecting the population, infrastructure, environment, economy, national morale, and/or government functions.

CENTRAL NERVOUS SYSTEM DEPRESSANTS - Compounds that have the predominant effect of depressing or blocking the activity of the central nervous system. The primary mental effects include the disruption of the ability to think, sedation, and lack of motivation.

CENTRAL NERVOUS SYSTEM STIMULANTS - Compounds that have the predominant effect of flooding the brain with too much information. The primary mental effect is loss of concentration, causing indecisiveness and the inability to act in a sustained, purposeful manner.

CHAIN OF COMMAND - A series of command, control, executive, or management positions in hierarchical order of authority.

CHEMICAL ACCIDENT/INCIDENT RESPONSE AND ASSISTANCE (CAIRA) PLAN - A plan that spells out how an Army installation will handle chemical material events. This on-post plan must be integrated with off-post plans.

CHEMICAL AGENT - A chemical substance that is intended for use in military operations to kill, seriously injure, or incapacitate people through its physiological effects. Excluded from consideration are riot control agents, smoke, and flame materials. The agent may appear as a vapor, aerosol, or liquid. It can be either a casualty/toxic agent or an incapacitating agent.

CHEMICAL STOCKPILE DISPOSAL PROGRAM (CSDP) - The congressionally mandated program that requires the Army to dispose of all its unitary chemical agents by the year 2004. The preferred mode of disposition is on-post incineration.

CHEMICAL STOCKPILE EMERGENCY PREPAREDNESS PROGRAM (CSEPP) – A federally-funded program established by Congress in 1988 to provide the "maximum possible protection" for citizens near the nation's eight chemical weapons storage sites, including the Umatilla Army Depot. This protection is provided through emergency planning, early warning systems and public education.

CHOKING AGENT - Compounds that injure an unprotected person chiefly in the respiratory tract (the nose, throat and particularly the lungs). In extreme cases, membranes swell, lungs become filled with liquid, and death results from lack of oxygen; thus, these agents "choke" an unprotected person. Choking agents include phosgene, diphosgene, and chlorine.

CLAIMANT - The individual making a claim or their legal representative.

COLORED FLAGGING: A color coded identification system used to designate medical priority of patients during a Multiple Casualty Incident.

- Red Flagging (immediate)
- Yellow Flagging (delayed)
- Green Flagging (minor)
- Striped (black/white) Flagging (deceased)
- White Flagging (decontaminated/clean patient)

COMMON PROGRAM CONTROL STATION (CPCS) - A broadcasting station in a local operational area that has special communications links with appropriate authorities (e.g. National Weather Service, and local jurisdiction Emergency Operations Centers). Provides common emergency program for its operational area.

COMMUNITY PICK-UP POINT – Location where government transportation dependent evacuees congregate in their local or neighborhood areas to access short haul transportation to convey them to the embarkation site.

COMPANION ANIMAL - not a legally defined, but is accepted as another term for pet.

COMPREHENSIVE EMERGENCY MANAGEMENT NETWORK (CEMNET) - Dedicated 2-way Very High Frequency (VHF) low-band radio system. Provides direction and control capability for state and local jurisdictions for administrative use, and during an emergency or disaster. This is an emergency management net belonging to and managed by the Washington State Military Department, Emergency Management Division.

CONFINED SPACE - Space large enough for a body to work with limited entry and egress. Not designed for continuous habitation.

CONGREGATE CARE CENTER - A public or private facility that is predesignated and managed by the American Red Cross during an emergency, where evacuated or displaced persons are housed and fed.

CONSEQUENCE MANAGEMENT - Measures to alleviate the damage, loss, hardship and/or suffering caused by emergencies. It includes measures to restore essential government service, protect public health and safety, and provide emergency relief to affected governments, businesses and individuals.

CONTAGIOUS - Capable of being transmitted from one person to another.

COORDINATE - To advance systematically an analysis and exchange of information among principals who have or may have a need to know certain information to carry out specific incident management responsibilities.

COUNTER-TERRORISM - Strategic and/or tactical measures taken, in a collaborative effort, to prevent or respond to acts of terrorism.

CRISIS MANAGEMENT - MEASURES to identify, acquire, and plan the use of resources needed to anticipate, prevent, and/or resolve a threat, act, or incident. In a terrorist incident, crisis management includes intelligence, surveillance, tactical operations, negotiations, forensics, investigation, agent identification, search, render safe procedures, transfer and disposal, limited decontamination, and assurance of public health and safety.

CUTANEOUS - Pertaining to the skin.

DECONTAMINATION - The process of making people, objects, or areas safe by absorbing, destroying, neutralizing, making harmless, or removing the hazardous material.

DEBARKATION SITE – Site designated to receive government transportation dependent evacuees. A debarkation site may be designated as air, rail, bus or maritime, as required. Evacuee's arrival at the debarkation site may be noted in the tracking system being uses for the evacuation.

DEFENSE COORDINATING OFFICER (DCO) - Individual supported and provided by the Department of Defense to serve in the field as the point of contact to the Federal Coordinating Officer and the Emergency Support Functions regarding requests for military assistance. The Defense Coordinating Officer and staff coordinate support and provide liaison to the Emergency Support Functions.

DEFENSE SUPPORT OF CIVIL AUTHORITIES – DSCA is the process by which United States military assets and personnel can be used to assist in missions normally carried out by civil authorities.

DEPARTMENT OF NATURAL RESOURCES (DNR) EMERGENCY COORDINATION CENTER - Site where DNR's Emergency Management Team accomplishes the duties assigned in the Department Emergency Management Plan. The primary office is the Fourth Floor Dispatch Office, 1111 Washington Street Southeast, Olympia, Washington.

DEPARTMENT OF NATURAL RESOURCES EMERGENCY OPERATIONS ADMINISTRATOR - The individual with the primary responsibility for the operations of the Department of Natural Resources Emergency Coordination Center and the mobilization of department assets.

DEPLETED URANIUM AD-38 - Uranium with a concentration of Uranium-235 smaller than that found in nature (0.711 percent). It is largely a byproduct ("tails") of the Uranium enrichment process. This material is essentially not harmful to human health. It is often found in aircraft as counterweights and in boats as ballast material. It is also used in anti-tank or armor-piercing ammunition to enhance penetration.

DIRECTION AND CONTROL EXERCISE - An activity in which emergency management officials respond to a simulated incident from their command and control centers. It mobilizes emergency management and communications organizations and officials. Field response organizations are not normally involved.

DISASTER - An event expected or unexpected, in which a community's available, pertinent resources are expended, or the need for resources exceeds availability, and in which a community undergoes severe danger, incurring losses so that the social or economic structure of the community is disrupted and the fulfillment of some or all of the community's essential functions are prevented.

DISASTER MEDICAL CONTROL CENTER - The DMCC (also known as Hospital Control) is the Hospital responsible for providing Transport with a coordinated distribution of patients to area hospitals based on patient needs and the hospitals capabilities. For the purpose of this plan, Harborview Medical Center will be the primary DMCC for King County with Overlake Hospital as the backup.

DISASTER RECOVERY CENTER (DRC) - A temporary facility where, under one roof, representatives of federal agencies, local and state governments, and voluntary relief

organizations can explain the disaster recovery programs and process applications from businesses.

DISASTER RECOVERY MANAGER (DRM) - This is a function, rather than position, to which the Federal Emergency Management Agency Regional Director delegates the authority to administer the Federal Emergency Management Agency response and recovery programs. The function oversees the physical obligation from the President's Disaster Relief Fund.

DISASTER SEARCH AND RESCUE - Large scale search and rescue operations conducted as a result of a natural or technological (human-caused) emergency, disaster, or catastrophe.

DIRECT EFFECTS - The effect classified as "direct" includes flash, blast, thermal radiation, electromagnetic pulse, and initial nuclear radiation.

DIRECT FEDERAL ASSISTANCE - Emergency work or assistance, beyond the capability of state and local jurisdictions, which is performed by a federal agency under mission assignment from Federal Emergency Management Agency.

DOSIMETER - A radiation detection device that can measure accumulated radiation dose. The device could be a film badge, thermo luminescent dosimeter (TLD), or an electrostatic pocket dosimeter. Different dosimeter designs are required to measure gamma radiation, neutron radiation, etc.

ECONOMIC RECOVERY - Involves economic impact assessment to the City and the business community, support to small businesses from federal and other sources, and economic revitalization planning;

EMBARKATION SITE – Evacuation support location providing reception, mass care (nourishment and hydration), sanitation (including accessible restrooms), first aid, processing, and vehicle staging and boarding areas. In addition, there must be a pet processing area, outdoor pet recreation and sanitation areas, and separate areas within the facility for household pets and their owners.

EMERGENCY - An expected or unexpected event involving shortages of time and resources that places life, property, or the environment in danger and requires response beyond routine incident response resources.

EMERGENCY ALERT SYSTEM (EAS) - Established to enable the President, federal, state, and local jurisdiction authorities to disseminate emergency information to the public via the Commercial Broadcast System. Composed of amplitude modulation (AM), frequency modulation (FM), television broadcasters, and the cable industry.

EMERGENCY MANAGEMENT or COMPREHENSIVE EMERGENCY MANAGEMENT - The preparation for and the carrying out of all emergency functions other than functions for which the military forces are primarily responsible, to mitigate, prepare for, respond to, and recover

from emergencies and disasters, to aid victims suffering from injury or damage resulting from disasters caused by all hazards, whether natural or technological, and to provide support for search and rescue operations for persons and property in distress.

EMERGENCY OPERATIONS CENTER (EOC) - A designated site from which government officials can coordinate emergency operations in support of on-scene responders.

EMERGENCY MEDICAL SERVICES - This term refers to medical treatment and care that may be rendered at the scene or any medical emergency or while transporting any patient in an ambulance to an appropriate medical facility, including ambulance transportation between medical facilities. (RCW 70.168.015)

EMERGENCY PLANNING ZONES (EPZs) - The areas for which emergency plans are made to assure that prompt and effective action can be taken to protect the public in the event of a radiological or chemical emergency. In Washington State the first zone is the plume exposure emergency planning zone with an approximate radius of ten miles from the nuclear power plant or chemical depot. The second zone is the ingestion exposure EPZ with an approximate radius of 50 miles. Immediate Response Zone (IRZ) and Protective Action Zone (PAZ) are associated with nuclear and chemical storage facilities.

EMERGENCY SUPPORT FUNCTION (ESF) – The functional approach that groups the types of assistance that a state is most likely to need, (e.g. mass care, health and medical services) as well as the kinds of federal operations support necessary to sustain state response actions (e.g., transportation, communications). ESFs are expected to support one another in carrying out their respective missions.

EMERGENCY WORKER - Emergency worker means any person including but not limited to an architect registered under Chapter 18.08 RCW or a professional engineer registered under Chapter 18.43 RCW, who is registered with a local emergency management organization or the department and holds an identification card issued by the local emergency management director or the department for the purpose of engaging in authorized emergency management activities or is an employee of the state of Washington or any political subdivision thereof who is called upon to perform emergency management activities.

ENDOGENOUS - Produced or originating from within the cell or organism. Concerning spore formation within the bacterial cell.

ENGINEER - Any person registered under Chapter 38.52 RCW as an emergency worker who is an architect or professional engineer as registered under Chapters 18.08 and
18.43 RCW respectively.

ENRICHED URANIUM - Uranium in which the abundance of the Uranium-235 isotope has been increased above the natural amount (0.711 percent), Uranium-235.

EVACUATION COORDINATION TEAM – The mission of the Evacuation Coordination Team is to provide for the protection of life or property by removing endangered persons and property from potential or actual disaster areas of less danger through the successful execution of evacuation procedures. (NIMS)

EVACUATION LIAISON TEAM – Provides support in State and local emergency response efforts by compiling, analyzing, and disseminating traffic-related information that can be used to facilitate the rapid, efficient, and safe evacuation of threatened populations. Primarily operates in the State or local EOC as an extension of ESF #1 – Transportation. (NIMS)

EVACUATION - Evacuation can be defined as the removal of persons from the area at risk prior to, during, or after an emergency's impact.

EVACUEE – A member of a region or area that has been advised to leave a threatened or affected area.

EVIDENCE SEARCH - An unscheduled, non-emergency training activity utilizing emergency worker skills to look for evidentiary materials resulting from criminal activity.

EXOTIC ANIMAL - any animal not identified in the definition of "animal" provided in this part that is native to a foreign country or of foreign origin or character, is not native to the United States, or was introduced from abroad. This term specifically includes animals including but not limited to lions, tigers, leopards, elephants, camels, antelope, anteaters, kangaroos, water buffalo, and species of foreign domestic cattle such as Ankole, Gayal, and Yak.

EXPLOSIVE ORDNANCE DISPOSAL (EOD) - The detection, identification, field evaluation, rendering-safe, and/or disposal of explosive ordnance which has become hazardous by damage or deterioration when the disposal of such explosive ordnance is beyond the capabilities of personnel assigned to routine disposal.

EXTRACTION: The process of moving patients out of the hot zone to the treatment and transport areas.

EXTRICATION: The process of removing a patient from an entrapment.

FALLOUT PROTECTION FACTOR (FPF) - Fallout Protection Factor is a numerical factor (ratio) of gamma radiation exposure at an unprotected location to exposure at a protected location. It is a calculated value suitable as an indictor of relative protection.
FEDERAL COORDINATING OFFICER (FCO) - The individual appointed by the Federal Emergency Management Agency Director (by delegation of authority from the President) to coordinate assistance in a federally-declared disaster.

FARM ANIMAL - any domestic species of cattle, sheep, swine, goats, llamas, or horses, which are normally and have historically been kept and raised on farms in the United States, and used or intended for use as food or fiber, for improving animal nutrition, breeding, management,

production efficiency, or for improving the quality of food or fiber. This term also includes animals such as rabbits, mink, and chinchilla when they are used solely for purposes of meat or fur, and animals such as horses and llamas when used solely as work and pack animals.

FEDERAL - Of or pertaining to the Federal Government of the United States of America.

FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA) - Agency created in 1979 to provide a single point of accountability for all federal activities related to disaster mitigation and emergency preparedness, response, and recovery. Federal Emergency Management Agency manages the President's Disaster Relief Fund and coordinates the disaster assistance activities of all federal agencies in the event of a Presidential Disaster Declaration.

FEDERAL EMERGENCY MANAGEMENT AGENCY-STATE AGREEMENT - A formal legal document between Federal Emergency Management Agency and the affected state that describes the understandings, commitments, and binding conditions for assistance applicable as a result of a declaration by the President. It is signed by the Federal Emergency Management Agency Regional Director and the Governor. The agreement establishes the disaster incident period, the state and local jurisdiction commitment, and the financial grant requirements as administered by Federal Emergency Management Agency through the state.

FEDERAL EMERGENCY RESPONSE TEAM - An interagency team consisting of the lead representative from each federal department or agency assigned primary responsibility for an Emergency Support Function and key members of the FCO's staff, formed to assist the FCO in carrying out his/her coordination responsibilities. The Emergency Response Team provides a forum for coordinating the overall federal response, reporting on the conduct of specific operations, exchanging information, and resolving issues related to Emergency Support Functions and other response requirements. Emergency Response Team members respond to and meet as requested by the FCO. The Emergency Response Team may be expanded by the FCO to include designated representatives of other federal departments and agencies as needed.

FEDERAL INFORMATION PROCESSING STANDARD (FIPS) - Pre-assigned numbers by the Federal government to identify local jurisdictions throughout the nation. The code for any location consists of eight (8) digits.

FEDERAL RADIOLOGICAL MONITORING AND ASSESSMENT PLAN (FRMAP) - (formerly known as the Interagency Radiological Assistance Plan) - A plan developed, coordinated and maintained by the U.S. Department of Energy for provision of federal radiological monitoring and assessment support during a response to a nuclear emergency.

FEDERAL RADIOLOGICAL EMERGENCY RESPONSE PLAN - The plan that describes the Federal response to the radiological and on-site technical aspects of an emergency in the United States and identifies the lead federal agency for an event. The events include one involving the Nuclear Regulatory Commission or state licensee, the U.S. Department of Energy or the U.S. Department of Defense property, a space launch, occurrence outside the United States but

affecting the United States, and one involving radium or accelerator-produced material. Transportation events are included in those involving the U.S. Nuclear Regulatory Commission, state licensee, U.S. Department of Energy, or U.S. Department of Defense.

FIELD ASSESSMENT TEAM (FAST) - A designated team of technical experts from federal, state, and local emergency management organizations that are alerted and deployed to a disaster to augment or supplement state and local jurisdiction assessment capabilities.

FIELD TREATMENT SITE**:** Area designated or created by emergency officials for the congregation, triage, medical treatment, holding, and/or evacuation of casualties following a multiple casualty incident.

FIELD TRIAGE**:** The process of rapidly categorizing a large number of patients according to their severity of injury in order to prioritize their extrication and/or extraction to the treatment area. Various forms of triage used to determine the severity of a patients injuries and condition. Examples are:

- **ABC Field Triage:** An algorithm which allows for the rapid categorization of patients dependant on the assessment of Awake, Breathing, and Circulation.
- **RPM Triage:** A form of triage that has the first responders evaluate a patient's status based on **R**espirations, **P**ulse, and **M**entation.
- **Sacco Triage:** Triage system which incorporates the Injury Severity Score to define patients according to surgery survivability, not just their basic vital signs.
- **Sick/ Not Sick:** The Sick/Not Sick approach to triage utilizes the EMT's knowledge and experience to rapidly evaluate a patient's physiological status. The sick patient is categorized as Red. The not sick patient is considered Green if they are able to get up and walk on their own, and Yellow if they have injuries preventing moving themselves. (Seattle/ King County 2010 EMT Patient Care Guidelines) It is understood that the Sick/Not Sick model encompasses the ABC, START, RPM, and other triage systems used to determine the patient's severity and transport priority.
- **START Triage:** An acronym for **S**imple **T**riage **a**nd **R**apid **T**reatment, and is defined as being a method that first responders use to effectively and efficiently evaluate all of the victims during a mass casualty incident

FIRE COMMUNICATIONS (FIRECOM) - Statewide mutual aid firefighting frequency used by firefighters of different departments and districts for the command and coordination of fire suppression operations.

FIRE SERVICES DEFENSE REGIONS - One of nine regions within the state responsible to the development and maintenance of Washington State Regional Fire Services Resource Mobilization Procedures (WSFSRMP) consistent with local plans and with WSFSRMP, CEMP, and ICS. Administers the WSFSRMP as it applies within the region, maintains local liaisons, and maintains inventories of equipment.

FIRESET - The system of components in a nuclear weapon that converts (if necessary), stores, and releases electrical or chemical energy to detonate weapon when commanded by the fusing system.

FISH - finfish, mollusks, crustaceans, and all other forms of marine animal and plant life other than marine mammals and birds. Under "Definitions" of the Magnuson-Stevens Fishery Conservation and Management Act, Public Law 94-265, (as amended in October 1996).

FISSILE MATERIAL - An isotope that readily fissions after absorbing a neutron of any energy, either fast or slow. Fissile materials are Uranium-235, Uranium-233, Plutonium-239 and Plutonium-241. Uranium-235 is the only naturally occurring fissile isotope.

FISSION - The splitting of the nucleus of a heavy atom into two lighter nuclei. It is accompanied by the release of neutrons, X-rays, gamma rays, and kinetic energy of the fission products.

FISSION WEAPON - A nuclear warhead whose material is Uranium or Plutonium that is brought to a critical mass under pressure from a chemical explosive detonation to create an explosion that produces blast, thermal radiation, and nuclear radiation through fission. The complete fission of one pound of fissionable materials has a yield equivalent to 8,000 tons of TNT.

FOOD ACCESS CONTROL POINT (FACP) - An access control point established along the food control boundary to ensure that food control measures are maintained. (Synonymous with Food Control Point).

FOREST FIRE - The uncontrolled destruction of forested lands by wildfires caused by natural or human-made events. Wildfires occur primarily in undeveloped areas characterized by forestlands.

FORMALIN - A watery solution of 37 percent formaldehyde.

FULL-SCALE EXERCISE - An activity intended to evaluate the operational capability of emergency management systems in an interactive manner over a substantial period of time. It involves the testing of a major portion of the emergency plan and organizations in a highly stressful environment. It includes the mobilization of personnel and resources to demonstrate coordination and response capabilities. The EOC is activated and field command posts may be established. A full-scale exercise is always formally evaluated.

FUNCTIONAL EXERCISE - Activities designed to test or evaluate the capability of individual or multiple emergency management functions. It is more complex than a tabletop exercise in that activities are usually under time constraints and are followed by an evaluation or critique. It usually takes place in some type of coordination or operating center. The use of outside resources is often simulated. No field units are used.

FUNCTIONAL NEEDS SUPPORT SERVICES – Defined as services that enable individuals to maintain their independence in a general population shelter. FNSS includes:

- Reasonable modification to policies, practices, and procedures
- Durable medical equipment (DME)
- Consumable medical supplies (CMS)
- Personal assistance services (PAS)
- Other goods and services as needed
- Children and adults requiring FNSS may have physical, sensory, mental health, and cognitive and/or intellectual disabilities affecting their ability to function independently without assistance. Others that may benefit from FNSS include women in late stages of pregnancy, elders, and people needing bariatric equipment.

FUSION - The opposite of fission, in which two light nuclei atoms deuterium and/or tritium-combine to form a heavier nucleus with the release of a substantial amount of energy. Extremely high temperatures, resulting in highly energetic, fast moving nuclei, are required to initiate fusion reactions,

FUSION WEAPON - Two stage nuclear warhead containing fusion materials, such as Deuterium and Tritium, that are brought to critical density and temperature conditions by use of a primary fission reaction in order to initiate and sustain a rapid fusion process. This process in turn creates an explosion that produces blast, thermal radiation, and nuclear radiation. This type of device is commonly known as hydrogen bomb and thermonuclear weapon.

GAMMA RADIATION - High-energy electromagnetic radiation emitted by nuclei during nuclear reactions or radioactive decay. These rays have high energy and a short wave length. Shielding against gamma radiation requires thick layers of dense materials, such as lead. Gamma rays or radiation are potentially lethal to humans, depending of the intensity of the flux.

GOVERNMENT TRANSPORTATION DEPENDENT EVACUEE – A member of a region or area who has been advised to leave a threatened or affected area and who, by choice or other reasons, is not able to provide their own transportation for evacuation and must rely upon government provided transportation to exit the danger zone.

GOVERNOR'S AUTHORIZED REPRESENTATIVE (GAR) - The person empowered by the Governor to execute, on behalf of the state, all necessary documents for disaster assistance.

GREEN PATIENT AREA - An area dedicated for congregation, treatment, and care of patients with minor injuries. Designated as a separate area from Treatment due to the large number of potential patients and the special considerations they may need such as shelter, food and restroom facilities. Depending on the type of incident they may also be considered witness/suspects and require police presence.

G-SERIES NERVE AGENTS - Chemical agents of moderate to high toxicity developed in the 1930's. Examples are tabun (GA), sarin (GB), soman (GD), and GF.

GUN-TYPE WEAPON - A gun-barrel-shaped device in which two or more pieces of fissionable material, each less than a critical mass, are brought together very rapidly so as to form a supercritical mass that can explode as the result of a rapidly expanding fission chain reaction.

HAZARD - Something that is potentially dangerous or harmful, often the root cause of an unwanted outcome.

HANFORD SITE - A 560 square mile complex, located north of the city of Richland, Washington, under the direction of the U.S. Department of Energy.

HAZARD MITIGATION GRANT PROGRAM - A program authorized under Section 404 of the Stafford Act, which provides funding for hazard mitigation projects that are cost effective and complement existing post-disaster mitigation programs and activities by providing funding for beneficial mitigation measures that are not funded through other programs.

HEMORRHAGIC - Pertaining to or marked by an abnormal, severe internal or external discharge of blood.

HEMORRHAGIC FEVER - Any of a diverse group of diseases characterized by a sudden onset of fever, aching, bleeding in the internal organs, petechiae, and shock. They include Ebola, Lassa, and Marburg viruses.

HIGH (LOW) ANGLE RESCUE - Using rope and other associated rescue devices in above- and below grade situations.

HIGH-LEVEL WASTE (HLW) - Nuclear power plant waste that is very radioactive. This waste is usually (1) irradiated (spent) reactor fuel; (2) liquid waste resulting from the operation of the first cycle solvent extraction system and the concentration wastes from subsequent extraction cycles, in a facility for reprocessing irradiated reactor fuel; and (3) solids into which such liquid wastes have been converted. Most HLW in the United States is spent fuel discharged from commercial nuclear power reactors, but there is some reprocessed HLW from defense activities and a small quantity of reprocessed commercial HLW.

HOSPITAL EMERGENCY ADMINISTRATIVE RADIO (HEAR) - Radio frequency for communications between emergency medical responders.

HOST DURATION – Short term – up to two weeks; intermediate – two to 12 weeks; indefinite – 12 weeks to a year or more.

HOST STATE – A state that, by agreement with an impact-State or FEMA, is providing evacuation and sheltering support to individuals from another State that has received a Presidential emergency or major disaster declaration due to an incident.

HOUSEHOLD PET – A domesticated animal, such as a dog, cat, bird, rabbit, rodent, or turtle that is typically kept in the home for companionship rather than commercial purposes, can travel in commercial carriers, and be sheltered in temporary facilities.

HUMAN NEEDS RECOVERY - Encompasses disaster-related community outreach, long-term housing, health (physical and mental), human services, assistance to non-profit agencies, and problem-solving to address unusual circumstances generated by the disaster for which no existing programs provide assistance.

IMMEDIATE RESPONSE ZONE (IRZ) – The planning zone immediately surrounds each Army CSEPP installation. Generally, it extends to about 6 miles from the installation's chemical storage area. At some installations it extends to about 9 miles.

IMPLOSION WEAPON - A spherical device in which a quantity of fissionable material, less than a critical mass at ordinary pressure has its volume suddenly reduced by compression - a step accomplished by using chemical explosives - so that it becomes supercritical, producing a nuclear explosion.

INCAPACITATING AGENTS - Produce temporary physiological and/or mental effects via action on the central nervous system. Effects may persist for hours or days and victims usually do not require medical treatment; however, such treatment does speed recovery.

INCIDENCE – Frequency of disease occurrence.

INCIDENT - An occurrence or event, either human-caused or natural phenomena, that requires action by emergency services personnel to prevent or minimize loss of life or damage to property and/or the environment.

INCIDENT COMMAND SYSTEM (ICS)

a. An all-hazards, on-scene functional management system that establishes common standards in organization, terminology, and procedures, provides a means (unified command) for the establishment of a common set of incident objectives and strategies during multi-agency/multi-jurisdiction operations while maintaining individual agency/jurisdiction authority, responsibility, and accountability, and which is a component of the National Interagency Incident Management Systems (NIMS).

b. An equivalent and compatible all-hazards, on-scene, functional management system.

INDIVIDUAL ASSISTANCE (IA) - Supplementary federal assistance available under the Stafford Act to individuals, families, and businesses which includes disaster housing assistance, unemployment assistance, grants, loans, legal services, crisis counseling, tax relief, and other services or relief programs (see Individual and Family Grant Program below).

INDIVIDUAL ASSISTANCE OFFICER (IAO) - The individual who, under the direction of the Federal Coordinating Officer monitors the Individual Assistance programs of all agencies, and reports to the Federal Coordinating Officer on the total effectiveness of the Individual Assistance effort.

INDIVIDUAL AND FAMILY GRANT (IFG) PROGRAM - The program authorized under Section 411 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act for the purpose of making grants to individuals and families whose disaster-related serious needs or necessary expenses cannot be satisfied by any other federal, state, or volunteer program. The grant program is normally seventy five percent federally funded and twenty five percent state funded. The state administers the program.

INDUSTRIAL AGENTS - Chemicals developed or manufactured for use in industrial operations or research by industry, government, or academia. These chemicals are not manufactured, primarily, for the specific purpose of producing human casualties or rendering equipment, facilities, or areas dangerous for use by man. Hydrogen cyanide, cyanogen chloride, phosgene, chlorine, chloropicrin, and many herbicides and pesticides are industrial chemicals that also can be chemical agents.

INFRASTRUCTURE RECOVERY - Includes repair and reconstruction of the physical plant – facilities, infrastructure, utilities, communications and other life-line services;

INFECTIOUS - Capable of being transmitted with or without contact. Pertaining to a disease caused by a microorganism. Producing infection.

INGESTION - The process of taking material (particularly food) into the gastrointestinal tract or the process by which a cell takes in foreign particles.

INGESTION EXPOSURE PATHWAY - When human beings are exposed to radioactive or hazardous materials from a facility through consumption of water and foodstuffs, including dairy products. Emergency planning and protective actions are designed in part to eliminate or reduce to the minimum exposures due to ingestion of contaminated materials in the area surrounding a facility.

INGESTION PLANNING ZONE (IPZ) – Per Integrated Plan it is the Ingestion Exposure Pathway Emergency Planning Zone. Ingestion exposure pathway is the potential pathway of radioactive materials to the public through consumption of radiological contaminated water, food crops, or dairy products. This planning zone extends 50 miles in radius from the nuclear power plant.

INHALATION - The act of drawing breath, vapor, or gas into the lungs.

INTERFACE AREA - The area where residences are built in proximity to the flammable fuels naturally found in wildland areas, such as forests, prairies, hillsides and valleys.

INTERFACE FIRE - Fire that threatens or burns the interface area. Fire affecting both wildland areas and homes.

INTERMIXES FIRE - Fire that threatens or has caused damage in areas containing both forestlands and structures.

IMPACT STATE – A state that has received a Presidential emergency or major disaster declaration.

IONIZING RADIATION - Any radiation displacing electrons from atoms or molecules, thereby producing ions. Examples: alpha, beta, gamma radiation, X-ray or short-wave ultraviolet light. Ionizing radiation may produce severe skin or tissue damage.
IRRADIATION - Exposure to neutrons in a nuclear reactor or more generally, exposure to any source of radiation.

JOINT FIELD OFFICE (JFO) - The office established in or near the designated area to support federal and state response and recovery operations. The Joint Field Office houses the Federal Coordinating Officer (FCO) and the Emergency Response Team (ERT) and the State Coordinating Officer (SCO) and support staff.
JOINT INFORMATION CENTER (JIC) - A facility that may be used by affected utilities, state agencies, counties, local jurisdictions, and/or federal agencies to jointly coordinate the public information function during all hazards incidents.

JOINT PRIMARY AGENCY - Two state agencies assigned primary responsibilities to manage and coordinate a specific Emergency Support Function (ESF), jointly. Joint primary agencies are designated on the basis of their having shared authorities, resources, capabilities, or expertise relative to accomplishment of the specific ESF activities. Joint primary agencies are responsible for overall planning and coordination with support agencies for the ESF, with ESF
delivery assistance, if requested, from the state EOC. An example of Joint Primary Agency activities is the Department of Ecology and the Washington State Patrol for ESF 10, Hazardous Materials.

JURISDICTION: A range or sphere of authority. Public agencies have jurisdiction at an incident related to their legal responsibilities and authority. Jurisdictional authority at an incident can be political or geographical (e.g., Federal, State, tribal, and local boundary lines) or functional (e.g., law enforcement, public health).

LAND SEARCH AND RESCUE - See SEARCH AND RESCUE.
LAW ENFORCEMENT RADIO NETWORK (LERN) - Statewide law enforcement mutual aid frequency controlled by the Washington State Police Chiefs Association and Washington State Patrol.

LESION - An injury or wound. A single infected patch in a skin disease.

LIQUID AGENT - A chemical agent that appears to be an oily film or droplets. The color ranges from clear to brownish amber.

LOCAL DIRECTOR - The director or designee of a county or municipal emergency management agency jurisdiction.

LOCAL EMERGENCY MANAGEMENT AGENCY - The emergency management or emergency services organization of a political subdivision of the state established in accordance with RCW 38.52.070.

LOCAL EMERGENCY PLANNING COMMITTEE (LEPC) - The planning body designated by the Superfund Amendments and Reauthorization Act, Title III legislation as the planning body for preparing local hazardous materials plans.

LONG TERM RECOVERY - There can be no definitive time period for short or long-term recovery as the process is dictated by the type and scope of event. Typically a moderate incident may require 6 - 12 months to bring circumstances back to normal functionality. Long-term recovery Involves

1. permanent repair and reconstruction of infrastructure, facilities, or property,
2. area specific or city-wide redevelopment planning,
3. economic and business recovery, and
4. Social/community restoration.

LYMPHATIC - Of or pertaining to the alkaline fluid found in the lymphatic vessels

MASS CASUALTY INCIDENT - Sometimes called a Multiple Casualty Incident, an MCI is an event resulting from man-made or natural causes which results in illness and/or injuries which exceed the Emergency Medical Services (EMS) capabilities of a locality, jurisdiction and/or region.

MAJOR DISASTER - As defined in federal law, is any hurricane, tornado, storm, flood, high water, wind-driven water, tidal wave, tsunami, earthquake, volcanic eruption, landslide, mudslide, snowstorm, drought, fire, explosion, or other technological or human caused catastrophe in any part of the United States which, in the determination of the President, causes damage of sufficient severity and magnitude to warrant major disaster assistance… in alleviating the damage, loss, hardship, or suffering caused thereby.

MARINE MAMMAL - any mammal which (A) is morphologically adapted to the marine environment (including sea otters and members of the orders Sirenia, Pinnipedia and Cetacea), or (B) primarily inhabits the marine environment (such as the polar bear); and, for the purposes of this chapter, includes any part of any such marine mammal, including its raw, dressed, or dyed fur or skin. Under the Marine Mammal Protection Act of 1972 (as amended in 1994).

MCI RESPONSE - Varied level of resources dispatched to an incident dependent upon the nature of the incident, the number of patients, and their severity of injury.

MCI UNIT - A mobile unit, which contains large quantities of medical supplies that can be dispatched to a scene of an MCI. MCI units typically treat 50 or more patients.

MEDICAL CONTROL - Will be provided by county pre-hospital patient care protocols. “Pre-hospital patient care protocols” means the written procedures adopted by the county Medical Program Director (MPD) which direct the out-of-hospital emergency care of the emergency patient. These procedures shall be based upon the assessment of the patient’s medical needs and what treatment will be provided for emergency conditions.

MULTIPLE CASUALTY INCIDENT - An incident resulting from man-made or natural causes with associated illness or injury to a large number of people. The effect is that patient care cannot be provided immediately to all and resources must be managed.

MEDICAL EMERGENCY DELIVERY NETWORK (MEDNET) - Dedicated two-way Ultra High Frequency (UHF) radio system to provide communications between emergency medical responders and hospitals.

MEDICAL NEEDS SHELTERING - These are shelters or components of shelters for individuals who require sustained assistance (or supervision) for medical needs, but do not have an acute condition requiring hospitalization. This is a subset of access and functional needs populations.

MEDICAL STAGING - An area established to maintain medical supplies, personnel and equipment. The Medical Staging Area will not be necessary at all incidents. When it is indicated, Medical will assign a Medical Staging Manager

MILITARY DEPARTMENT - Refers to the Emergency Management Division, the Army and Air National Guard, and Support Services.

MILITARY ASSISTANCE TO SAFETY AND TRAFFIC - MAST or Military Assistance to Safety and Traffic is a cooperative program of the Department of Defense, the Department of Transportation and the Department of Health, Education and Welfare. MAST provides military helicopter ambulance to transport civilian medical emergencies. MAST is a supplement to your local emergency medical service system and is used only when there is a life-threatening situation in which time is a major factor to save a life. Fort Campbell will not compete with any civilian organization. If a mission can be completed by a civilian organization, the mission must be turned down by that organization before MAST is called.

MILITARY SUPPORT OF CIVIL AUTHORITIES - Those activities and measures taken by the DOD Components to foster mutual assistance and support between the Department of Defense and any civil government agency in planning or preparedness for, or in the application of resources for response to, the consequences of civil emergencies or attacks, including national security emergencies.

MISSION - A distinct assignment of personnel and equipment to achieve a set of tasks related to an incident, emergency, disaster, catastrophe, or search and rescue operations that occur under the direction and control of an authorized official.

MISSION ASSIGNMENT - A task assigned by the Federal Emergency Management Agency to any capable federal agency to provide necessary disaster assistance not available under other statutory authorities. The task may involve logistical and personnel of federal assistance as well as direct federal assistance to state and local jurisdictions.

MITIGATION - Actions taken to eliminate or reduce the degree of long-term risk to human life, property, and the environment from natural and technological hazards. Mitigation assumes our communities are exposed to risks whether or not an emergency occurs. Mitigation measures include but are not limited to: building codes, disaster insurance, hazard information systems, land use management, hazard analysis, land acquisition, monitoring and inspection, public education, research, relocation, risk mapping, safety codes, statues and ordinances, tax incentives and disincentives, equipment or computer tie downs, and stockpiling emergency supplies.

MORBIDITY - State of being diseased. The number of sick persons or cases of disease in relationship to a specific population.

MORTALITY - The condition of being mortal. The death rate; the ratio of the number of deaths to a given population.

NATIONAL CONTINGENCY PLAN (NCP) - "The National Oil and Hazardous Substances Pollution Contingency Plan" (40 CFR Part 300) prepared by the Environmental Protection Agency to put into effect the response powers and responsibilities created by the Comprehensive Environmental Response, Compensation and Liability Act, and the authorities established by Section 311 of the Clean Water Act.

NATIONAL DISASTER MEDICAL SYSTEM (NDMS) - A system designed to deal with extensive medical care needs in very large disasters or emergencies. The system is a cooperative effort of the U.S. Department of Health and Human Services, Federal Emergency Management Agency, U.S. Department of Defense, state and local government agencies, and the private sector.
NATIONAL INTERAGENCY COORDINATION CENTER (NICC) - The organization responsible for coordination of the national emergency response to a wildland fire. The NICC is headquartered in Boise, Idaho.

NATIONAL INCIDENT MANAGEMENT SYSTEM – A system mandated by HSPD-5 that provides a consistent, nationwide approach for Federal, State, local, and tribal governments; the private sector; and NGOs to work effectively and efficiently together to prepare for, respond to, and recover from domestic incidents, regardless of cause, size, or complexity. To provide for interoperability and compatibility among Federal, State, local, and tribal capabilities, the NIMS includes a core set of concepts, principles, and terminology. HSPD-5 identifies these as the ICS; multi-agency coordination systems; training; identification and management of resources

(including systems for classifying types of resources); qualification and certification; and the collection, tracking, and reporting of incident information and incident resources.

NATIONAL RESPONSE CENTER - A communications center for activities related to hazardous materials response actions at Coast Guard headquarters in Washington D.C. The center receives and relays notices of discharges or releases to the appropriate on-scene coordinator, disseminates on-scene coordinator and Regional Response Team reports to the National Response Team when appropriate, and provides facilities for the National Response Team to use in coordinating national response action when required.

NATIONAL RESPONSE FRAMEWORK - Guides how the Nation conducts all-hazards response. The Framework documents the key response principles, roles, and structures that organize national response. It describes how communities, States, the Federal Government, and private-sector and nongovernmental partners apply these principles for a coordinated, effective national response. And it describes special circumstances where the Federal Government exercises a larger role, including incidents where Federal interests are involved and catastrophic incidents where a State would require significant support. It allows first responders, decision-makers, and supporting entities to provide a unified national response.

NATIONAL RESPONSE PLAN (NRP) - Renamed National Response Framework (NRF).

NATIONAL PUBLIC SAFETY PLANNING ADVISORY COMMITTEE (NPSPAC) - Advisory committee that reviews and approves or disapproves applications in accordance with National Public Safety Planning Advisory Committee Region 43 (Washington State) for use of a specific band of 800 megahertz (MHZ) frequencies within the state.

NATIONAL SEARCH AND RESCUE PLAN (NSP) - A U.S. interagency agreement providing a national plan for the coordination of Search and Rescue services to meet domestic needs and international commitments.

NATIONAL WARNING SYSTEM (NAWAS) - The federal portion of the Civil Defense Warning System, used for the dissemination of warnings and other emergency information from the Federal Emergency Management Agency National or Regional Warning Centers to Warning Points in each state. Also used by the State Warning Points to disseminate information to local Primary Warning Points. Provides warning information to state and local jurisdictions concerning severe weather, earthquake, flooding, and other activities affecting public safety.

NATURAL URANIUM - Uranium as found in nature, containing about 0.711 percent of Uranium-235, 99.283 percent of Uranium-238, and a trace (0.0006 percent) of Uranium-234. It is mined as an ore in various regions of the world and is relatively inexpensive.

NEBULIZER - A device for producing a fine spray or aerosol.

NEUROLOGIC - Adjective relating to the branch of medicine that deals with the nervous system and its diseases.

NEUROMUSCULAR - Concerning both nerves and muscles

NEUROTOXIN - A substance that attacks nerve cells.
NERVE AGENT - Organophosphate ester derivatives of phosphoric acid. Nerve agents are potent inhibitors of the enzyme acetyl cholinesterase (AChE), causing a disruption in normal neurological function. Symptoms appear rapidly with death occurring as rapidly as several minutes. Nerve agents are generally divided into G-series agents and V-series agents. They include tabun (GA), sarin (GB), soman (GD), and VX.

NATIONAL INCIDENT MANAGEMENT SYSTEM (NIMS) - The provides a systematic, proactive approach to guide departments and agencies at all levels of government, nongovernmental organizations, and the private sector to work seamlessly to prevent, protect against, respond to, recover from, and mitigate the effects of incidents, regardless of cause, size, location, or complexity, in order to reduce the loss of life and property and harm to the environment.

NON-PERSISTENT AGENT - An agent that, upon release, loses its ability to cause casualties after 10-to-15 minutes. It has a high evaporation rate and is lighter than air and will disperse rapidly. It is considered to be a short-term hazard. However, in small and unventilated areas, the agent will be more persistent.

NUCLEAR EMERGENCY SEARCH TEAM (NEST) - A U.S. Department of Energy sponsored team trained to search for and identify lost or stolen weapons and special nuclear materials, and to respond to nuclear bomb threats or radiation dispersal threats. The team is made up of personnel from many agencies and other organizations.

NUCLEAR REGULATORY COMMISSION (NRC) - The federal agency that regulates and licenses commercial nuclear facilities.

ON-SCENE COMMAND AND COORDINATION RADIO (OSCCR) - A frequency used by “on-scene” emergency responders of different agencies for command and coordination of an incident or emergency, according to a joint Military Department, Emergency Management Division and Association of Police Communications Officers (APCO) agreement.

ORGANOPHOS-PHOROUS COMPOUND - A compound, containing the elements phosphorus and carbon, whose physiological effects include the inhibition of neurotransmitters. Many pesticides (Malathion and parathion) and virtually all nerve agents are organophosphorous compounds.

PATIENT CARE PROCEDURES - The written operating guidelines adopted by the regional emergency medical services and trauma care council, in consultation with the local emergency medical services and trauma care councils, emergency communication centers, and the emergency medical services medical program director, in accordance with statewide minimum standards. The patient care procedures shall identify the level of medical care personnel to be

dispatched to an emergency scene, procedures for triage of patients, the level of trauma care facility to first receive the patient, and the name and location of other trauma care facilities to receive the patient should an interfacility transfer be necessary. Procedures on interfacility transfer of patients shall be consistent with the transfer procedures in chapter 70.170 RCW.

PUGET SOUND REGION - For the purposes of this plan, the Puget Sound region is defined as the Seattle Urban Area (UA)/Combined Statistical Area (CSA), which includes the eight Puget Sound counties (Island, King, Kitsap, Mason, Pierce, Skagit, Snohomish, Thurston) and selects major cities located therein.

PATHOGEN - Any organism (usually living) capable of producing serious disease or death, such as bacteria, fungi, and viruses.

PATHOGENIC AGENTS - Biological agents capable of causing serious disease.

PERSISTENT AGENT - An agent that upon release retains its causality-producing effects for an extended period of time, usually anywhere from 30 minutes to several days. A persistent agent usually has a low evaporation rate and its vapor is heavier than air. Therefore, its vapor cloud tends to hug the ground. It is considered to be a long-term hazard. Although inhalation hazards are still a concern, extreme caution should be taken to avoid skin contact as well.

PET ANIMAL - any animal that has commonly been kept as a pet in family households in the United States such as dogs, cats, guinea pigs, rabbits, and hamsters. This term excludes exotic animals and wild animals.

PLAGUE - A disease caused by Yersinia pestis, which is usually transmitted occupationally or recreationally to humans through the bite of infected fleas but may also be disseminated by aerosol. Can result in three clinical forms Bubonic, Septicemic or Pneumonic with the later being the most common result of a bioterrorist event. Pneumonic plague is characterized by sudden onset of fever, headache, fatigue; muscle aches and coughs progressing to pneumonia, respiratory distress and death, if untreated. Treatment with appropriate, sensitive antibiotics is necessary.

PLUME - Airborne material spreading from a particular source; the dispersal of particles, gases, vapors, and aerosols into the atmosphere.

POINT-OF-DISTRIBUTION SYSTEM (PODS) - Points of Distribution are centralized locations where the public picks up life sustaining commodities following a disaster or emergency. Commodities usually include shelf stable food and water

POINT-SOURCE DELIVERY SYSTEM - A delivery system in which the biological agent is dispersed from a stationary position. This delivery method results in coverage over a smaller area than with the line-source system. (See also “Line-Source Deliver System.”)

POP-UP SHELTER – A spontaneous shelter with no pre-established resources or trained volunteers.

PRELIMINARY DAMAGE ASSESSMENT (PDA) - The joint local, state, and federal analysis of damage that has occurred during a disaster and which may result in a Presidential declaration of disaster. The PDA is documented through surveys, photographs, and other written information.

PRELIMINARY DAMAGE ASSESSMENT TEAM - An ad hoc group that comes together after a disaster whose main purpose is to determine the level of disaster declaration that is warranted. The team usually consists of federal, state, and local representatives to do an initial damage evaluation to sites damaged.

PRE-HOSPITAL - Means emergency medical care and transportation rendered to patients prior to hospital admission or during interfacility transfer by licensed ambulance or aid service under chapter 18.73 RCW, by personnel certified to provide emergency medical care under chapters 18.71 and 18.73 RCW or by facilities providing Level V trauma care services as provided for in this chapter. (RCW 70.168.015)

PRE-HOSPITAL PATIENT CARE PROTOCOLS - The written procedures adopted by the emergency medical services medical program director which direct the out-of-hospital emergency care of the emergency patient, which includes the trauma patient. These procedures shall be based upon the assessment of the patient's medical needs and what treatment will be provided for emergency conditions. These protocols shall meet or exceed statewide minimum standards developed by the department in rule as authorized in chapter 70.168 RCW.

PRE-HOSPITAL TRAUMA CARE SERVICES - means agencies that are verified to provide pre-hospital trauma care. (WAC 246-976-010)

PREPAREDNESS - Actions taken in advance of an emergency to develop operational capabilities and facilitate an effective response in the event an emergency occurs. Preparedness measures include but are not limited to: continuity of government, emergency alert systems, emergency communications, emergency operations centers, emergency operations plans, emergency public information materials, exercise of plans, mutual aid agreements, resource management, training response personnel, and warning systems.

PRESIDENTIAL DECLARATION - Formal declaration by the President that an Emergency or Major Disaster exists based upon the request for such a declaration by the Governor and with the verification of Federal Emergency Management Agency preliminary damage assessments.
PRIMARY AGENCY - A state agency or agency assigned primary responsibility to manage and coordinate a specific ESF. Primary agencies are designated on the basis of who has the most authorities, resources, capabilities, or expertise relative to accomplishment of the specific Emergency Support Function (ESF) with assistance, if requested, from the state EOC. An example of a primary agency is the Department of Transportation for ESF 1, Transportation.

PRIVATE BRANCH EXCHANGE (PBX) - A telephone switch system owned and operated by the user.

PROJECT WORKSHEET – Detailed record of an on-site inspection of disaster damage caused to property of the state and local jurisdictions.

PROJECT WORKSHEET TEAMS - Teams of federal, state, and local jurisdiction experts, typically architects or engineers who conduct detailed on-site inspections, of disaster damage caused to property of state and local jurisdictions. The team determines costs and categories of repair work needed for damages offered. The results are used in the preparation of Project Worksheets. Used in conjunction with Presidential Disaster Declaration.

PROPHYLAXIS - Observance of rules necessary to prevent disease. Protective treatment for or prevention of disease.

PROTECTION - Any means by which an individual protects their body. Measures include masks, self-contained breathing apparatuses, clothing, structures such as buildings, and vehicles.

PROTECTIVE ACTION DECISION (PAD) - An action or measure taken by public officials to prevent or minimize radiological or chemical exposures to people.

PROTECTIVE ACTION RECOMMENDATION (PAR) - A recommendation based on technical scientific data for public officials to use in forming a decision to prevent or minimize the contamination of people and foodstuffs.

PUBLIC ASSISTANCE (PA) - Supplementary federal assistance provided under the Stafford Act to state and local jurisdictions, special purpose districts, Native Americans, or eligible private, nonprofit organizations.

PUBLIC ASSISTANCE OFFICER (PAO) - A member of the Federal Emergency Management Agency Regional Director's staff who is responsible for management of the Public Assistance Program.

PULMONARY - Concerning or involving the lungs.

Q FEVER - A disease caused by the rickettsia Coxiella burnedi that is characterized by fever, malaise, and muscular pains. The average incubation period is 2 to 3 weeks but may be less depending on the dose. Q-fever is rarely transmitted from person to person. Antibiotics are necessary for treatment.

RADIO AMATEUR CIVIL EMERGENCY SERVICES (RACES) - Licensed amateur radio operators who support state and local jurisdictions during emergencies or disasters.

RADIOGRAPHIC - Adjective relating to the process of producing an image on a radiosensitive surface like photographic film with radiation other than visible light, especially by x-rays passed through an object.

RADIOLOGICAL CALIBRATION - A procedure utilizing radioactive sources for establishing the accuracy of radiological instruments.
RADIOLOGICAL CONTAMINATION - Radioactive material deposited on the surface of structures, areas, objects, or persons following a release of any radioactive material.

RADIOLOGICAL COUNTERMEASURES - Protective actions to reduce the effects of any nuclear incident, including fallout, upon the population. Example: decontamination.

RADIOLOGICAL PROFILE (RADPRO) - A microcomputer-based file containing records from each of the local jurisdictions that have a radiological defense system. Each record has 38 data fields containing specific information about the jurisdiction. The file is maintained by the state Radiation Safety Officer.

RADIOLOGICAL MONITOR (RM) - An individual trained to measure, record, and report radiation exposure and exposure rates, and to provide limited field guidance on radiation hazards.

RADIOLOGICAL RESPONSE TEAM (RRT) - A community-based radiological defense cadre consisting of members from the community emergency services, vital facilities, and essential services. This cadre trained and exercised on an on-going basis, forms a baseline radiological defense capability which can be used for surge training and to assist in the rapid build up of community radiological defense capability during an increased readiness period. The Radiological Response Team may be used to respond to peacetime radiological accidents such as transportation and nuclear power plant accidents.

RECOVERY

a. Activity to return vital life support systems to minimum operating standards and long-term activity designed to return life to normal or improved levels, including some form of economic viability. Recovery measures include, but are not limited to, crisis counseling, damage assessment, debris clearance, decontamination, disaster application centers, disaster insurance payments, disaster loans and grants, disaster unemployment assistance, public information, reassessment of emergency plans, reconstruction, temporary housing, and full-scale business resumption.

b. The extrication, packaging, and transport of the body of a person killed in a search and rescue incident.

RECOVERY and RESTORATION TASK FORCE (RRTF) - In the wake of a catastrophic disaster, the Governor may direct the formation of the RRTF. Its purpose is to guide, recommend and coordinate efforts to restore normalcy to areas adversely impacted by the disaster. The RRTF will determine the extent of economic impacts on citizens, businesses, as well as the ecological impacts on land and property.

RECOVERY RESOURCE GROUP (RRG) – The group constituted by the Governor, at the request of the senior locally elected official, to assist with recovery activities for the Chemical Stockpile Emergency Preparedness Program. The RRG will be chaired by the senior locally elected official or designee and composed of a representative from the local jurisdiction, state, and federal governments. The group will coordinate recovery activities of the members' respective government and provide advice to the chairperson on recovery issues.

REGIONAL DIRECTOR, FEDERAL EMERGENCY MANAGEMENT AGENCY (RD) - The individual in the federal government who responds to the Governor's request for a Presidential declaration by organizing and coordinating the preliminary damage assessment, makes the regional analysis and recommendation as to whether the situation warrants a Presidential Disaster Declaration. If the President declares a major disaster or emergency, the Regional Director administers the Public Assistance Program and monitors the Individual and Family Grant Program under Public Law 93-288. The Regional Director is a presidential appointee and manages one of ten federal regions.

REGIONAL – For this plan, 'regional' refers to the eight county region whose footprint this plan covers - Island, King, Kitsap, Mason, Pierce, Skagit, Snohomish, and Thurston counties, and the tribal jurisdictions and cities and towns within those counties.

REGIONAL CATASTROPHIC AGREEMENT - An inter-jurisdictional agreement that is made between governments or organizations, either public or private, to provide aid and assistance during emergency situations where resources of a single jurisdiction or organization are insufficient or inappropriate for the tasks that must be performed to control the situation.

REGIONAL RESPONSE REGIONS - The Washington State homeland security planning and coordination structure is divided into nine (9) regions. These regions mirror the State's public health regions. The regions are made up of one or more counties that include cities, towns, and tribal nations within regional geographical boundaries. This regional configuration was implemented to distribute Federal grant funds, develop emergency responder equipment priority lists, plan and execute training and exercise programs, create regionally based mutual aid plans, and develop volunteer infrastructure to support citizens' involvement in homeland security initiatives. Operations and physical resources are maintained at the local jurisdiction (county, city, and tribal) level, and coordination and planning are facilitated at the regional level.

REMOTE PICK-UP UNIT (RPU) - A radio transmitter and receiver used in conjunction with Emergency Alert System to provide communications between the Primary Emergency Alert System (EAS) station and the local emergency operations center.

RECEPTION PROCESSING SITE – Site established to track and process government transportation dependent evacuees; provide mass care services; assign evacuees to congregate care facilities; provide for health screening; provide for the general support of other needs. Reception Processing Sites may or may not be co-located with a Point of Debarkation.

REPROCESSED URANIUM - Uranium that has been recovered from spent fuel rods. It typically contains small amounts of Uranium-234 and Uranium-236 in addition to Uranium-235 and Uranium-238.

RESCUE COORDINATION CENTER (RCC)

a. (Federal) - A unit responsible for promoting efficient organization of search and rescue services and coordinating conduct of search and rescue operations within a search and rescue region (National Search and Rescue Plan).

b. (State) - An extension of the state Emergency Operations Center (EOC) activated in an emergency or disaster to support local search and rescue operations by coordinating the state, out-of-state, and federal search and rescue resources responding to the incident. The RCC may be co-located with the EOC or deployed to a location in the proximity of the incident site.

RESPONSE - Actions taken immediately before, during, or directly after an emergency occurs, to save lives, minimize damage to property and the environment, and enhance the effectiveness of recovery. Response measures include, but are not limited to, emergency plan activation, emergency alert system activation, emergency instructions to the public, emergency medical assistance, staffing the emergency operations center, public official alerting, reception and care, shelter and evacuation, search and rescue, resource mobilization, and warning systems activation.

ROBERT T. STAFFORD DISASTER RELIEF AND EMERGENCY ASSISTANCE ACT (Public Law 93-288, as amended) - The act that authorizes the greatest single source of federal disaster assistance. It authorizes coordination of the activities of federal, state, and volunteer agencies operating under their own authorities in providing disaster assistance, provision of direct federal assistance as necessary, and provision of financial grants to state and local jurisdictions as well as a separate program of financial grants to individuals and families. This act is commonly referred to as the Stafford Act.

ROENTGEN MAN EQUIVALENT (REM) - The unit of exposure expressed as dose equivalent. The amount of ionizing radiation needed to produce the same biological effect as one roentgen of high-penetration x-rays.

ROUTE OF EXPOSURE (Entry) - The path by which a person comes into contact with an agent or organism; for example, through breathing, digestion, or skin contact.

SEARCH AND RESCUE - The act of searching for, rescuing, or recovering by means of ground, marine, or air activity any person who becomes lost, injured, or is killed while outdoors or as a result of a natural or human-caused event, including instances of searching for downed aircraft when ground personnel are used. Includes DISASTER, URBAN, and WILDLAND SEARCH AND RESCUE. Also referred to as LAND SEARCH AND RESCUE to differentiate from AIR SEARCH AND RESCUE.

SELF-EVACUEE – A member of a region or area who has been directed to leave a threatened or affected area and is able to provide their own transportation for evacuation without requesting government transportation assistance.

SELF-PROTECTION MONITORING - A capability that provides for the personnel in emergency services, vital facilities, and essential industries with the ability to conduct radiological monitoring for their own protection. It includes a means to monitor and control the radiation exposure of emergency workers who would be engaged in peacetime emergency response and post-attack recovery operations.

SERVICE ANIMAL - any animal individually trained to do work or perform tasks for the benefit of a person with a disability. Such tasks can include guiding a person with impaired vision, alerting a person with impaired hearing to the presence of people or sounds, pulling a wheelchair, retrieving dropped items, etc. Dogs are most frequently trained as service animals, but sometimes other animals can to this work. (American with Disabilities Act, 1990)

SHELTER MONITORING - A capability which provides for the means to detect, measure, and assess, in public fallout shelters, the radiation hazards from fallout following a nuclear accident or attack. The fallout shelter is the primary countermeasure in the radiological defense system to protect people from radiation.

SHORT-TERM RECOVERY - Involves

1. immediate restoration of services and government functions as well as
2. Assistance to residents in resuming essential life activities.

   Activities may include: sheltering, debris clearance, damage/impact assessment, temporary service provision, and traffic control, temporary space for displaced government/business/community functions, public information, inspections and permitting for repairs, volunteer and donations management, and initiation of state/federal assistance programs. Immediate mental health, public health or other community issues may also be addressed.

SITUATIONAL ASSESSMENT REPORT - Document that contains confirmed or verified information and explicit details (who, what, where, and how) relating to an incident.

SITUATIONAL AWARENESS - The ability to identify, process, and comprehend the critical elements of information about an incident.

SMALLPOX - An acute, highly contagious, sometimes fatal, disease caused by Variola Major Virus. Symptoms include a high fever and successive stages of severe widespread skin eruptions (papules) that eventually blister, suppurate, and form pockmarks. Smallpox can be spread by direct contact or through the airborne route.

SOCIAL ANIMAL - often animals that did not complete service animal/service dog training due to health, disposition, trainability, or other factors, and are made available as pets for people who have disabilities. These animals might or might not meet the definition of service animals. There is no legal definition.

SPILL RESPONSE - All actions taken in carrying out the Washington State Department of Ecology's responsibilities to spills of hazardous materials, e.g. receiving and making notifications, information gathering and technical advisory phone calls, preparation for and travel to and from spill sites, direction of clean-up activities, damage assessment, report writing, enforcement investigations and actions, cost recovery, and program development.
SPORE - A reproductive form some microorganisms can take to become resistant to environmental conditions, such as extreme heat or cold, while in a "resting stage."

STAFFORD ACT - The Robert T. Stafford Disaster Relief and Emergency Assistance Act, P.L. 93-288, as amended. This Act describes the programs and processes by which the Federal Government provides disaster and emergency assistance to State and local governments, tribal nations, eligible private nonprofit organizations, and individuals affected by a declared major disaster or emergency. The Stafford Act covers all hazards, including natural disasters and terrorist incidents.

STAGING - Location where incident personnel and equipment are assigned on an immediately available status.

STATE AND REGIONAL DISASTER AIRLIFT PLAN (SARDA) - A plan prepared by Washington State Department of Transportation, Aviation Division, which provides overall policy and guidance for aviation support in time of emergency.

STATE COORDINATING OFFICER (SCO) - The individual appointed by the Governor to act in cooperation with the Federal Coordinating Officer to administer disaster recovery efforts. The SCO may also function as the Disaster Recovery Manager and as the Governor's Authorized Representative.

STATE EMERGENCY OPERATIONS OFFICER (SEOO) - An individual designated as the initial point of contact for state level emergency response and coordination activities for all hazards (natural or human made) that could adversely affect lives, property, environment or the economy of Washington State operating within the Alert and Warning Center at the State Emergency Operations Center (EOC).

STATE FIRE DEFENSE COMMITTEE - A committee of the Fire Protection Policy Board which develops the Washington State Fire Services Resource Mobilization Plan, develops planning guidance for the Fire Services Mobilization Regions, promotes standardization of fire communications, develops alerting and dispatching procedures, maintains a listing of regional firefighting resources, and provides guidance for the approval of reimbursement requests.

STRUCTURAL COLLAPSE - Structures whose ability to remain self-supporting have been compromised.

SUPPORT AGENCY - An agency designated to assist a specific primary or joint primary agency with available resources, capabilities, or expertise in support of Emergency Support Function (ESF) activities under the coordination of the primary or joint primary, agency. An example of a support agency is the Department of Agriculture for ESF 8 - Health and Medical Services.

SURGE/INCREASED READINESS - A strategy for moving from a pre-established or existing base capability to a higher level of capability. Per the Federal Emergency Management Agency, Civil defense surge and increased readiness are not concepts that can be separated into different and distinct compartments. State and local increased readiness actions might be taken before, during, and after the initiation of a civil defense surge and may be part of it. Surge may be thought of as a federally supported enhanced form of increased readiness.
SURVIVABLE CRISIS MANAGEMENT (SCM) - The operational capability to survive a catastrophic disaster and be able to direct, control, and coordinate emergency operations within the state and in coordination and cooperation with other states and the federal government.

SYNDROME - A group of symptoms and signs of disordered function related to one another by means of some anatomical, physiological, or biochemical peculiarity. Provides a frame of reference for investigating an illness.

TABLETOP EXERCISE - An activity in which officials and key staff or others with emergency responsibilities are gathered together informally to discuss simulated emergency situations. It is designed to elicit constructive discussion by the participants without time constraints. Participants evaluate plans and procedures and resolve questions of coordination and assignment of responsibilities in a non-threatening format under minimum stress.

TEAR (riot control agents) - Produce irritating or disabling effects that rapidly disappear within minutes after exposure ceases

TERRORISM - The unlawful use of force or violence committed by an individual or group against persons or property in order to intimidate or coerce a government, the civilian population, or any segment thereof in furtherance of political or social objectives.

THERAPY ANIMAL - not legally defined by federal law, but some states have laws defining therapy animals. They provide people with constant contact with animals but are not limited to working with people who have disabilities. They are usually the personal pets of their handlers and work with their handlers to provide services to others. Federal laws have no provisions for people to be accompanied by therapy animals in places of public accommodation that have “no pets” policies. Therapy animals are not usually service animals.

THERMONUCLEAR WEAPON - A nuclear weapon (also referred to as a hydrogen bomb) in which the main contribution to the explosive energy results from fusion of light nuclei such as

Deuterium and Tritium. The high temperatures required for such fusion reactions are obtained by means of an initial fission explosion.

THREAT **-** An indication of possible violence, harm, or danger.

TITLE III - Public Law 99-499, Superfund Amendment and Reauthorization Act (SARA) of 1986, Title III, Emergency Planning Community Right-to-Know Act (EPCRA), requires the establishment of state and local planning organizations, State Emergency Response Commission (SERC) - a subcommittee of the Emergency Management Council -, and Local Emergency Planning Committees (LEPCs) to conduct emergency planning for hazardous materials incidents. It requires (1) site-specific planning for extremely hazardous substances, (2) participation in the planning process by facilities storing or using hazardous substances, and (3) notifications to the commission or committee of releases of specified hazardous substances. It also provides for mechanisms to provide information on hazardous chemicals and emergency plans for hazardous chemical events to the public.

TOXICITY - A measure of the harmful effect produced by a given amount of a toxin on a living organism. The relative toxicity of an agent can be expressed in milligrams of toxin needed per kilogram of body weight to kill experimental animals.
TOXINS - A substance, in some cases produced by disease-causing microorganisms, that is toxic to other living organisms. Numerous organisms including bacteria, fungi, algae, and plants produce toxins. Many toxins are extremely poisonous, with a toxicity that is several orders of magnitude greater than the nerve agents. Since toxins have low volatility, they are dispersed as aerosols and then taken up primarily through inhalation. Some examples of toxins include:

BOTULINUM TOXIN - Produced by the bacterium Clostridium botulinum and is one of the most lethal compounds known. There are three forms of botulism – food borne (the classic form), wound, and intestinal (infant and adult) botulism. The site of toxin production is different for each of the forms but all share the flaccid descending paralysis. In its natural form, botulism toxin is most often found in improperly canned or undercooked foods. Ventilatory assistance is required for recovery and if available administration of the botulism antitoxin can aid treatment.

RICIN - A toxin made from the processing of Castor beans for oil. Symptoms of ricin poisoning would result about 3 hours after exposure through inhaling, ingesting or injecting and would cause cough, tightness of the chest, difficulty breathing, nausea and muscle aches. This could progress to death within 36-48 hours from respiratory or circulatory collapse. No vaccine or anti-toxins are available, only supportive treatment.

SAXITOXIN - A potent neurotoxin produced by certain dinoflagellates that accumulate in shellfish feeding on these organisms and consequently causes paralytic shellfish poisoning in human beings who eat the contaminated shellfish. Development of this illness is extremely rapid with initial symptoms such as numbness or tingling in the lips, tongue and fingertips followed by a general lack of muscle coordination. At high doses death from respiratory paralysis may occur within less than 15 minutes.

TRAINING EVENT - A planned, non-emergency activity for the development, maintenance, or upgrading of emergency worker skills.

TREATMENT AREA: The designated area for the collection and treatment of patients.

- Red: an area where patients require immediate assistance
- Yellow: an area where patient injuries are serious (delayed) but not life-threatening
- Green: an area where patients with minor injuries are kept

TRANSFER POINT – A location used to change vehicle operators and/or transfer evacuees and luggage from one vehicle or mode of transportation to another. A transfer point incorporates all necessary logistical support.

TRAUMA - A major single or multisystem injury requiring immediate medical or surgical intervention or treatment to prevent death or permanent disability. (RCW 70.168.015)

TRENCH RESCUE - Narrow excavation below the surface of the earth where the depth is greater than the width at the bottom.

TRIAGE - The screening and classification of sick, wounded, or injured persons during disasters to determine priority needs for the efficient use of medical and nursing personnel, equipment, and facilities. Triage is also done in emergency rooms and acute care clinics to determine priority of treatment. The use of triage is essential to save the maximum number of lives specifically during an emergency situation that produces many more sick and wounded individuals than the available medical care facilities and personnel can handle.

TRIBAL GOVERNMENT (TRIBES) - Authorized representatives of Federally Recognized Tribes that are sovereign governments within the United States. Within Washington State, Tribes interface with the State during disasters in a very similar manner as other types of local government with respect to seeking supplemental response and recovery support.

TRIGGER LIST - A list of sensitive items to which export controls are to be applied. The Zangger Committee (INFCIRC 209) and the Nuclear Supplier Group (INFCIRC 254) each have trigger lists.

TULAREMIA - A disease caused by the bacterium Francisella tularensis that is characterized by an abrupt onset of fever, chills, headaches, muscle aches and non-productive cough. The average incubation period is 3 to 5 days but can range from 1 to 21 days. Tularemia is usually transmitted occupationally to humans through infected animals, animal products or tick bites. Tularemia is not transmitted from person to person. Antibiotics are necessary for treatment.

UMATILLA CHEMICAL DEPOT (UMCD) - A United States Army ordnance storage facility located in northeastern Oregon formerly known as Umatilla Depot Activity (UMDA). The Depot has been operated since 1942 as a storage site for conventional Army ammunition, bombs, artillery shells, and landmines. It is now a storage site for unitary and binary chemical weapons and agents.

UNIQUE IDENTIFIER NUMBER: Number preprinted on a band or bracelet to assist in tracking patient throughout the incident from initial entry to final disposition

UNPROTECTED LANDS - Lands that are not protected by any fire suppression agency. (There is private property that does not have fire protection from rural fire districts, but does have protection from the Department of Natural Resources. This protection is for wildland and forest fires and not for protection of structures.)

URANIUM DIOXIDE - The chemical form of Uranium that is most commonly used in power reactors. Also known as "Brown Oxide," even though it is nearly black when pressed into pellets.

URANIUM OXIDE - The generic name for a group of uranium compounds that includes Uranium Dioxide ($U0_2$, Brown Cycle), Uranium Trioxide ($U0_3$, Orange Cycle), Uranus-Uranium Oxide ($U_30_8$, Black Cycle), and Uranium Peroxide ($U0_4.2H_20$).

URBAN FIRE - Fire that is primarily found within the boundaries or limits of a city.

URBAN SEARCH AND RESCUE (USR) - Locating, extricating, and providing for the immediate medical treatment of victims trapped in collapsed or damaged structures.

URBAN SEARCH AND RESCUE TASK FORCE - A 62 member organization sponsored by the Federal Emergency Management Agency in support of Emergency Support Function 9. The task force is trained and equipped to conduct heavy urban search and rescue and is capable of being deployed to any disaster site nationwide.

V-SERIES NERVE AGENTS - Chemical agents of moderate to high toxicity developed in the 1950s. They are generally persistent. Examples are VE, VG, VM, VS, and VX.

VACCINE - A preparation of killed or weakened microorganism products used to artificially induce immunity against a disease.

VAPOR AGENT - A gaseous form of a chemical agent. If heavier than air, the cloud will be close to the ground. If lighter than air the cloud will rise and disperse more quickly.

VENEZUELAN EQUINE ENCEPHALITIS (VEE) - VEE is a mosquito-borne arbovirus. In nature, VEE is infects animals and is transmitted to humans through mosquitoes that have fed on the infected animals. The disease is characterized by sudden onset of headache, chills and fever, nausea and vomiting, muscle and bone aches, and encephalitis occurring in a very small portion of cases.

VENOM - A poison produced in the glands of some animals such as snakes, scorpions, and bees.

VESICLE - A blister-like, small elevation on the skin containing fluid or a small sac or bladder containing fluid. Vesicles may vary in diameter from a few millimeters to a centimeter. They may be round, transparent, opaque, or dark elevations of the skin.

VIRUS - An infectious microorganism that exists as a particle rather than as a complete cell. Particle sizes range from 20 to 400 nanometers (one billionth of a meter). Viruses are not capable of reproducing outside of a host cell. Some examples include:

VITRIFICATION - The solidification process to bind hazardous waste indefinitely. Hazardous waste is melted with a mixture of sand and reground fusing materials (a frit) to form a glass for ease of handling and storage.

VOLATILITY - A measure of how readily a substance will vaporize.

VOMITING AGENTS - Produce nausea and vomiting effects can also cause coughing sneezing, pain in the nose and throat, nasal discharge, and tears.

WASHINGTON PUBLIC POWER SUPPLY SYSTEM (Name changed to Energy Northwest in 1999) - A public corporation planning the construction and operation of three nuclear facilities in the state of Washington. Two facilities (WNP-1 and WNP-2 – Name changed to Columbia Generating Station) are located on land leased from the United States Department of Energy, Hanford Site, and one facility (WNP-3) is located in Grays Harbor County. Columbia Generating Station is the sole operating plant.

WASHINGTON STATE EMERGENCY INFORMATION CENTER (WEIC) - State level emergency public information may be established, provided to media and public, and
Managed through the WEIC, which is a part of the Washington State Emergency Operations Center (EOC).

WATER RESCUE - Locating and removing persons from moving or standing bodies of water (to include ice, salt and fresh) both surface and subsurface.

WEAPONS GRADE MATERIAL - Nuclear material considered most suitable for a nuclear weapon. It usually connotes Uranium enriched to above 90 percent Uranium-235 or Plutonium with greater than about 90 percent Plutonium-239.

WEAPON OF MASS DESTRUCTION (WMD) (TITLE 18 USC, SECTION 2332a) - Any weapon or device that is intended or has the capability to cause death or serious bodily injury to a significant number of people through the release, dissemination, or impact of toxic or poisonous chemicals or their precursors; a disease organism; or radiation or radioactivity. Any explosive, incendiary, or poison gas, bomb, grenade, rocket having a propellant charge of more than four ounces, missile having an explosive or incendiary charge of more than one-quarter ounce, min or device similar to the above; poison gas; any weapon that is designed to release radiation or radioactivity at a level dangerous to life.

WILD ANIMAL - any animal that is now or historically has been found in the wild, or in the wild state, within the boundaries of the United States, its territories, or possessions. This term includes, but is not limited to, animals such as deer, skunk, opossum, raccoons, mink, armadillos, coyotes, squirrels, fox, and wolves.

WILDLAND - An area in which development is essentially non-existent except for roads, railroads, power lines, and similar transportation facilities. Used in place of WILDERNESS, which frequently refers to specifically designated federal lands intended to remain in their natural state to the greatest extent possible.

WILDLAND FIRE - Fire that occurs in wildland areas made up of sagebrush, grasses, or other similar flammable vegetation.

WILDLAND SEARCH AND RESCUE - Search and rescue conducted in wildland areas. Due to the increasing wildland urban interface, wildland search and rescue strategy and tactics may also be employed for subjects lost or missing in urban or suburban areas. See SEARCH AND RESCUE, DISASTER SEARCH AND RESCUE, and URBAN SEARCH AND RESCUE.

WIND (DF) MESSAGES - Weather information concerning wind direction and speed. The information would be used for fallout forecasting.

YELLOWCAKE - A concentrated form of Uranium ore known as Uranium Diuranate.

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| **AAR** | After-Action Review |
| **ACF** | Alternate Care Facility |
| **ACS** | Auxiliary Communications Services |
| **ADMIN** | Administrative Services Department |
| **ALS** | Advanced Life Support |
| **AMR** | American Medical Response |
| **APHIS** | Animal and Plant Health Inspection Service |
| **ARC** | American Red Cross (Also called Red Cross) |
| **BLS** | Basic Life Support |
| **CAN** | Coordinated Assistance Network |
| **CB** | Citizens Band Radio |
| **CBO** | Community-Based Organization |
| **CDRG** | Catastrophic Disaster Response Group |
| **CEMP** | Comprehensive Emergency Management Plan |
| **CERCLA** | Comprehensive Environmental Response, Compensation, and Liability Act |
| **CERT** | Community Emergency Response Team |
| **CRT** | Community Response Team |
| **CFO** | Chief Financial Officer |
| **CI/KR** | Critical Infrastructure/Key Resources |
| **CISD** | Critical Incident Stress De-briefing |
| **CMC** | Crisis Management Coordinator |
| **CMO** | City Manager's Office |
| **CNMI** | Commonwealth of the Northern Mariana Islands |
| **CONPLAN** | U.S. Government Interagency Domestic Terrorism Concept of Operations Plan |
| **CSG** | Counterterrorism Security Group |
| **CW** | Continuous Wave (Also known as Morse Code) |
| **DCE** | Defense Coordinating Element |
| **DCO** | Defense Coordinating Officer |
| **DEST** | Domestic Emergency Support Team |
| **DHS** | Department of Homeland Security |
| **DMAT** | Disaster Medical Assistance Team |
| **DMORT** | Disaster Mortuary Operational Response Team |
| **DMC** | Disaster Medical Control |
| **DMP** | Donation Management Plan |
| **DML** | Donations Management Leader |
| **DOC** | Department of Commerce |
| **DOD** | Department of Defense |
| **DOE** | Department of Energy |
| **DOI** | Department of the Interior |
| **DOJ** | Department of Justice |
| **DOL** | Department of Labor |

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| **DOS** | Department of State |
| **DOT** | Department of Transportation |
| **DPA** | Defense Production Act |
| **DRC** | Disaster Recovery Center |
| **DRM** | Disaster Recovery Manager |
| **DSCA** | Defense Support of Civil Authorities |
| **DTRIM** | Domestic Threat Reduction and Incident Management |
| **EAS** | Emergency Assistance Personnel or<br>Emergency Alert System |
| **ECC** | Emergency Coordination Centers |
| **EOC** | Emergency Operations Center |
| **EMAC** | Emergency Management Assistance Compact |
| **EMTALA** | Emergency Medical Treatment and Labor Act |
| **EPA** | Environmental Protection Agency |
| **EPCRA** | Emergency Planning and Community Right-to-Know Act |
| **EPLO** | Emergency Preparedness Liaison Officer |
| **EPR** | Emergency Preparedness and Response |
| **ERL** | Environmental Research Laboratories |
| **ERT** | Environmental Response Team (EPA) |
| **ERT-A** | Emergency Response Team—Advance Element |
| **ERT-N** | National Emergency Response Team |
| **ESF** | Emergency Support Function |
| **ESFLG** | Emergency Support Function Leaders Group |
| **EST** | Emergency Support Team |
| **FAS** | Freely Associated States |
| **FBI** | Federal Bureau of Investigation |
| **FCO** | Federal Coordinating Officer |
| **FDOC** | Fire Department Operation Center |
| **FEMA** | Federal Emergency Management Agency |
| **FIRST** | Federal Incident Response Support Team |
| **FLSA** | Fair Labor Standards Act |
| **FMC** | Federal Mobilization Center |
| **FNS** | Food and Nutrition Service |
| **FOC** | FEMA Operations Center |
| **FOG** | Field Operations Guide |
| **FRC** | Federal Resource Coordinator |
| **FRERP** | Federal Radiological Emergency Response Plan |
| **FTS** | Field Treatment Site |
| **GAR** | Governor's Authorized Representative |
| **GIS** | Geographical Information System |
| **GSA** | General Services Administration |
| **HHS** | Department of Health and Human Services |
| **HIPPA** | Health Insurance Portability and Accountability Act |
| **HMC** | Harborview Medical Center |

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| **HMP** | Hazard Mitigation Plan |
| **HQ** | Headquarters |
| **HR** | Human Resources Department |
| **HSAS** | Homeland Security Advisory System |
| **HSC** | Homeland Security Council |
| **HSOC** | Homeland Security Operations Center |
| **HSPD** | Homeland Security Presidential Directive |
| **IAIP** | Information Analysis and Infrastructure Protection |
| **IA** | Interlocal Agreements |
| **IC** | Incident Command |
| **ICP** | Incident Command Post |
| **ICS** | Incident Command System |
| **IIMG** | Interagency Incident Management Group |
| **IMT** | Incident Management Team |
| **INRP** | Initial National Response Plan |
| **IOF** | Interim Operating Facility |
| **ISAO** | Information-Sharing and Analysis Organization |
| **ISDN** | Integrated Services Digital Networking |
| **IT** | Information Technology |
| **IWN** | Integrated Wireless Network |
| **JFO** | Joint Field Office |
| **JIC** | Joint Information Center |
| **JIS** | Joint Information System |
| **JOC** | Joint Operations Center |
| **JTF** | Joint Task Force |
| **JTTF** | Joint Terrorism Task Force |
| **LTC-MAP** | Long Term Care Mutual Aid Plan |
| **KCECC** | King County Emergency Coordination Center |
| **KCDOT** | King County Department of Transportation |
| KCOEM | King County Office of Emergency Management |
| **KCSO** | King County Sheriff's Office |
| **MAA** | Mutual Aid Agreements |
| **MAC Entity** | Multiagency Coordinating Entity |
| **MACC** | Multiagency Command Center |
| **MARS** | Mutual Aid Radio System |
| **MAST** | Military Assistance to Safety and Traffic |
| **MERS** | Mobile Emergency Response Support |
| **MOA** | Memorandum of Agreement |
| **MMRS** | Metropolitan Medical Response System |
| **MOU** | Memorandum of Understanding |
| **MSCA** | Military Support of Civil Authorities |
| **NAHERC** | National Animal Health Emergency Response Corps |
| **NASA** | National Aeronautics and Space Administration |
| **NAWAS** | National Warning System |

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| **NCH** | Natural and Cultural Resources and Historic Properties |
| **NCP** | National Oil and Hazardous Substances Pollution Contingency Plan |
| **NCR** | National Capital Region |
| **NCS** | National Communications System |
| **NCTC** | National Counterterrorism Center |
| **NDMN** | National Donations Management Network |
| **NDMS** | National Disaster Medical System |
| **NEP** | National Exercise Program |
| **NGO** | Nongovernmental Organization |
| **NICC** | National Infrastructure Coordinating Center |
| **NICC** | National Interagency Coordination Center |
| **NIMS** | National Incident Management System |
| **NIPP** | National Infrastructure Protection Plan |
| **NIRT** | Nuclear Incident Response Team |
| **NJTTF** | National Joint Terrorism Task Force |
| **NMRT** | National Medical Response Team |
| **NOC** | Integra Network Operation Center |
| **NOAA** | National Oceanic and Atmospheric Administration |
| **NORCOM** | North East King County Regional Public Safety Communications Agency |
| **NRC** | Nuclear Regulatory Commission |
| **NRCC** | National Response Coordination Center |
| **NRCS** | Natural Resources Conservation Service |
| **NRF** | National Response Framework |
| **NRT** | National Response Team |
| **NSC** | National Security Council |
| **NSP** | National Search and Rescue Plan |
| **NSSE** | National Special Security Event |
| **NVOAD** | National Voluntary Organizations Active in Disaster |
| **NWCG** | National Wildland Coordinating Group |
| **OEM** | Office of Emergency Management |
| **OIA** | Office of the Assistant Secretary for Information Analysis |
| **OSC** | On-Scene Coordinator 76 \| National Response Plan December 2004 |
| **OSHA** | Occupational Safety and Health Administration |
| **OSLGCP** | Office of State and Local Government Coordination and Preparedness |
| **PADS** | Planning and Development Service, also known as PDS |
| **PCC** | Policy Coordination Committee |
| **PDA** | Preliminary Damage Assessment |
| **PDD** | Presidential Decision Directive |
| **PDS** | Planning and Development Services also known as PADS |
| **PFO** | Principal Federal Official |
| **PIO** | Public Information Officer |
| **POC** | Point of Contact |
| **POD** | Point of Distribution |
| **PPE** | Personal Protective Equipment |

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| **PRI** | Primary Rate Interface |
| **PW** | Public Works |
| **RA** | Reimbursable Agreement |
| **RACES** | Radio Amateur Civil Emergency Services |
| **RAMP** | Remedial Action Management Program |
| **RCP** | Regional Contingency Plan |
| **RCPGP** | Puget Sound Regional Catastrophic Preparedness Grant Program |
| **RCW** | Revised Code of Washington |
| **RDP** | Regional Disaster Plan |
| **RRCS** | Parks, Recreation and Cultural Services |
| **RVRC** | Regional Volunteer Reception Center |
| **RCRA** | Resource Conservation and Recovery Act |
| **REPLO** | Regional Emergency Preparedness Liaison Officer |
| **RFI** | Request for Information |
| **RISC** | Regional Interagency Steering Committee |
| **RRCC** | Regional Response Coordination Center |
| **RRT** | Regional Response Team |
| **ROC** | Regional Operations Center |
| **SAC** | Special Agent-in-Charge |
| **SAR** | Search and Rescue |
| **SCC** | Secretary's Command Center (HHS) |
| **SCO** | State Coordinating Officer |
| **SDOT** | Seattle Department of Transportation |
| **SERS** | Snohomish Emergency Radio System |
| **SFLEO** | Senior Federal Law Enforcement Official |
| **SFO** | Senior Federal Official |
| **SIOC** | Strategic Information and Operations Center |
| **SOG** | Standard Operating Guideline |
| **SOP** | Standard Operating Procedure |
| **SPU** | Seattle Public Utilities |
| **START** | Scientific and Technical Advisory and Response Team |
| **TAG** | Adjutant General (WA National Guard) |
| **TSA** | Transportation Security Administration |
| **TSC** | Terrorist Screening Center |
| **TRIS** | Tri-County Radio Interoperability System |
| **TTU** | Text Telephone |
| **US&R** | Urban Search and Rescue |
| **USACE** | U.S. Army Corps of Engineers |
| **USCG** | U.S. Coast Guard |
| **USDA** | U.S. Department of Agriculture |
| **USSS** | U.S. Secret Service |
| **UHF** | Ultra High Frequency |
| **VEW** | Volunteer Emergency Workers |
| **VHF** | Very High Frequency |

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| **VMAT** | Veterinarian Medical Assistance Team |
| **WAC** | Washington Administrative Code |
| **WMP** | Volunteer Management Program |
| **VMS** | Volunteer Management Supervisor |
| **VMU** | Volunteer Management Unit |
| **VOIP** | Voice Over Internet Protocol |
| **VRC** | Volunteer Reception Center |
| **WAMAS** | Washington Mutual Aid System |
| **WAVOAD** | Washington Association of Volunteer Organizations Active in Disasters |
| **WAWAS** | Washington Area Warning System |
| **WMD** | Weapons of Mass Destruction |
| **WNG** | Washington National Guard |
| **WSDOT** | Washington State Department of Transportation |
| **WSP** | Washington State Patrol |
| **Z1 EC** | Zone 1 Emergency Coordinator |

This Plan was developed and is maintained pursuant to, but not limited to, the following state and federal statutes and regulations, and existing plan documents. This appendix is a compilation of references used in the completion of this version of the Shoreline Comprehensive Emergency Management Plan. References include: Federal, State, and local codes and regulations as well as texts, plans and widely used standards.

National Response Framework

Department of Defense Directive 3025.1

Washington State Comprehensive Emergency Management Plan, 2011

Public Law 93-288, The Disaster Relief Act of 1974, as amended by Public Law 100-707, the Robert T. Stafford Disaster Relief and Emergency Assistance Act.

Title 47 USC 151, 303,524,606 as related to FCC Rules and Regulations, Emergency Alert System 11 CFR Part 11 as related to FCC Rules and Regulations, Emergency Alert System

Homeland Security Presidential Directives (HSPD) #1-8

National Incident Management System, 2004

Incident Command System, 2004

Revised Code of Washington 38.52, Emergency Management

Revised Code of Washington 70.102, Hazardous Substances Incidents

Revised Code of Washington 70.136, Hazardous Materials Incidents

Revised Code of Washington 4.2.4.314, Hazardous Materials - Responsible Party

Washington State Administrative Code 118.30 Emergency Management

Washington State Administrative Code 118.40 Community Right to Know Act

Washington State Administrative Code 118-04 Emergency Workers

Washington State Hazard Identification Vulnerability Analysis (HIVA 2000)

Washington State Fire Mobilization Plan

Northwest Area Contingency Plan, Washington State Department of Ecology, 1996

Hazardous Materials Emergency Resource Plan, Draft, King County LEPC, 2002

Vital Records and Disaster Recovery Guidelines (King County 3/96)

Endangered Species Act (ESA) King County Policy Guidance document (2001)

American Red Cross of King-Kitsap County Weapons Mass Destruction

Seattle-King County Mass Casualty Incident Plan (MCI)

King County Comprehensive Emergency Operations Plan

King County Regional Disaster Framework

Disaster Assistance for Local Government, June 1996

Disaster Assistance: A Guide to Recovery Programs (FEMA 1995)

Earthquake Recovery: Survival Manual for Local Government (California/1993)

Public Assistance Policy Digest (FEMA 1998)

Public Assistance Debris Management Guide (FEMA 1999)

Article 80 Uniform Fire Code, 2000

City of Shoreline Municipal Code 2.50 Emergency Management

King County CEMP Regional Shelter Operations Incident Annex (2010)

Puget Sound Region Evacuation and Sheltering Plan

Shelter Operations Participant's Workbook, American Red Cross

WA State Good Samaritan law

City of Shoreline Disaster Recovery Plan, 2010

City of Shoreline Hazard Mitigation Plan, 2009

City of Shoreline Continuity of Government Plan, 2009

City of Shoreline Debris Management Plan, 2010

King County Mass Fatality Incident Plan

King County Medical Examiner's Office Multiple Fatality Incident Guidelines

King County for Pre-Hospital Catastrophic Emergency Triage and Treatment Plan

King County Long Term Care Facilities Mutual Aid Evacuation Plan

Emergency Medical Treatment and Labor Act

Cross-Border Ambulance Reciprocity (#05-01), Washington State Department of Health, Office of Emergency Medical Services and Trauma System, Effective November 30, 2003.

W A Public Health Mutual Aid Plan Standard Operating Procedures (SOPs) of the Inter-jurisdictional Public Health Mutual Aid Agreement (MAA) (January 2009)

Act 58-4-1905 American National American Red Cross Statement of Understanding, Dec. 30, 1985

Mennonite Disaster Services Agreement with Federal Disaster Assistance Administration (FDAA).

Washington State Intrastate Mutual Aid Compact

Superfund Amendments and Re-authorization Act (SARA Title III)

**PRIMARY AGENCY:** Community Services Division

**SUPPORT AGENCIES:** All City Departments, Shoreline Police, and Shoreline Fire

The City relies on the Emergency Management Coordinator to train, facilitate, monitor and advise on all emergency management training for City staff to ensure compliance for National Incident Management System requirements and to develop competencies for their assignments in the EOC, for field operations during events, or to assist with issues like shelter operations, debris management, and recovery. The EMC relies on training resources from King County OEM, Washington State DEM, community partners, and the Federal government.

The City participates at least once a year in an exercise with community and/or regional partners. This can be in the form on a table top, functional or full scale exercise. The staff assigned to the Emergency Management function participates in at least 3 exercises every year within the region or state.

Shoreline Emergency Management will make a reasonable effort to include people with disabilities and/or organizations with expertise in disability issues, to participating in Training, Drills, and Exercises.

**Hardcover**
City Clerks
CMO
CSD
EMC
EOC
PW Admin
PW Ops
Finance
HR
Police
PADS
Parks
Fire
Shoreline Schools
Shoreline CC
ACES Team

**CD Distribution**
State of Washington
Fire Department
Police Department
Shoreline Water
Ronald Wastewater
CRISTA
ZONE 1

**Intranets**
City, Police & Fire

**Internet**
City of Shoreline Web site

Distribution of revised versions will be the responsibility of the Emergency Management Coordinator.

Outdated versions of this plan should be destroyed when a new version is published so that only the most recent version is in circulation.

**RECORD OF CHANGES**

In future revisions, this page will provide a record of major changes made since the date of publishing the first draft, to keep the plan consistent with current policies.

| Change Number | Date of Change | Part | Attachment Changed Posted By |
|---|---|---|---|
| | | | |

# EMERGENCY SUPPORT FUNCTION #1

## Transportation

**ESF COORDINATOR: Public Works Director**

**LEAD AGENCIES: Public Works Department**

**SUPPORT AGENCIES: Police Department, Fire Department, EOC, Administrative Services Department, Zone 1 Emergency Coordinator, King County Emergency Coordination Center, Washington State Emergency Management Division, Washington State Department of Transportation.**

## Article I. Introduction

### Section 1.01 Purpose

(a) This document has been developed to provide for the mitigation, preparedness, recovery, restoration, safety and security of the transportation system within the City of Shoreline (City) in the event of an emergency or disaster. The City's transportation system is one of the critical lifelines of our community. This ESF will guide us the timely restoration of that lifeline during and after an emergency or disaster.

### Section 1.02 Scope

(a) This ESF addresses the following activities: assessment and reporting of damage to all transportation systems within the City; requesting and coordinating assistance from the County, State and Federal governments; coordinating alternate transportation services; and coordinating the restoration and recovery of the City's transportation infrastructure. The transportation network refers to the multimodal system within the City of Shoreline that includes, but is not limited to, surface, transit, maritime, and aviation assets.

### Section 1.03 Situation

(a) By nature a transportation network is an extremely fragile system. Local transportation activities can be hampered due to damaged infrastructure, a surge in use, and/or a loss in capacity. Most public emergencies will create a demand for local transportation resources to support the response, recovery, and restoration of the transportation system.

### Section 1.04 Assumptions

(a) A public emergency occurring within the Region will have a negative impact on the transportation network

(b) During a public emergency the transportation infrastructure will be impacted which could limit access to and from the incident area.

(c) A public emergency within or adjacent to the City has the potential to cause loss of life, property, and/or disruption of normal life support.

(d) The City may be heavily dependent on outside agency assistance to repair significant damage to transportation systems in order to coordinate transportation during the immediate and post-disaster period.

(e) Infrastructure damage and communications disruptions may inhibit efficient coordination of transportation support during the immediate and post-disaster period.

(f) Regional emergency transportation coordination and planning is critical to ensure regional transportation stability.

(g) The City is heavily dependent on King County and Washington State transportation infrastructure to support transportation needs, especially transporting patients to hospitals. This plan depends on the ability for those infrastructures to be operational.

(h) Initial damage reports may be fragmented and provide an incomplete picture concerning the extent of damage to communications facilities.

(i) Bridge failures, traffic, landslides, damaged road systems, air traffic restrictions, and so forth, may hamper access, making conventional travel extremely difficult or impossible.

**Section 1.05 Policies**

(a) All activities within ESF 1 – Transportation will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF).

(b) Primary emergency transportation responsibilities will be coordinated by the Public Works Department, Operations Division (PW).

(c) In accordance with RCW 38.52.990 (9) and City of Shoreline Municipal Code 2.50, in responding to a disaster, the City Manager is directed to utilize the services, equipment, supplies and facilities of existing departments, offices and agencies of the state, political subdivisions and all other municipal corporations thereof including but not limited to districts and quasi municipal corporations organized under the laws of the State of Washington to the maximum extent practicable and the officers and personnel of all such departments, offices and agencies are directed to cooperate with and extend such services and facilities upon request notwithstanding any other provision of law.

(d) All City owned vehicles (not otherwise involved in emergency response) will be made available for use by the ESF 1 Coordinator, the Public Works Operations and Utilities Manager and the Public Works Director.

(e) As a signatory of the King County Regional Disaster Framework and through the State of Washington Mutual Aid System (WAMAS), the City will make resources available to other jurisdictions through the KC ECC, whenever possible.

## Article II. Concept of Operations

### Section 2.01 General

(a) All operations conducted within the scope of ESF 1, Transportation, will utilize the Incident Command System (ICS) in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF).

(b) The City will coordinate, as appropriate, with jurisdictions within Zone 1 though the Zone 1 Emergency Coordinator (Z1 EC); King County Emergency Coordination Center and Snohomish County Emergency Operations Center; and the Washington State Emergency Operations Center to ensure expeditious resolutions to transportation issues resulting from an emergency or disaster.

(c) The PW Department is responsible for the assessment, coordinated repairs and operations of City owned infrastructure. In the event all City and mutual aid resources have been expended, the PW Department will notify the City's Emergency Operations Center (EOC) that additional assistance is needed. The EOC will request outside assistance through KC ECC. In the event KC ECC is not available, the EOC can request assistance from Snohomish County or submit requests for assistance directly to the Washington State Emergency Operations Center.

(d) During a disaster, the PW Department, will identify the most efficient and effective method of operating the transportation system within the City to appropriately respond to the emergency and will coordinate operations through the EOC with, King County Department of Transportation (KCDOT), Seattle Department of Transportation (SDOT), Snohomish County Transportation, the Washington Department of Transportation (WSDOT), Washington State Patrol (WSP), and with the Public Works Departments of adjacent cities to provide an effective integrated transportation system within the region.

(e) As the extent and transportation needs of an emergency are identified, the PW Department, Operations Division will identify the most efficient and effective method of operating the transportation system to appropriately respond to the emergency.

(f) In locations where local ground, water, or air transportation systems have been severely disabled, local political subdivisions will act to restore transportation systems and equipment on a priority basis, whenever possible.

(g) The PW Department, Operations Division will notify all appropriate agencies, departments and affected individuals through the EOC at the earliest time possible by providing early warning of system changes and roadway conditions.

**Section 2.02 Organization**

(a) The PW Department is the lead agency for the coordination of emergency management activities associated with ESF 1 within the City. The PW Department has pre-designated individuals to be assigned to the EOC to facilitate the coordination of ESF 1, Transportation Operations (see ESF 5 - EOC Lines of Succession).

**Section 2.03 Actions**

(a) **Preparedness:**

1) Conduct planning with other agencies and other emergency support functions to refine transportation operations,

2) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

3) Maintain a list of City assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources,

4) Assign and schedule sufficient personnel to implement transportation tasks for an extended period of time,

5) Ensure lead agency personnel are trained in their responsibilities and duties,

6) Develop and implement emergency response and transportation strategies,

7) Develop and present training courses for personnel assigned to support transportation needs,

8) Maintain liaison with support agencies

9) Conduct All Hazards exercises involving the Transportation ESF.

(b) **Response:**

1) Coordinate operations at the EOC and/or at other locations as required,

2) Coordinate needs and response actions with each transportation agency,

3) Establish and maintain a system to support on-scene direction/control and coordination with the EOC, King County ECC, and the State EOC, or other coordination entities as appropriate,

4) Utilize evacuation, deployment or demobilization routes to the extent possible, (See ESF 16 for Evacuation procedures.

5) Coordinate with support agencies to develop, prioritize and implement strategies for the initial response to EOC requests. Shoreline Fire Department Emergency Medical Services will provide transportation for medically critical and other special needs persons. American Medical Response (AMR) will provide transportation for ambulatory and non-ambulatory persons,

6) Establish communications with appropriate field personnel to ensure readiness for timely response,

7) Monitor and direct transportation resources and response activities to include pre-positioning for response/relocation due to the potential impact(s) of the emergency situation,

8) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

9) Coordinate with support agencies, as needed, to support emergency activities,

10) Obtain other resources through the King County Regional Disaster Framework or accessing WAMAS.,

11) Coordinate all resources into the affected areas from designated staging areas,

12) Relay all emergency traffic conditions/regulations to all affected personnel,

13) Coordinate with other Jurisdictions to obtain resources and facilitate an effective emergency response among all participating agencies,

14) Report to the EOC any traffic control signs/signals needed at locations for general navigation through and around the disaster area,

15) Coordinate with Public Works, Operations Division for equipment and staffing required to clear roads,

16) Coordinate with Shoreline Fire Department for emergency medical air transportation

17) Coordinate with Shoreline Fire Department and Shoreline Police Department for transportation services, including evacuation and transportation of the medical fragile, by non-emergent Transport providers. This includes ensuring that providers have access, as needed, through checkpoint and restricted areas.

(c) **Recovery**

1) Recovery activities for this ESF are covered in the City of Shoreline Disaster Recovery Plan

(d) **Mitigation**

1) Mitigation activities for this ESF are covered in the Shoreline Multi-jurisdictional Hazard Mitigation Plan.

## Article III. Responsibilities

### Section 3.01 Lead Agency

(a) Coordinate Transportation activities with appropriate agencies and jurisdictions.

(b) In coordination with the Shoreline Fire Department, the Police Department, assigned public works Lead staff (that includes the combined resources of CRT and Park Maintenance staff) will facilitate the initial rapid damage assessment of all transportation routes and report information to the EOC.

(c) Take action to appropriately close or adjust routes deemed unsafe and identify alternate routes.

(d) Coordinate with the City's Police Department to provide temporary traffic control measures/devices and operational control of traffic signals as needed.

(e) Immediately notify Metro Transit, Community Transit, Shoreline School District, police, fire and other agencies of routes affected by partial or total road closures and detours.

(f) Whenever possible, make temporary emergency repairs, bypasses or alterations to critical transportation routes to ensure movement of emergency responders.

(g) Provide for safe and effective operation of streets and walkways through the removal of debris.

(h) Maintain an inventory of equipment (signs, barricades, paint, etc.) that are readily available to be used to respond to road closures, detour route markings, etc. in the case of an emergency. To the extent possible, deliver this equipment to the site in a timely manner.

(i) Through close coordination with the EOC, decide when to reopen roads that have been closed and coordinate activities required in accomplishing this task.

(j) Conduct minor street and structure repair after the decision to perform such services in-house has been made or whenever immediate restoration is critical and possible.

(k) Coordinate the use of alternative transportation routes and assist with the restoration and recovery of the transportation infrastructure.

(l) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency.

(m) Manage inventory of equipment and other pre-designated assets that are essential to meet transportation of special needs groups Monitor and direct transportation resources and response activities to include pre-positioning for response/relocation due to the potential impact(s) of the emergency situation.

(n) Assist with emergency evacuations and re-entry of threatened areas, in coordination with Law Enforcement, WSDOT, and KCECC.

**Section 3.02 Support Agency**

(a) **Emergency Operations Center**

1) Activate, when necessary, to provide for coordination of resources with all agencies involved.

2) Notify Z1 Emergency Coordinator, KC ECC and/or Washington State Emergency Operations Center regarding the status of transportation routes and services within the City, once PW has conducted the initial assessments.

3) Coordinate information between various departments within the City to ensure efficient and accurate communication.

4) Submit requests for additional resources to the Z1 EC, KC ECC, or Washington State Emergency Operations Center.

5) Provide information on emergency services including evacuation information and routes, staging areas and public shelters.

(b) **Police Department**

1) Notify the EOC of system deficiencies as soon as possible and make recommendations to reduce the impact of these damages on emergency responders and residents.

2) Provide support for traffic control and damage assessment operations.

3) Work with the PW Department to identify and resolve high hazard vehicle accident locations and other safety concerns.

4) Coordinate with PW on the movement of equipment, personnel and additional assets to ensure the arrivals for these assets in a timely manner.

5) Provide security for critical transportation routes.

6) Assist with the dissemination of transportation information to the public, as appropriate.

(c) **Fire Department**

1) Notify the EOC of any damage to transportation services and make recommendations to reduce the impact of these damages on emergency responders and residents.

2) Provide support for hazardous material incidents.

3) Whenever possible, assist in the initial rapid damage assessment of transportation routes.

(d) **Administrative Services Department**

1) Coordinate with other Local, County, State, and Federal agencies, through the EOC, to ensure that resources are accurately accounted for throughout the disaster.

2) Track disaster expenditure and facilitate the completion and submission of appropriate forms required for State and Federal assistance relating to the reimbursement of expenses incurred by the City during a disaster.

(e) **Zone 1 Emergency Coordinator**

1) Communicate and coordinate with jurisdictions within Zone 1 and KC ECC regarding the status of transportation routes within the area

2) Coordinate with Zone 1 jurisdictions and KC ECC to ensure proper distribution of resources.

(f) **King County Emergency Coordination Center**

1) Communicate with Zone 1, 3, and 5 ECCs and cities, Snohomish County, State Emergency Operations Center and all related agencies regarding transportation systems within the area and associated activities

2) Coordinate requests for resources with the above entities and facilitate the equitable distribution of available resources.

3) Coordinate activities of the KC DOT.

(g) **State Emergency Operations Center**

1) Provide coordination of State resources to provide support to local jurisdictions, as appropriate, when all local, regional and county resources have been expended.

2) Facilitate the requisition of resources from other states through the Emergency Management Assistance Compact (EMAC).

3) Request and coordinate Federal resources through the Federal Emergency Management Agency (FEMA).

(h) **Washington Department of Transportation**

1) Provide damage assessment, emergency repairs and periodic status reports of state highways and bridges, as appropriate.

2) Coordinate emergency transportation resources, as appropriate.

## Article IV. Appendices

(a) Appendix A - Transportation Resource Staging Area

(b) Appendix B – King County Transportation Recovery Plan

*Note: This information is also located in ESF #16 – Evacuation, as location may serve multiple purposes*

**Hamlin Park**
**16006 15th Ave NE**
**(73 Acres) EAST SIDE OF CITY**

Facilities: 1 Grass Multi-Purpose Field (approx. 320' X 275'), 2 Grass Baseball Fields (approx. 275' X 275' each), 1 Picnic Shelter with water/electricity, 2 Restroom buildings with electricity/water, 1 playground, and 3 parking lots.

Adjacent to: Kellogg Junior High School, Shorecrest High School and Shoreline School District Warehouse.

**Shoreline Park (at Shoreline Center)**
**1st Ave. NE @ N. 190th Street (9 Acres)**
**CENTRAL AREA OF CITY**

Facilities: 2 Synthetic Field Turf Fields (approx. 320' X 225'/side-by-side), 1 Grass Multi-Purpose Field (approx. 320' X 225'), 1 restroom building, 4 tennis courts, 1 playground, small parking lots and angle parking for 50 cars.

Adjacent to: Shoreline Pool, Shoreline Conference Center, Shoreline School District Administration and Maintenance Facilities, Shoreline Stadium.

**Paramount School Park**
**NE 155th Street & 8th Ave. NE**
**(7 Acres) EAST SIDE OF CITY**

Facilities: 1 Grass Multi-Purpose Field (approx 275' X 275'), 1 skate park, 1 restroom building, 1 picnic shelter, 1 playground, 1/3 mile walking path, 2 small parking lots for approx 40 cars

Adjacent to: Not Applicable

**Richmond Highlands Recreation Center and Ball fields**
**16544 Fremont Ave. N.**
**(4.3 Acres) WEST SIDE OF CITY**

Facilities: 1 Community Center (capacity 214) with small kitchen, meeting room, game room, small gym, 3 restrooms and small parking lot 30 cars, 1 Grass Multi-Purpose Field (250' X 300'), 1 outdoor restroom near ball fields and on-street parking.

Adjacent to: 1 block south of Shorewood High School

**Hillwood Park**
**3rd Ave. NW & NW 190 St.**
**(10 Acres) WEST SIDE OF CITY**
Facilities: 1 Grass Multi-Purpose Field, 1 restroom building, 1 playground, small parking lot, and natural area
Adjacent to: Einstein Junior High

**Shoreview Park**
**Innis Arden Way & 9th Ave. NW**
**(47.5 Acres) WEST SIDE OF CITY**
Facilities 2 Grass Baseball Fields (Upper Field approx. 200' X 200' / Lower Field approx. 250' X 250'), 1 All-Weather (Dirt) Soccer Field (approx. 320' X 225'), 2 restroom buildings, 6 Tennis Courts, 155 parking stalls.
Adjacent to: Shoreline Community College and Highland Terrace Elementary School

**Richmond Beach Community Park**
**Richmond Beach Road @ 21st Ave. NW**
**(3.8 Acres) WEST SIDE OF CITY**
Facilities 1 Grassy meadow, 1 sanican, 1 playground, 2 tennis courts, and on-street parking
Adjacent to: Richmond Beach Library

**Twin Ponds Park**
**1st Ave. NE and N. 155th Street**
**(21.8 Acres) CENTRAL SOUTH SIDE OF CITY**
Facilities: 1 Synthetic Field Turf, 1 restroom building, 1 playground, limited open grassy area, large natural space, 2 small parking lots
Adjacent to: Not applicable

# City of Shoreline

# Comprehensive Emergency Management Plan (CEMP)

# Essential Support Function (ESF) 1

# Appendix B

# King County Transportation Recovery Plan

## Created by King County OEM

## Pages: 200

Note:

This document was created and maintained by the State of Washington Catastrophic Planning Group. The City of Shoreline incorporates this document into its CEMP in order to improve regional collaboration and coordination. This document may have a different header, footer, page numbers, and references than the rest of the ESF.
For more information, please contact the State of Washington CatastrophicPlanning Group.

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# King County

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# Appendix B
# Scenario #3 - Closure of SR 167 – I-405 to the Pierce County Line

## A. General Information

For the closure of SR 167 – I-405 to Pierce County Line, stakeholders proposed two alternative routes for this scenario. The primary route entails diverting traffic from SR 167 to I-5. The secondary route involves diverting traffic from SR 167 to I-5 onto SR99. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)
2. Pierce County Department of Emergency Management (DEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency, and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional Emergency Operations Centers/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will also coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local government in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs),

municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

2. Pierce County Emergency Operations Center will notify Buckley Emergency Management, Gig Harbor Emergency Management, Puyallup Emergency Management and Tacoma Emergency Services as well as the jurisdictions and tribes with which they have an inter-local agreement which includes Bonney Lake, Buckley, DuPont, Eatonville, Edgewood, Fife, Fircrest, Lakewood, Milton, Orting, the Puyallup Tribe of Indians, Roy, Ruston, Steilacoom, Sumner, University Place, and Wilkeson.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Short term solutions have been identified such as providing alternate routing for all vehicle traffic. Solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

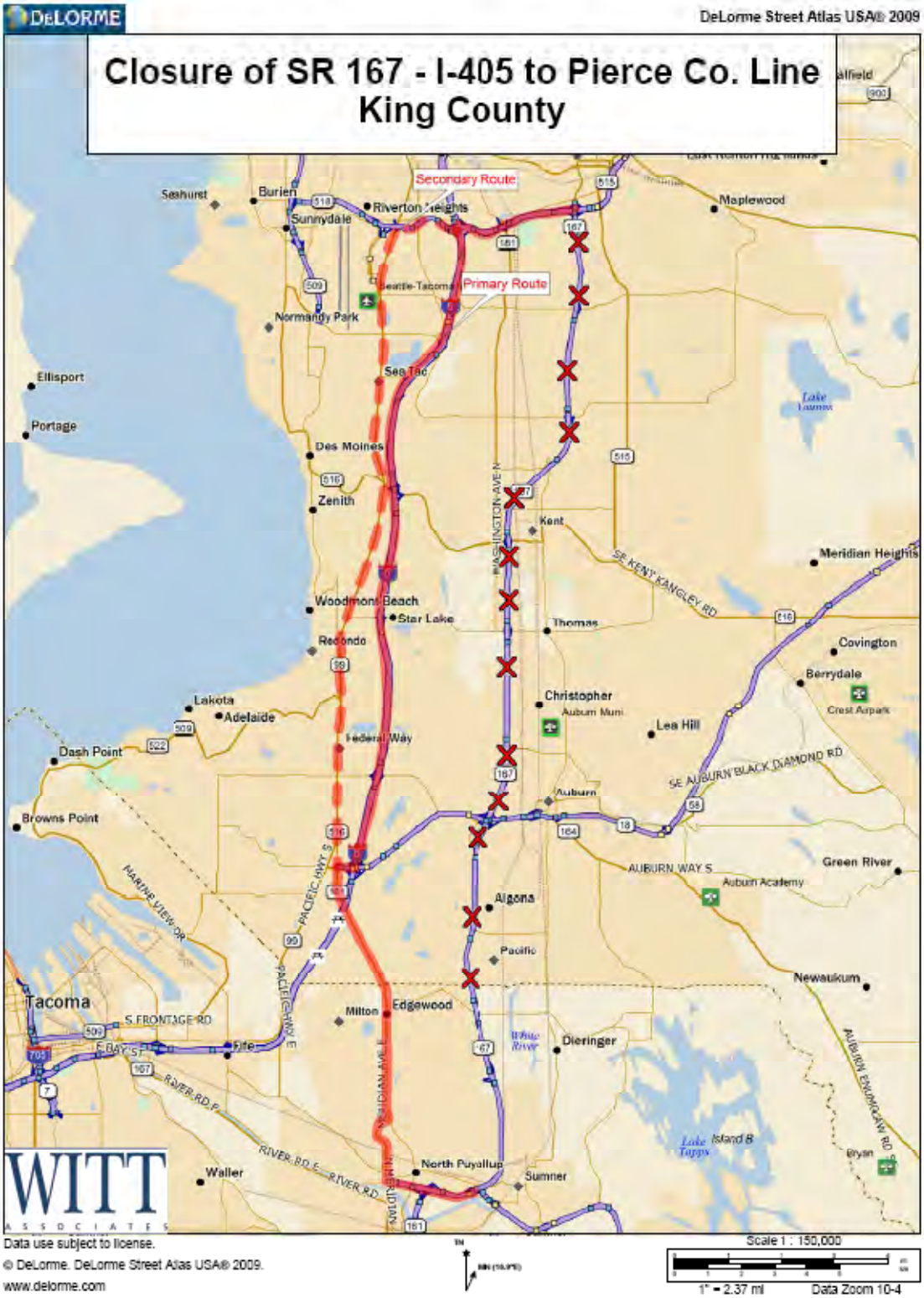
2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on Meridian Ave, and Enchanted Parkway. Other alternatives include: Eliminate or restrict parking, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include changing HOV rules, constructing HOV Bypass, convert

freeway should to driving lane, transit service increase and establish new transit service, freeway ramp metering, and incorporating technology in traffic signal interconnects. See Appendix E – Roadways Toolbox for further information.


DeLORME
DeLorme Street Atlas USA® 2009
Closure of SR 167 - I-405 to Pierce Co. Line
King County
Secondary Route
Primary Route
Seahurst
Burien
Riverton Heights
Sunnydale
Maplewood
Seattle-Tacoma
Normandy Park
Ellisport
Portage
Sea Tac
Des Moines
Zenith
Kent
Meridian Heights
SE KENT KANGLEY RD
Woodmont Beach
Star Lake
Redondo
Thomas
Covington
Berrydale
Crest Airpark
Lakota
Adelaide
Christopher
Auburn Muni
Lea Hill
Federal Way
Dash Point
SE AUBURN BLACK DIAMOND RD
Auburn
Browns Point
Green River
AUBURN WAY S
Auburn Academy
Algona
Pacific
Newaukum
Tacoma
S FRONTAGE RD
Milton
Edgewood
Fife
E RAY ST
Dieringer
RIVER RD E
Lake Tapps
Island B
Waller
North Puyallup
Sumner
Bryan
WITT
ASSOCIATES
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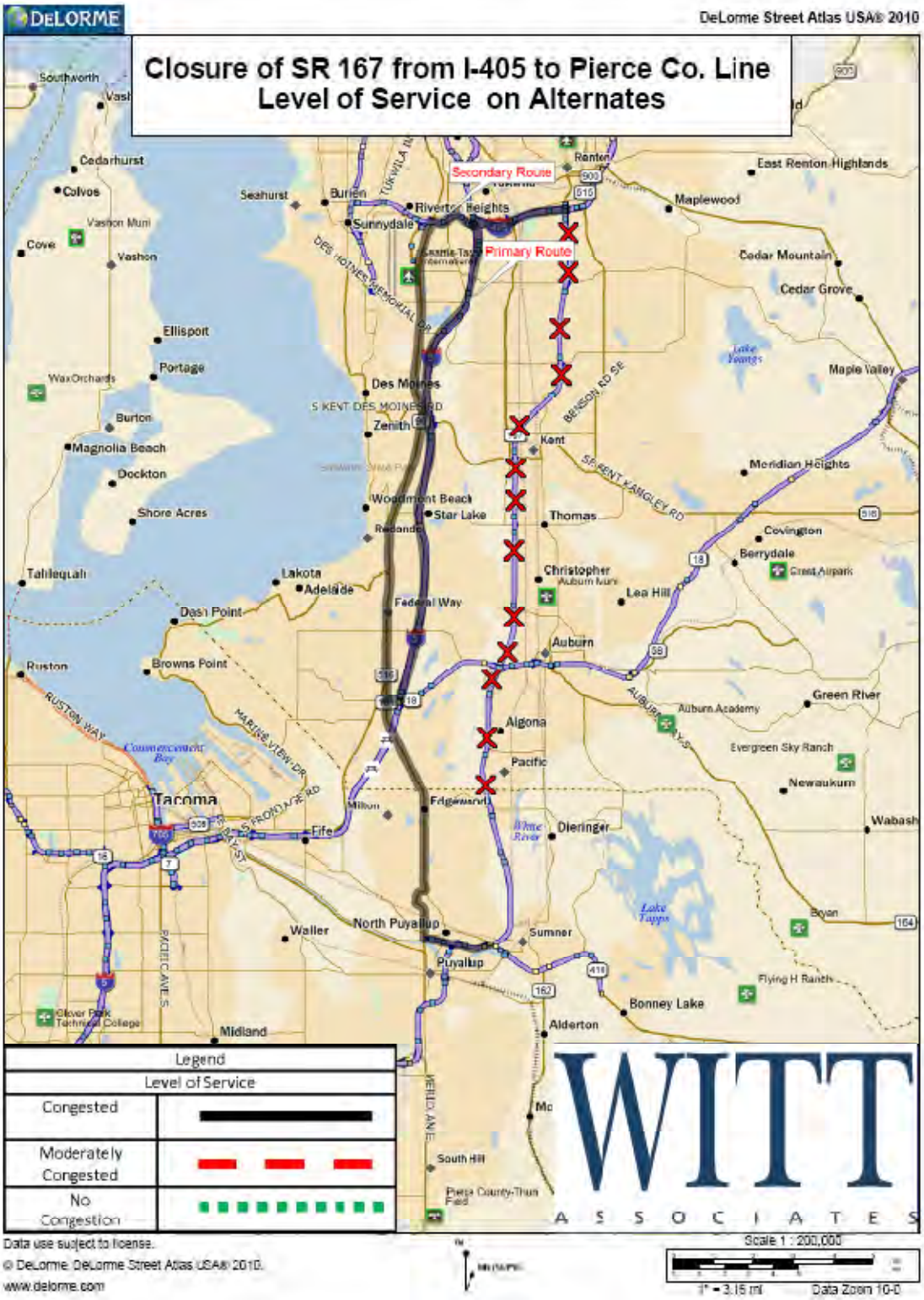
www.delorme.com
Scale 1 : 150,000
1" = 2.37 mi
Data Zoom 10-4

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 3 - Closure of SR 167 from I-405 to Pierce County Line – King County | |
| North to South Routing - Primary | South to North Routing - Primary |
| I-405 Southbound (Exit to I-5 Southbound)<br>I-5 Southbound (Interchange 154)<br>I-5 Southbound to Exit 142 (SR 18)<br>SR 18 Westbound (South 348th Street)<br>SR 161 Southbound (Enchanted Parkway South) – - Traffic Signal<br>SR 161 Southbound (Meridian Ave. East)<br>SR 161 Southbound (N Meridian Ave)<br>SR 167 Northbound (Traffic Signal)<br>SR 167 to SR 410 (Pierce Co) | SR 167 Southbound (Begin at SR 410) (Pierce Co)<br>SR 167 Southbound (Exit at Meridian Ave) (Trf Sig)<br>SR 161 Northbound (N Meridian Ave)<br>SR 161 Northbound (Meridian Ave. East)<br>SR 161 Northbound (Enchanted Parkway South)<br>SR 18 Westbound (South 348th Street) (Trf Signal)<br>I-5 Northbound (Interchange 142)<br>I-5 Northbound (Exit 154)<br>I-405 Northbound (to SR 167) |

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 3 - Closure of SR 167 from I-405 to Pierce County Line – King County | |
| North to South Routing - Secondary | South to North Routing - Secondary |
| I-405 Southbound (Exit to I-5 Southbound)<br>SR 518 Westbound<br>SR 99 Southbound (International Dr)<br>SR 99 Southbound (Pacific Hwy S)<br>16th Ave S Southbound (Traffic Signal)<br>SR 161 Southbound (Enchanted Parkway South) – - Traffic Signal<br>SR 161 Southbound (Meridian Ave. East)<br>SR 161 Southbound (N Meridian Ave)<br>SR 167 Northbound (Traffic Signal)<br>SR 167 to SR 410 (Pierce Co) | SR 167 Southbound (Begin at SR 410) (Pierce Co)<br>SR 167 Southbound (Exit at Meridian Ave) (Trf Sig)<br>SR 161 Northbound (N Meridian Ave)<br>SR 161 Northbound (Meridian Ave. East)<br>SR 161 Northbound (Enchanted Parkway South)<br>16th Ave S Northbound (Trf Signal)<br>SR 99 Northbound (Pacific Hwy S) Traffic Signal<br>SR 99 Northbound (International Drive)<br>SR 518 Eastbound<br>I-405 Northbound<br>I-405 Northbound (to SR 167) |


DeLorme
DeLorme Street Atlas USA® 2010
Closure of SR 167 from I-405 to Pierce Co. Line
Level of Service on Alternates
Secondary Route
Primary Route
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT ASSOCIATES
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Scale 1 : 200,000
1" = 3.16 mi
Data Zoom 10-0

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 3 - Closure of SR 167 – I-405 to Pierce County Line – King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | | √ | |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | | √ | | HOV 2 – HOV 3 – HOV 4 |
| Construct HOV Bypass | | | √ | | Exit 142 |
| Ramp Metering | | | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | | √ | |
| Truck Restrictions | | | | √ | |
| Truck Preferences | | | | √ | |
| Shoulder - Convert to Driving Lane | | | √ | | I-5, I-405 |
| Parking Eliminate/Restrict | | | √ | | Meridian Ave, Enchanted Pky |
| Turn Prohibitions | | | √ | | Meridian Ave, Enchanted Pky |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | | | | √ | |
| Bike Lanes | | | | √ | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | √ | √ | | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | SR 161 |
| Convert trails to special motorized use | | | | √ | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | | | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 3 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #4 - Closure of the I-90/I-405 Interchange

## A. General Information

The I-90 I-405 Interchange is located southeast of downtown Seattle and provides many different access routes to both downtown Seattle and to I-405 and I-90. It also is a significant freight route for east-west traffic to and from the Seattle-area. The alternative routes for this section of roadway consist of using I-5 for north-south traffic, SR 18 for southerly traffic from I-90, and SR-520 for east-west traffic from I-90 to downtown Seattle. Hwy 148 should be considered a viable option for a local detour. Lake Washington could be used as an additional transportation corridor for passenger-only ferries at various locations.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction of a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs),

municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Short term solutions have been identified such as providing alternate routing for all vehicle traffic. Solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. Set-up highway detours signage for rerouting traffic. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

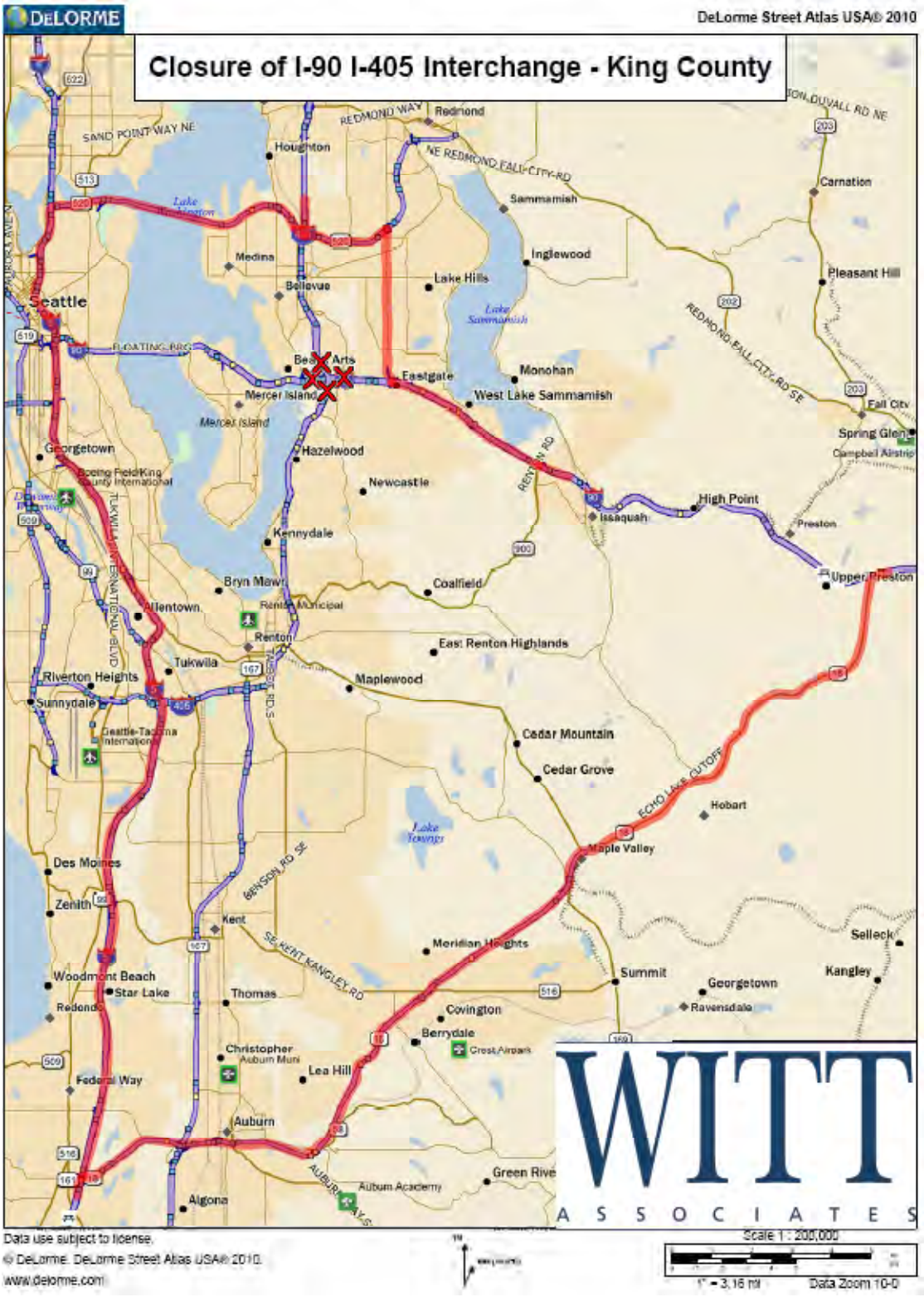
The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on 148th Street. Other alternatives include: Eliminate or restrict parking, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week.

Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long term options include establishing new contra-flow lanes on SR 520, Truck Restrictions, Truck Preferences, convert lanes on I-5, I-405, SR 520 to HOV lanes, changing HOV rules on I-5, Constructing HOV Bypass to ease bottlenecks, establish new ferry service, increase transit service and establish new transit service, bike lanes, freeway ramp metering, and incorporating technology in traffic signal interconnects. See Appendix E – Roadways Toolbox for further information.

New passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.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Closure of I-90 I-405 Interchange - King County
Seattle
Houghton
Redmond
Sammamish
Inglewood
Medina
Bellevue
Lake Hills
Carnation
Pleasant Hill
Beaux Arts
Eastgate
Monohan
West Lake Sammamish
Mercer Island
Fall City
Spring Glen
Georgetown
Hazelwood
Newcastle
Issaquah
High Point
Preston
Kennydale
Bryn Mawr
Coalfield
Upper Preston
Allentown
Renton
East Renton Highlands
Tukwila
Riverton Heights
Maplewood
Sunnydale
Cedar Mountain
Cedar Grove
Hobart
Maple Valley
Des Moines
Zenith
Kent
Meridian Heights
Selleck
Woodmont Beach
Star Lake
Thomas
Summit
Georgetown
Kangley
Redondo
Covington
Ravensdale
Berrydale
Christopher
Lea Hill
Federal Way
Auburn
Green River
Algona
Auburn Academy
WITT
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Scale 1 : 200,000
1" = 3.16 mi
Data Zoom 10-0

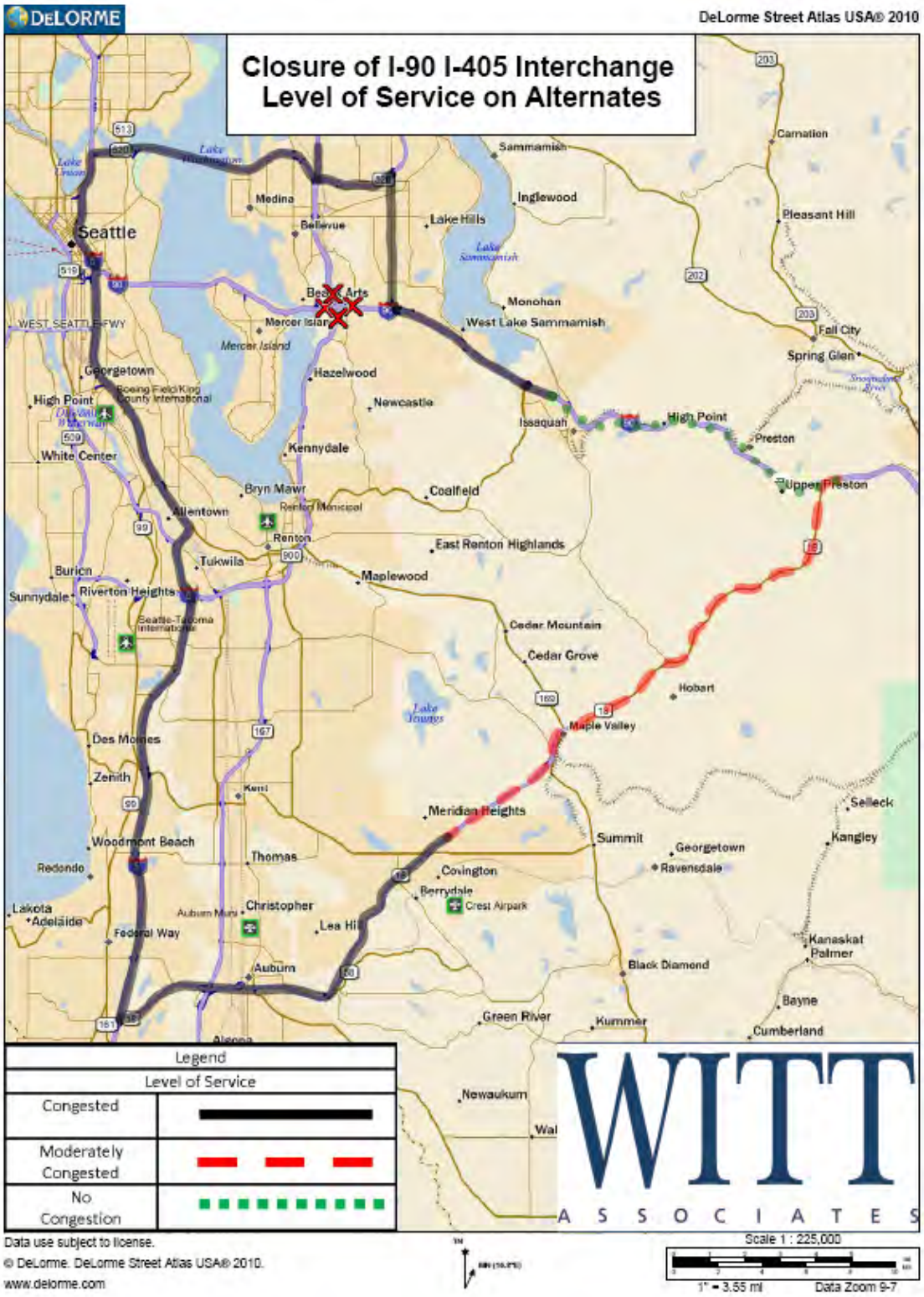
| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 4 - Closure of I-90 I-405 Interchange – King County | |
| East to South (Snoqualmie to Auburn) Routing<br>I-90 to I-5 | South to East (Auburn to Snoqualmie) Routing<br>I-5 to I-90 |
| I-90 Westbound<br>I-90 Westbound Exit 25 (SR 18) (Traffic Signal)<br>SR 18 Westbound<br>SR 18 Westbound Exit for I-5 (interchange 142)<br>I-5 Southbound | I-5 Northbound<br>I-405 Northbound Exit 142 (SR 18)<br>SR 18 Eastbound<br>SR 18 Eastbound Exit for I-90 (Interchange 25)<br>I-90 Eastbound |
| South to West (Renton to Seattle) Routing<br>I-405 to I-90 | West to South (Seattle to Renton) Routing<br>I-90 to I-405 |
| I-405 Southbound<br>I-405 Southbound Exit to I-5 Northbound<br>I-5 Northbound<br>I-5 Northbound to Exit 164A (I-90, Dearborn, James, and Madison St) | I-90 Westbound to I-5 Southbound Exit (local access from S Atlantic St)<br>I-5 Southbound (Interchange 164)<br>I-5 Southbound<br>I-5 Southbound Exit 154 (I-405 Northbound)<br>I-405 Northbound |
| West to North (Seattle to Kirkland) Routing<br>I-90 to I-405 | North to West (Kirkland to Seattle) Routing<br>I-405 to I-90 |
| I-90 Westbound to I-5 Northbound (local access from Dearborn St)<br>I-5 Northbound<br>I-5 Northbound to Exit 168 (SR 520)<br>SR 520 Eastbound<br>SR 520 Eastbound Exit for I-405<br>I-405 Northbound | I-405 Southbound<br>I-405 Southbound Exit 14 (SR 520 Westbound)<br>SR 520 Westbound<br>SR 520 Westbound Exit for I-5 Southbound<br>I-5 Southbound<br>I-5 Southbound Exit for I-90 (local access via Dearborn St) |
| North to East (Kirkland to Issaquah) Routing<br>I-405 to I-90 | East to North (Issaquah to Kirkland) Routing<br>I-90 to I-405 |
| I-405 Southbound<br>I-405 Southbound Exit for SR 520 Eastbound<br>SR 520 Eastbound Exit for 148th St NE Southbound<br>148th St NE Southbound (Traffic Signal)<br>148th St NE Southbound Ramp to I-90 Eastbound<br>I-90 Eastbound | I-90 Westbound<br>I-90 Westbound Exit for 156th Ave SE<br>SE Eastgate Way Westbound (Traffic Signal)<br>148th St NE Northbound (Traffic Signal)<br>148th St NE Northbound<br>148th St NE Northbound Exit for SR 520 Eastbound<br>SR 520 Eastbound<br>SR 520 Eastbound Exit for I-405 Northbound<br>I-405 Northbound |

Note: Routing provides circumferential route. Directional signing should be based on locale and compass direction (e.g. Issaquah and Points East).

Note: Local access can be provided from circumferential route inwards. Access to Mercer Island is to/from the west on I-90 and I-90 Exit 9.

Note: I-90 / SR 18 / I-5 can be used as regional connection of I-90 and I-5.

Note: For local trips consider: SE 36th / Eastgate Way as east/west one-way couplet, linking Factoria Blvd (southbound) and Richards Rd. (northbound). Also, consider 118th and 112th as north/south option west of I-405.


DeLorme
DeLorme Street Atlas USA® 2010
Closure of I-90 I-405 Interchange
Level of Service on Alternates
Seattle
Bellevue
Medina
Sammamish
Inglewood
Lake Hills
Carnation
Pleasant Hill
Fall City
Spring Glen
Monohon
West Lake Sammamish
Mercer Island
Hazelwood
Newcastle
Issaquah
High Point
Preston
Upper Preston
Kennydale
Coalfield
Bryn Mawr
Renton
East Renton Highlands
Maplewood
Tukwila
Allentown
Burien
Riverton Heights
Sunnydale
White Center
Georgetown
Boeing Field/King County International
Seattle-Tacoma International
Cedar Mountain
Cedar Grove
Hobart
Maple Valley
Lake Tapps
Des Moines
Zenith
Kent
Meridian Heights
Summit
Georgetown
Ravensdale
Kangley
Selleck
Woodmont Beach
Redondo
Thomas
Covington
Berrydale
Crest Airpark
Lakota
Adelaide
Auburn Muni
Christopher
Lea Hill
Federal Way
Auburn
Kanaskat
Palmer
Black Diamond
Bayne
Green River
Kummer
Cumberland
Newaukum
Legend
Level of Service
Congested
Moderately Congested
No Congestion
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www.delorme.com
Scale 1 : 225,000
1" = 3.55 mi
Data Zoom 9-7

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 4 - Closure of I-90 I-405 Interchange King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | √ | | SR 520 |
| HOV Lanes – Convert | | | √ | | I-5, I-405, SR 520 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | | √ | | HOV 3, HOV 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | | | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | √ | | Interchanges near closure point |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | Depot Access, Critical Supplies |
| Shoulder - Convert to Driving Lane | | √ | √ | | Interstates/Freeways HOV |
| Parking Eliminate/Restrict | | √ | √ | | |
| Turn Prohibitions | | √ | √ | | 148th St |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland, Kenmore, Bellevue or Leschi Park/Bellevue (pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | √ | √ | | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | √ | √ | | |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 4 - Closure of I-90 I-405 Interchange King County | | | | | |
| Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | | | | √ | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | | | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | | | √ | | |
| Determine personnel required and availability of alternative maritime transportation | | | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | | | √ | | |
| Determine long-term contracting needs | | | √ | | |
| Identify recovery options for alternative maritime transportation | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 4 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #5 - Closure of I-405 from I-5 to SR 167

## A. General Information

For the closure of I-405 from I-5 to SR-167, the one route presented as an alternative for this scenario entails diverting traffic from SR 167 to I-5. Traffic from the south should use SR 516 to SR 167 to I-5. Lake Washington could be used as an additional transportation corridor for passenger-only ferries at various locations. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Short term solutions have been identified such as providing alternate routing for all vehicle traffic. Solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. Set-up highway detours signage for rerouting traffic See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as convert trails to specialized motorized use. Other alternatives include: Van/Carpool Incentives, Alternate Driving Days, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, long term options include establishing new contra-flow lanes on SR 520, Truck Restrictions, Truck Preferences, convert lanes on I-5, I-90, I-405 to HOV lanes, changing HOV rules on I-5, I-90, I-405, Constructing HOV Bypass to ease bottlenecks, establish new ferry service, increase transit service and establish new transit service, bike lanes, freeway ramp metering, develop new freeway ramps and incorporate technology in traffic signal interconnects. See Appendix E – Roadways Toolbox for further information.

New passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

## H. Site Images for Alternate Route Landing Sites

UW Waterfront Activities Center

Leschi Park

Bellevue Meydenbauer Bay Marina

Kirkland Marina Park

Kenmore Tracy Owen Station Park

Renton – Bristol at Southport

DeLorme
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Closure of I-405 from I-5 to SR 167
King County
Seattle
Primary Route
Alternate Route
Data use subject to license.
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Scale 1 : 175,000
1" = 2.76 mi
Data Zoom 10-2
WITT
ASSOCIATES

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 5 - Closure of I-405 between I-5 and SR 167 – King County | |
| North to South Routing | South to North Routing |
| I-405 Southbound<br>I-405 Southbound Exit 11 (I-90 )<br>I-90 Westbound<br>I-90 Westbound Exit for I-5 Southbound<br>I-5 Southbound (Interchange 164)<br>I-5 Southbound | I-5 Northbound<br>I-5 Northbound Exit 164 (I-90 Eastbound)<br>I-90 Eastbound<br>I-90 Eastbound Exit 10 (I-405)<br>I-405 Northbound |

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 5 - Closure of I-405 between I-5 and SR 167 – King County | |
| North to South Routing (Alternate) | South to North Routing (Alternate) |
| I-405 Southbound<br>I-405 Southbound Exit 2 (SR 167)<br>SR 167 Southbound<br>SR 167 Southbound Exit for SR 18<br>SR 18 Westbound<br>SR 18 Westbound Exit for I-5<br>I-5 Southbound (Interchange 142)<br>I-5 Southbound | I-5 Northbound<br>I-5 Northbound Exit 142 (SR 18)<br>SR 18 Eastbound<br>SR 18 Eastbound Exit for SR 167<br>SR 167 Northbound<br>SR 167 Northbound Exit for I-405<br>I-405 Northbound (Interchange 2) |

Note: This route could be used in northbound direction only if I-405/SR 167 is not fully operational.

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Closure of I-405 from I-5 to SR 167
Level of Service on Alternates
Primary Route
Alternate Route
Seattle
Bainbridge Island
Winslow
Eagledale
Port Blakely
Sammamish
Inglewood
Lake Hills
Bellevue
Eastgate
Monohan
West Lake Sammamish
Mercer Island
Hazelwood
Newcastle
Kennydale
Georgetown
High Point
White Center
Harper
Southworth
Vashon Heights
Cedarhurst
Colvos
Fragaria
Cove
Vashon
Ellisport
Lisabeula
Portage
Burton
Magnolia Beach
Dockton
Shore Acres
Tahlequah
Dash Point
Ruston
Browns Point
Seahurst
Burien
Riverton Heights
Sunnydale
Tukwila
Bryn Mawr
Allentown
Renton
East Renton Highlands
Maplewood
Coalfield
Cedar Mountain
Cedar Grove
Des Moines
Zenith
Woodmont Beach
Star Lake
Redondo
Thomas
Kent
Meridian Heights
Covington
Berrydale
Lea Hill
Auburn
Lakota
Adelaide
Federal Way
Algona
Pacific
Edgewood
Dieringer
Green River
Evergreen Sky Ranch
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT ASSOCIATES
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www.delorme.com
Scale 1 : 200,000
Data Zoom 10-0

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 5 - Closure of I-405 from I-5 to SR 167 King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | √ | | I-5, I-90, I-405 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | √ | √ | √ | | I-5, I-90, I-405, HOV 3 or 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | |
| Freeway Ramps - New | | √ | √ | | |
| Freeway Ramps – Closure | | | | √ | |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | |
| Shoulder - Convert to Driving Lane | | | √ | | |
| Parking Eliminate/Restrict | | | | √ | |
| Turn Prohibitions | | | | √ | |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland-Kenmore-Bellevue (Pass. Only) Leschi Park/Bellevue (Pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | √ | | SR 167 |
| Transit Service New | | | √ | | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 5 - Closure of I-405 from I-5 to SR 167 King County | | | | | |
| Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | | | | √ | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | | | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | | | √ | | |
| Determine personnel required and availability of alternative maritime transportation | | | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | | | √ | | |
| Determine long-term contracting needs | | | √ | | |
| Identify recovery options for alternative maritime transportation | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 5 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

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# Appendix B
# Scenario #6 - Closure of I-5 Ship Canal Bridge

## A. General Information

For the closure of the I-5 Ship Canal Bridge, there are two routes presented as alternative routes for this scenario. One route will entail diverting traffic from I-5 onto SR 520 onto I-405 back onto I-5. As a second alternative, Lake Washington could be used as an additional transportation corridor for passenger-only ferries at various locations. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. Emergency Services Coordinating Agency (ESCA)
2. King County Office of Emergency Management (OEM)
3. Snohomish County Department of Emergency Management (DEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction of a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs),

municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the Cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
2. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.
3. Snohomish County Emergency Operations Center will notify Everett Emergency Management and Monroe Emergency Management as well as the jurisdictions and tribes with which they have an inter-local agreement which includes the Tulalip tribe, Marysville, Arlington, Stanwood, Darrington, Granite Falls, Lake Stevens, Index, Gold Bar, Sultan and Snohomish as well as the Stillaguamish Tribe.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Short term solutions have been identified such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. Set-up highway detours signage for rerouting traffic. The Ship Canal Bridge is located over a navigable waterway. Thus, opening and closing of the bridge is subject to the U.S. Coast Guard approval. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on ramps near closure points. Other alternatives include: Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, long term options include Truck Restrictions and Preferences, contra-flow lanes on SR 520, changing current HOV rules on I-5 and I-405, converting lanes on I-405, I-5 and SR 520 to HOV lanes, constructing HOV Bypass lanes to ease bottlenecks, converting freeway shoulder to driving lane, incorporating new transit service with maritime (ferry connections), incorporating technology in traffic signal interconnects and freeway ramp metering. See Appendix E – Roadways Toolbox for further information.

New passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

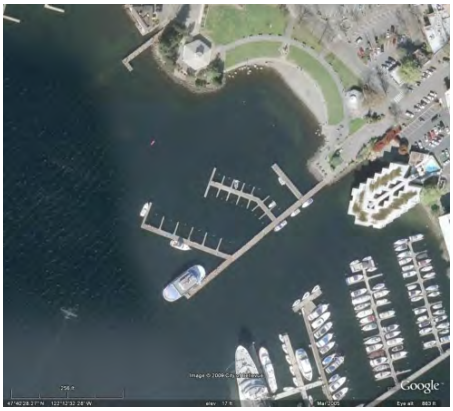
## H. Site Images for Alternative Route Landing Sites

UW Waterfront Activities Center

Leschi Park

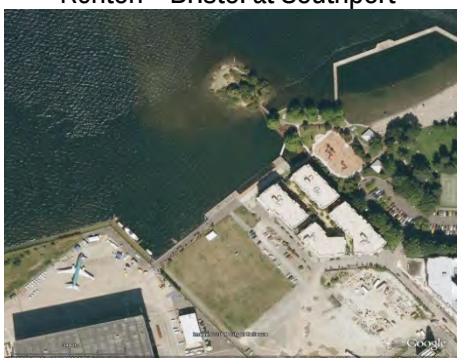
Bellevue Meydenbauer Bay Marina

Kirkland Marina Park



Kenmore Tracy Owen Station Park

Renton – Bristol at Southport



DeLORME
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Closure of I-5 Ship Canal Bridge
King County
Cathcart
Clearview
Lynnwood
Kennard Corner
North Creek
CASPERS ST
Edmonds
Seattle Heights
FILBERT RD
MALTBY RD
Turner Corner
Maltby
EDMONDS WAY
Mountlake Terrace
BALLINGER WAY NE
Bothell
Lake Forest Park
Kenmore
Shoreline
Woodinville
Kingsgate
Juanita
Kirkland
Green Lake Park
SAND POINT WAY NE
Redmond
REDMOND WAY
Fort Lawton Military Reservation
Houghton
AURORA BRG
Lake Union
Washington Park
Medina
Lake Hills
Bellevue
Seattle
ALASKAN WAY
FLOATING BRG
Beaux Arts
Eastgate
Harbor Island
Alternate Lake Crossing
Mercer Island
West Lake Sammamish
Mercer Island
WITT
ASSOCIATES
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Scale 1 : 150,000
1" = 2.37 mi
Data Zoom 10-4

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 6 - Closure of I-5 Ship Canal Bridge – King County | |
| North to South Routing | South to North Routing |
| I-5 Southbound | I-5 Northbound |
| I-5 Southbound Exit to I-405 | I-5 Northbound Exit 168B (SR 520 Eastbound) |
| I-405 Southbound | SR 520 Eastbound |
| I-405 Southbound Exit 14 (SR 520) | SR 520 Eastbound Exit for I-405 Northbound |
| SR 520 Westbound | I-405 Northbound |
| SR 520 Westbound Exit for I-5 Southbound | I-405 Northbound Exit for I-5 Northbound |
| I-5 Southbound | I-5 Northbound |

Note: Alternate crossing of Lake Washington is I-90 Floating Bridge.
Note: Traffic South of Tukwila should be diverted to I-405 at Tukwila.
Note: Local Traffic would be signed to SR 99/Aurora Ave.
Note: City of Seattle Recommendations-

1- Close I-5 fully at I-5/I-405. Reopen for local traffic Only for downtown destinations.
2- Restrict Montlake Bridge to local traffic only.
3- Adjustments to Traffic Signal timings required.
4- Parking elimination needed.
5- Turn Restrictions needed.
6- Consider closing crosswalks where left turns are hindered by pedestrian crossings.

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DeLorme Street Atlas USA® 2010
Closure of I-5 over Ship Canal Bridge
Level of Service on Alternate
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT ASSOCIATES
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1" = 4.34 mi
Data Zoom 9-5

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 6 - Closure of I-5 Ship Canal Bridge King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | √ | | SR 520 |
| HOV Lanes – Convert | | | √ | | I-5, I-405, SR 520 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | √ | √ | √ | | I-5, I-405, HOV 3 or 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | | √ | |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | Critical Supplies |
| Shoulder - Convert to Driving Lane | | √ | √ | | Freeways/Interstates |
| Parking Eliminate/Restrict | | | | √ | |
| Turn Prohibitions | | | √ | | Ramps near closure point |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland-Kenmore-Bellevue (Pass. Only) Leschi Park/Bellevue (Pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | √ | | Ferry Connections |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 6 - Closure of I-5 Ship Canal Bridge King County | | | | | |
| Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | √ | √ | √ | | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | | | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | | | √ | | |
| Determine personnel required and availability of alternative maritime transportation | | | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | | | √ | | |
| Determine long-term contracting needs | | | √ | | |
| Identify recovery options for alternative maritime transportation | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 6 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #7 - Closure of I-90 at Snoqualmie Pass

## A. General Information

For the closure of I-90 Snoqualmie Pass, there are two alternatives. The primary route entails diverting traffic from I-705, to I-5, I-84, to I-82 returning to I-90 in Ellensburg. The secondary route entails diverting traffic from I-5 onto SR 12 which should be used as a priority route for passenger only cars and a limited amount of prioritized freight (short term only) to I-82 back to I-90. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)
2. Pierce County Department of Emergency Management (DEM)
3. Thurston County Department of Emergency Management (DEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs),

municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.
2. Pierce County Emergency Operations Center will notify Buckley Emergency Management, Gig Harbor Emergency Management, Puyallup Emergency Management and Tacoma Emergency Services as well as the jurisdictions and tribes with which they have an inter-local agreement which includes Bonney Lake, Buckley, DuPont, Eatonville, Edgewood, Fife, Fircrest, Lakewood, Milton, Orting, the Puyallup Tribe of Indians, Roy, Ruston, Steilacoom, Sumner, University Place, and Wilkeson.
3. Thurston County Emergency Operations Center will notify Lacey Emergency Services, Olympia Emergency Management, Tumwater Emergency Services and Yelm Emergency Services as well as the towns of Tenino and Bucoda and the Nisqually Tribe.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

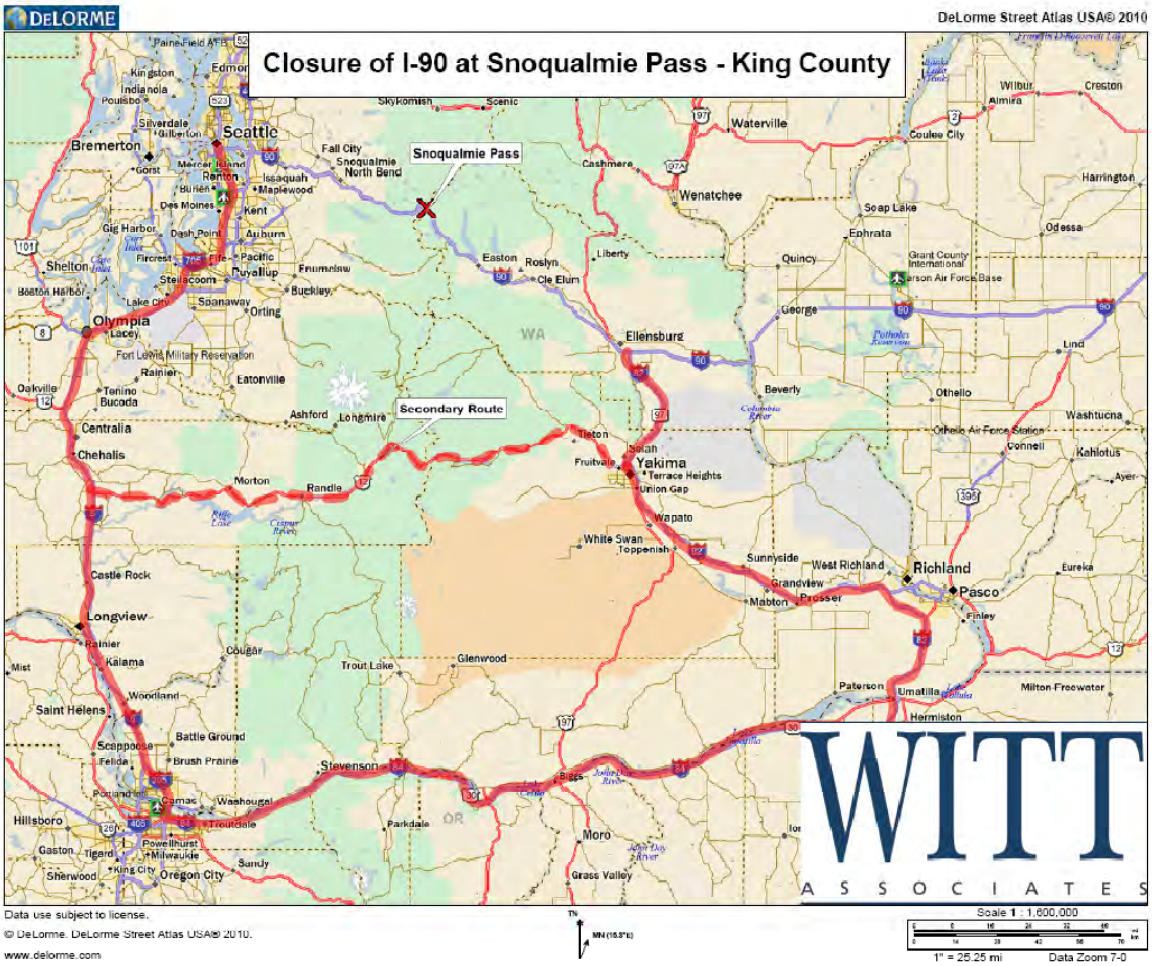
Short term solutions have been identified such as providing alternate routing for all vehicle traffic. Solutions include: Tele-commuting, Alternate Routing, and Adjusting Traffic Signal Timing. See Appendix E – Roadways Toolbox for further information.

1. Mid-Term Alternatives

Several Mid-Term Alternatives have been identified such as truck preferences for critical supplies. Other alternatives include: Electronic Signage and/or Surveillance and truck restrictions. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

2. Long Term Options

In addition, Long Term options include contra-flow lanes, changing HOV rules, constructing HOV Bypass, convert freeway shoulder to driving lane, transit service increase and establish new transit service, freeway ramp metering, and incorporating technology in traffic signal interconnects See Appendix E – Roadways Toolbox for further information.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Closure of I-90 at Snoqualmie Pass - King County
Snoqualmie Pass
Secondary Route
Seattle
Bremerton
Olympia
Yakima
Richland
Pasco
Kennewick
Wenatchee
Ellensburg
Moses Lake
Longview
Centralia
Chehalis
Aberdeen
Hoquiam
Shelton
Kelso
Vancouver
Portland
Hillsboro
Oregon City
Sherwood
Tigard
Gresham
Camas
Washougal
Stevenson
Goldendale
Trout Lake
Glenwood
Packwood
Randle
Morton
Castle Rock
Saint Helens
Woodland
Battle Ground
Brush Prairie
Scappoose
Mist
Kalama
Cougar
Rainier
Oakville
Tenino
Bucoda
Lacey
Fort Lewis Military Reservation
Eatonville
Ashford
Longmire
Elbe
Spanaway
Orting
Buckley
Enumclaw
Puyallup
Pacific
Auburn
Kent
Des Moines
Burien
Renton
Issaquah
Maplewood
Mercer Island
Gorst
Silverdale
Gilberton
Poulsbo
Kingston
Indianola
Edmonds
Paine Field Arts
Fall City
Snoqualmie
North Bend
Skykomish
Scenic
Cashmere
Waterville
Coulee City
Wilbur
Creston
Harrington
Soap Lake
Ephrata
Odessa
Quincy
Grant County International
Larson Air Force Base
George
Lind
Othello
Beverly
Washtucna
Othello Air Force Station
Connell
Kahlotus
Ayer
Eureka
Sunnyside
West Richland
Grandview
Prosser
Mabton
Finley
Wapato
White Swan
Toppenish
Fruitvale
Tieton
Selah
Yakima
Terrace Heights
Union Gap
Easton
Roslyn
Cle Elum
Liberty
Gig Harbor
Dash Point
Fircrest
Fife
Steilacoom
Boston Harbor
Lake City
Pioneer
Grayland
Ocean Shores
Westport
Raymond
South Bend
Tokeland
Naselle
Ilwaco
Long Beach
Chinook
Cathlamet
Skamokawa
Wahkiakum
Kalama
Ridgefield
La Center
Yacolt
Amboy
Cougar
Trout Lake
Glenwood
Packwood
Randle
Morton
Castle Rock
Saint Helens
Woodland
Battle Ground
Brush Prairie
Scappoose
Mist
Kalama
Cougar
Rainier
Oakville
Tenino
Bucoda
Lacey
Fort Lewis Military Reservation
Eatonville
Ashford
Longmire
Elbe
Spanaway
Orting
Buckley
Enumclaw
Puyallup
Pacific
Auburn
Kent
Des Moines
Burien
Renton
Issaquah
Maplewood
Mercer Island
Gorst
Silverdale
Gilberton
Poulsbo
Kingston
Indianola
Edmonds
Paine Field Arts
Fall City
Snoqualmie
North Bend
Skykomish
Scenic
Cashmere
Waterville
Coulee City
Wilbur
Creston
Harrington
Soap Lake
Ephrata
Odessa
Quincy
Grant County International
Larson Air Force Base
George
Lind
Othello
Beverly
Washtucna
Othello Air Force Station
Connell
Kahlotus
Ayer
Eureka
Sunnyside
West Richland
Grandview
Prosser
Mabton
Finley
Wapato
White Swan
Toppenish
Fruitvale
Tieton
Selah
Yakima
Terrace Heights
Union Gap
Easton
Roslyn
Cle Elum
Liberty
Gig Harbor
Dash Point
Fircrest
Fife
Steilacoom
Boston Harbor
Lake City
Pioneer
Grayland
Ocean Shores
Westport
Raymond
South Bend
Tokeland
Naselle
Ilwaco
Long Beach
Chinook
Cathlamet
Skamokawa
Wahkiakum
Ridgefield
La Center
Yacolt
Amboy
Paterson
Umatilla
Hermiston
Milton Freewater
Pendleton
Pilot Rock
Athena
Weston
Milton-Freewater
Walla Walla
College Place
Dayton
Waitsburg
Prescott
Starbuck
Pomeroy
Clarkston
Asotin
Anatone
Grande Ronde
Troy
Enterprise
Joseph
Wallowa
Lostine
Elgin
La Grande
Island City
Cove
Union
North Powder
Baker City
Sumpter
Unity
John Day
Prairie City
Mount Vernon
Burlington
Sedro-Woolley
Concrete
Darrington
Arlington
Marysville
Everett
Lynnwood
Edmonds
Mountlake Terrace
Shoreline
Kenmore
Bothell
Woodinville
Redmond
Kirkland
Bellevue
Mercer Island
Issaquah
Maple Valley
Black Diamond
Enumclaw
Buckley
Orting
Puyallup
Sumner
Fife
Tacoma
Lakewood
University Place
Fircrest
Gig Harbor
Port Orchard
Bremerton
Silverdale
Poulsbo
Kingston
Edmonds
Lynnwood
Mountlake Terrace
Shoreline
Kenmore
Bothell
Woodinville
Redmond
Kirkland
Bellevue
Mercer Island
Issaquah
Maple Valley
Black Diamond
Enumclaw
Buckley
Orting
Puyallup
Sumner
Fife
Tacoma
Lakewood
University Place
Fircrest
Gig Harbor
Port Orchard
Bremerton
Silverdale
Poulsbo
Kingston
Edmonds
WA
OR
WITT
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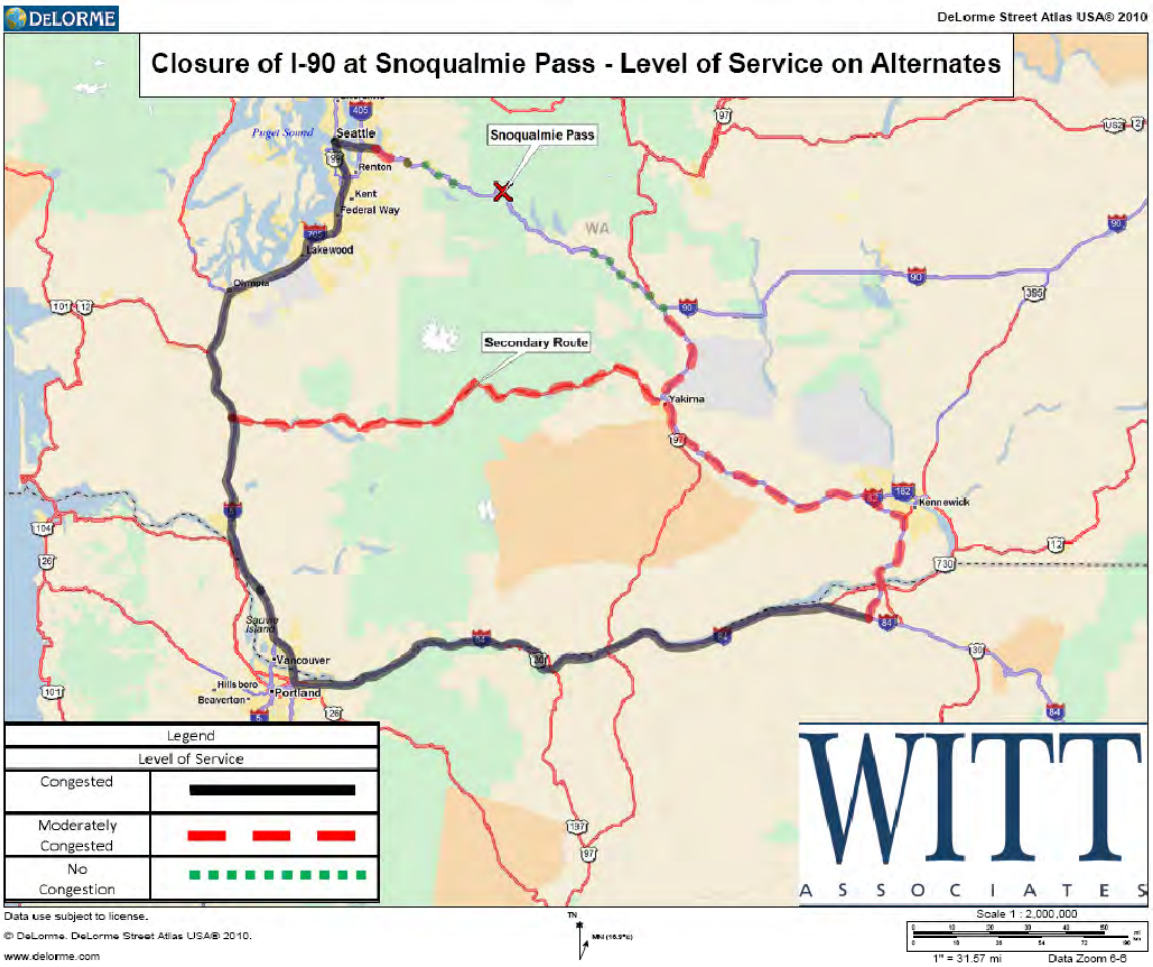
Scale 1 : 1,600,000
1" = 25.25 mi
Data Zoom 7-0

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 7 - Closure of I-90 Snoqualmie Pass – King County | |
| East to West Routing<br>Primary | West to East Routing<br>Primary |
| I-90 Westbound Exit 110 (I-82)<br>I-82 Eastbound (to Oregon State Line)<br>I-82 Eastbound Exit for I-84 Westbound<br>I-84 Westbound<br>I-84 Westbound Exit for I-205 Northbound<br>I-205 Northbound (to Washington State Line)<br>I-205 Northbound Exit for I-5 Northbound<br>I-5 Northbound (Interchange 7)<br>I-5 Northbound<br>I-5 Northbound (to Seattle area) | I-90 (Seattle area)<br>I-90 Exit for I-5 Southbound (Int. 164)<br>I-5 Southbound<br>I-5 Southbound Exit 7 (I-205 Southbound)<br>I-205 Southbound (to Oregon State Line)<br>I-205 Southbound Exit for I-84 Eastbound<br>I-84 Eastbound<br>I-84 Eastbound Exit for I-82 Westbound<br>I-82 Westbound (Washington State Line)<br>I-82 Westbound to I-90<br>I-90 Eastbound (Interchange 110) |
| East to West Routing<br>Secondary – US 12 | West to East Routing<br>Secondary – US 12 |
| I-90 Westbound<br>I-90 Westbound Exit 110 (I-82)<br>I-82 Eastbound<br>I-82 Eastbound Exit 31(US 12)<br>US 12 Westbound<br>US 12 Westbound Ramp for I-5 Northbound<br>I-5 Northbound (Interchange 68)<br>I-5 Northbound Exit 164A (I-90 Eastbound)<br>I-90 Eastbound | I-90 Westbound<br>I-90 Westbound Exit for I-5 Southbound<br>I-5 Southbound (Interchange 154)<br>I-5 Southbound Exit 68 (US 12)<br>US 12 Eastbound<br>US 12 Exit for I-82 Westbound<br>I-82 Westbound (Interchange 31)<br>I-82 Westbound<br>I-82 Westbound Exit for I-90 Westbound<br>I-90 Westbound |

Note: Secondary route is two lane mountain pass highways. Secondary route must be confirmed to be passable since there is high probability that these roadways will also be impassable.

Note: Local access can be provided via I-90 from I-82 or from I-405.

Note: Coordination required with State of Oregon for primary route.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DeLorme Street Atlas USA® 2010
Closure of I-90 at Snoqualmie Pass - Level of Service on Alternates
Snoqualmie Pass
Secondary Route
Seattle
Renton
Kent
Federal Way
Lakewood
Olympia
Yakima
Kennewick
Vancouver
Portland
Hillsboro
Beaverton
WA
Legend
Level of Service
Congested
Moderately Congested
No Congestion
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Scale 1 : 2,000,000
1" = 31.57 mi
Data Zoom 6-6

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 7-Closure of I-90 Snoqualmie Pass King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | √ | | I-5 |
| HOV Lanes – Convert | | | √ | | I-5 |
| HOV Lanes – New | | | √ | | I-5 |
| HOV Rules - Change | | | √ | | I-5 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | I-5 |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | √ | | Interchanges near closure point |
| Truck Restrictions | √ | √ | √ | | Unsafe Truck Routes |
| Truck Preferences | | √ | √ | | Critical Supplies |
| Shoulder - Convert to Driving Lane | | √ | √ | | |
| Parking Eliminate/Restrict | | | | √ | |
| Turn Prohibitions | | | | √ | |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | | | | √ | |
| Park – Ride Lots New/Expand | | | | √ | |
| Alternating Driving Days | | | | √ | |
| Bike Lanes | | | | √ | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | | √ | |
| Transit Service Increase | | | | √ | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | | | √ | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | | | | √ | |
| Compressed Work Week | | | | √ | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 7 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #8 - Closure of I-405 between Exits 2 and 4

## A. General Information

The closure of I-405 between exits 2 and 4 or the section of I-405 between SR 169 and SR 167 is located southeast of downtown Seattle and provides many different access routes. The alternative route for this section of roadway consists of using I-5 to I-90. Lake Washington could be used as an additional transportation corridor for passenger-only ferries at various locations.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)
2. City of Renton
3. City of Tukwila

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs),

municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes, including but are not limited to SR-900 to SR-405, and I-5 to SR 520 to I-405.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. Set-up highway detours signage for rerouting traffic. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as convert trails to specialized motorized use. Other alternatives include: Van/Carpool Incentives, Alternate Driving Days, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week.

Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include Truck Restrictions, Truck Preferences, convert lanes on I-405 to HOV lanes, changing HOV rules, constructing HOV Bypass to ease bottlenecks, establish new ferry service, transit service increase and establish new transit service, bike lanes, freeway ramp metering, freeway ramps closure and incorporating technology in traffic signal interconnects. New passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix E – Roadways Toolbox for further information. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

## H. Site Images for Alternate Routing Landing Sites

UW Waterfront Activities Center

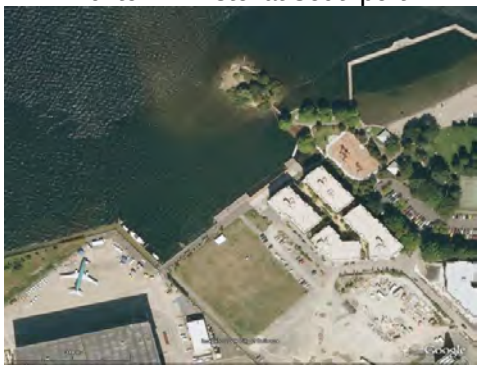
Leschi Park

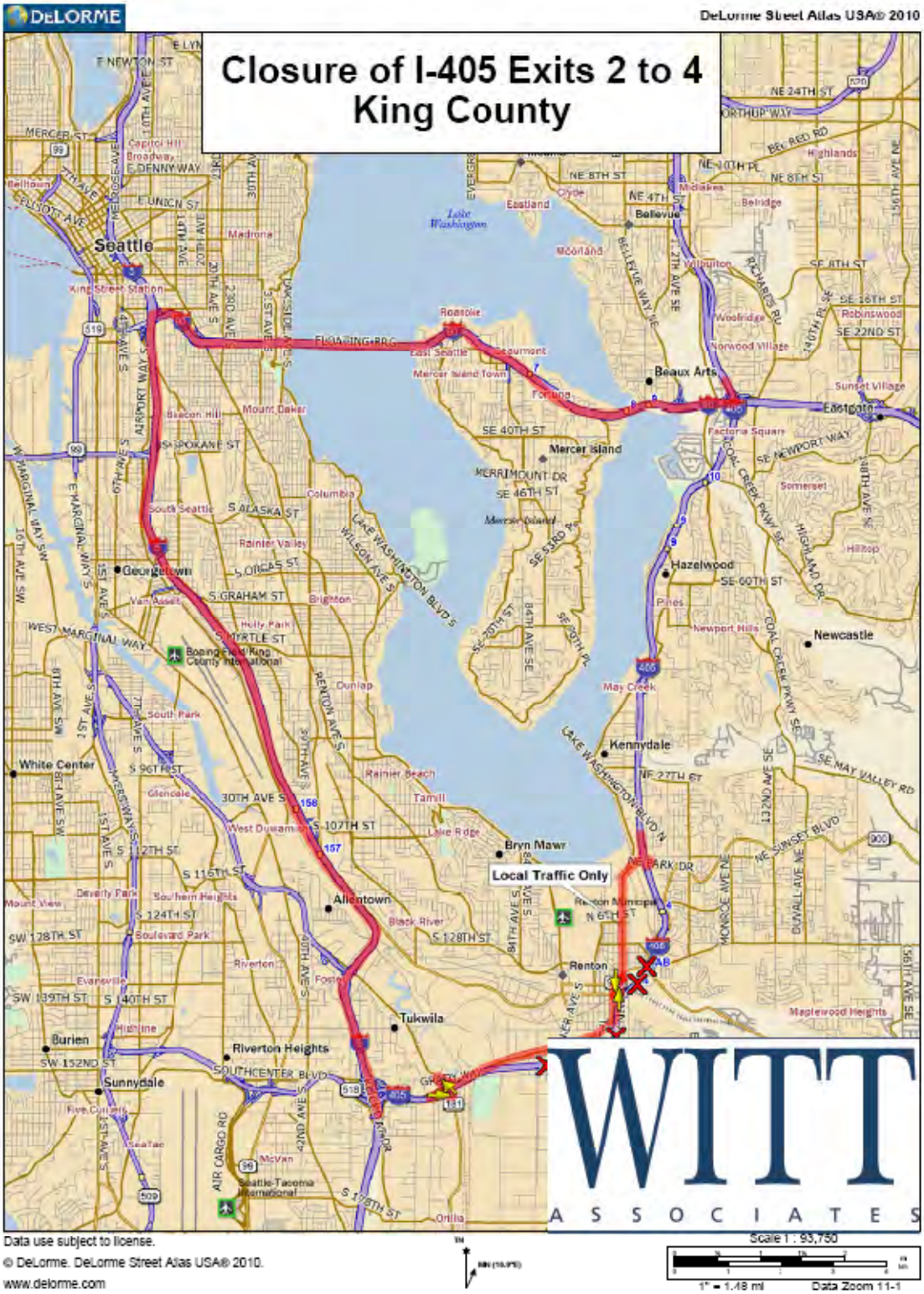
Bellevue Meydenbauer Bay Marina

Kirkland Marina Park

Kenmore Tracy Owen Station Park

Renton – Bristol at Southport




DeLorme
DeLorme Street Atlas USA® 2010
Closure of I-405 Exits 2 to 4
King County
Local Traffic Only
Seattle
Bellevue
Renton
Kennydale
Newcastle
Tukwila
Burien
Sunnydale
Riverton Heights
Allentown
Bryn Mawr
Beaux Arts
Mercer Island
Hazelwood
Lake Washington
WITT
ASSOCIATES
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Scale 1 : 93,750
1" = 1.48 mi
Data Zoom 11-1

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 8 - Closure of I-405 from Exit 2 to Exit 4 – King County | |
| North to South Routing | South to North Routing |
| I-405 Southbound<br>I-405 Southbound Exit 11 to I-90<br>I-90 Westbound<br>I-90 Westbound Exit for I-5<br>I-5 Southbound<br>I-5 Southbound to I-405 | I-405 Southbound<br>I-405 Southbound Exit to I-5<br>I-5 Northbound<br>I-5 Northbound Exit 164 for I-90<br>I-90 Eastbound<br>I-90 Eastbound Exit 10 (I-405)<br>I-405 Northbound |

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 8 - Closure of I-405 from Exit 2 to Exit 4 – King County | |
| North to South Routing (Local Traffic) | South to North Routing (Local Traffic) |
| I-405 Southbound<br>I-405 Southbound Exit 5 to SR 900 (Park Ave) (TS)<br>Park Ave N Westbound<br>Park Ave N Westbound to Lake Washington Blvd<br>Lake Washington Blvd Southbound<br>Lake Washington Blvd becomes Park Ave N<br>Park Ave N Southbound<br>Park Ave N Southbound to (SR 900 (Bronson Way)<br>SR 900 Westbound (Bronson Way)<br>SR 900 Westbound to SR 515 (Main Ave S)<br>SR 515 Southbound (S Grady Way)<br>S Grady Way Westbound<br>SW Grady Way Westbound<br>SW Grady Way West to SR 181(Interurban Ave)<br>SR 181 Northbound Interurban Ave to I-405 Ramp<br>I-405 Southbound (Interchange 1) | I-405 Northbound<br>I-405 Northbound Exit 1<br>I-405 North Ramp to Interurban Ave (Traf. Sig)<br>Interurban Ave Northbound<br>Interurban Ave Northbound to SW Grady Rd<br>SW Grady Rd Eastbound<br>S Grady Rd Eastbound<br>S Grady Ave to SR 515 (Main Ave S)<br>SR 515 Northbound<br>SR 515 to SR 900<br>SR 900 Eastbound to SR 900 (Mill Ave S)<br>SR 900 Eastbound (Mill Ave S Northbound)<br>SR 900 Eastbound (Bronson Way)<br>SR 900 Northbound (Bronson Way) to Park Ave N<br>Park Ave N Northbound<br>Park Ave N becomes Lake Washington Blvd<br>Lake Washington Blvd Northbound<br>Park Ave N Eastbound<br>Ramp to I-405<br>I-405 Northbound (Interchange 5) |

Note: One Way Couplet Mill Ave N and Main Ave N.

Note: One Way Couplet Interurban (Interchange 1)

DeLorme Street Atlas USA® 2010
Closure of I-405 Exits 2 to 4
Level of Service on Alternates
Seattle
Beaux Arts
Eastgate
Mercer Island
Hazelwood
Newcastle
Kennydale
Bryn Mawr
Local Traffic Only
Renton
Tukwila
Maplewood
Allentown
Riverton Heights
Burien
Sunnydale
Seahurst
White Center
High Point
Georgetown
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT
ASSOCIATES
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www.delorme.com
Scale 1 : 100,000
1" = 1.58 mi
Data Zoom 11-0

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 8 - Closure of I-405 from Exit 2 to Exit 4 King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | √ | | I-405 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | √ | √ | √ | | I-5, I-405, HOV 3 or 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | √ | | |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | |
| Shoulder - Convert to Driving Ln | | | √ | | I-405 |
| Parking Eliminate/Restrict | √ | √ | √ | | Grady, Bronson, Main, Park |
| Turn Prohibitions | √ | √ | √ | | Grady, Bronson, Main, Park |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland-Kenmore-Bellevue ;Leschi Park/Bellevue (Both Pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | √ | | Ferry Connections |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 8 - Closure of I-405 from Exit 2 to Exit 4 King County | | | | | |
| Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | | | | √ | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | | | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | | | √ | | |
| Determine personnel required and availability of alternative maritime transportation | | | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | | | √ | | |
| Determine long-term contracting needs | | | √ | | |
| Identify recovery options for alternative maritime transportation | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 8 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

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# Appendix B
# Scenario #9 - Closure of I-405 from Exit 18 to Exit 20

## A. General Information

Several routes present as suitable alternates in dealing with the closure of I-405 at Exits 18 thru 20. The freeway alternative will entail diverting southbound traffic from I-405 onto SR 522 at Bothell then onto Interstates 5 and 90 back onto I-405. Northbound traffic will be diverted from I-405 to I-90, I-5 and SR 522. The freeway routing is intended for all regional trips on I-405. Northbound I-405 traffic headed for local destinations east of I-405 such as Redmond and Totem Lake will exit eastbound to NE 85th Street at exit 18. Detour routing will lead from eastbound NE 85th Street north to NE 124th Street. Northbound I-405 traffic headed for local destinations west of I-405 such as Kirkland and Kenmore will exit westbound to NE 70th Street at exit 17.

Detour routing will lead from eastbound NE 70th/68th Streets to northbound 6th Street. Southbound I-405 traffic headed for local destinations east of I-405 such as Redmond and Totem Lake will exit eastbound to NE 160th Street at exit 22. Detour routing will lead from eastbound NE 160th Street to 124th Avenue NE. Southbound I-405 traffic headed for local destinations west of I-405 such as Kirkland and Kenmore will exit westbound to NE 124th Street at exit 20. Detour routing will lead from eastbound NE 124th Street to southbound NE 100th Street. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. Emergency Services Coordinating Agency (ESCA)
2. King County Office of Emergency Management (OEM)
3. City of Seattle
4. City of Lake Forest Park
5. City of Kenmore
6. City of Bothell

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the Cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
2. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders identified short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on the detour

route. Other alternatives include: Tele-commuting, Staggered Work Shifts, Electronic Signage and/or surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

1. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, long term options include Truck Restrictions, changing current HOV rules, converting lanes on I-405 to HOV lanes, constructing HOV Bypass lanes to ease bottlenecks, incorporating new transit service with maritime (ferry connections), incorporating technology in traffic signal interconnects and freeway ramp metering. See Appendix E – Roadways Toolbox for further information.

DeLorme
DeLorme Street Atlas USA® 2010
Closure of I-405 Exit 18 to Exit 20
King County
Bothell
Lake Forest Park
Kenmore
Woodinville
Shoreline
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Medina
Bellevue
Lake Hills
Seattle
Beaux Arts
Mercer Island
Harbor Island
Magnuson Park
Washington Park
SAND POINT WAY NE
EVERGREEN POINT FLOATING BRG
I-90 FLOATING BRG
WEST SEATTLE FWY
AURORA AVE N
AURORA BRG
ALASKAN WAY
BOTHELL WAY NE
REDMOND WAY
REDMOND WOODINVILLE RD NE
EDMONDS WAY
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Scale 1 : 112,500
1" = 1.78 mi
Data Zoom 10-7
WITT
ASSOCIATES

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 9-Closure of I-405 from Exit 18 to Exit 20 – King County | |
| North to South Routing | South to North Routing |
| I-405 Southbound Exit 23 (SR 522) | I-405 Northbound |
| Ramp to SR 522 Westbound | I-405 Northbound Exit 11 for I-90 Westbound |
| SR 522 Westbound (Woodinville Rd) | I-90 Westbound |
| SR 522 Westbound (Bothell Way NE) | I-90 Westbound Exit for I-5 Northbound |
| SR 522 Westbound (NE Bothell Way) | I-5 Northbound |
| SR 522 Westbound (Bothell Way NE) | I-5 Northbound Exit 171 (SR 522 East) |
| SR 522 Westbound (Lake City Way NE) | Ramp to SR 522 Eastbound |
| SR 522 Westbound Exit for I-5 | SR 522 Eastbound (Lake City Way NE) |
| Ramp to I-5 Southbound | SR 522 Eastbound (Bothell Way NE) |
| I-5 Southbound | SR 522 Eastbound (NE Bothell Way) |
| I-5 Southbound to I-90 Exit | SR 522 Eastbound (Bothell Way NE) |
| I-90 Eastbound | SR 522 Eastbound (Woodinville Rd) |
| I-90 Eastbound Exit 10 for I-405 | SR 522 Eastbound Ramp to I-405 |
| I-405 Southbound | Ramp to I-405 Northbound |
| | I-405 Northbound (Interchange 23) |

Note: Local access to Kirkland will be designated by City of Kirkland.

DeLorme
DeLorme Street Atlas USA® 2010
Closure of I-405 Exit 18 to Exit 20
Level of Service on Alternates
Lake Forest Park
Shoreline
Kenmore
Bothell
Woodinville
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Medina
Bellevue
Lake Hills
Seattle
Beaux Arts
Eastgate
Carkeek Park
Magnuson Park
Washington Park
Lake Washington
Green Lake
Lake Union
Harbor Island
Mercer Island
SAND POINT WAY NE
REDMOND WAY
FLOATING BRG
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT
ASSOCIATES
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www.delorme.com
Scale 1 : 125,000
1" = 1.97 mi
Data Zoom 10-6

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 9-Closure of I-405 from Exit 18 to Exit 20 King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | √ | | I-405 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | √ | √ | √ | | I-405, HOV 3 or 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | √ | | |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | |
| Shoulder - Convert to Driving Lane | | | √ | | I-405 |
| Parking Eliminate/Restrict | √ | √ | √ | | For Local Kirkland Access |
| Turn Prohibitions | √ | √ | √ | | For Local Kirkland Access |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland-Kenmore-Bellevue (Pass. Only)<br>Leschi Park/Bellevue (Pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | √ | √ | | Ferry Connections |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 9-Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #10 - Closure of I-5 from SR 599 to SR 900

## A. General Information

Stakeholders presented two alternative routes for dealing with the closure of I-5 from SR 599 to SR 900 under this scenario. The primary route entails diverting traffic from I-5 to SR 99 to SR 509 to St 518 back onto I-5. The secondary route is only a southbound alternative that entails diverting traffic from I-5 to SR 99 to SR 599 back onto I-5. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)
2. City of Seattle

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

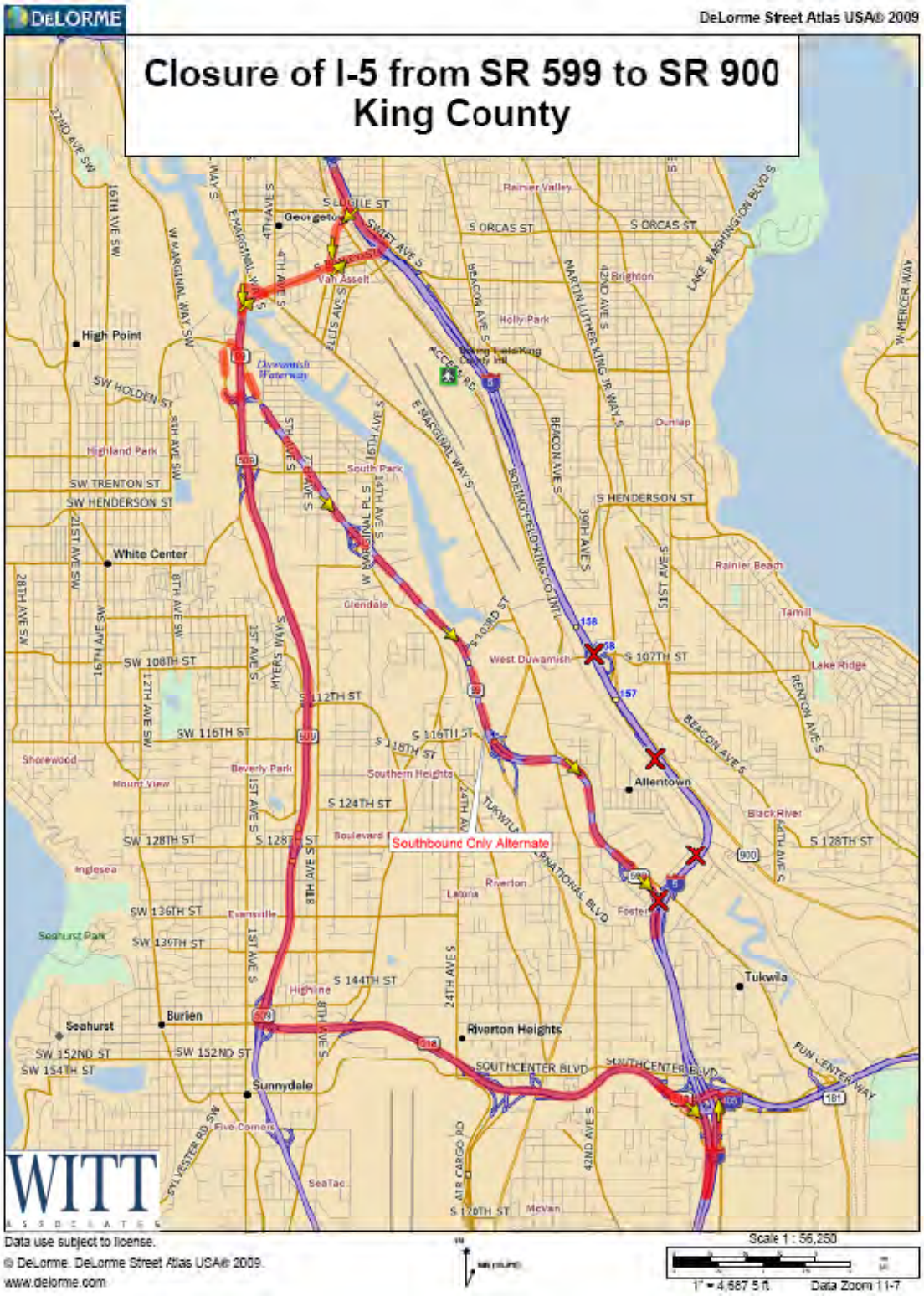
Stakeholders identified short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on Michigan Street. Other alternatives include: Alternate Driving Days, Bike Lanes, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include changing HOV rules, constructing HOV Bypass to ease bottleneck, convert lanes on I-5, SR 518, SR 509 to HOV lanes, convert freeway shoulder to driving lane on SR 509, SR 518, transit service increase, freeway ramp metering, and incorporating technology in traffic signal interconnects on Michigan Street. See Appendix E – Roadways Toolbox for further information.


DeLorme
DeLorme Street Atlas USA® 2009
Closure of I-5 from SR 599 to SR 900
King County
Southbound Cnty Alternate
WITT ASSOCIATES
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Scale 1 : 56,250
1" = 4,687.5 ft
Data Zoom 11-7

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 10 - Closure of I-5 from SR 599 to SR 900 – King County | |
| North to South Routing | South to North Routing |
| I-5 Southbound | I-5 Northbound |
| I-5 Southbound Exit 162 (Michigan St/Corson Ave) | I-5 Northbound Exit 154 A (SR 518) |
| Ramp to Corson Ave | SR 518 Westbound |
| Corson Ave S Southbound | SR 518 Westbound Exit for SR 509 North |
| Corson Ave S to Michigan St (Traffic Signal) | SR 509 Northbound |
| S Michigan St Westbound | SR 509 Northbound Exit for I-5/Michigan St |
| S Michigan St Westbound Ramp to SR 509 (Tr. Sig.) | S Michigan St Eastbound |
| Ramp to SR 509 | S Michigan St Eastbound becomes S Bailey St |
| SR 509 Southbound | S Bailey St Eastbound to I-5 Ramp |
| SR 509 Southbound Exit to SR 518 | I-5 Northbound Ramp |
| Ramp to SR 518 (Traffic Signal) | I-5 Northbound |
| SR 518 Eastbound | |
| SR 518 Eastbound Exit to I-5 | |
| I-5 Southbound | |

Note: Potential exists for Ramp from SR 599 Southbound to I-5 Southbound to remain serviceable. If so, southbound route would be relocated to SR 99/SR 599 (see map note).

Note: Traffic Signal retiming required.

Note: Need to coordinate restricted bridge openings with USCG for Duwamish.

DeLorme Street Atlas USA® 2010
Closure of I-5 from SR 599 to SR 900
Level of Service on Alternates
Southbound Only Alternate
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT ASSOCIATES
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www.delorme.com
Scale 1 : 68,750
1" = 1.09 mi
Data Zoom 11-5

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 10 - Closure of I-5 from SR 599 to SR 900 King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | √ | | I-5, SR 518, SR 509 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | √ | √ | √ | | I-5, HOV 3 or 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | | √ | |
| Truck Restrictions | √ | √ | √ | | Unsafe Truck Routes, Turns |
| Truck Preferences | | √ | √ | | Critical Supplies |
| Shoulder - Convert to Driving Lane | | √ | √ | | SR 509, SR 518 |
| Parking Eliminate/Restrict | | | | √ | |
| Turn Prohibitions | √ | √ | √ | | Michigan St |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | | √ | √ | | |
| Park – Ride Lots New/Expand | | √ | √ | | |
| Alternating Driving Days | | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | | √ | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | Michigan |
| Convert trails to special motorized use | | | | √ | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 10 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

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# Appendix B
# Scenario #11- Closure of the I-90 Floating Bridge

## A. General Information

The I-90 Floating Bridge (Homer Hadley Floating Bridge) connects downtown Seattle to Mercer Island and is one of the main routes connecting downtown Seattle to other major metropolitan areas along the east side of Lake Washington. It also is a significant freight route for east-west traffic to and from the Seattle-area. The alternative routes for this section of roadway consist of using SR-520 via the "Evergreen Point" floating bridge, or by going around the lake either to the north or to the south. Lake Washington could be used as an additional transportation corridor for passenger-only ferries at various locations.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. Emergency Services Coordinating Agency (ESCA)
2. King County Office of Emergency Management (OEM)
3. Snohomish County Department of Emergency Management (DEM)
4. City of Lake Forest Park
5. City of Kenmore
6. City of Bothell

### D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies

to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the Cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
2. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.
3. Snohomish County Emergency Operations Center will notify Everett Emergency Management and Monroe Emergency Management as well as the jurisdictions and tribes with which they have an interlocal agreement which includes the Tulalip tribe, Marysville, Arlington, Stanwood, Darrington, Granite Falls, Lake Stevens, Index, Gold Bar, Sultan and Snohomish as well as the Stillaguamish Tribe.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes, including but are not limited to SR 520, SR-522 (north route), and I-5 to I-405 through Renton (south route).

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Set-up highway detours signage for rerouting traffic. Other solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. Set-up highway detours signage for rerouting traffic. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

Restoring this section of highway will require freight movement to and from the destructed area. The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Van/Carpool Incentives, Alternate Driving Days, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance,

as well as Compressed Work Week. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include Truck Restrictions, Truck Preferences, convert lanes on I-405 to HOV lanes, changing HOV rules, constructing HOV Bypass to ease bottlenecks, establish new ferry service, transit service increase and establish new transit service, bike lanes, freeway ramp metering, freeway ramps closure and incorporating technology in traffic signal interconnects. New passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix E – Roadways Toolbox for further information. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

## H. Site Images for Alternative Route Landing Sites

UW Waterfront Activities Center

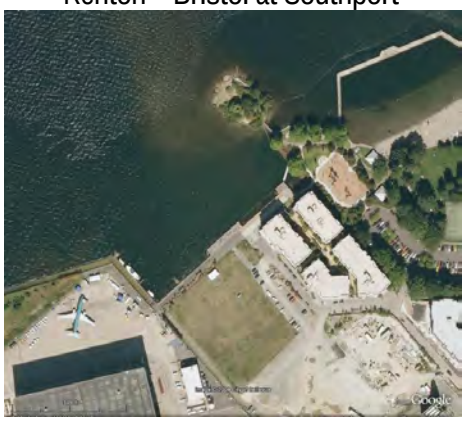
Leschi Park

Bellevue Meydenbauer Bay Marina

Kirkland Marina Park

Kenmore Tracy Owen Station Park

Renton – Bristol at Southport



DeLORME
DeLorme Street Atlas USA® 2009
Closure of I-90 Floating Bridge
King County
North Seattle Secondary
North Seattle Primary
Primary Route
South Seattle Route
XXX
Cathcart
Clearview
North Creek
Kenmore
Bothell
Woodinville
Cottage Lake
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Sammamish
Inglewood
Lake Hills
Medina
Bellevue
Seattle
Bellevue Arts
Eastgate
Monohan
West Lake Sammamish
Mercer Island
Hazelwood
Newcastle
Issaquah
Kennydale
Coalfield
East Renton Highlands
Maplewood
Renton
Tukwila
Burien
Seahurst
Riverton Heights
Sunnydale
Allentown
Bryn Mawr
White Center
High Point
Georgetown
Vashon Heights
Fort Lawton Military Reservation
Lake Forest Park
Shoreline
Mountlake Terrace
Lynnwood
Kenmore
Edmonds
Seattle Heights
Turner Corner
Maltby
WEST SEATTLE FWY
AURORA AVE N
SAND POINT WAY NE
WOODINVILLE REDMOND RD NE
NE REDMOND FALL CITY RD
REDMOND WAY
RENTON RD
SE RENTON MAPLE VALLEY RD
EDMONDS WAY
CASPERS ST
MALTBY RD
WITT ASSOCIATES
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Scale 1 : 200,000
1" = 3.16 mi
Data Zoom 10-0

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 11 - Closure of I-90 Floating Bridge – King County | |
| East to West Routing – Primary Downtown | West to East Routing – Primary Downtown |
| I-90 Westbound (Bellevue Area)<br>I-90 Westbound Exit 10 (I-405 Northbound)<br>I-405 Northbound<br>I-405 Northbound Exit 14 (SR 520 Westbound)<br>SR 520 Westbound<br>SR 520 Westbound (Floating Bridge)<br>SR 520 Westbound Exit for I-5 Southbound<br>I-5 Southbound | I-5 Northbound (Seattle Downtown Area)<br>I-5 Northbound Exit 168B (SR 520 Eastbound)<br>SR 520 Eastbound<br>SR 520 Eastbound (Floating Bridge)<br>SR 520 Eastbound Exit for I-405 Southbound<br>I-405 Southbound<br>I-405 Southbound Exit 11 (I-90 Eastbound)<br>I-90 Eastbound |

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 11 - Closure of I-90 Floating Bridge – King County | |
| East to West Routing – (South Seattle Route) | West to East Routing – (South Seattle Route) |
| I-90 Westbound (Bellevue Area)<br>I-90 Westbound Exit 10 (I-405 Southbound)<br>I-405 Southbound<br>I-405 Southbound Exit for I-5 Northbound<br>I-5 Northbound<br>I-5 Northbound (South Seattle Area) | I-5 Southbound (South Seattle Area)<br>I-5 Southbound Exit 154A (I-405 Northbound)<br>I-405 Northbound<br>I-405 Northbound Exit 11 (I-90 Eastbound)<br>I-90 Eastbound (Bellevue Area) |

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 11 - Closure of I-90 Floating Bridge – King County (North Seattle Route) | |
| East to West Routing –<br>(North Seattle Primary Route) | West to East Routing –<br>(North Seattle Primary Route) |
| I-90 Westbound (Bellevue Area)<br>I-90 Westbound Exit 10 (I-405 Northbound)<br>I-405 Northbound<br>I-405 Northbound Exit 23 for SR 522 West<br>Ramp to SR 522 Westbound<br>SR 522 Westbound<br>SR 522 Westbound (Woodinville Rd)<br>SR 522 Westbound (NE Bothell Way<br>SR 522 Westbound (Lake City Way NE)<br>SR 522 Westbound to I-5 | I-5 (North Seattle Area)<br>I-5 Exit 171 (SR 522 Eastbound)<br>Ramp to SR 522 East (Lake City Way NE)<br>SR 522 Eastbound (Lake City Way NE)<br>SR 522 Eastbound (NE Bothell Way)<br>SR 522 Eastbound (Woodinville Rd)<br>SR 522 Eastbound<br>SR 522 Eastbound Ramp to I-405 Southbound<br>I-405 Southbound (Interchange 23)<br>I-405 Southbound<br>I-405 Southbound to Exit 10 (I-90 East)<br>I-90 Eastbound |

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 11 - Closure of I-90 Floating Bridge – King County (North Seattle Route) | |
| East to West Routing –<br>(North Seattle Secondary Route) | West to East Routing –<br>(North Seattle Secondary Route) |
| I-90 Westbound (Bellevue Area)<br>I-90 Westbound Exit 10 (I-405 Northbound)<br>I-405 Northbound<br>I-405 Northbound Exit for I-5 Southbound<br>I-5 Southbound<br>I-5 Southbound (North Seattle Area) | I-5 Northbound (North Seattle Area)<br>I-5 Northbound Exit 182 (I-405 Southbound)<br>I-405 Southbound<br>I-405 Southbound Exit 11 (I-90 Eastbound)<br>I-90 Eastbound (Bellevue Area) |

Note: Mercer Island access via I-90 to/from the east.

Note: I-405 Interchange Ramps to Mercer Island – Local Traffic Only.

Note: Seattle should monitor 23rd for need of signal control/retiming.

Note: Seattle should consider restricting bridge openings on Montlake Bridge. Coordination with USCG needed.

Note: Consideration should be given for bus priority rerouting from I-90.

DeLorme Street Atlas USA® 2010
Closure of I-90 Floating Bridge
Level of Service on Alternates
Eglon
Kingston
Indianola
Port Madison
Rollingbay
Winslow
Eagledale
Port Blakely
Harper
Southworth
Vashon Heights
Lynnwood
Edmonds
Seattle Heights
Mountlake Terrace
Lake Forest Park
Shoreline
Kenmore
Bothell
Woodinville
North Creek
Kennard Corner
Turner Corner
Maltby
Clearview
Cottage Lake
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Fort Lawton Military Reservation
Lake Union
Lake Washington
Medina
Bellevue
Lake Hills
Sammamish
Inglewood
Lake Sammamish
Seattle
Beaux Arts
Mercer Island
Monohan
West Lake Sammamish
WEST SEATTLE FWY
Georgetown
Boeing Field/King County International
High Point
Hazelwood
Newcastle
Issaquah
White Center
Kennydale
Bryn Mawr
Renton Municipal
Coalfield
Allentown
Tukwila
Riverton Heights
Seattle-Tacoma International
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT
ASSOCIATES
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Scale 1 : 225,000
1" = 3.55 mi
Data Zoom 9-7

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 11 - Closure of I-90 Floating Bridge King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | √ | | SR 520 |
| HOV Lanes – Convert | | | √ | | I-5, I-405, SR 520 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | √ | √ | √ | | I-5, I-405, HOV 3 or 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | √ | | Local Access only to Mercer Is. |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | |
| Shoulder - Convert to Driving Lane | | | √ | | Freeways/Interstates |
| Parking Eliminate/Restrict | | | √ | | |
| Turn Prohibitions | | | √ | | |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland-Kenmore-Bellevue (Pass. Only) Leschi Park/Bellevue (Pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | √ | | Ferry Connections |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 11 - Closure of I-90 Floating Bridge King County | | | | | |
| Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | | | | √ | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | | | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | | | √ | | |
| Determine personnel required and availability of alternative maritime transportation | | | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | | | √ | | |
| Determine long-term contracting needs | | | √ | | |
| Identify recovery options for alternative maritime transportation | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 11 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

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# Appendix B
# Scenario #12 - Closure of SR 522 from I-5 to I-405

## A. General Information

Stakeholders identified two routes as suitable alternatives under this scenario for the closure of SR 522 from I-5 to I-405, dependent on the direction of the traffic flow:

1. A Downtown Seattle/Kirkland Route via SR 520 to I-405; and
2. A North Seattle/Bothell Route via I-5 to I-405.

See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies coordination responsibilities for routes to be used as alternatives)

1. Emergency Services Coordinating Agency (ESCA)
2. King County Office of Emergency Management (OEM)
3. Snohomish County Department of Emergency Management (DEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs),

municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the Cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
2. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.
3. Snohomish County Emergency Operations Center will notify Everett Emergency Management and Monroe Emergency Management as well as the jurisdictions and tribes with which they have an interlocal agreement which includes the Tulalip tribe, Marysville, Arlington, Stanwood, Darrington, Granite Falls, Lake Stevens, Index, Gold Bar, Sultan and Snohomish as well as the Stillaguamish Tribe.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on roadways near SR 522. Other alternatives include: Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Also there is potential for a Maritime (Ferry) alternative. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include Truck Restrictions and Preferences, constructing HOV

Bypass lanes to ease bottlenecks, converting lanes on SR 522 to HOV lanes, changing HOV lane rules on I-5 and I-405, converting trails to special motorized use lanes, increasing transit service, incorporating technology in traffic signal interconnects and freeway ramp metering. See Appendix E – Roadways Toolbox for further information.

DeLorme
DeLorme Street Atlas USA® 2009
Closure of SR 522 from I-5 to I-405
King County
North Seattle / Bothell Route
Downtown Seattle / Kirkland Route
Edmonds
Lynnwood
Seattle Heights
Mountlake Terrace
Shoreline
Lake Forest Park
Kenmore
Bothell
Woodinville
North Creek
Kennard Corner
Clearview
Turner Corner
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Carkeek Park
Washington Park
Lake Washington
Green Lake
CASPERS ST
EDMONDS WAY
BALLINGER WAY NE
AURORA AVE N
AURORA BRG
SAND POINT WAY NE
BOTHELL EVERETT HWY
MALTBY RD
WOODINVILLE DR
WOODINVILLE REDMOND RD NE
REDMOND WAY
WITT ASSOCIATES
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Scale 1 : 112,500

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 12 - Closure of SR 522 from I-5 to I-405 – King County | |
| East to West<br>North Seattle / Bothell Route | West to East Routing<br>North Seattle / Bothell Route |
| SR 522 Westbound<br>SR 522 Westbound Exit to I-405 Northbound<br>Ramp to I-405 Northbound<br>I-405 Northbound (Interchange 23)<br>I-405 Northbound<br>I-405 Northbound Exit to I-5 Southbound<br>Ramp to I-5 Southbound<br>I-5 Southbound<br>I-5 Southbound to SR 522 (Interchange 171) | I-5 Northbound<br>I-5 Northbound Exit to I-405 Southbound<br>Ramp to I-405 Southbound<br>I-405 Southbound<br>I-405 Southbound Exit 23 (SR 522 Eastbound)<br>Ramp to SR 522 Eastbound<br>SR 522 Eastbound |

| 12-Closure of SR 522 from I-5 to I-405 – King County | |
|---|---|
| East to West<br>Downtown Seattle / Kirkland Route | West to East Routing<br>Downtown Seattle / Kirkland Route |
| SR 522 Westbound<br>SR 522 Westbound Exit to I-405 Southbound<br>Ramp to I-405 Southbound<br>I-405 Southbound (Interchange 23)<br>I-405 Southbound<br>I-405 Southbound Exit14 to SR 520 Westbound<br>Ramp to SR 520 Westbound<br>SR 520 Westbound<br>SR 520 Westbound Exit for I-5 | I-5 Exit for SR 520 (Exit 168)<br>Ramp to SR 520 Eastbound<br>SR 520 Eastbound<br>SR 520 Eastbound Exit for I-405 North<br>Ramp to I-405 North<br>I-405 Northbound<br>I-405 Northbound Exit 23 (SR 522)<br>Ramp to SR 522 Eastbound<br>SR 522 Eastbound |

Note: No overweight/over height loads on 15th St.

Note: Consider changing HOV requirements. Coordination with WSDOT required.

DeLorme
DeLorme Street Atlas USA® 2010
Closure of SR 522 from I-5 to I-405
Level of Service on Alternatives
Martha Lake
Cathcart
Clearview
Lynnwood
Kenmore Corner
North Creek
CASPERS ST
Edmonds
Seattle Heights
MALTBY RD
Turner Corner
Maltby
EDMONDS WAY
Mountlake Terrace
BOTHELL EVERETT HWY
Lake Forest Park
Shoreline
Kenmore
Bothell
Woodinville
Cottage Lake
Kingsgate
Juanita
WOODINVILLE REDMOND RD NE
Kirkland
REDMOND WAY
Redmond
SAND POINT WAY NE
Fort Lawton Military Reservation
Houghton
Sammamish
Washington Park
Lake Union
Lake Washington
Medina
AURORA BRG
AURORA AVE N
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT ASSOCIATES
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Scale 1 : 150,000
1" = 2.37 mi
Data Zoom 10-4

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 12 - Closure of SR 522 from I-5 to I-405 – King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | | √ | SR 520 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | | √ | | HOV 3, HOV 4 on I-5, I-405 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | | | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | | √ | |
| Truck Restrictions | √ | √ | √ | | Unsafe Truck Routes |
| Truck Preferences | | √ | √ | | Critical Supplies, To SR 522 |
| Shoulder - Convert to Driving Lane | | | | √ | |
| Parking Eliminate/Restrict | | | | √ | |
| Turn Prohibitions | | √ | √ | | Roadways near SR 522 |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | √ | √ | | UW/Kirkland-Kenmore-Bellevue (Pass. Only) Leschi Park/Bellevue (Pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | | | | √ | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | | √ | |
| Transit Service Increase | | √ | √ | | To/from SR 522 Corridor |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | | √ | |
| Convert trails to special motorized use | | √ | √ | | Burke- Gilman |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 12 - Roadway Reconstruction Toolbox Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #13 - Closure of the I-405/SR 520 Interchange

## A. General Information

The I-405/SR 520 Interchange is a major interchange for north-south traffic on I-405 as well as the east-west traffic on SR 520. The alternative routes for this section of roadway consist of using I-90 via the floating bridge, or by going around the lake either to the north or to the south. Lake Washington could be used as an additional transportation corridor for passenger-only ferries at various locations.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. Emergency Services Coordinating Agency (ESCA)
2. King County Department of Emergency Management (DEM)
3. Snohomish County Department of Emergency Management (DEM)
4. City of Bellevue
5. City of Redmond
6. City of Lake Forest Park
7. City of Kenmore
8. City of Bothell

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their

Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the Cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
2. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.
3. Snohomish County Emergency Operations Center will notify Everett Emergency Management and Monroe Emergency Management as well as the jurisdictions and tribes with which they have an interlocal agreement which includes the Tulalip tribe, Marysville, Arlington, Stanwood, Darrington, Granite Falls, Lake Stevens, Index, Gold Bar, Sultan and Snohomish as well as the Stillaguamish Tribe.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes, including but are not limited to I-90 and SR-522 for east-west routes, and I-5 for north-south through traffic on I-405.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on roadways near Redmond Way and SR 522. Other alternatives include: Freeway Ramp Closure near the

SR 520 interruption, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Also there is potential for a Maritime (Ferry) alternative. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include new passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. Other options include Truck Restrictions and Preferences, constructing HOV Bypass lanes to ease bottlenecks, changing HOV lane rules on I-5, I-90 and I-405, converting trails to special motorized use lanes, increasing transit service, incorporating technology in traffic signal interconnects and freeway ramp metering. See Appendix E – Roadways Toolbox for further information.

New passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

## H. Site Images for Alternative Route Landing Sites

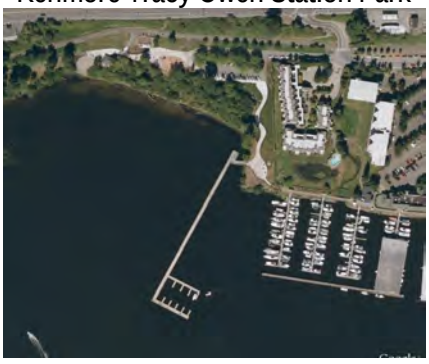
UW Waterfront Activities Center

Leschi Park

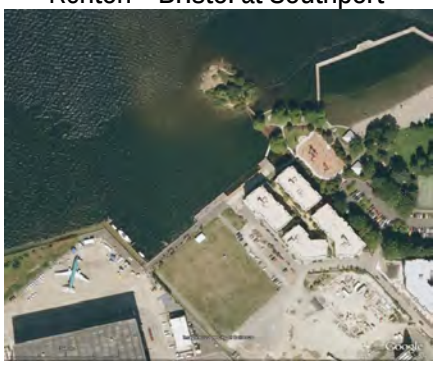
Bellevue Meydenbauer Bay Marina

Kirkland Marina Park

Kenmore Tracy Owen Station Park



Renton – Bristol at Southport



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DeLorme Street Atlas USA® 2010
Closure of I-405 SR 520 Interchange (I-405 Through Route)
Cathcart
Clearview
North Creek
Lynnwood
Edmonds
Seattle Heights
Kennard Corner
Turner Corner
Maltby
Mountlake Terrace
Bothell
Kenmore
Woodinville
Lake Forest Park
Shoreline
Cottage Lake
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Fort Lawton Military Reservation
Sammamish
Inglewood
Medina
Bellevue
Lake Hills
Seattle
Beaux Arts
Eastgate
Monohan
Mercer Island
West Lake Sammamish
Georgetown
Hazelwood
High Point
Newcastle
White Center
Kennydale
Vashon Heights
Bryn Mawr
Allentown
Cedarhurst
Renton
Tukwila
Seahurst
Burien
Riverton Heights
Sunnydale
Vashon Muni
Vashon
SAND POINT WAY NE
FLOATING BRG
WEST SEATTLE FWY
BOTHELL EVERETT HWY
WOODINVILLE REDMOND RD NE
RENTON RD
TUKWILA INTERNATIONAL BLVD
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1" = 3.16 mi
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Closure of I-405 SR 520 Interchange
King County
SR 520 Through Traffic Route
SR 520 / I-405 Route
SR 520 East to I-405 South
I-405 (South) Route
Bothell
Kenmore
Lake Forest Park
Shoreline
Woodinville
Cottage Lake
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Sammamish
Medina
Bellevue
Lake Hills
Seattle
Beaux Arts
Mercer Island
West Lake Sammamish
Monohan
Eastgate
Harbor Island
Georgetown
High Point
Seward Park
Magnuson Park
Green Lake
Lake Union
Lake Washington
Lake Sammamish
WITT
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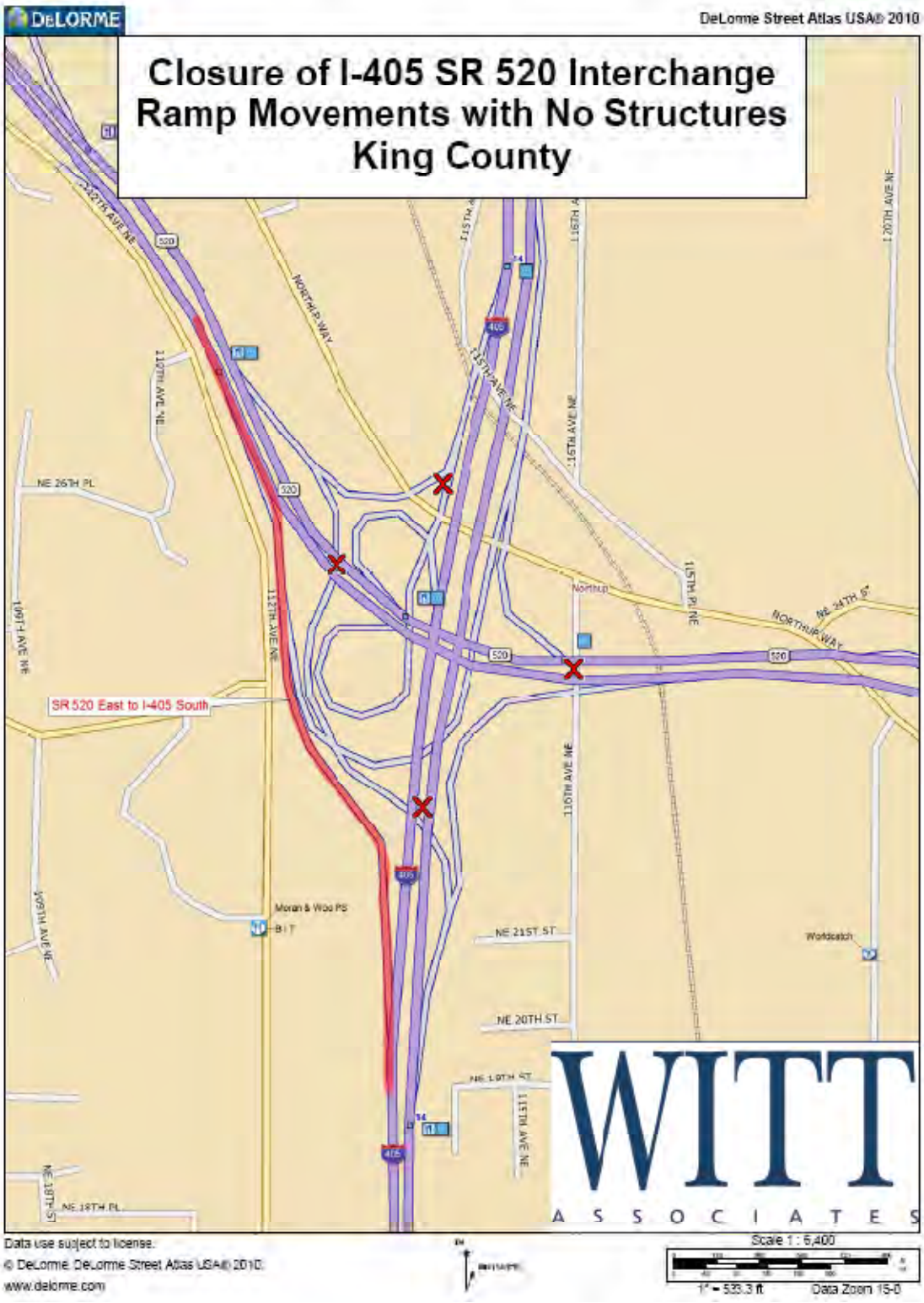
1" = 1.97 mi
Data Zoom 10-6


DeLorme Street Atlas USA® 2010
Closure of I-405 SR 520 Interchange
Ramp Movements with No Structures
King County
SR 520 East to I-405 South
NE 26TH PL
NE 21ST ST
NE 20TH ST
NE 19TH ST
NE 18TH PL
NORTHUP WAY
112TH AVE NE
110TH AVE NE
109TH AVE NE
116TH AVE NE
115TH AVE NE
115TH PL NE
120TH AVE NE
Moran & Woo PS
Worldcatch
Northup
WITT
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Scale 1 : 6,400
1" = 533.3 ft
Data Zoom 15-0

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 13 - Closure of I-405 SR 520 Interchange – King County | |
| North to South (Regional Through Traffic) Routing | South to North (Regional Through Traffic) Routing |
| Use I-5 Southbound | Use I-5 Northbound |
| East to West (SR 520 Through Traffic) Routing | West to East (SR 520 Through Traffic) Routing |
| SR 520 / SR 202 Interchange (Redmond) | SR 520 to I-5 Northbound (Seattle Area) |
| SR 202 Westbound (Redmond Way) | I-5 Northbound Exit 171 (SR 522 East) |
| SR 202/908 Westbound (Redmond Way) | Ramp to SR 522 Eastbound |
| - One Way Couplet with Cleveland St | SR 522 Eastbound (Lake City Way NE) |
| SR 908 Westbound (Redmond Way) | SR 522 Eastbound (Bothell Way NE) |
| SR 908 Westbound (NE 85th St) | SR 522 Eastbound (NE Bothell Way) |
| SR 908 Westbound Ramp to I-405 | SR 522 Eastbound (Bothell Way NE) |
| I-405 Northbound | SR 522 Eastbound (Woodinville Rd) |
| I-405 Northbound Exit 23 (SR 522) | SR 522 Eastbound Ramp to I-405 |
| Ramp to SR 522 Westbound | Ramp to I-405 Southbound |
| SR 522 Westbound (Woodinville Rd) | I-405 Southbound (Interchange 23) |
| SR 522 Westbound (Bothell Way NE) | I-405 Southbound |
| SR 522 Westbound (NE Bothell Way) | I-405 Southbound Exit 18 (SR 908) |
| SR 522 Westbound (Bothell Way NE) | Ramp to SR 908 Eastbound (NE 85th St) |
| SR 522 Westbound (Lake City Way NE) | SR 908 Eastbound (NE 85th St) |
| SR 522 Westbound Exit for I-5 | SR 908 Eastbound (Redmond Way) |
| Ramp to I-5 Southbound | SR 908/202 Eastbound (Cleveland St) |
| I-5 Southbound | - One Way Couplet with Redmond Way |
| I-5 Southbound to SR 520 | SR 202 Eastbound to SR 520 Interchange |
| North to South (Local I-405 Traffic) Routing | South to North (Local I-405 Traffic) Routing |
| I-405 Southbound | I-405 Northbound |
| I-405 Southbound Exit 23 (SR 522) | I-405 Northbound Exit 11 (I-90) |
| Ramp to SR 522 Westbound | I-90 Westbound |
| SR 522 Westbound (Woodinville Rd) | I-90 Westbound Exit for I-5 Northbound |
| SR 522 Westbound (Bothell Way NE) | Ramp to I-5 Northbound |
| SR 522 Westbound (NE Bothell Way) | I-5 Northbound |
| SR 522 Westbound (Bothell Way NE) | I-5 Northbound Exit 171 (SR 522 East) |
| SR 522 Westbound (Lake City Way NE) | Ramp to SR 522 Eastbound |
| SR 522 Westbound Exit for I-5 | SR 522 Eastbound (Lake City Way NE) |
| Ramp to I-5 Southbound | SR 522 Eastbound (Bothell Way NE) |
| I-5 Southbound | SR 522 Eastbound (NE Bothell Way) |
| I-5 Southbound to Exit for I-90 Eastbound | SR 522 Eastbound (Bothell Way NE) |
| Ramp to I-90 Eastbound | SR 522 Eastbound (Woodinville Rd) |
| I-90 Eastbound | SR 522 Eastbound Ramp to I-405 |
| I-90 Eastbound Exit for I-405 (Exit 10) | Ramp to I-405 Southbound |
| I-405 Southbound (Interchange 11) | I-405 Southbound (Interchange 23) |
| | I-405 Southbound |

Note: Ramps with no structures and expected to remain open – SR 520 Eastbound to I-405 Southbound and I-405 Northbound to SR 520 Eastbound (see map).

Note: Alternate Route from SR 520 West to I-405 South – Use 148th Ave NE Southbound to I-90 Westbound (see map).

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DeLorme Street Atlas USA© 2010
Closure of I-405 SR 520 Interchange
Level of Service on Alternatives
Bothell
Kenmore
Lake Forest Park
Shoreline
Woodinville
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Medina
Bellevue
Lake Hills
Seattle
Beaux Arts
Mercer Island
West Lake Sammamish
Carkeek Park
Magnuson Park
Green Lake
Lake Union
Lake Washington
Washington Park
Harbor Island
SAND POINT WAY NE
AURORA AVE N
LAKE CITY WAY NE
WOODINVILLE REDMOND RD NE
REDMOND WAY
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT ASSOCIATES
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Scale 1 : 125,000
1" = 1.97 mi
Data Zoom 10-8

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 13 - Closure of I-405 SR 520 Interchange King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | | √ | |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | √ | √ | √ | | I-5, I-405, I-90 HOV 3 or 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | √ | √ | | Near Closure (SR 520) |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | Critical Supplies |
| Shoulder - Convert to Driving Lane | | √ | √ | | |
| Parking Eliminate/Restrict | √ | √ | √ | | Redmond Way, SR 522 |
| Turn Prohibitions | √ | √ | √ | | Redmond Way, SR 522 |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland-Kenmore-Bellevue (Pass. Only) Leschi Park/Bellevue (Pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | √ | | Ferry Connections |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | Redmond Way, SR 522 |
| Convert trails to special motorized use | | √ | √ | | Burke-Gilman |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| Closure of I-405 SR 520 Interchange King County | | | | | |
| 13 - Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | | | | √ | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | | | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | | | √ | | |
| Determine personnel required and availability of alternative maritime transportation | | | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | | | √ | | |
| Determine long-term contracting needs | | | √ | | |
| Identify recovery options for alternative maritime transportation | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 13 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #14 - Closure of the SR 520 Floating Bridge

## A. General Information

The SR-520 Floating Bridge (Governor Albert D. Rosellini Bridge—Evergreen Point) connects downtown Seattle to the east side of Lake Washington. The alternative routes for this section of roadway consist of using I-90 via the floating bridge, or by going around the lake either to the north or to the south. Lake Washington could be used as an additional transportation corridor for passenger-only ferries at various locations.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. Emergency Services Coordinating Agency (ESCA)
2. King County Office of Emergency Management (OEM)
3. City of Lake Forest Park
4. City of Kenmore
5. City of Bothell

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the Cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
2. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes, including but are not limited to, I-90, SR-522, and I-5 to I-405.

## G. Transportation Mitigation Strategies

1. Short Term Solution

Short term solutions have been identified such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions. Other alternatives include: Freeway Ramp Closure at interchanges near interruption, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Also there is potential for a Maritime (Ferry) alternative. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include new passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. Other options include Truck Restrictions and Preferences, constructing HOV Bypass lanes to ease bottlenecks, changing HOV lane rules on I-5, I-90 and I-405, converting trails to special motorized use lanes, transit

service increase, incorporating technology in traffic signal interconnects and freeway ramp metering. See Appendix E – Roadways Toolbox for further information.

New passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

## H. Site Images for Alternative Route Landing Sites

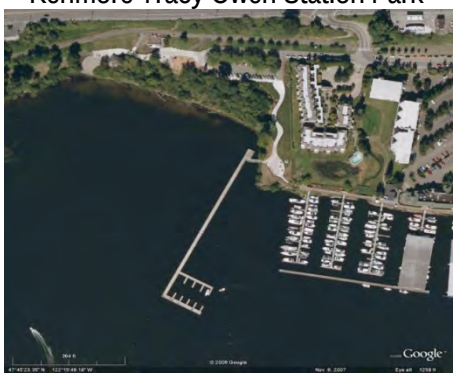
UW Waterfront Activities Center

Leschi Park

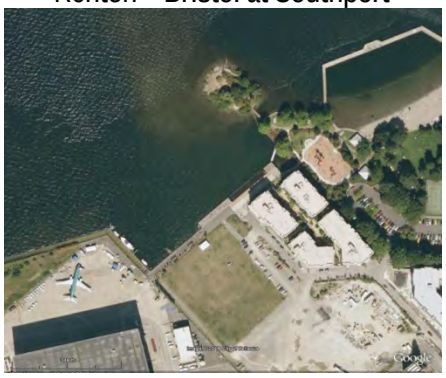
Bellevue Meydenbauer Bay Marina

Kirkland Marina Park

Kenmore Tracy Owen Station Park



Renton – Bristol at Southport



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Closure of SR 520 Floating Bridge
King County
Alternate Route
Primary Route
Seattle
Bellevue
Kirkland
Redmond
Lake Forest Park
Kenmore
Shoreline
Woodinville
Kingsgate
Juanita
Houghton
Medina
Beaux Arts
Mercer Island
Eastgate
Lake Washington
Lake Union
WITT ASSOCIATES
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Scale 1 : 100,000
1" = 1.58 mi
Data Zoom 11-0

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 14 - Closure of SR 520 Floating Bridge – King County | |
| East to West Routing – Primary | West to East Routing – Primary Downtown |
| SR 520 (Bellevue Area) | I-5 Southbound (Seattle Downtown Area) |
| SR 520 to Exit for I-405 | I-5 Southbound Exit for I-90 Eastbound |
| I-405 Southbound (Interchange 14) | Ramp to I-90 Eastbound |
| I-405 Southbound to Exit 11 (I-90) | I-90 Eastbound |
| Ramp to I-90 Westbound | I-90 Eastbound Exit 10 A (I-405 North) |
| I-90 Westbound | Ramp to I-405 Northbound |
| I-90 Westbound Exit 2C (I-5 Northbound) | I-405 Northbound |
| I-90 Westbound Ramp to I-5 Northbound | I-405 Northbound Exit 14 (SR 520) |
| I-5 Northbound | SR 520 Eastbound |

Note: Local Seattle destination via I-5 Exits.

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 14 - Closure of SR 520 Floating Bridge – King County | |
| East to West Routing – Alternate Route | West to East Routing – Alternate Route |
| SR 520 to Exit for I-405 (Bellevue Area) | I-5 Northbound (Seattle Area) |
| I-405 Northbound | I-5 Northbound Exit 171 (SR 522 East) |
| I-405 Southbound Exit 23 (SR 522) | Ramp to SR 522 Eastbound |
| Ramp to SR 522 Westbound | SR 522 Eastbound (Lake City Way NE) |
| SR 522 Westbound (Woodinville Rd) | SR 522 Eastbound (Bothell Way NE) |
| SR 522 Westbound (Bothell Way NE) | SR 522 Eastbound (NE Bothell Way) |
| SR 522 Westbound (NE Bothell Way) | SR 522 Eastbound (Bothell Way NE) |
| SR 522 Westbound (Bothell Way NE) | SR 522 Eastbound (Woodinville Rd) |
| SR 522 Westbound (Lake City Way NE) | SR 522 Eastbound Ramp to I-405 |
| SR 522 Westbound Exit for I-5 | Ramp to I-405 Southbound |
| Ramp to I-5 Southbound | I-405 Southbound (Interchange 23) |
| I-5 Southbound | I-405 Southbound |
| I-5 Southbound to SR 520 | I-405 Southbound to SR 520 (Interchange 14) |

DeLORME
DeLorme Street Atlas USA® 2010
Closure of SR 520 Floating Bridge
Level of Service on Alternates
Alternate Route
Primary Route
Bothell
Kenmore
Lake Forest Park
Shoreline
Woodinville
Cottage Lake
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Medina
Bellevue
Lake Hills
Seattle
Beaux Arts
Eastgate
Mercer Island
West Lake Sammamish
Carkeek Park
Green Lake
Lake Union
Lake Washington
Washington Park
Harbor Island
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT ASSOCIATES
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www.delorme.com
Scale 1 : 125,000
1" = 1.97 mi
Data Zoom 10-6

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 14 - Closure of SR 520 Floating Bridge - King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | SR 522 |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | √ | | I-5, I-90, I-405 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | √ | √ | | HOV 3, HOV 4, I-90 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | | | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | √ | | Interchanges near closure point |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | Critical Supplies |
| Shoulder - Convert to Driving Lane | | | | √ | Interstates/Freeways HOV |
| Parking Eliminate/Restrict | | √ | √ | | |
| Turn Prohibitions | | √ | √ | | |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland, Kenmore, Bellevue<br>Leschi Park/Bellevue (pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | √ | √ | | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | √ | √ | | SR 522 |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 14 - Closure of SR 520 Floating Bridge - King County | | | | | |
| 14-Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | | | | √ | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | | | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | | | √ | | |
| Determine personnel required and availability of alternative maritime transportation | | | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | | | √ | | |
| Determine long-term contracting needs | | | √ | | |
| Identify recovery options for alternative maritime transportation | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 14 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #15 - Closure of SR 99 from I-90 to the Snohomish Co. Line

## A. General Information

For the closure of SR 99 to I-90 to the Snohomish County Line, the alternate route for this scenario will entail diverting traffic from SR 99 to SR 104 to Interstate 5. Northbound traffic will be diverted at Michigan St. to avoid further congestion in downtown Seattle. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. Emergency Services Coordinating Agency (ESCA)
2. King County Office of Emergency Management (OEM)
3. Snohomish County Department of Emergency Management (DEM)
4. City of Seattle
5. City of Edmonds

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes and detours, and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the Cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
2. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.
3. Snohomish County Emergency Operations Center will notify Everett Emergency Management and Monroe Emergency Management as well as the jurisdictions and tribes with which they have an interlocal agreement which includes the Tulalip tribe, Marysville, Arlington, Stanwood, Darrington, Granite Falls, Lake Stevens, Index, Gold Bar, Sultan and Snohomish as well as the Stillaguamish Tribe.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

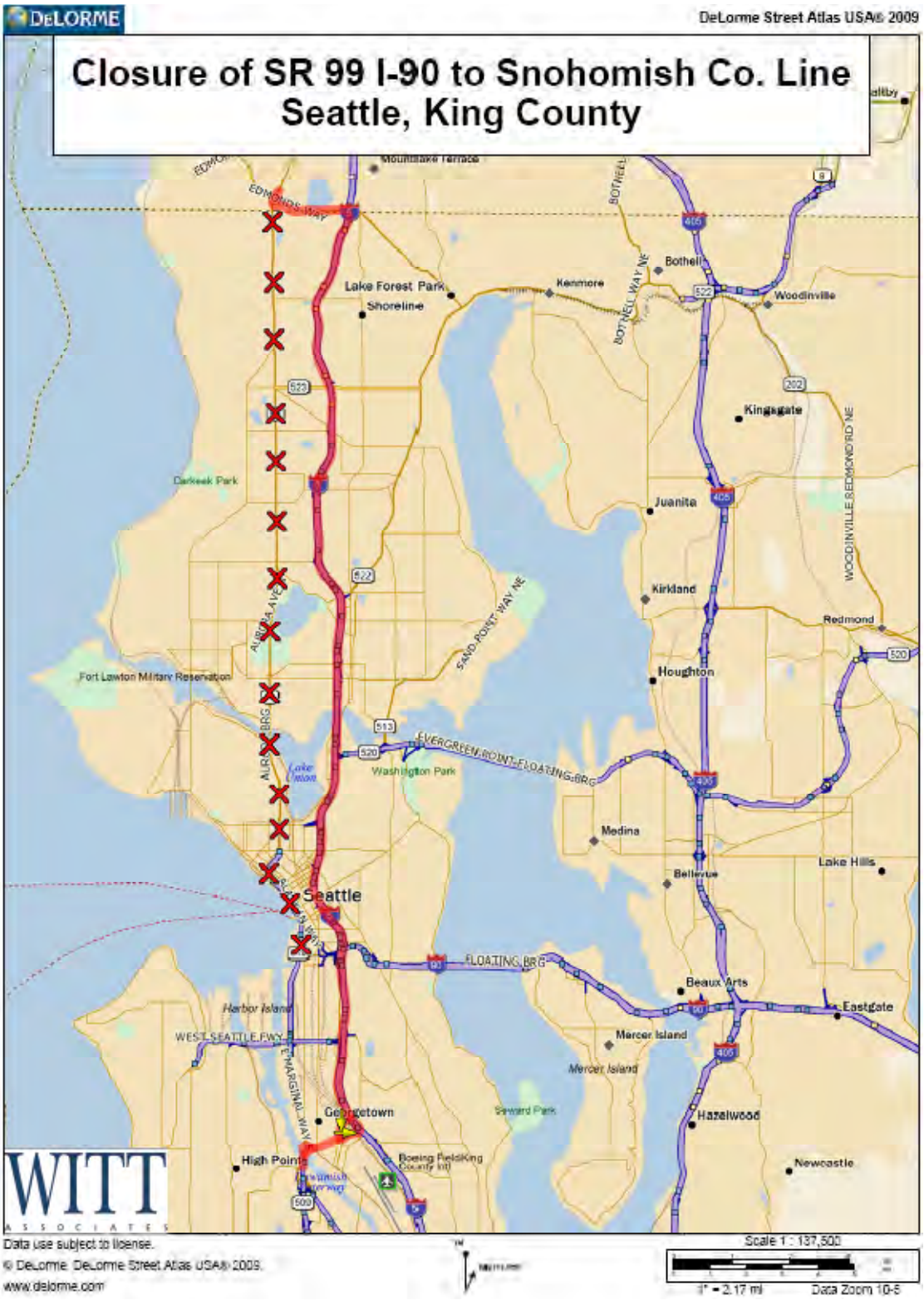
Short term solutions have been identified such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establish or expand Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions near closures. Other alternatives include: Tele-commuting, Van/Carpool Incentives, increase in transit services on SR 99 corridor, Staggered Work Shifts, Freeway Ramp Closures on West Seattle Hwy to SR 99, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include Truck Restrictions on roadways, opening Bike Lanes, changing current HOV rules, converting lanes on SR 104 to HOV lanes and freeway ramp metering on I-5. See Appendix E – Roadways Toolbox for further information.


DeLORME
DeLorme Street Atlas USA® 2009
Closure of SR 99 I-90 to Snohomish Co. Line
Seattle, King County
Mountlake Terrace
Lake Forest Park
Shoreline
Kenmore
Bothell
Woodinville
Kingsgate
Juanita
Kirkland
Redmond
Houghton
Medina
Bellevue
Lake Hills
Beaux Arts
Eastgate
Mercer Island
Hazelwood
Newcastle
Seattle
Harbor Island
Georgetown
Seward Park
High Point
Boeing Field/King County Int'l
Carkeek Park
Fort Lawton Military Reservation
Washington Park
Lake Union
EVERGREEN POINT FLOATING BRG
FLOATING BRG
WEST SEATTLE FWY
E MARGINAL WAY
SAND POINT WAY NE
BOTHELL WAY NE
WOODINVILLE REDMOND RD NE
EDMONDS WAY
ALASKA AVE
ALASKAN WAY
WITT
ASSOCIATES
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Scale 1 : 137,500
1" = 2.17 mi
Data Zoom 10-6

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 15 - Closure of SR 99 I-90 to Snohomish County Line – Seattle, King County | |
| North to South Routing | South to North Routing |
| SR 99 Southbound<br>SR 99 Southbound (Pacific Hwy)<br>SR 99 Southbound (Pacific Hwy) Exit for SR 104<br>SR 104 Eastbound<br>SR 104 Eastbound (Edmonds Way)<br>SR 104 Eastbound (NW 205th St)<br>SR 104 Eastbound (Lake Ballinger Way)<br>SR 104 Eastbound Exit to I-5 Southbound<br>Ramp to I-5 Southbound<br>I-5 Southbound (Interchange177)<br>I-5 Southbound<br>I-5 southbound Exit 162 (Corson Ave)<br>I-5 Ramp to Corson Ave<br>Corson Ave S Southbound<br>Corson Ave S Southbound to Michigan St (Traf Sig)<br>Michigan St S Westbound<br>Michigan St S Westbound to SR 99 Ramp (Traf Sig)<br>Ramp to SR 99<br>SR 99 Southbound | SR 99 Northbound<br>SR 99 Northbound Exit for Michigan St<br>S Michigan St Eastbound<br>S Michigan St Eastbound to S Bailey St (Traf. Signal)<br>S Bailey St Eastbound to Ramp to I-5<br>Ramp to I-5 Northbound<br>I-5 Northbound<br>I-5 Northbound Exit 177 (SR 104)<br>Ramp to SR 104 Westbound<br>SR 104 Westbound<br>SR 104 Westbound (Lake Ballinger Way)<br>SR 104 Westbound (NW 205th St)<br>SR 104 Westbound (Edmonds Way)<br>SR 104 Westbound Exit for SR 99 North<br>SR 99 Northbound (Pacific Hwy) |

Note: One Way Couplet S Bailey St/Corson Ave.

Note: Local access to Seattle destinations from I-5 exits.

Note: Retiming of traffic signals needed on Michigan St.

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DeLorme Street Atlas USA® 2010
Closure of SR 99 I-90 to Snohomish Co. Line
Level of Service on Alternate
Mountlake Terrace
Lake Forest Park
Shoreline
Kenmore
Bothell
Woodinville
Kingsgate
Juanita
Kirkland
Houghton
Medina
Bellevue
Eastgate
Mercer Island
Hazelwood
Newcastle
Seattle
Harbor Island
Georgetown
High Point
White Center
Boeing Field/King County International
Port Madison
Indianola
Rollingbay
Fort Lawton Military Reservation
Winslow
Eagledale
Port Blakely
Blake Island
Lake Washington Ship Canal
Lake Washington
Washington Park
Bridle Trails State Park
SAND POINT WAY NE
BALLINGER WAY NE
BOTHELL WAY NE
WEST SEATTLE BRG
FLOATING BRG
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT ASSOCIATES
Data use subject to license.
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www.delorme.com
Scale 1 : 162,500
1" = 2.56 mi
Data Zoom 10-3

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 15 - Closure of SR 99 from I-90 to Snohomish County Line - Seattle, King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | √ | | SR 104 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | √ | √ | | I-5 HOV 3, HOV 4 |
| Construct HOV Bypass | | | | √ | |
| Ramp Metering | | | √ | | I-5 |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | √ | √ | √ | | West Seattle Hwy to SR 99 |
| Truck Restrictions | √ | √ | √ | | Local Roadways |
| Truck Preferences | | | | √ | |
| Shoulder - Convert to Driving Lane | | | | √ | |
| Parking Eliminate/Restrict | | | | √ | |
| Turn Prohibitions | √ | √ | √ | | Near Closures |
| Ferry Service Relocation | √ | √ | √ | | Restricted Access to Terminal? |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | | | | √ | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | | √ | |
| Transit Service Increase | | √ | √ | | SR 99 Corridor |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | | √ | |
| Convert trails to special motorized use | | | | √ | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 15 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #16 - Closure of SR 181 from I-405 to SR 516

## A. General Information

Two routes present as suitable alternatives for the scenario dealing with closure of SR 181 from I-405 to SR 516. The primary route entails diverting traffic onto I-405 to I-5 to SR 516. The secondary route entails diverting traffic from I-405 at SR 181 to SR 167. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities FOR routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes, and detours and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will also coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

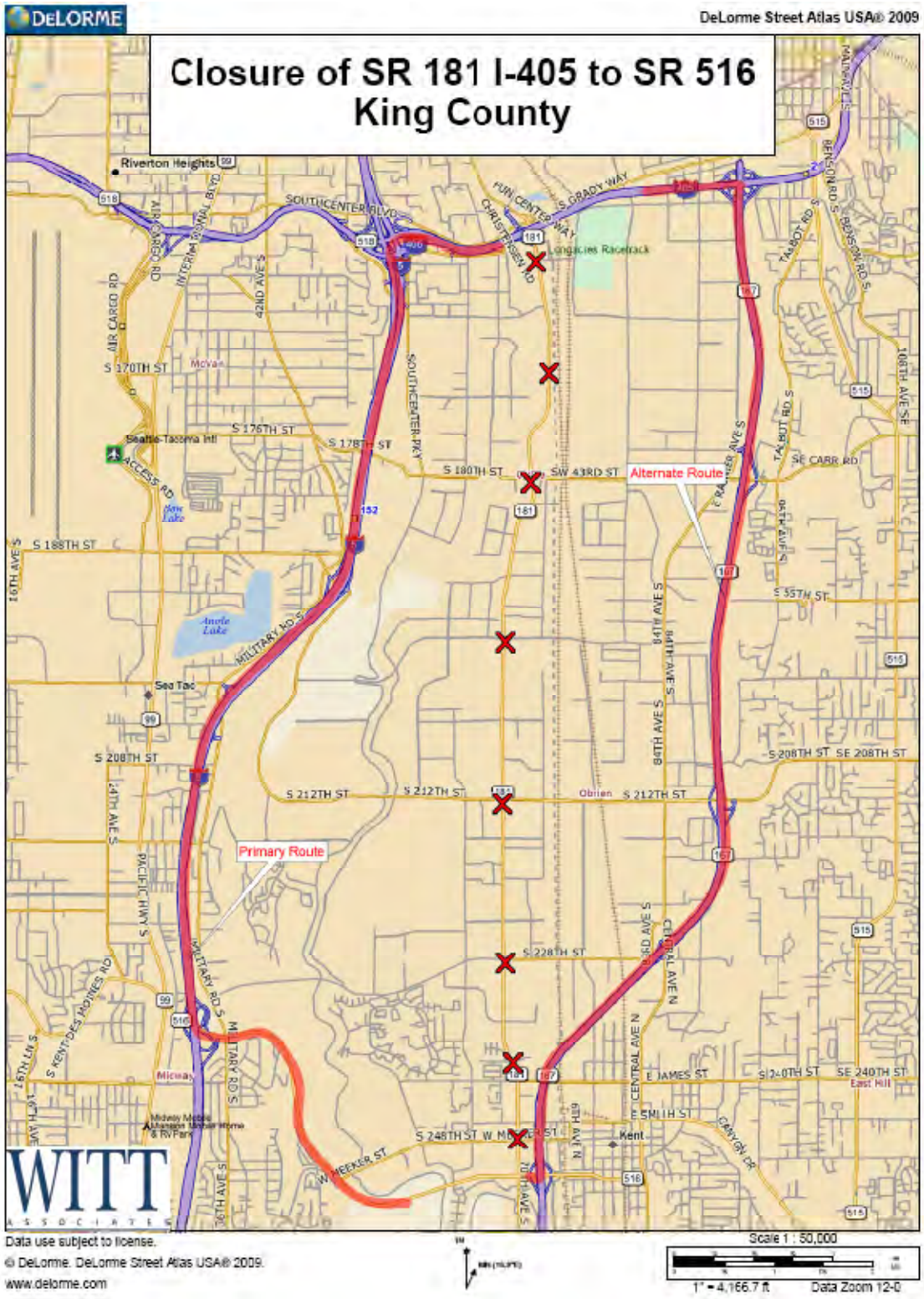
Stakeholders identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on local access roads to SR 181 Corridor. Other alternatives include: Alternate Driving Days, Bike Lanes, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include truck restrictions due to unsafe routes to SR 181, truck preferences at local access roads to SR 181 Corridor, changing HOV rules, constructing HOV Bypass to ease bottleneck, increasing transit service, freeway ramp metering, freeway ramp closure at I-5 Exit 152, SR 167 & 43rd, 122nd, tolling adjustments on SR 167 and incorporating technology in traffic signal interconnects on Kent Des Moines Rd. See Appendix E – Roadways Toolbox for further information.


DeLorme
DeLorme Street Atlas USA® 2009
Closure of SR 181 I-405 to SR 516
King County
Riverton Heights
SOUTHCENTER BLVD
FUN CENTER WAY
S GRADY WAY
Longacres Racetrack
AIR CARGO RD
INTERNATIONAL BLVD
42ND AVE S
SOUTHCENTER PKY
CHRISTENSEN RD
BENSON RD S
TALBOT RD S
S 170TH ST
McVay
S 176TH ST
S 178TH ST
Seattle-Tacoma Intl
ACCESS RD
S 180TH ST
SW 43RD ST
Alternate Route
SE CARR RD
108TH AVE SE
S 188TH ST
MILITARY RD S
Angle Lake
Sea Tac
S 208TH ST
S 212TH ST
Obrien
SE 208TH ST
Primary Route
PACIFIC HWY S
S 228TH ST
S KENT DES MOINES RD
Midway
S 248TH ST
W MEEKER ST
E JAMES ST
S 240TH ST
SE 240TH ST
East Hill
Kent
SMITH ST
CANYON DR
WITT
ASSOCIATES
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www.delorme.com
Scale 1 : 50,000
1" = 4,166.7 ft
Data Zoom 12-0

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 16 - Closure of SR 181 from I-405 to SR 516 – King County | |
| North to South Routing - Primary | South to North Routing - Primary |
| I-405 Southbound<br>I-405 Southbound Exit to I-5 Southbound<br>I-5 Southbound<br>I-5 Southbound Exit 149 (SR 516)<br>I-5 Ramp to SR 516(Traffic Signal)<br>SR 516 Eastbound (Kent Des Moines Rd)<br>SR 516 Eastbound to West Valley Hwy<br>West Valley Hwy Southbound | West Valley Hwy Northbound<br>SR 516 Westbound (Kent Des Moines Rd) (Traf. S)<br>SR 516 Westbound Ramp to I-5 Northbound Ramp to I-5 Northbound<br>I-5 Northbound<br>I-5 Northbound Exit 154 B (I-405)<br>I-405 Northbound<br>I-405 Northbound Exit to SR 181<br>SR 181 |

| 16 - Closure of SR 181 from I-405 to SR 516 – King County | |
|---|---|
| North to South Routing - Alternate | South to North Routing - Alternate |
| I-405 Southbound<br>I-405 Southbound Exit 2 to SR 167<br>SR 167 Southbound<br>SR 167 Southbound Exit for SR 516<br>SR 516 Eastbound (Kent Des Moines Rd)<br>SR 516 Eastbound to W Valley Hwy<br>W Valley Hwy Southbound | W Valley Hwy Northbound<br>SR 516 Eastbound (Kent Des Moines Rd)<br>SR 516 Eastbound to SR 167 Northbound<br>SR 167 Northbound<br>SR 167 Northbound Exit for I-405 Southbound<br>I-405 Southbound<br>I-405 Southbound Exit for SR 181<br>SR 181 Northbound |

Note: Primary and Alternate can be used simultaneously to create a one-way couplet (I-5 Southbound and SR 167 Northbound)

DeLorme Street Atlas USA® 2010
Closure of SR 181 I-405 to SR 516
Level of Service on Alternate
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT
ASSOCIATES
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Scale 1 : 62,500
1" = 5,208.3 ft
Data Zoom 11-6

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 16 - Closure of SR 181 from I-405 to SR 516 King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | | √ | |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | | √ | | I-5, I-405 HOV 3, HOV 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | | | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | √ | | I-5 Exit 152, SR 167 & 43rd ,122 |
| Truck Restrictions | √ | √ | √ | | Unsafe Routes to SR 181 |
| Truck Preferences | √ | √ | √ | | Local Access to SR 181 Corridor |
| Shoulder - Convert to Driving Lane | | | | √ | |
| Parking Eliminate/Restrict | | | | √ | |
| Turn Prohibitions | | √ | √ | | Local Access to SR 181 Corridor |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | √ | | SR 167 |
| Vanpool Carpool Incentives | | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | √ | | SR 167 |
| Transit Service New | | | | √ | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | Kent Des Moines Rd |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 16 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

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# Appendix B
# Scenario #17 – Closure of the West Seattle High Bridge

## A. General Information

The closure of the West Seattle High Bridge may cause closures of the lower bridge and may restrict access to the Duwamish Waterway, which is critical for the maritime industry. The West Seattle High Bridge is located over navigable waterways, which are regulated by the United States Coast Guard; i.e. the USCG determines the opening and closing of the waterway. The King County Water Taxi operates between downtown Seattle and West Seattle. Local private ferry operators may be available to provide increased ferry service. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. Seattle DOT

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. City of Seattle Office of Emergency Management (OEM)
2. King County Office of Emergency Management (OEM)
3. WSDOT
4. WSP

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes, and detours and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will also coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. Set-up highway detours signage for rerouting traffic. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on Olson, Roxbury, Michigan. Other alternatives include: Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include Truck Restrictions, Truck Preferences on Spokane St, W Marginal Way, contra-flow lanes on Spokane Street, converting lanes (Olson and Roxbury) to HOV lanes, constructing HOV Bypass lanes to ease bottlenecks, increase existing ferry services (West Seattle to Seattle), incorporating technology in traffic signal interconnects.

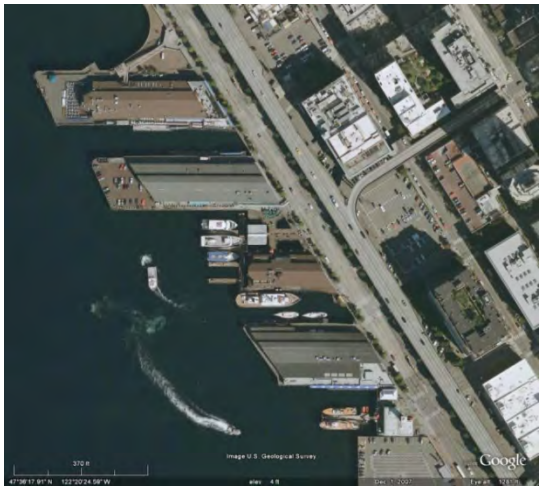
Increasing passenger-only ferry service may be a viable option due to congestion. See the Maritime Toolbox for alternative transportation options. See Appendix E – Roadways Toolbox

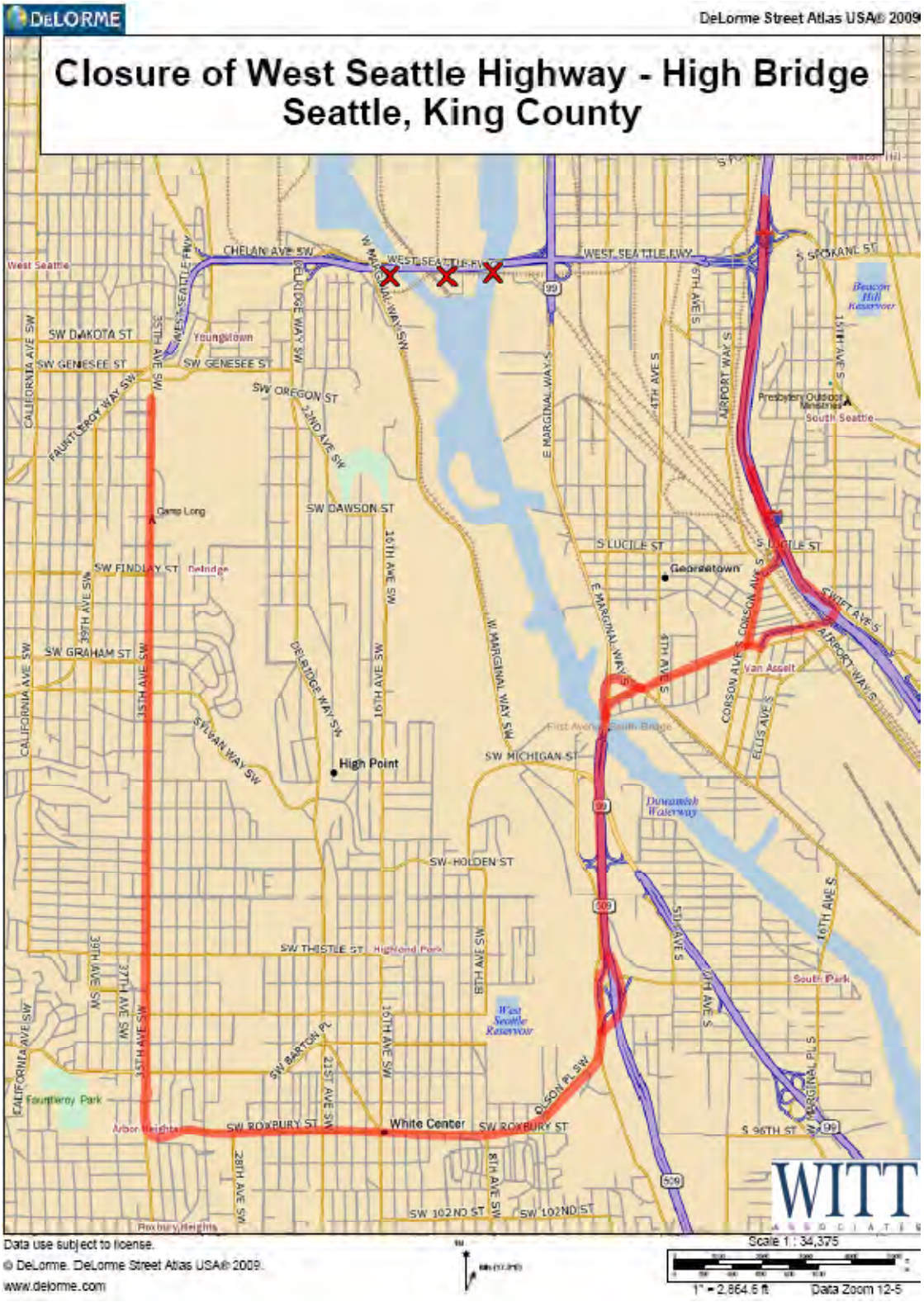
for further information. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

## H. Site Images for Alternative Route Landing Sites

West Seattle

Downtown Seattle




DeLORME
DeLorme Street Atlas USA© 2009
Closure of West Seattle Highway - High Bridge
Seattle, King County
CHELAN AVE SW
WEST SEATTLE FWY
S SPOKANE ST
SW DAKOTA ST
SW GENESEE ST
SW OREGON ST
SW DAWSON ST
SW FINDLAY ST
SW GRAHAM ST
SW MICHIGAN ST
SW HOLDEN ST
SW THISTLE ST
SW ROXBURY ST
SW 102ND ST
S LUCILE ST
S 96TH ST
Georgetown
High Point
White Center
Camp Long
Youngstown
Delridge
Van Asselt
South Park
Fauntleroy Park
Arbor Heights
Roxbury Heights
Presbytery Outdoor Ministries
South Seattle
Beacon Hill Reservoir
West Seattle Reservoir
Duwamish Waterway
First Avenue South Bridge
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Scale 1 : 34,375
1" = 2,864.6 ft
Data Zoom 12-5
WITT

DeLorme Street Atlas USA® 2009
Closure of West Seattle Highway - High Bridge
Port Access Routes
Seattle, King County
Primary Port Access
Alternate Port Access
Harbor Island
SW SPOKANE ST
W SEATTLE WAY
S COLUMBIAN WAY
16TH AVE S
Beacon Hill
Beacon Hill Reservoir
Prestytery Outdoor Ministries
South Seattle
SW OREGON ST
22ND AVE SW
Puget Park
SW DAWSON ST
16TH AVE SW
DELRIDGE WAY SW
E MARGINAL WAY S
1ST AVE S
4TH AVE S
6TH AVE S
AIRPORT WAY S
15TH AVE S
BEACON AVE S
23RD AVE S
S LUCILE ST
Georgetown
Van Asselt
CORSON AVE S
ELLIS AVE S
13TH AVE S
SWIFT AVE S
W MARGINAL WAY SW
SW MICHIGAN ST
High Point
Duwamish Waterway
Boeing Field/King County Int'l
SW HOLDEN ST
163B
163A
163
162
161
WITT
ASSOCIATES
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Scale 1 : 28,125
1" = 2,343.8 ft
Data Zoom 12-7

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 17 - Closure of West Seattle Highway (High Bridge) – King County | |
| East to West Routing | West to East Routing |
| I-5 North and South Exit at 162<br>I -5 Ramp to Michigan St<br>Corson Ave S Southbound<br>Corson Ave S Southbound to Michigan St (Traf. Sig)<br>S Michigan St<br>S Michigan St to Ramp to SR 99<br>SR 99 Southbound<br>SR 99 Southbound to SR 509<br>SR 509 Southbound<br>SR 509 Exit for Myers Way – White Center<br>Ramp to 1st Ave Southbound<br>1st Ave Southbound to Olson Pl SW (Traf. Sig.)<br>Olson Pl SW Southbound<br>Olson Pl SW Southbound to SW Roxbury St<br>SW Roxbury St Westbound<br>SW Roxbury St Westbound to 35th Ave SW (T.S.)<br>35th Ave SW Northbound | 35th Ave SW Southbound<br>35th Ave SW Southbound to SW Roxbury St (T.S.)<br>SW Roxbury St Eastbound<br>SW Roxbury St Eastbound to Olson Pl SW (T.S.)<br>Olson Pl SW Northbound<br>Olson Pl SW Northbound to 1st Ave<br>1st Ave Northbound<br>1st Ave Northbound to Ramp for SR 99 to I-5<br>SR 99 Northbound<br>SR 99 Northbound Exit for Michigan St<br>Michigan St Eastbound<br>Bailey St Eastbound<br>Bailey St Eastbound Ramp to I-5 (North or South)<br>I-5 (Interchange 162) |

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 17 - Closure of West Seattle Highway (High Bridge) – King County | |
| East to West Routing - Port Access Primary | West to East Routing - Port Access Primary |
| I-5 North and South Exit at 163<br>I -5 Ramp to Spokane St<br>Alternate Ramp from I-5 Exit 163B<br>- S Forest St Westbound to<br>- 6th Ave S Southbound to<br>SW Spokane St Westbound<br>SW Spokane St Westbound Port Access | SW Spokane St Eastbound<br>SW Spokane St Eastbound to I-5 Ramps<br>I-5 Ramps (Northbound & Southbound)<br>I-5 (Interchange 163) |

Note: Primary Port Access contingent on access to/from Spokane St and Spokane St Bridge.

Note: If Primary Port Access is blocked in one direction, use Alternate Port Access Route.

DeLorme Street Atlas USA® 2010
Closure of West Seattle Highway - High Bridge
Level of Service on Alternates
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT
ASSOCIATES
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www.delorme.com
Scale 1 : 40,625
1" = 3,385.4 ft
Data Zoom 12-3
Georgetown
High Point
White Center
West Seattle
Youngstown
Puget Park
Delridge
Riverview Playfield
Highland Park
Westcrest Park
South Park
South Seattle
Beacon Hill
Jefferson Park
Van Asselt
Boeing Field/King County International
Fauntleroy
Endolyne
Arbor Heights
Lake Garrett
SW SPOKANE ST
WEST SEATTLE FWY
S SPOKANE ST
SW DAKOTA ST
SW GENESEE ST
SW OREGON ST
SW DAWSON ST
SW FINDLAY ST
SYLVAN WAY SW
SW HOLDEN ST
SW THISTLE ST
SW TRENTON ST
SW HENDERSON ST
SW ROXBURY ST
SW 102ND ST
SW 108TH ST
S LUCILE ST
E MARGINAL WAY S
W MARGINAL WAY SW
AIRPORT WAY S
SWIFT AVE S
BEACON AVE S
ELLIS AVE S
OLSON PL SW
SW BARTON PL
SW BRACE POINT DR
CALIFORNIA AVE SW
FAUNTLEROY WAY SW
ERSKINE WAY SW
48TH AVE SW
47TH AVE SW
39TH AVE SW
37TH AVE SW
35TH AVE SW
16TH AVE SW
8TH AVE SW
21ST AVE SW
1ST AVE S
4TH AVE S
5TH AVE S
7TH AVE S
14TH AVE S
15TH AVE S
23RD AVE S
50TH AVE SW
99
509

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 17 - Closure of West Seattle Highway - High Bridge King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | √ | √ | | Spokane St (Damaged Section Bypass) |
| HOV Lanes – Convert | | | √ | | Olson, Roxbury |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | | | √ | |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | | | | √ | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | | √ | |
| Truck Restrictions | √ | √ | √ | | Unsafe Routes |
| Truck Preferences | √ | √ | √ | | Spokane St, W Marginal Way |
| Shoulder - Convert to Driving Lane | | | | √ | |
| Parking Eliminate/Restrict | | | | √ | Olson, Roxbury |
| Turn Prohibitions | | | √ | | Olson, Roxbury, Michigan |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | √ | √ | √ | | West Seattle to Seattle |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | | √ | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | Olson, Roxbury, 35th |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 17 - Closure of West Seattle Highway - High Bridge King County | | | | | |
| Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | √ | √ | √ | | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | √ | √ | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | √ | √ | √ | | |
| Determine personnel required and availability of alternative maritime transportation | √ | √ | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | √ | √ | √ | | |
| Determine long-term contracting needs | √ | √ | √ | | |
| Identify recovery options for alternative maritime transportation | √ | √ | √ | | |
| Develop long-term contracting procedures | √ | √ | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 17- Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #18 - Closure of I-5, I-405 and SR 518 Interchange

## A. General Information

Stakeholders presented two routes as suitable alternatives for this scenario involving closure of the I-5, I-405 and SR 518 Interchange. One route details moving traffic within the mainline of Seattle, and another route details diverting traffic from I-5 onto SR 18 to SR 167 to I-90 back onto I-5. See Maps and Alternate Routing Plan for specific and additional information, including a map included that details traffic movement on and off of the freeway ramps.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)
2. City of Tukwila

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes, and detours and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will also coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions on Southcenter, Klickitat, and International. Other alternatives include: Converting freeway shoulder to driving lane, Alternate Driving Days, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include Truck Restrictions depending on the Time of Day, Truck Preferences (e.g.. Critical supplies or near airport), ramp metering, freeway ramp closure near interchanges, changing current HOV rules on I-5 and I-405, converting lanes on I-405, and I-5 to HOV lanes, constructing HOV Bypass lanes to ease bottlenecks, incorporating tolling adjustments on SR 167, and incorporating technology in traffic signal interconnects on SR 99. See Appendix E – Roadways Toolbox for further information.

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Closure of I-5 I-405 SR 518 Interchange
King County
I-5 South to I-5 South
I-5 North & I-405 to SR 518
I-405 South to I-5 South & SR 518
Allentown
Bryn Mawr
Renton
Tukwila
Riverton Heights
Sunnydale
Burien
Normandy Park
Sea-Tac
Des Moines
Zenith
Kent
Scale 1 : 75,000
1" = 1.18 mi
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Closure of I-5 I-405 SR 518 Interchange - Regional Through Traffic Routing - King County
Seattle
Bellevue
Lake Hills
Lake Sammamish
Beaux Arts
Eastgate
Monohan
West Lake Sammamish
Mercer Island
WEST SEATTLE FWY
Georgetown
Hazelwood
Newcastle
Issoquah
High Point
Boeing Field/King County International
White Center
Kennydale
Bryn Mawr
Coalfield
Allentown
Renton Municipal
Renton
East Renton Highlands
Tukwila
Seahurst
Burien
Riverton Heights
Maplewood
Sunnydale
Seattle-Tacoma International
Cedar Mountain
Cedar Grove
Lake Youngs
Maple Valley
Des Moines
Zenith
Kent
Meridian Heights
Summit
Woodmont Beach
Star Lake
Thomas
Redondo
Covington
Berrydale
Crest Airpark
Lakota
Adelaide
Christopher
Auburn Muni
Federal Way
Dash Point
Auburn
Dash Point State Park
Algona
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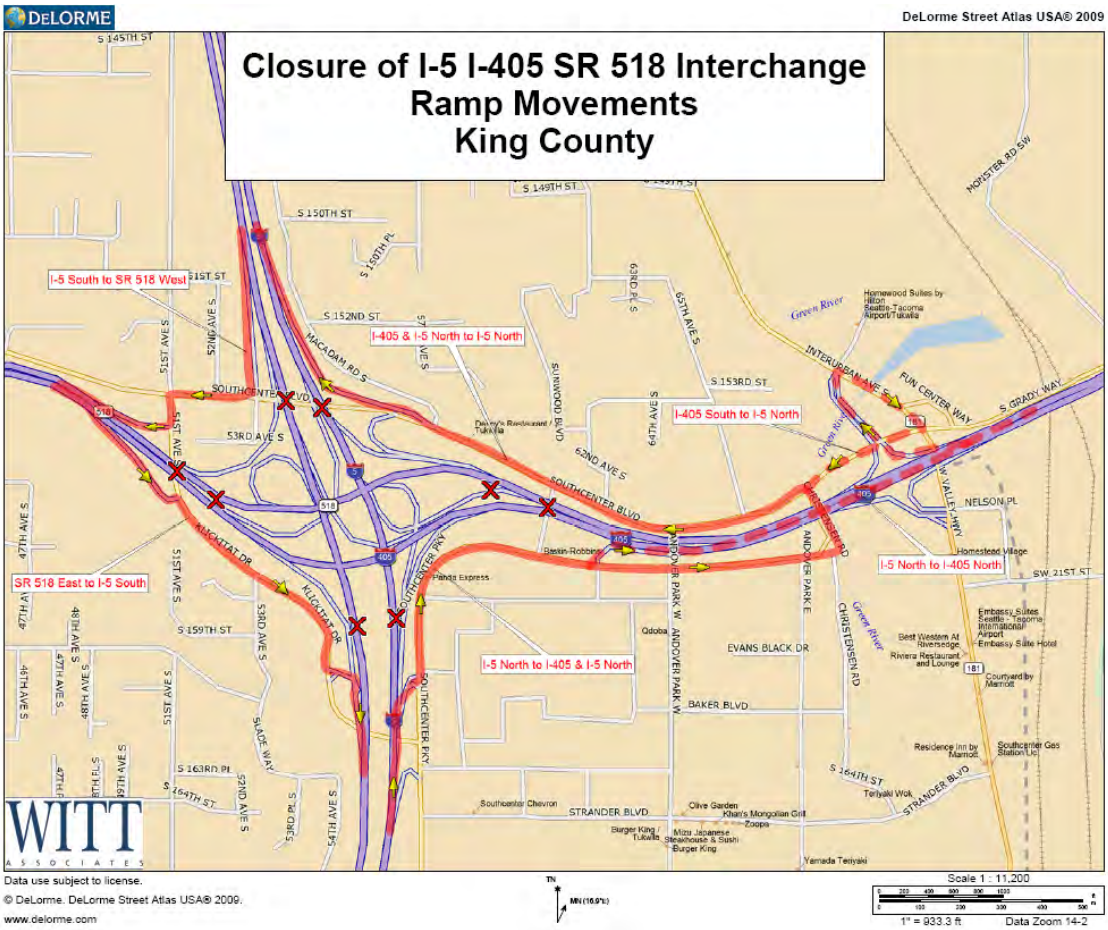
1" = 2.76 mi
Data Zoom 10-2


DeLorme Street Atlas USA® 2009
Closure of I-5 I-405 SR 518 Interchange
Ramp Movements
King County
I-5 South to SR 518 West
I-405 & I-5 North to I-5 North
I-405 South to I-5 North
I-5 North to I-405 North
SR 518 East to I-5 South
I-5 North to I-405 & I-5 North
S 145TH ST
S 149TH ST
S 150TH ST
S 152ND ST
S 153RD ST
S 159TH ST
S 163RD PL
S 164TH ST
SOUTHCENTER BLVD
STRANDER BLVD
BAKER BLVD
EVANS BLACK DR
NELSON PL
SW 21ST ST
Green River
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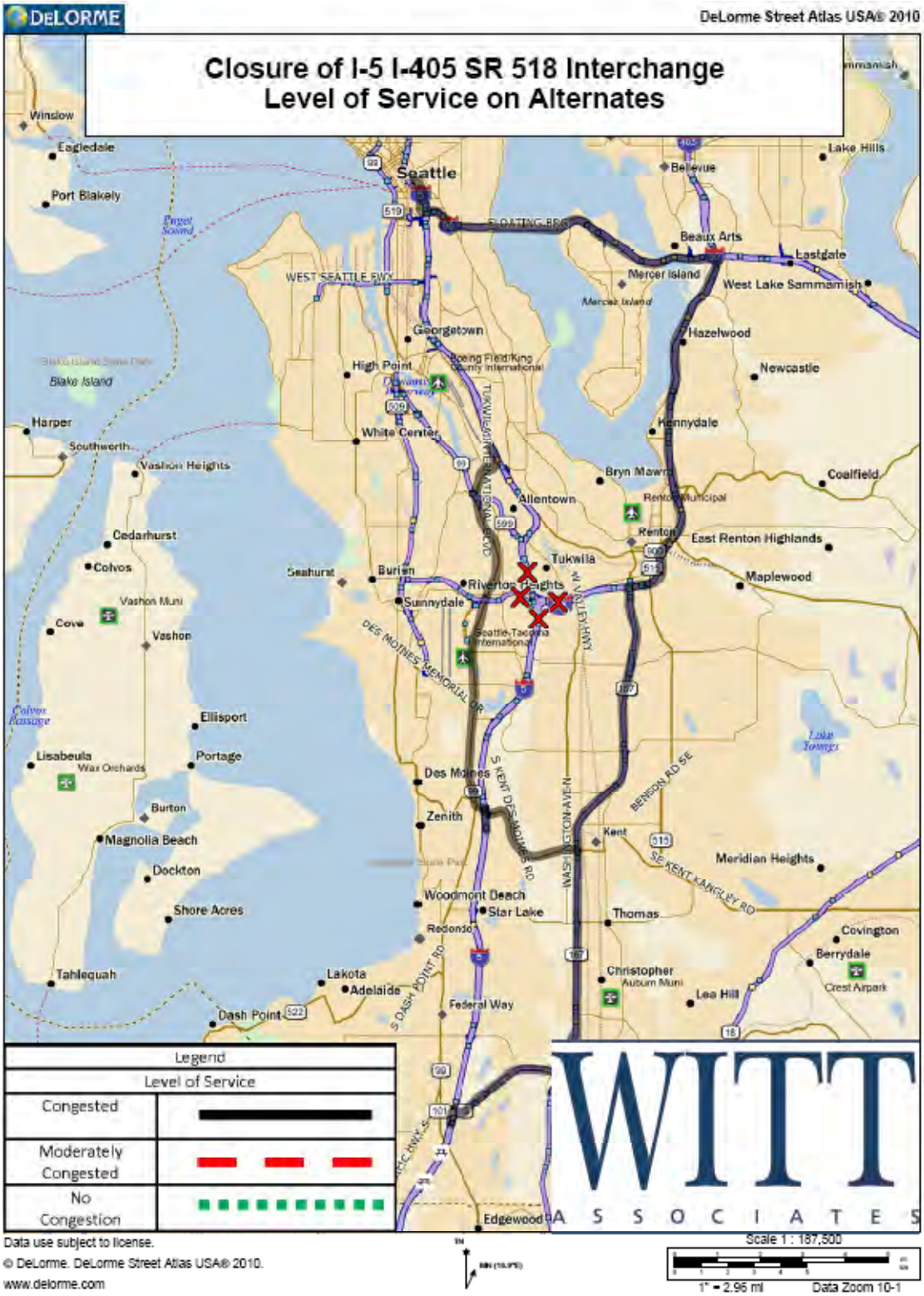
Scale 1 : 11,200
1" = 933.3 ft
Data Zoom 14-2

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 18 - Closure of I-5 I-405 SR 518 Interchange – King County | |
| North to South (I-5 Through Traffic) | South to North (I-5 Through Traffic) |
| I-5 Southbound<br>I-5 Southbound Exit for I-90 Eastbound<br>I-90 Eastbound<br>I-90 Eastbound Exit for I-405 Southbound<br>I-405 Southbound<br>I-405 Southbound Exit 2A (SR 167)<br>SR 167 Southbound<br>SR 167 Southbound Exit for SR 18 Westbound<br>SR 18 Westbound<br>SR 18 Westbound Exit for I-5 Southbound<br>I-5 Southbound (Interchange 142) | I-5 Northbound<br>I-5 Northbound Exit 142A (SR 18)<br>SR 18 Eastbound<br>SR 18 Eastbound Exit for SR 167 Northbound<br>SR 167 Northbound<br>SR 167 Northbound Exit for I-405 Northbound<br>I-405 Northbound<br>I-405 Northbound Exit 11 (I-90)<br>Ramp to I-90 Westbound<br>I-90 Westbound<br>I-90 Westbound Exit for I-5<br>Ramp to I-5 Northbound<br>I-5 Northbound |
| West to East (SR 518 to I-405) | East to West (I-405 to SR 518) |
| SR 518 Eastbound<br>SR 518 Eastbound exit to 51st Ave S<br>Ramp to 51st Ave S<br>Klickitat Dr Southbound<br>Klickitat Dr Southbound to Southcenter Prkwy<br>Southcenter Prkwy Northbound to Tukwila Prkwy<br>Tukwila Prkwy Eastbound<br>Tukwila Prkwy Eastbound to I-405 Ramp<br>I-405 Northbound | I-405 Southbound<br>I-405 Southbound Exit 2 (SR 167)<br>SR 167 Southbound<br>SR 167 Southbound Exit for SR 516<br>SR 516 Westbound (Kent Des Moines Rd)<br>SR 516 Westbound to SR 99 (Pacific Hwy)<br>SR 99 Northbound<br>SR 99 Exit for SeaTac Airport Access Rd<br>SeaTac Airport Access Rd Exit for SR 518<br>SR 518 Westbound |
| West to South (SR 518 to I-5 (South)) | South to West (I-5 (South) to SR 518) |
| SR 518 Eastbound<br>SR 518 Eastbound exit to 51st Ave S<br>Ramp to 51st Ave S<br>Klickitat Dr Southbound<br>Klickitat Dr Southbound to I-5 Ramp<br>I-5 Southbound | I-5 Northbound<br>I-5 Northbound Exit 149B (SR 516)<br>SR 516 Westbound (Kent Des Moines Rd)<br>SR 516 Westbound to SR 99 (Pacific Hwy)<br>SR 99 Northbound (Pacific Hwy S)<br>SR 99 Exit for SeaTac Airport Access Rd<br>SeaTac Airport Access Rd Exit for SR 518<br>SR 518 Westbound |

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 18 - Closure of I-5 I-405 SR 518 Interchange – King County | |
| North to South (I-5 (North) to I-405 Routing) | South to North (I-405 to I-5 (North) Routing) |
| I-5 Southbound<br>I-5 Southbound Exit 158 (S Boeing Access Rd)<br>Ramp to S Boeing Access Rd (Traffic Signal)<br>S Boeing Access Rd Westbound<br>S Boeing Access Rd Westbound to Internatl. Blvd.<br>International Blvd Southbound<br>SR 99 Southbound (International Blvd)<br>SR 99 Southbound to SR 518<br>Ramp to SR 518 Eastbound (Traffic Signal)<br>SR 518 Eastbound<br>SR 518 Eastbound exit to 51st Ave S<br>Ramp to 51st Ave S<br>Klickitat Dr Southbound<br>Klickitat Dr Southbound to Southcenter Prkwy<br>Southcenter Prkwy Northbound to Tukwila Prkwy<br>Tukwila Prkwy Eastbound<br>Tukwila Prkwy Eastbound to I-405 Ramp<br>I-405 Northbound | I-405 Southbound<br>I-405 Southbound Exit 1 (SR 181)<br>I-405 Ramp to Interurban Ave<br>Interurban Ave Southbound<br>Southcenter Blvd Westbound<br>Southcenter Blvd Westbound to I-5 Ramp<br>I-5 Northbound |
| North to South (Local I-5 Traffic Routing) | South to North (Local I-5 Traffic Routing) |
| I-5 Southbound<br>I-5 Southbound Exit 158 (S Boeing Access Rd)<br>Ramp to S Boeing Access Rd (Traffic Signal)<br>S Boeing Access Rd Westbound<br>S Boeing Access Rd Westbound to Internatl. Blvd.<br>International Blvd Southbound<br>SR 99 Southbound (International Blvd)<br>SR 99 Southbound to SR 518<br>Ramp to SR 518 Eastbound (Traffic Signal)<br>SR 518 Eastbound<br>SR 518 Eastbound exit to 51st Ave S<br>Ramp to 51st Ave S<br>Klickitat Dr Southbound<br>Klickitat Dr Southbound to I-5 Ramp<br>I-5 Southbound | I-5 Northbound<br>I-5 Northbound Exit 153 (Southcenter Prkwy)<br>Ramp to Southcenter Prkwy (Traffic Signal)<br>Southcenter Parkway Northbound<br>Southcenter Prkwy Northbound to Tukwila Prkwy<br>Tukwila Prkwy Eastbound<br>Tukwila Prkwy Eastbound to Christensen Rd<br>Christensen Rd Northbound<br>Southcenter Blvd Westbound<br>Southcenter Blvd Westbound to I-5 Ramp<br>Ramp to I-5 Northbound<br>I-5 Northbound |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DeLorme Street Atlas USA® 2010
Closure of I-5 I-405 SR 518 Interchange
Level of Service on Alternates
Seattle
Bellevue
Lake Hills
Winslow
Eagledale
Port Blakely
Puget Sound
Beaux Arts
Lastgate
Mercer Island
West Lake Sammamish
WEST SEATTLE FWY
Georgetown
Hazelwood
Newcastle
Boeing Field/King County International
High Point
Blake Island
Harper
Southworth
White Center
Vashon Heights
Hennydale
Bryn Mawr
Coalfield
Allentown
Renton Municipal
Renton
East Renton Highlands
Cedarhurst
Colvos
Tukwila
Seahurst
Burien
Riverton Heights
Maplewood
Sunnydale
Vashon Muni
Cove
Vashon
Seattle-Tacoma International
DES MOINES MEMORIAL DR
Ellisport
Lisabeula
Portage
War Orchards
Des Moines
Burton
Zenith
Magnolia Beach
Kent
Meridian Heights
Dockton
Woodmont Beach
Star Lake
Thomas
Shore Acres
Redondo
Covington
Berrydale
Tahlequah
Lakota
Adelaide
Christopher
Auburn Muni
Lea Hill
Crest Airpark
Dash Point
Federal Way
Edgewood
Legend
Level of Service
Congested
Moderately Congested
No Congestion
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Scale 1 : 187,500
1" = 2.96 mi
Data Zoom 10-1

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 18 - Closure of I-5 I-405 SR 518 Interchange - King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | √ | | I-5, I-405 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | | √ | | HOV 3, HOV 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | | | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | √ | | Interchanges near closure point |
| Truck Restrictions | √ | √ | √ | | Time of Day |
| Truck Preferences | | √ | √ | | Critical Supplies, Airport |
| Shoulder - Convert to Driving Lane | | √ | √ | | Interstates/Freeways HOV |
| Parking Eliminate/Restrict | | √ | √ | | Southcenter, Klickitat, Internatl |
| Turn Prohibitions | | √ | √ | | Southcenter, Klickitat, Internatl |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | √ | | SR 167 |
| Transit Service New | | √ | √ | | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | SR 99 |
| Convert trails to special motorized use | | | | √ | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 18 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #19 - Closure of SR 99 – Aurora Bridge

## A. General Information

Stakeholders presented two routes as suitable alternatives under this scenario involving closure of SR 99 - Aurora Bridge. One route details diverting traffic from SR 99 to I-5 through local streets back to SR 99 via N 85th St to Aurora Ave. The second route details diverting traffic from SR 99 at Elliott Ave W to 15th Ave W/NW back to SR99 (Aurora Ave). See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. City of Seattle
2. King County Office of Emergency Management (DEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes, and detours and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will also coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions due to One Way Couplets. Other alternatives include: Converting freeway shoulder to driving lane, Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include Truck Restrictions due to turning radii, increasing transit service, and incorporating technology in traffic signal interconnects. See Appendix E – Roadways Toolbox for further information.

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DeLorme Street Atlas USA® 2010
Closure of SR 99 - Aurora Bridge
King County
Alternate Route
Primary Route
Seattle
Georgetown
High Point
Harbor Island
West Seattle
Lake Union
Lake Washington
Puget Sound
Port Lawton Military Reservation
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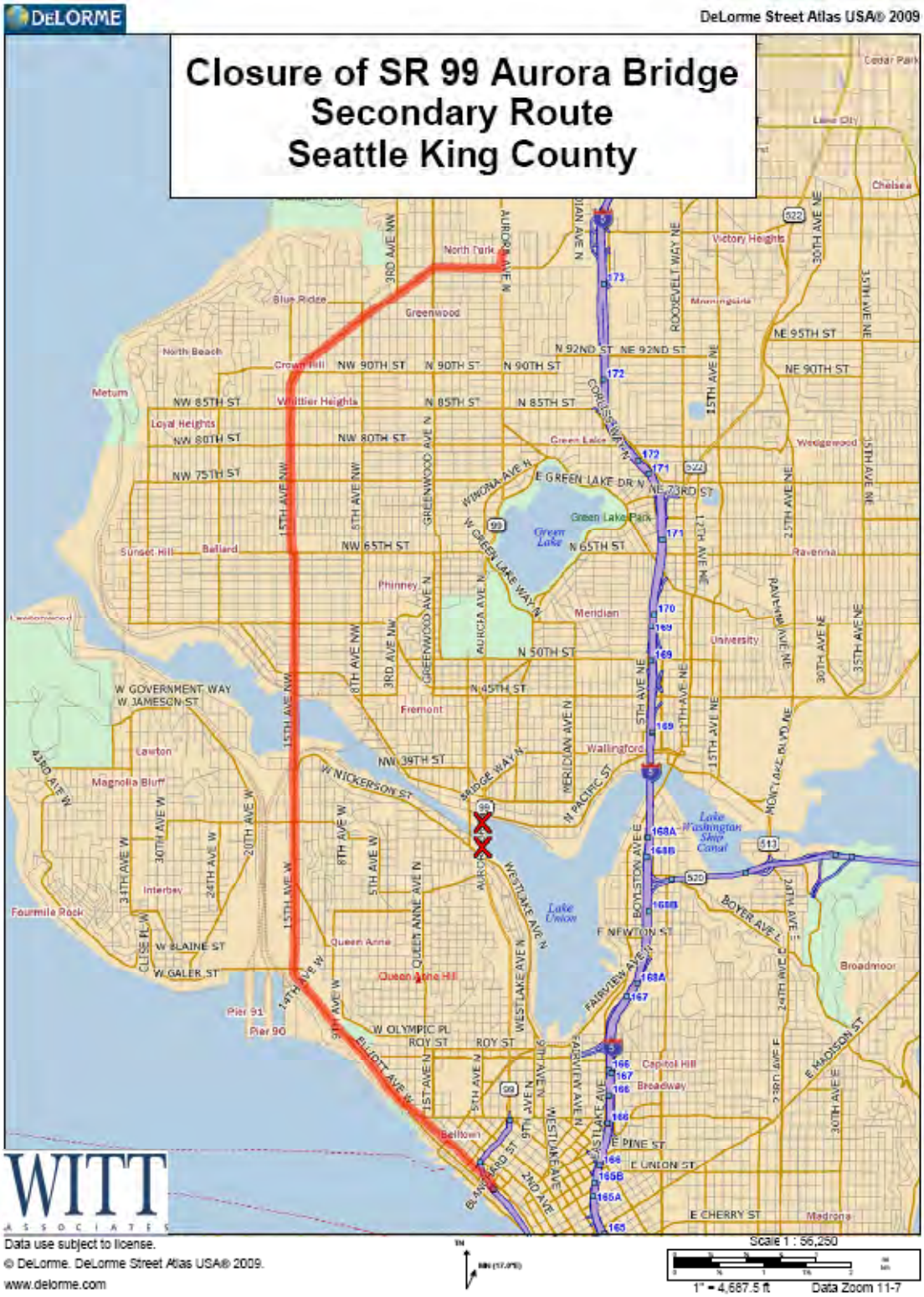
DeLorme Street Atlas USA® 2009
Closure of SR 99 Aurora Bridge
Secondary Route
Seattle King County
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Scale 1 : 56,250
1" = 4,687.5 ft
Data Zoom 11-7

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 19 - Closure of SR 99 Aurora Bridge (City of Seattle) – King County | |
| North to South Routing | South to North Routing |
| SR 99 Aurora Ave N Southbound<br>N 85th St Eastbound<br>I-5 Southbound (Interchange 172)<br>I-5 Southbound<br>I-5 southbound Exit 162 (Corson Ave)<br>I-5 Ramp to Corson Ave<br>Corson Ave S Southbound<br>Corson Ave S Southbound to Michigan St (Traf Sig)<br>Michigan St S Westbound<br>Michigan St S Westbound to SR 99 Ramp (Traf Sig)<br>Ramp to SR 99<br>SR 99 Southbound | SR 99 Northbound<br>SR 99 Northbound Exit for Michigan St<br>S Michigan St Eastbound<br>S Michigan St Eastbound to S Bailey St (Traf. Signal)<br>S Bailey St Eastbound to Ramp to I-5<br>Ramp to I-5 Northbound<br>I-5 Northbound<br>I-5 Northbound - Exit 172<br>- Exit for N 85 St, Aurora Ave N<br>N 85th St Westbound<br>SR 99 Aurora Ave N Northbound |

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 19 - Closure of SR 99 Aurora Bridge (City of Seattle) – King County | |
| North to South Routing - Alternate | South to North Routing - Alternate |
| SR 99 Aurora Ave N Southbound<br>N 105th St Westbound (Traffic Light)<br>I-5 Southbound (Interchange 172)<br>Holman Rd NW Southbound (Traffic Signal)<br>15th Ave NW Southbound( Traffic Signal)<br>15th Ave NW Southbound (Ballard Bidge)<br>15th Ave W Southbound<br>Elliot Ave W Southbound<br>SR 99 Alaskan Way Viaduct Southbound | SR 99 Alaskan Way Viaduct Northbound<br>- Exit for Western Ave<br>Western Ave W Northbound<br>Elliott Ave W Northbound<br>15th Ave W Northbound<br>15th Ave W Northbound (Ballard Bridge)<br>15th Ave NW Northbound<br>Holman Rd NW Northbound<br>N 105th St Eastbound<br>SR 99 Northbound (Aurora Ave) Traffic Light |

Note: Using the Mercer Street/I-5 Interchange as an alternative is not desirable.

Note: Consider restricting bridge openings on 15th Ave. Coordination required with USCG.

Note: Potential for developing one-way couplets as alternatives based on extent of damage.

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Closure of SR 99 - Aurora Bridge
Level of Service on Alternates
Seattle
Legend
Level of Service
Congested
Moderately Congested
No Congestion
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Scale 1 : 100,000
1" = 1.58 mi
Data Zoom 11-0

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 19 - Closure of SR 99 Aurora Bridge - Seattle, King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | Restrict Bridge Openings |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | | √ | |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | | | √ | |
| Construct HOV Bypass | | | | √ | |
| Ramp Metering | | | | √ | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | | √ | |
| Truck Restrictions | √ | √ | √ | | Turning Radii |
| Truck Preferences | | | | √ | |
| Shoulder - Convert to Driving Lane | | √ | √ | | |
| Parking Eliminate/Restrict | √ | √ | √ | | |
| Turn Prohibitions | √ | √ | √ | | One Way Couplets |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | | | | √ | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | | √ | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | | | √ | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | | | | √ | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 19 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

# Appendix B
# Scenario #20 - Closure of US 2 Skykomish to Stevens Pass

## A. General Information

For the closure of US 2 from Skykomish to Stevens Pass, the alternate route for this scenario will entail diverting traffic from US 2 to US 97 to I-90 to I-5 back to US 2. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies or jurisdictions with coordination responsibilities over routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)
2. Emergency Services Coordinating Agency (ESCA)
3. Snohomish County Department of Emergency Management (DEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes, and detours and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will also coordinate through the ESF – 1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.
2. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the Cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
3. Snohomish County Emergency Operations Center will notify Everett Emergency Management and Monroe Emergency Management as well as the jurisdictions and tribes with which they have an interlocal agreement which includes the Tulalip tribe, Marysville, Arlington, Stanwood, Darrington, Granite Falls, Lake Stevens, Index, Gold Bar, Sultan and Snohomish as well as the Stillaguamish Tribe.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Tele-commuting, Van/Carpool Incentives, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include changing current HOV rules, establishing new HOV lanes on I-90 and freeway ramp metering on I-5 and I-405. See Appendix E – Roadways Toolbox for further information.

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DeLorme Street Atlas USA® 2009
Closure of US 2 Skykomish / Stevens Pass
King County
Everett
Cavalero Corner
Snohomish
Paine Field AFB
Larimers Corner
Murphys Corner
Mill Creek
Cathcart
Clearview
Kennard Corner
Turner Corner
Maltby
Monroe
Sultan
Startup
Gold Bar
Index
High Rock
Baring
South Fork Skykomish River
Crotto
Skykomish
Scenic
Lake Wenatchee
Merritt
Plain
Winton
Leavenworth
Peshastin
Dryden
Dragontail Peak
Bothell
Kenmore
Woodinville
Duvall
Novelty
Juanita
Kirkland
Redmond
Houghton
Sammamish
Carnation
Inglewood
Pleasant Hill
Medina
Bellevue
Lake Hills
Beaux Arts
Monohan
Fall City
Spring Glen
Snoqualmie Falls
Snoqualmie
Preston
Upper Preston
North Bend
Mercer Island
Eastgate
Hazelwood
Newcastle
Kennydale
Issaquah
High Point
Bryn Mawr
Coalfield
Renton
Tukwila
Maplewood
Cedar Mountain
Cedar Grove
Hobart
Cedar Falls
Maple Valley
Kent
Meridian Heights
Summit
Selleck
Kangley
Thomas
Covington
Georgetown
Christopher
Berrydale
Kanaskat
Auburn
Black Diamond
Green River
Kummer
Cumberland
Algona
Pacific
Newaukum
Wabash
Dieringer
Enumclaw
Upper Mill
Boise
Buckley
Hyak
Kachess Lake
Cle Elum Lake
Easton
Ronald
Roslyn
Cle Elum
Lester
Liberty
WITT
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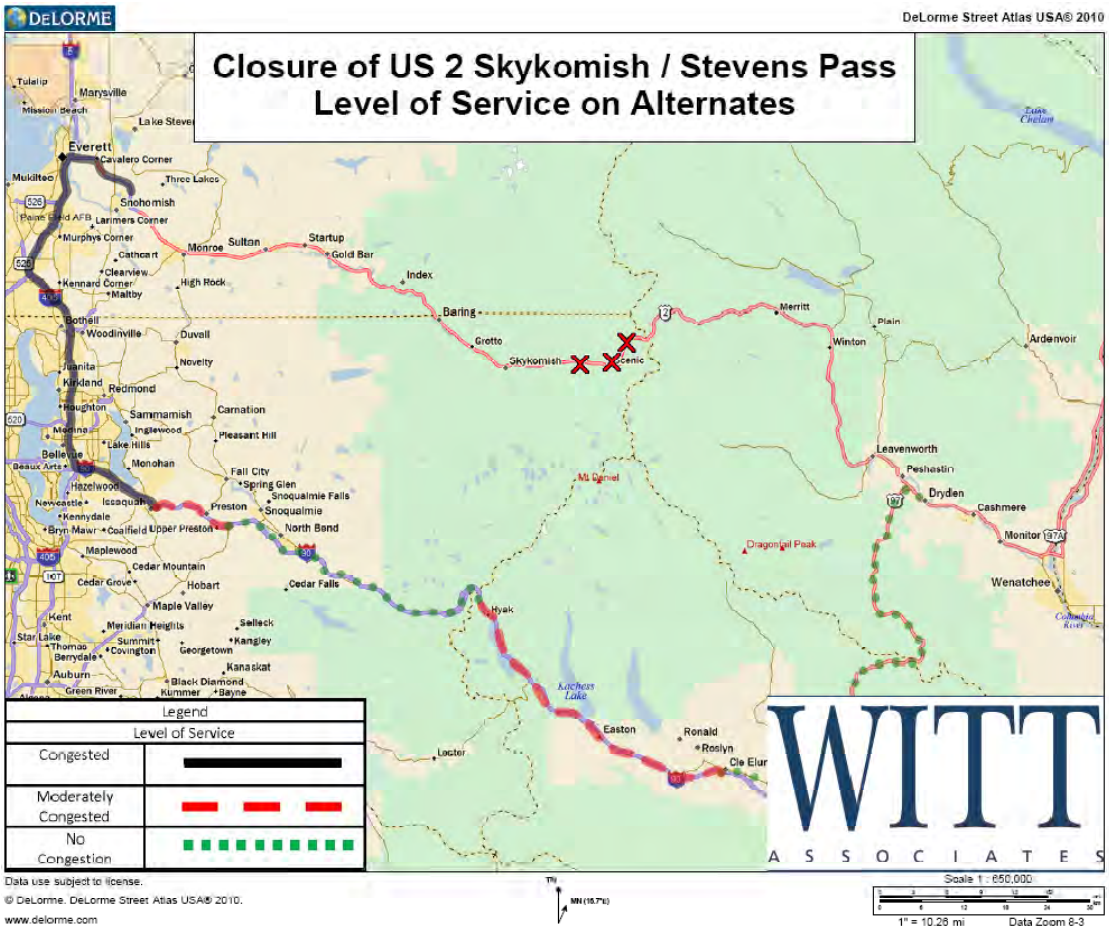
TN
MN (10.8°E)
Scale 1 : 550,000
1" = 8.68 mi
Data Zoom 8-5

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 20 - Closure of US 2 Skykomish Stevens Pass - King County | |
| East to West Routing | West to East Routing |
| US 2 Eastbound (Dryden) (Coincident w/ US 97)<br>US 97 Southbound<br>US 97 Southbound to SR 970<br>SR 970 Westbound (to Cle Elum)<br>SR 970 Westbound (Sunset Hwy)<br>SR 970 Westbound (W 1st St)<br>SR 970 to I-90 West Interchange 84<br>I-90 Westbound (Interchange 84)<br>I-90 Westbound to Exit 10 (I-405)<br>I-405 Northbound (Interchange 11)<br>I-405 Northbound to Exit 27 (I-5)<br>I-5 Northbound<br>I-5 Northbound to Exit 194 (US 2)<br>US 2 Eastbound (Stevens Pass Highway) | US 2 Westbound (Stevens Pass Highway)<br>US 2 Westbound Exit to I-5 Southbound<br>I-5 Southbound (Interchange 194)<br>I-5 Southbound to Exit 182 (I-405)<br>I-405 Southbound<br>I-405 Southbound to Exit 11 (I-90)<br>I-90 Eastbound<br>I-90 Eastbound to Exit 84 (Cle Elum)<br>SR 907 Eastbound (W 1st St)<br>SR 907 Eastbound (Sunset Hwy)<br>SR 907 Eastbound to US 97<br>US 97 Northbound<br>US 2 Westbound (Coincident w/ US 97) |


DeLorme Street Atlas USA® 2010
Closure of US 2 Skykomish / Stevens Pass
Level of Service on Alternates
Legend
Level of Service
Congested
Moderately Congested
No Congestion
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Scale 1 : 650,000
1" = 10.26 mi
Data Zoom 8-3
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| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 20 - Closure of US 2 Skykomish Stevens Pass - King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | | √ | |
| HOV Lanes – New | | | √ | | I-90 |
| HOV Rules - Change | | | √ | | HOV 2 – HOV 3 |
| Construct HOV Bypass | | | | √ | |
| Ramp Metering | | | √ | | I-5, I-405 |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | | √ | |
| Truck Restrictions | | | | √ | |
| Truck Preferences | | | | √ | |
| Shoulder - Convert to Driving Lane | | | | √ | |
| Parking Eliminate/Restrict | | | | √ | |
| Turn Prohibitions | | | | √ | |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | | | | √ | |
| Bike Lanes | | | | √ | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | | √ | |
| Transit Service Increase | | | | √ | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | | √ | |
| Convert trails to special motorized use | | | | √ | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | | | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 20 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

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# Appendix B
# Scenario #21 - Closure of I-5/I-90 Interchange

## A. General Information

The I-5 I-90 Interchange is located southeast of downtown Seattle and provides many different access routes to both downtown Seattle and to I-5 and I-90. Also, it is located near the main King County metro bus holding area. This interchange is a significant freight route for east-west traffic to and from the Seattle-area. The alternative routes for this section of roadway consist of using I-405 for north-south through traffic, SR 520 to I-405 for local traffic north of the interchange, and SR 99 to SR 519 for access south of the interchange. There is a potential for developing a number of alternative one-way couplets to divert traffic depending on the extent of the damage. Lake Washington could be used as an additional transportation corridor for passenger-only ferries at various locations. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. King County Office of Emergency Management (OEM)
2. Emergency Services Coordinating Agency (ESCA)
3. Snohomish County Department of Emergency Management (DEM)
4. City of Seattle

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes, and detours and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will also coordinate through the ESF –

1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.
2. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the Cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
3. Snohomish County Emergency Operations Center will notify Everett Emergency Management and Monroe Emergency Management as well as the jurisdictions and tribes with which they have an interlocal agreement which includes the Tulalip tribe, Marysville, Arlington, Stanwood, Darrington, Granite Falls, Lake Stevens, Index, Gold Bar, Sultan and Snohomish as well as the Stillaguamish Tribe.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes, including I-405, SR 520 to I-405, and SR-99 to SR-519.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders have identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

The Short-Term solutions can be extended to provide Mid-Term Alternatives, as necessary. Several Mid-Term Alternatives have been identified such as Turn Prohibitions. Other alternatives include: Establishing new ferry service and transit service, Tele-commuting, Van/Carpool Incentives, increase in transit services, Alternate Driving Days, Staggered Work Shifts, Freeway Ramp Closures on I-90 and I-5 near closures, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Restoring this section of highway will require

freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Mid-term alternative transportation options can be extended to long term options, as necessary. In addition, Long Term options include Truck Restrictions on roadways, opening Bike Lanes, converting trails for special motorized use, changing current HOV rules, converting lanes on I-5, I-405, I-90, SR 509 and SR 520 to HOV lanes and freeway ramp metering. New passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix E – Roadways Toolbox for further information. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

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DeLorme Street Atlas USA® 2009
Closure of I-5 I-90 Interchange
King County
Monroe
Clearview
North Creek
Kennard Corner
Lynnwood
Edmonds
Seattle Heights
Turner Corner
Maltby
High Rock
Mountlake Terrace
Bothell
Woodinville
Lake Forest Park
Kenmore
Shoreline
Cottage Lake
Duvall
Kingsgate
Novelty
Juanita
Kirkland
Redmond
Houghton
Sammamish
Inglewood
Medina
Bellevue
Lake Hills
Seattle
Beaux Arts
Eastgate
Monohan
Mercer Island
West Lake Sammamish
Georgetown
Hazelwood
High Point
Newcastle
Issaquah
White Center
Kennydale
Coalfield
Allentown
East Renton Highlands
Tukwila
Seanurst
Burien
Riverton Heights
Sunnydale
Maplewood
WITT
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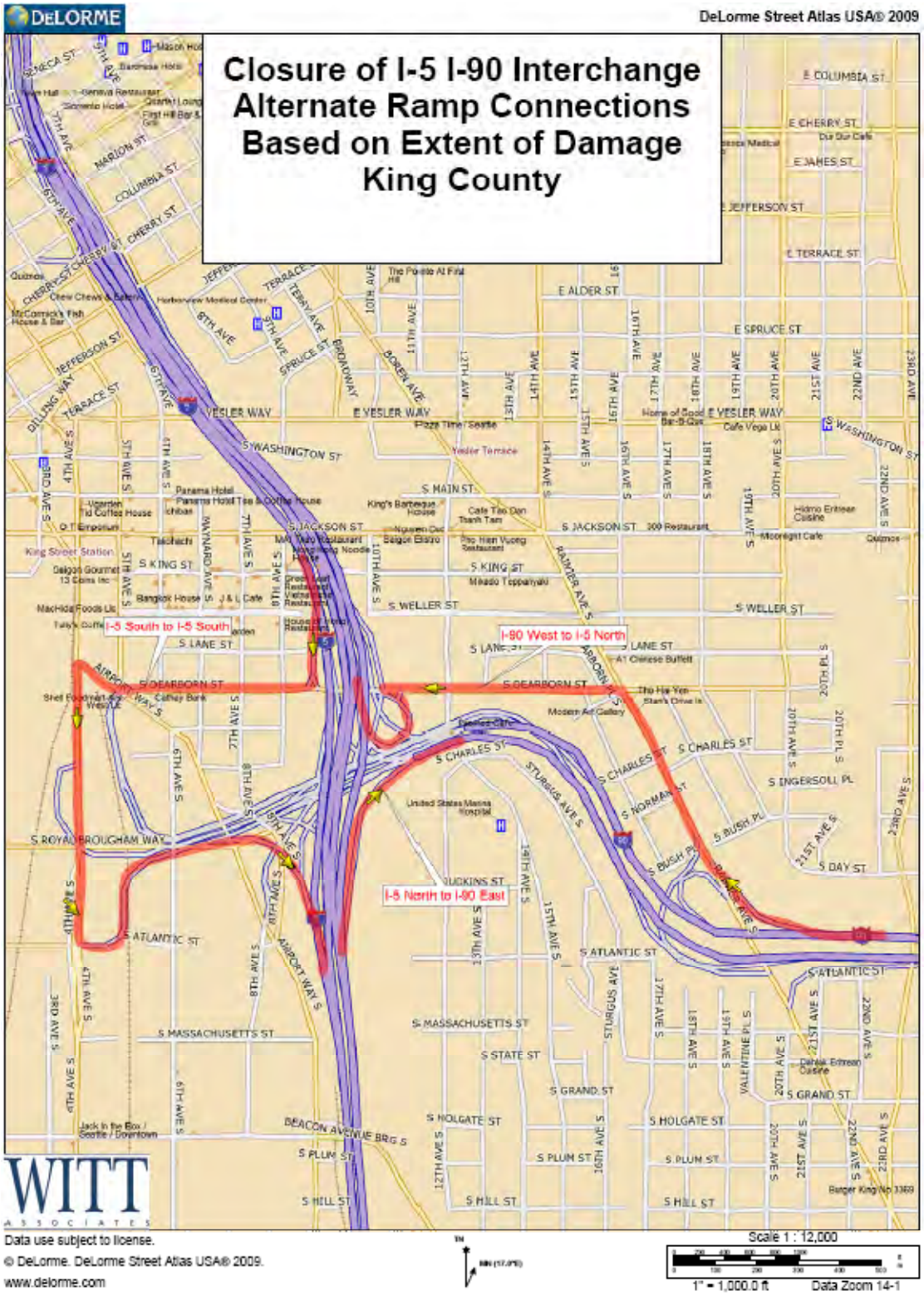
Scale 1 : 200,000
1" = 3.16 mi
Data Zoom 10-0


DeLORME
DeLorme Street Atlas USA® 2009
Closure of I-5 I-90 Interchange
Alternate Ramp Connections
Based on Extent of Damage
King County
I-5 South to I-5 South
I-90 West to I-5 North
I-5 North to I-90 East
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Scale 1 : 12,000
1" = 1,000.0 ft
Data Zoom 14-1

DeLorme Street Atlas USA® 2009
Closure of I-5 I-90 Interchange
Downtown Seattle Access
King County
Seattle Access Route from I-90 - Bellevue Area
Seattle Access Route from I-5 - Tukwila Area
Seattle
Medina
Bellevue
Beaux Arts
Eastgate
Mercer Island
Hazelwood
Newcastle
Kennydale
Georgetown
High Point
White Center
Bryn Mawr
Allentown
Renton
Tukwila
Riverton Heights
Burien
Seahurst
Sunnydale
Maplewood
Lake Washington
Lake Union
Lake Washington Ship Canal
Harbor Island
Seward Park
Seahurst Park
Boeing Field/King County Int'l
Renton Muni
EVERGREEN POINT FLOATING BRG
FLOATING BRG
WEST SEATTLE FWY
EMARGINAL WAY S
AURORA BRG
AURORA AVE N
ALASKAN WAY
REDMOND WAY
NE PARK DR
NE SUNSET BLVD
RAINIER AVE S
TALBOT RD S
WITT
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Scale 1 : 112,500
1" = 1.78 mi
Data Zoom 10-7

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 21 - Closure of I-5 I-90 Interchange – King County | |
| North to South Routing | South to North Routing |
| I-5 Southbound | I-5 Northbound |
| I-5 Southbound Exit to I-405 | I-5 Northbound Exit 154 (I-405) |
| I-405 Southbound | I-405 Northbound |
| I-405 Southbound Exit 14 to I-5 (Tukwila) | I-405 Northbound Exit for I-5 Northbound |
| I-5 Southbound (Interchange 154) | I-5 Northbound (Interchange 182) |
| I-5 Southbound | I-5 Northbound |

Note: Most of this interchange is on structure. Depending on extent of damage some ramps may be serviceable and provide a reasonable alternate route (see Alternate Map).

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 21 - Closure of I-5 I-90 Interchange – King County | |
| Seattle Access from I-90 and Bellevue Area | Seattle Access from I-5 and Tukwila Area |
| I-90 Westbound | I-5 Northbound |
| I-90 Westbound Exit for I-405 North | I-5 Northbound Exit 156 (SR 599) |
| I-405 Northbound | SR 599 Northbound |
| I-405 Northbound Exit for SR 520 | SR 599 Northbound to SR 99 (International Blvd) |
| SR 520 Westbound | SR 99 Northbound (International Blvd) |
| SR 520 Westbound Exit to I-5 Southbound | SR 99 Northbound becomes Alaskan Way Viaduct |
| I-5 Southbound | Local Exits for Seattle |
| Local Exits for Seattle | |
| No Through Traffic | |

Note: No Trucks on Dearborn St. alternative.

Note: Use Airport Way if roadway is open.

Note: Coordination with Metro Transit required, due to large number of buses impacted. Consider priority treatment of bus traffic.

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DeLorme Street Atlas USA® 2010
Closure of I-5 I-90 Interchange
Level of Service on Alternates
Seattle
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT
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Scale 1 : 250,000
1" = 3.95 mi
Data Zoom 9-6

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 21 - Closure of I-5 I-90 Interchange King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | √ | √ | | I-5, I-405, I-90, SR 509, SR 520 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | √ | √ | √ | | I-5, I-405, I-90 HOV 3 or 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | √ | √ | | Near Closure (I-90 and I-5) |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | Critical Supplies |
| Shoulder - Convert to Driving Lane | | √ | √ | | |
| Parking Eliminate/Restrict | √ | √ | √ | | |
| Turn Prohibitions | √ | √ | √ | | |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland-Kenmore-Bellevue (Pass. Only) Leschi Park/Bellevue (Pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | √ | | Ferry Connections |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 21 - Closure of I-5 I-90 Interchange King County | | | | | |
| Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | | | | √ | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | | | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | | | √ | | |
| Determine personnel required and availability of alternative maritime transportation | | | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | | | √ | | |
| Determine long-term contracting needs | | | √ | | |
| Identify recovery options for alternative maritime transportation | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 21-Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

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# Appendix B
# Scenario #22 - Closure of SR 99 Alaska Way Viaduct to Battery Street Tunnel

## A. General Information

The Seattle Department of Transportation (SDOT) is responsible for closing and inspecting the Alaska Way Viaduct. The closure of SR 99 Alaskan Way Viaduct may also restrict access to piers and terminals along the waterfront in downtown Seattle. Washington State Ferries (WSF) routes from downtown Seattle to Bainbridge Island and Bremerton may need to be rerouted out of Fauntleroy or Edmonds. The Alaskan Way Viaduct Emergency Traffic Management and Closure Plan outlines WSF alternative routes and pre-negotiated agreements with transit authorities.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. Seattle DOT
2. WSDOT
3. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. City of Seattle Office
2. King County Office of Emergency Management (DEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes, and detours and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers (EOC)/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will also coordinate through the ESF –

1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Short term solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. Set-up highway detours signage for rerouting traffic. Relocating passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See also the SDOT Alaskan Way Viaduct Emergency Traffic Management and Closure Plan (July 2005). See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

Several Mid-Term Alternatives have been identified such as Turn Prohibitions on One-Way Couplets. Other alternatives include: Eliminate or restrict parking on Roy St., Tele-commuting, Staggered Work Shifts, Electronic Signage and/or Surveillance, as well as Compressed Work Week. Relocating passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See also the SDOT Alaskan Way Viaduct Emergency Traffic Management and Closure Plan (July 2005). Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Long Term options include Truck Restrictions due to turning radii, changing HOV rules on I-5, transit service increase, bike lanes, freeway ramp metering on I-5, incorporating technology in

traffic signal interconnects. Relocating passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix E – Roadways Toolbox for further information. See Appendix F – Waterways Toolbox for maritime alternatives for restoration of the transportation network.

## H. Site Images for Alternative Route Landing Sites

Bainbridge Island Ferry Terminal

Edmonds Ferry Terminal

Bremerton Ferry Terminal

Fauntleroy Ferry Terminal

Vashon Island Ferry Terminal

Southworth Ferry Terminal

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Closure of SR 99 AW Viaduct to Battery St Tunnel
Seattle, King County
Seattle
Georgetown
Harbor Island
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Scale 1 : 50,000
1" = 4,166.7 ft
Data Zoom 12-0

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 22 - Closure of SR 99 Alaskan Way Viaduct to Battery St. Tunnel – Seattle, King County | |
| North to South Routing | South to North Routing |
| SR 99 Southbound<br>SR 99 Southbound Exit for Denny Way<br>Ramp to Denny Way (Traffic Signal)<br>Denny Way Eastbound<br>Denny Way Eastbound to Yale Ave<br>Yale Ave Southbound<br>Yale Ave Southbound to I-5 Ramp<br>I-5 Southbound<br>I-5 southbound Exit 162 (Corson Ave)<br>I-5 Ramp to Corson Ave<br>Corson Ave S Southbound<br>Corson Ave S Southbound to Michigan St (Traf Sig)<br>Michigan St S Westbound<br>Michigan St S Westbound to SR 99 Ramp (Traf Sig)<br>Ramp to SR 99<br>SR 99 Southbound | SR 99 Northbound<br>SR 99 Northbound Exit for Michigan St<br>S Michigan St Eastbound<br>S Michigan St Eastbound to S Bailey St (Traf. Signal)<br>S Bailey St Eastbound to Ramp to I-5<br>Ramp to I-5 Northbound<br>I-5 Northbound<br>I-5 Northbound Exit 167 (Mercer St)<br>Ramp to Mercer St<br>Fairview Ave N Northbound (Traffic Signal)<br>Valley St Westbound (Traffic Signal)<br>Broad St Westbound<br>Roy St Westbound<br>SR 99 Northbound (Aurora Ave) |

Note: One Way Couplets - Denny Way/ Valley St-Roy St, and S Bailey St/Corson Ave.

Note: Local access to Seattle destinations from I-5 exits.

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Closure of SR 99 AW Viaduct to Battery St Tunnel
Level of Service on Alternates
Seattle
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT ASSOCIATES
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Scale 1 : 50,000
1" = 4,166.7 ft
Data Zoom 12-0

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 22 - Closure of SR 99 Alaskan Way Viaduct to Battery St Tunnel - Seattle, King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | | | √ | |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | | √ | √ | | I-5 HOV 3, HOV 4 |
| Construct HOV Bypass | | | | √ | |
| Ramp Metering | | | √ | | I-5 |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | | | √ | |
| Truck Restrictions | √ | √ | √ | | Turning Radii |
| Truck Preferences | | | | √ | |
| Shoulder - Convert to Driving Lane | | √ | √ | | |
| Parking Eliminate/Restrict | √ | √ | √ | | Roy St |
| Turn Prohibitions | √ | √ | √ | | One Way Couplets |
| Ferry Service Relocation | √ | √ | √ | | Restricted Access to Terminal? |
| Ferry Service New | | | | √ | |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | | | | √ | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | | √ | |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | | | √ | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 22 - Closure of SR 99 Alaskan Way Viaduct to Battery St Tunnel - Seattle, King County | | | | | |
| Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | √ | √ | √ | | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | √ | √ | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | √ | √ | √ | | |
| Determine personnel required and availability of alternative maritime transportation | √ | √ | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | √ | √ | √ | | |
| Determine long-term contracting needs | √ | √ | √ | | |
| Identify recovery options for alternative maritime transportation | √ | √ | √ | | |
| Develop long-term contracting procedures | √ | √ | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 22 - Roadway Reconstruction Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

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# Appendix B
# Scenario #23 - Closure of I-5/SR 520 Interchange

## A. General Information

Stakeholders presented a number of routes as suitable alternatives for this scenario involving closure of the I-5, SR 520 Interchange. The primary route entails diverting traffic from I-5 to I-405, and for downtown Seattle access, traffic will divert from I-405 to I-90 to I-5. North bound local only access lanes can be used to divert traffic from SR 520 to SR 513 to local streets. Lake Washington could be used as an additional transportation corridor for passenger-only ferries at various locations. See Maps and Alternate Routing Plan for specific and additional information.

## B. Lead Agency

(Agency or agencies with the primary responsibility to implement alternative routes)

1. WSDOT
2. WSP

## C. Supporting and Coordinating Agencies and Jurisdictions

(Agencies with coordination responsibilities for routes to be used as alternatives)

1. City of Seattle
2. Emergency Services Coordinating Agency (ESCA)
3. King County Office of Emergency Management (OEM)
4. Snohomish County Department of Emergency Management (DEM)

## D. Transportation Disruption Notification

The State, counties, and other jurisdictions use a number of methods for notifying and coordinating transportation disruptions among state agencies, local jurisdictions and other transportation stakeholders. The agency having jurisdiction over a particular route, bridge, interchange or segment is responsible for notifying appropriate stakeholders in accordance with their respective emergency notification plans and procedures.

When disruptions occur on local routes, and detours and alternatives may impact state routes, WSDOT may be notified if local jurisdictions coordinate through WSDOT Regional Emergency Operations Centers/Traffic Management Centers or through the State Emergency Operations Center. WSDOT may also get this information through WebEOC if EOCs are activated, from staff reports from the field, direct contact with local jurisdictions in the field or though liaisons placed in local EOCs.

If alternatives and detours are established for routes where WSDOT is the lead agency and coordination with local jurisdictions is necessary, WSDOT will provide information through their Regional EOCs/Traffic Management Centers to local jurisdictions and transportation agencies to coordinate detour implementation. The WSDOT EOC will also coordinate through the ESF –

1 function at the State Emergency Operations Center. The State EOC will disseminate the information to local governments in accordance with State notification procedures.

When notified of diversions and detours on state routes that may impact local traffic flow, local jurisdictions will notify their respective departments, Department Operations Centers (DOCs), municipalities, and other transportation stakeholders, such as fire districts, school districts, transit agencies and ports in accordance with local notification procedures.

## E. County Emergency Operations Center Notification Concept

1. King County Emergency Coordination Center will notify Auburn Emergency Management, Bellevue Emergency Preparedness, Bothell Emergency Preparedness, Federal Way Emergency Management, Issaquah Emergency Management, Kent Emergency Management, Kirkland Emergency Management, Mercer Island Emergency Services, Redmond Office of Emergency Management, Renton Emergency Management, Seattle Office of Emergency Management, Shoreline Emergency Services, Skykomish Emergency Management, Snoqualmie Emergency Management, Tukwila Emergency Services and Woodinville Emergency Management as well as the Cities of Burien, Normandy Park, SeaTac and Des Moines and the Muckleshoot and Snoqualmie Tribes.
2. Emergency Services Coordinating Agency (ESCA) Emergency Operations Center will notify the cities of Brier, Edmonds, Kenmore, Lake Forest Park, Lynnwood, Mountlake Terrace, Mill Creek and Woodway.
3. Snohomish County Emergency Operations Center will notify Everett Emergency Management and Monroe Emergency Management as well as the jurisdictions and tribes with which they have an inter-local agreement which includes the Tulalip tribe, Marysville, Arlington, Stanwood, Darrington, Granite Falls, Lake Stevens, Index, Gold Bar, Sultan and Snohomish as well as the Stillaguamish Tribe.

## F. Current Available Alternatives

Depending on damage and identified impacts, there are other detour alternatives on state and local routes.

## G. Transportation Mitigation Strategies

1. Short Term Solutions

Stakeholders identified several short term solutions such as providing alternate routing for all vehicle traffic. Solutions include: Tele-commuting, Alternate Routing, Adjusting Traffic Signal Timings, and establishing or expanding Park and Ride lots. Set-up highway detours signage for rerouting traffic. See Appendix E – Roadways Toolbox for further information.

2. Mid-Term Alternatives

Several Mid-Term Alternatives have been identified such as Turn Prohibitions on Boylston, Harvard, and Roanoke. Other alternatives include: Staggered Work Shifts, Compressed work week, Eliminate/Restrict Parking on Boylston, Harvard, and Roanoke, Alternate Driving Days, Bike Lanes, and Electronic Signage and/or Surveillance. Restoring this section of highway will require freight movement to and from the destructed area. See Appendix E – Roadways Toolbox for further information.

3. Long Term Options

Long Term options include convert lanes on I-5, I-405, SR 520 to HOV, truck restrictions, changing HOV rules, constructing HOV Bypass lanes to ease bottlenecks, convert shoulder to driving lanes (Boylston Alternative), establishing new transit service via ferry connections, establishing new ferry service, freeway ramp closure, implementing technology for signal interconnects, and freeway ramp metering. New passenger-only ferry service may be a viable option due to congestion on other primary routes to and from Seattle. See Appendix E – Roadways Toolbox for further information. See Appendix F – Toolbox for maritime alternatives for restoration of the transportation network.

## H. Site Images for Alternative Route Landing Sites

UW Waterfront Activities Center

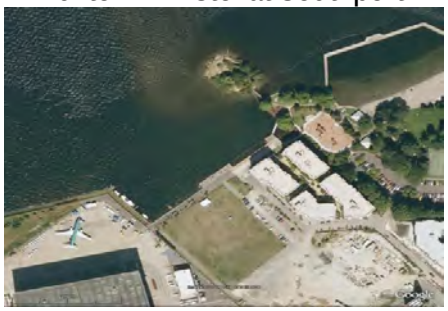
Leschi Park

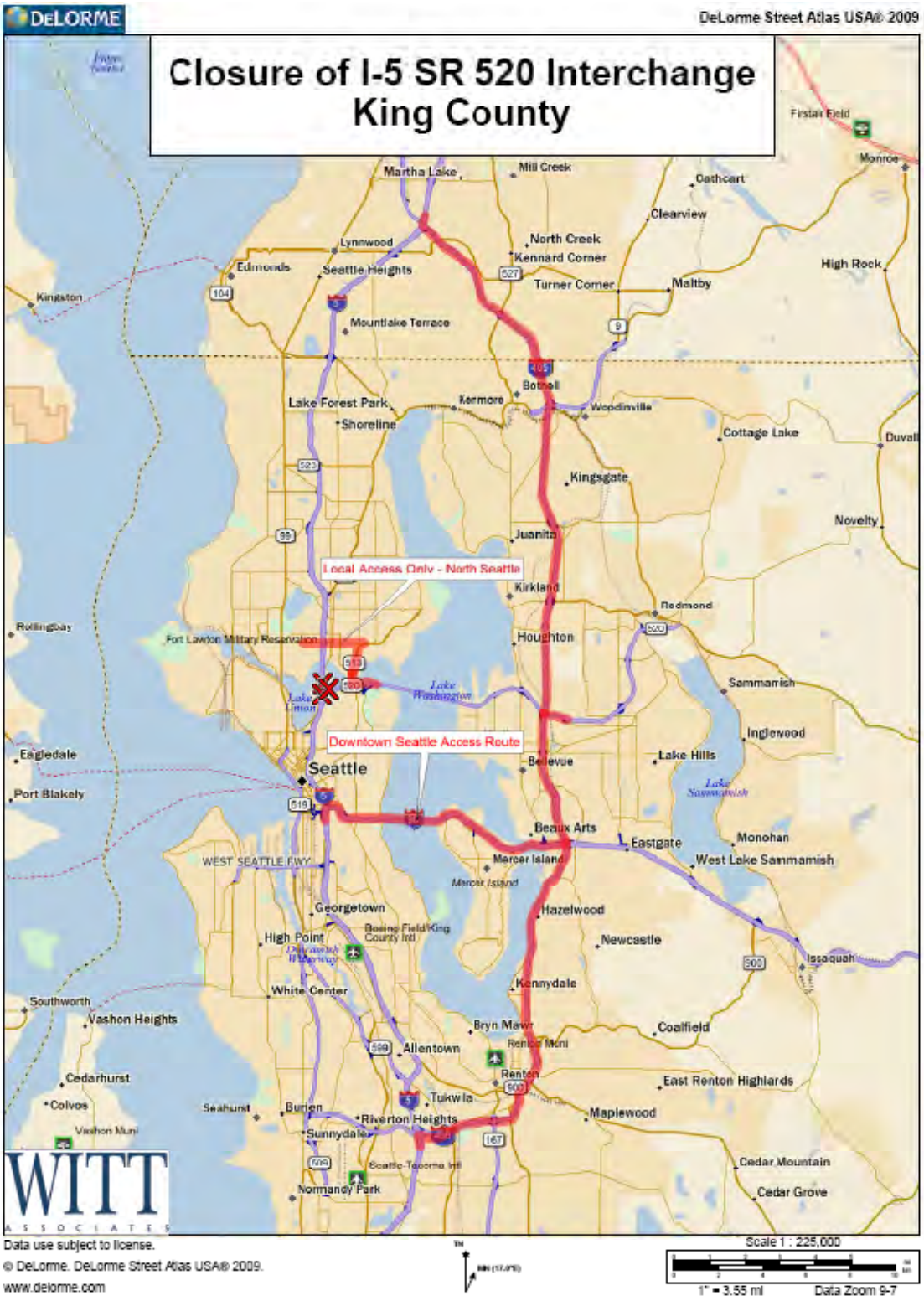
Bellevue Meydenbauer Bay Marina

Kirkland Marina Park

Kenmore Tracy Owen Station Park

Renton – Bristol at Southport




DeLorme
DeLorme Street Atlas USA® 2009
Closure of I-5 SR 520 Interchange
King County
Local Access Only - North Seattle
Downtown Seattle Access Route
Seattle
Martha Lake
Mill Creek
Cathcart
Clearview
North Creek
Kennard Corner
Turner Corner
Maltby
High Rock
Lynnwood
Edmonds
Seattle Heights
Kingston
Mountlake Terrace
Bothell
Kenmore
Woodinville
Lake Forest Park
Shoreline
Cottage Lake
Kingsgate
Novelty
Juanita
Kirkland
Redmond
Rollingbay
Fort Lawton Military Reservation
Houghton
Sammamish
Inglewood
Eagledale
Bellevue
Lake Hills
Port Blakely
Beaux Arts
Eastgate
Monohan
West Lake Sammamish
WEST SEATTLE FWY
Mercer Island
Georgetown
Hazelwood
High Point
Newcastle
Issaquah
White Center
Kennydale
Southworth
Vashon Heights
Bryn Mawr
Coalfield
Allentown
Renton
Cedarhurst
East Renton Highlands
Colvos
Seahurst
Burien
Tukwila
Riverton Heights
Maplewood
Sunnydale
Cedar Mountain
Normandy Park
Cedar Grove
WITT
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Closure of I-5 SR 520 Interchange
Boylston Ave Alternative
King County
N 36TH ST
N 35TH ST
N PACIFIC ST
MERIDIAN AVE N
NORTHLAKE WAY
E GWINN PL
E SHELBY ST
E HAMLIN ST
E ROANOKE ST
E LOUISA ST
E MILLER ST
E LYNN ST
E BOSTON ST
E NEWTON ST
E HOWE ST
E BLAINE ST
E GARFIELD ST
E HIGHLAND DR
BOYLSTON AVE E
EASTLAKE AVE E
YALE AVE E
BROADWAY E
10TH AVE E
11TH AVE E
12TH AVE E
13TH AVE E
14TH AVE E
15TH AVE E
BOYER AVE E
FAIRVIEW AVE E
HARVARD AVE E
FRANKLIN AVE E
FEDERAL AVE E
EVERETT AVE E
DELMAR DR E
INTERLAKEN BLVD
LAKEVIEW BLVD E
E BOSTON TER
E OLIN PL
GRANDVIEW PL E
RED AVE E
MINOR AVE E
520
Lake Union
Lake Washington Ship Canal
Portage Bay
North Broadway
WITT ASSOCIATES
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1" = 800.0 ft
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| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 23 - Closure of I-5 SR 520 Interchange – King County | |
| North to South Routing (I-5 Through Traffic) | South to North Routing (I-5 Through Traffic) |
| I-5 Southbound<br>I-5 Southbound Exit 182 to I-405 Southbound<br>I-405 Southbound<br>I-405 Southbound Exit to I-5 Southbound<br>I-5 Southbound | I-5 Northbound<br>I-5 Northbound Exit 154 to I-405 Northbound<br>I-405 Northbound<br>I-405 Northbound Exit to I-5 Northbound.<br>I-5 Northbound |

Note: Local Access to University and North Seattle can be made via SR 520/ Montlake Bridge.

Note: SR 520 Connection to I-5 made via I-405/SR 520 Interchange.

Note: Downtown Seattle access via I-90.

Note: Consideration should be given for I-5 Southbound closure at 45th Ave.

Note: If conditions permit Southbound I-5 Traffic can exit at 168A (Boylston Ave) and use Boylston Ave Service Road Southbound to bypass closure. Consider this alternative for emergency vehicles only.

Note: If conditions permit, Northbound I-5 traffic can exit at 168A (Lakeview Blvd) and use Boylston Ave Service Road Northbound and Harvard Ave. (See map and below). Consider this alternative for emergency vehicles only.

| Puget Sound Regional Transportation Recovery Plan – Alternative Routing Plan | |
|---|---|
| 23 - Closure of I-5 SR 520 Interchange – King County | |
| North to South Routing (Boylston Alternative) | South to North Routing (Boylston Alternative) |
| I-5 Southbound<br>I-5 Southbound Exit 168 A Boylston Ave<br>Boylston Ave Southbound<br>Ramp to I-5 Southbound | I-5 Northbound<br>I-5 Northbound Exit 168A Lakeview Blvd<br>Lakeview Blvd. Northbound<br>Boylston Ave E Northbound<br>E Roanoke St Eastbound<br>Harvard Ave Northbound<br>Ramp to I-5 Northbound |

Note: Traffic should be monitored closely and traffic control improved where needed.

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Closure of I-5 SR 520 Interchange
Level of Service on Alternates
Martha Lake
Cathcart
Clearview
Lynnwood
North Creek
Kenmore Corner
Edmonds
Seattle Heights
Turner Corner
Maltby
High Rock
Kingston
Mountlake Terrace
Bothell
Lake Forest Park
Kenmore
Woodinville
Shoreline
Cottage Lake
Duvall
Kingsgate
Juanita
Novelty
Kirkland
Redmond
Rollingbay
Fort Lawton Military Reservation
Houghton
Sammamish
Lake Washington
Medina
Inglewood
Eagledale
Seattle
Bellevue
Lake Hills
Port Blakely
Bellevue Arts
Monohan
WEST SEATTLE FWY
Mercer Island
West Lake Sammamish
Georgetown
Hazelwood
Boeing Field/King County International
High Point
Newcastle
Harper
White Center
Kennydale
Southworth
Vashon Heights
Bryn Mawr
Coalfield
Allentown
Renton Municipal
Renton
Tukwila
Legend
Level of Service
Congested
Moderately Congested
No Congestion
WITT
ASSOCIATES
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Scale 1 : 225,000

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 23 - Closure of I-5 SR 520 Interchange King County | | | | | |
| Mitigation Strategies | | | | | |
| Strategy | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Alternative Routing | √ | √ | √ | | |
| Adjust Traffic Signal Timings | √ | √ | √ | | |
| Contra-flow Lanes New | | | | √ | |
| HOV Lanes – Convert | | √ | √ | | I-5, I-405, SR 520 |
| HOV Lanes – New | | | | √ | |
| HOV Rules - Change | √ | √ | √ | | I-5, I-405, HOV 3 or 4 |
| Construct HOV Bypass | | | √ | | Bottlenecks |
| Ramp Metering | √ | √ | √ | | |
| Freeway Ramps - New | | | | √ | |
| Freeway Ramps – Closure | | √ | √ | | Near Closure (I-5) |
| Truck Restrictions | √ | √ | √ | | |
| Truck Preferences | | √ | √ | | Critical Supplies |
| Shoulder - Convert to Driving Lane | | √ | √ | | Boylston Alternative |
| Parking Eliminate/Restrict | √ | √ | √ | | Boylston, Harvard, Roanoke |
| Turn Prohibitions | √ | √ | √ | | Boylston, Harvard, Roanoke |
| Ferry Service Relocation | | | | √ | |
| Ferry Service New | | | √ | | UW/Kirkland-Kenmore-Bellevue (Pass. Only) Leschi Park/Bellevue (Pass only) |
| Ferry Service Increase Existing | | | | √ | |
| Congestion Pricing | | | | √ | |
| Vanpool Carpool Incentives | √ | √ | √ | | |
| Park – Ride Lots New/Expand | √ | √ | √ | | |
| Alternating Driving Days | √ | √ | √ | | |
| Bike Lanes | | √ | √ | | |
| Tolling Adjustments | | | | √ | |
| Transit Service New | | | √ | | Ferry Connections |
| Transit Service Increase | | √ | √ | | |
| Improved Incident Management (Patrols) | √ | √ | √ | | |
| Technology – Electronic Signing or Surveillance | √ | √ | √ | | |
| Technology – Signal Interconnects | | | √ | | |
| Convert trails to special motorized use | | √ | √ | | |
| Tele-commuting | √ | √ | √ | | |
| Staggered Work Shifts | √ | √ | √ | | |
| Compressed Work Week | √ | √ | √ | | |
| Emergency Responder Routes | √ | √ | √ | | |
| Adjust Fleet Size | | | | √ | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 23 - Closure of I-5 SR 520 Interchange King County | | | | | |
| Maritime Elements | | | | | |
| Maritime Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Moving freight via military support for maritime assets | | | | √ | The State EOC will remain activated if federal assets are being used. |
| Determine feasibility of alternative ferry service locations | | | √ | | See attached spreadsheet for determining the feasibility of locations. |
| Determine contracting mechanisms for new, relocated, or increased ferry service | | | √ | | |
| Determine personnel required and availability of alternative maritime transportation | | | √ | | |
| Meet with stakeholders to discuss options for alternative maritime transportation | | | √ | | |
| Determine long-term contracting needs | | | √ | | |
| Identify recovery options for alternative maritime transportation | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

| Puget Sound Regional Transportation Recovery Plan | | | | | |
|---|---|---|---|---|---|
| 23 - Roadway Reconstruction Toolbox Elements | | | | | |
| Roadway Reconstruction Elements | Implementation | | | | Comments |
| | Short-Term | Mid-Term | Long-Term | Not Feasible Or N/A | |
| Debris removal of damaged roadway and roadway structures | √ | | | | |
| Prioritize segment restoration/reconstruction | √ | | | | |
| Provide engineering contract mechanisms (assume design-build for roadways and roadway structures of high priority) | √ | | | | |
| Meet with stakeholders to discuss options | | √ | | | Pre-planning should identify conceptual level-plans for roadway sections that are susceptible to failure |
| Determine long-term contracting needs | | √ | | | |
| Identify recovery options for the roadway section | | | √ | | |
| Coordinate with utility purveyors for utilities in roadway rights-of-way | | | √ | | |
| Develop long-term contracting procedures | | | √ | | |

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**ESF COORDINATOR:** King County Sheriff's Dispatch Communications Center

**LEAD AGENCIES:** Police Department

**SUPPORT AGENCIES:** Emergency Operations Center
North East King County Regional Public Safety Communications Agency (NORCOM)
Administrative Services /Information Services
Communications Coordinator
All City Departments
Shoreline Auxiliary Communications Services (Amateur Radio Team)
King County Emergency Coordination Center
Washington State Emergency Management Division

## Article I. Introduction

### Section 1.01 Purpose

(a) The purpose of this ESF is to organize, establish and maintain the communications and information systems capabilities necessary to meet the operational requirements to respond to disasters and emergencies and to provide guidance regarding the dissemination of warning information.

### Section 1.02 Scope

(a) This ESF addresses the communication assets and procedures of the City of Shoreline (City) including 911, radio, voice and data links, telephone and cellular systems, National Warning System, Emergency Alert System (EAS), the city's use of an emergency warning system, and amateur radio. This ESF also addresses assisting industry in restoring the public communications infrastructure. Cyber Security issues is addressed in an Incident Annex to the CEMP.

### Section 1.03 Situation

(a) Local communications, information systems and warning activities can be hampered due to damaged infrastructure, a surge in use, and/or a loss in capacity. Most public emergencies will create a demand for local communications and information resources to support the response, recovery, and restoration of the transportation system. Concurrently, commercial communications facilities may sustain widespread damage. Restoration of the various communication systems as soon as possible after an emergency is one of the City's main missions as it is considered part of our critical infrastructure and is a community lifeline to providing vital public service.

### Section 1.04 Assumptions

(a) The EOC will activate resources at a level appropriate to the level of risk presented by a perceived or actual public emergency.

(b) A public emergency occurring within the region will have a negative impact on the transportation network.

(c) During a public emergency the communications and information infrastructure will be impacted which could limit access to and from the incident area.

(d) A public emergency within or adjacent to the City has the potential to cause loss of life, property, and/or disruption of normal life support.

(e) The City may be heavily dependent on outside agency and vendor assistance in order to repair significant damage to communication and information system's in order to coordinate communications, information, and warning during the immediate and post-disaster period.

(f) Infrastructure damage and communications disruptions will inhibit efficient coordination of communications, warning, and information support during the immediate and post-disaster period.

(g) The City is heavily dependent on businesses and regional infrastructure to support communications and information needs. This plan depends on the ability for those infrastructures to be operational.

(h) Initial damage reports may be fragmented and provide an incomplete picture concerning the extent of damage to communications facilities.

(i) Working with the communications industry, assigned staff will restore and reconstruct communications facilities as the situation permits.

**Section 1.05 Policies**

(a) All activities within ESF 2 – Communications, Information Systems, and Warnings will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF).

(b) The City will utilize hazard warning systems that supplement the early warning services provided by King County, local, state and federal agencies. Moreover, citizens are expected to be aware of a hazardous situation for which there is significant media attention, such as severe weather or flooding. Consequently, and supplemental to information being provided by other sources, the City will attempt to make a reasonable effort to warn the public of hazardous situations that could result in a disaster. The reasonableness of the effort will depend on the nature of the hazard, when emergency management officials are made aware of a hazardous situation, the quality and quantity of information available, communications and warning resources available, media attention, and other situational dependent factors. Examples of early warning systems would be to communicate information to citizens by utilizing the City's Early Warning and Alert System, (Everbridge), their WEB site and/or cable T.V. channel, social media, and any type of reverse 911 capabilities that are available through the Police or Fire Dispatch Centers or King County ECC. In addition to this, the City of Shoreline Auxiliary Communications Service, Amateur Radio Team, would be activated to assist in getting critical information to and from the citizens of Shoreline.

***(i)*** The City can also use the Alert and Warning systems to notify staff and other service providers of significant events and what is needed from them, as long as the internet is available. They system has the capability to send email, texts, and phone calls. Members of the City's Customer Response Team and the Emergency Management Coordinator will also have access to the system to send notifications. The Communications Manager will maintain a current data base of city staff and community partners to ensure they are made aware of significant events and request their response to or awareness of the event. City staff will endeavor to ensure their contact information in the system is current. Pre-event planning and staff are outlined in the City's Hazardous Weather Policy and Procedures and in their Snow and Ice Policy and Procedures.

(c) In accordance with RCW 38.52.110 (1), in responding to a disaster, or the threat of a disaster, the City Manager/Director of Emergency Services is directed to utilize the services, equipment, supplies, and facilities of existing departments, offices, and agencies of the state, political subdivisions, and all other municipal corporations thereof including but not limited to districts and quasi municipal corporations organized under the laws of the state of Washington to the maximum extent practicable, and the officers and personnel of all such departments, offices, and agencies are directed to cooperate with and extend such services and facilities upon request notwithstanding any other provision of law.

(d) As a signatory of the King County Regional Disaster Framework and through Washington State Mutual Aid System, the City will make resources available to other jurisdictions through the Z1 Coordinator and KC ECC, whenever possible and utilize those same systems when in need of assistance.

## Article II. Concept of Operations

## Section 2.01 General

(a) The City will coordinate, as appropriate, with jurisdictions within Zone 1 though the Zone 1 Emergency Coordinator (Z1 EC); King County Emergency Coordination Center and Snohomish County Emergency Operations Center, or the Washington State Emergency Operations Center, as necessary.

(b) Routine day-to-day modes of communication will continue to be utilized to the fullest extent possible. This utilization will depend on the survivability of the equipment and service during the disaster.

(c) Since partial or total disruption of normal communications may occur during a disaster, the clear definition of primary and alternate modes of communications is vital to any emergency operations activity. The existing telephone service provided through ShoreTel and Verizon phone service, along with the City's radio systems will provide the basis for attempting to maintain effective communications.

(d) The city utilizes an emergency alert and warning system, provided by Everbridge. It is an opt in system that people have to sign up for and it has the capability to access the white pages, however, it doesn't guarantee reaching every person living or working in Shoreline. Additional notification of citizens regarding emergency information and instructions may be eligible to go through the Emergency Alert System (EAS), operated by the King County Sherriff's Dispatch Communication Center, if it meets the requirements set for an EAS. King County ECC also can support our need with their, MyState USA system or any other reverse 911 system available. Other options include door-to-door by uniformed police and fire personnel, mobile loud speakers, or any other means available to the command agency at the time.

(e) The EAS provides emergency information to the public via local radio and television stations. The EAS may be activated by contacting KCSO or KC ECC. EAS information may be disseminated over television, radio stations, and reader boards throughout the area. An Amber Alert is an example of what type of warning is eligible for an EAS level of alert and warning.

(f) The National Warning System (NAWAS), established by the Federal Government, is the primary means of receiving and disseminating warning(s) to state and local officials within Washington. The Washington State Warning Point is operated 24 hours a day by the WA EOC, with the Washington State Patrol as an alternate warning point. The WA EOC will receive information through NAWAS and disseminate that information to King County Sheriff's Office Communication Center (KCSO) which is a local primary warning point. KCSO will provide that information to the City's police staff, City's Office of Emergency Management and the 24 hour Customer Response Team.

(g) The City is subject to a variety of situations that require rapid dissemination of warning and/or other emergency information to local officials and/or the public. The City will utilize the Central Puget Sound Regional EAS Plan (separately published document) and will follow the procedures outlined in that plan as appropriate.

(h) NOAA Weather Radios will be located in publicly accessed City buildings such as the City Hall, all city Fire Departments, Police Department, the City's Recreation Centers, Shoreline School District headquarters, most of the schools, and all of the Libraries in the City. This list is not meant to be exclusive but an example of locations.

(i) Initially, the City's first responders will focus on coordinating lifesaving activities and re-establishing communications and control in the disaster area.

(j) Tests of the warning system will be conducted periodically to familiarize government and the public with the system.

**Section 2.02 Organization**

(a) The Dispatch Communication Center (located at King County Regional Communications & Emergency Coordination Center 911 Call Center, 3511 NE 2nd, and Renton, WA 98056) is responsible for the overall direction and control of emergency communications and warning systems within the City during a disaster or emergency situation. The Dispatch Communication Center is a 24-hour facility which provides a day-to-day 911 answering point, and provides communications support for the Police Departments. The Shoreline Fire Department is dispatched by the North East King County Regional Public Safety Communications Agency (NORCOM), located at 450 110th Ave NE, Bellevue WA. 98008. The exchange of information during emergencies will be facilitated through both the Dispatch Communication Centers to the EOC via the Police and Fire representatives assigned to the EOC. Each dispatch Center has their own Computer Aided Dispatch system to log all emergency communications.

(b) Communication and coordination between all City departments, the EOC, field command post(s), and the Communication Centers is critical to the City's ability to effectively coordinate response to a disaster or emergency. If the EOC is activated, the Communications Unit of the Logistic Section will have overall responsibility for ensuring the coordination of information for the event to include phone lines, cellular communications, 800 MHz radio communication, satellite phone, email, and information from the City of Shoreline Radio Amateur Civil Emergency Services (RACES) (see Appendix A). All radio communications on the 800 MHz radios will be in compliance with all federal or state telecommunications guidelines and follow the City of Shoreline Radio Guidelines. (See Appendix B). When the City EOC is activated incoming calls for service will be logged as indicated below:

(I). The City uses a SharePoint platform to log all emergency communications that comes into the EOC. Most of the time the initial call will come into the EOC's

Communications Unit where it is logged in and then assigned to appropriate EOC section to do follow-up on.

(II). This message will capture the Who, What, When, Where, Why, and How, if available from the caller, into the message as best as they can.

(III). The assigned Section will complete and close out the call. Each entry is time stamped.

(IV). The Documentation Unit, in the Planning Section, will ensure each call has been closed out prior to de-activating the EOC.

(c) Additional volunteer radio networks may be activated as necessary to supplement the City's radio systems, such as local amateur radio operators. The City of Shoreline Radio Amateur Civil Emergency Services (RACES) (see Appendix A), also known as Auxiliary Communications Services (ACS), is activated at the request of the Incident Commander and/or the Emergency Management Coordinator. In the event of a major emergency, a RACES operator/team is pre-designated to the City of Shoreline EOC. The City will conduct drills and exercises to test these additional communication capabilities. The City's ACS Team has pre-designated team members that when available, will respond to their designated Fire Station. There is a primary team to support the EOC at Fire Station 61. In addition, there are team members who support a Communication van who will be deployed to gather and report information and another team that can set up at remote site support like at a shelter, mass feeding site, back up EOC, or established points of distribution (PODs).

(d) The Communication Centers are equipped with an emergency generator to supply emergency power to their Centers. The City's EOC is housed in the Shoreline Fire Department Headquarters, Station 61. It is also equipped with an emergency generator to supply emergency power to the EOC and the Fire Station when needed.

(e) The City's communications capabilities currently available include the following:

(I). Two-way radios – (Police, Fire, Public Works, CRT, Parks, and some P&CD and EOC staff)

(II). Wireless Computers (using Verizon Wireless air card)

(III). Satellite phones in the EOC and one assigned to the Police Department for the field

(IV). Electronic Mail (Microsoft Outlook Email System)

(V). Use of the city's Alert and Warning system

(VI). Website

(VII). Social Media Sites

(VIII). Shoretel voice over internet protocol (VOIP) Telephone Systems

(IX). ACCESS (central computerized landline teletype)

(X). Ham radio

(XI). Handheld CB low band

(XII). CEMNET to communicate with the State EOC and King County ECC

(XIII). Access to King County Sharepoint

(XIV). Runners

(f) The Police Department's radio frequencies are on the 800 MHz radio system. The City also has access to multiple mutual aid police frequencies (PSOPS) as well as City, fire, county and state talk groups.

(g) The Fire Department has radio frequencies are on the 800 MHz radio system as well as mutual aid frequencies with neighboring fire agencies.

(h) Key operations staff members within the Planning and Development Department, Customer Response Team, Park Maintenance, Public Works Departments, and the Office of Emergency Management utilize 800 MHz radios with established talk groups that can be accessed by both Police and Fire personnel.

(i) The City utilizes the Central Puget Sound Regional EAS Plan (separately published document) and will follow the procedures outlined in that plan as appropriate.

(j) The KCSO will serve as the primary warning point for the National Warning System throughout King County. Alternate originators include KC OEM, Eastside Public Safety Communication Agency, and the Seattle Division of Emergency Management.

(k) The National Warning Systems (NAWAS) is the primary system utilized by the Federal Government to disseminate warning information. Warnings received over NAWAS are received at the Washington Warning Point, which in turn disseminates the warning to local warning points. These warnings are disseminated over the ACCESS (Teletype) system, and received at the King County Communications Center which is monitored 24-hours a day.

(l) The City will generally take the following order of priority of systems for status and repair:

(I). 800 MHz Public Safety Radio network

(II). Telephone network

a. EOC

b. Public Safety (PD and FD)

c. Voicemail

(III). Data communications network including fiber

(IV). E-mail and messaging

(V). City's Internet connection

(VI). City's website (www.shorelinewa.gov)

(VII). City's television channel

(VIII). City's data center (staffed 24x7)

(IX). Enterprise Computing

(X). Desktop computing

(XI). Service desk (IT and telephone)

(XII). Social Networking Sights (Facebook, Twitter, etc)

(m) The City's communications infrastructure has the following components listed below. Each assigned agency or staff are responsible for ensuring the component is operational ready, by inspecting, testing and maintaining their assigned communication system:

| Component | Description | Support and Maintenance |
|---|---|---|
| Microwave | Not Available | Not Available |
| Fiber | Point-to-Point fiber that facilitates the delivery of voice and data between city facilities. | None |
| Radio – 800 MHz Public Safety and Emergency Management | City owns a number of 800 MHz radios that are issued to their operations staff, emergency management and mounted in key vehicles. Staff are assigned to each radio to ensure operational readiness. If the radio is not operational, they should notify the assigned CRT member to coordinate the maintenance needed. | Eastside Public Safety Communications Agency<br>(425) 452-7872<br>(425) 452-4340 fax |
| Radio – TRIS | TRIS is the Tri-County Radio Interoperability System. TRIS was implemented in 2005 using a combination of federal funds and urban area security initiative funds. TRIS allows some public safety answering points (PSAPs) to patch talk groups between these radio networks in the urban area: King County 800 MHz trunked, Snohomish Emergency Radio System (SERS), Tacoma 800 MHz radio, Port of Seattle 800 MHz radio, Washington State Patrol, and the Federal Integrated Wireless Network (IWN) which supports a number of DOJ and DHS agencies, including FEMA. | King County<br>Radio Communication Services<br>6452 S. 144th Street<br>Tukwila, WA 98168<br>Office: 206-205-8191 |
| Ham radios at Fire Stations and the Communications Van | Shoreline Auxiliary Communications Systems Team | Team Leaders - list maintained by the Office of Emergency Management |
| Communications and command vehicles | King County Sheriffs Office has several Command and Communications Vehicles they can access to facility these functions during an event. | King County Sheriff's Office |
| Telephone Network | Integrated Services Digital Networking ISDN- Primary Rate Interface PRI. | Integra Communications |
| Telephone Network - Interconnection to Local and Long Distance carriers | Integrated Services Digital Networking ISDN- Primary Rate Interface PRI. | Integra Network Operation Center (NOC) |
| Data Communications | Internal to City of Shoreline | City of Shoreline Information Services |

| Component | Description | Support and Maintenance |
|---|---|---|
| Internet connection | King County Institutional Network (I-Net) | City of Shoreline Information Services coordinates |
| Intergovernmental network | King County Institutional Network (I-Net) | City of Shoreline Information Services coordinates |
| Wireless data network—Public Access | Internal via KC-I-Net | City of Shoreline Information Services coordinates |
| Wireless data network—Internal City wireless access points | Internal via KC-I-Net | City of Shoreline Information Services coordinates |
| Wireless data network for mobile computing network | Internal via KC-I-Net | City of Shoreline Information Services coordinates |
| BlackBerry | Sprint/Nextel | City of Shoreline Information Services coordinates |
| Cellular telephones | Sprint/Nextel | City of Shoreline Information Services coordinates |
| Text Messaging | Sprint/Nextel | City of Shoreline Information Services coordinates |
| Paging (Fire) | Via NORCOM | North East King County Regional Public Safety Communications Agency (NORCOM) |
| Paging (non- Fire) | The City's Emergency Alert and Warning system has the capability of notifying key staff using a variety of methods | City of Shoreline Communication Manager |
| Electronic mail | Internal to the City of Shoreline | City of Shoreline Information Services coordinates |
| Sharepoint | Key EOC staff will have access to the King County Sharepoint Site for assisting with managing information and resource requests during an activation of the EOC | King County Office of Emergency Management |
| Shoreline City Website | Provide public facing information for the City on the web. | Coordinated by the CMO's office and City's WEB Design |

**Section 2.03** In general, communications with special needs and vulnerable populations will depend upon the specific needs and general functions of individual departments. The following communications methods are available for department use:

| **Communications Method** | **Description** | **Potential Applications** |
|---|---|---|
| City Telephone | Private telephone network internal to City government. Connections to public switched and cellular networks, including long distance.<br><br>The City operates a 24 hour 7 days a week phone number to respond to emergencies needing City assistance | All applications to populations with land-line or cellular telephones |
| TTY Capability | The City also has a TTY line for the deaf and hard of hearing that can be accessed during business hours that the city is open. After business hours the city relies on the King County Sheriff's Dispatch center's TTY line to relay and needs that are received by them for city services | Ability to receive information from the deaf and hard of hearing |
| Community Notification | Outbound telephone dialing and messaging mechanism, with limited response capability with the City's Emergency Alert and Warning System | All applications to populations with land-line telephones, cell phones or email |

| **Communications Method** | **Description** | **Potential Applications** |
|---|---|---|
| Auxiliary Communications Services | Ham radio operators (volunteers) who will be stationed at critical sites during a disaster | Communication to community centers and other assembly sites |
| Internet: E-Mail | Computer communications to populations with computer and data networking capability, active communications | Communication to populations whose e-mail address a City department knows |
| Internet: Web | Information – mostly one-way, passive | Communication to any population with an Internet connection and web browser |
| Social Networking: Facebook/Twitter | Provide notices of information on Facebook page and Twitter. May also be used as two way communication via discussion posts on the 'wall' and/or Discussion Posts or Twitter post. | Communication to any population with an Internet connect and web browser |
| Runners | People can physically go and notify people 'in person'. Police, Fire, and CERT Personnel may assist with this. This can include verbal and printed material. | Communicate to people 'in person'. |

## Section 2.04 Actions

(a) Preparedness:

(I). Conduct planning with partner agencies to refine communications, information systems, and warning operations,

(II). Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(III). Manage inventory of equipment and other pre-designated assets that are essential to meet communications of special needs groups,

(IV). Assign and schedule sufficient personnel to manage communication functions for an extended period of time,

(V). Ensure lead agency personnel are trained in their responsibilities and duties,

(VI). Develop and implement emergency communications, information systems, and warning strategies,

(VII). Develop and present training courses for all personnel,

(VIII). Maintain liaison with support agencies,

(IX). Conduct All Hazards exercises involving communications, information systems, and warning systems.

(b) Response:

(I). Coordinate operations in the EOC and/or at other locations as required,

(II). Coordinate needs and response actions with all agencies who manage communication functions,

(III). Establish and maintain of a system to support on-scene direction/control and coordination with EOC, King County ECC, the WA State EOC, or other coordination entities as appropriate,

(IV). Coordinate with support agencies to develop, prioritize and implement strategies for the initial response to EOC requests.

(V). Establish communications with appropriate field personnel to ensure readiness for timely response,

(VI). Evaluate and task the communications, information systems, and warning support requests for threatened and/or impacted areas, Implement Disaster Assessment Teams to determine post-event effect on emergency services, functional group resources and the ability to perform Continuity of Operations for essential functions,

(VII). Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(VIII). Coordinate with support agencies, as needed, to support emergency activities,

(IX). Obtain other resources through the King County Regional Disaster Plan or accessing the Statewide Intrastate Mutual System and/or the Mutual Aid Agreements,

(X). Coordinate with the Zone 1 Coordinator and the King County Office of Emergency Management to obtain resources and facilitate an effective emergency response among all participating agencies,

(XI). Monitor and direct communication resources and response activities to include pre-positioning for response/relocation due to the potential impact(s) of the emergency situation

(c) Recovery

***(I). Recovery activities for this ESF are covered in the City of Shoreline Disaster Recovery Plan.***

(d) Mitigation

*(I).* Mitigation activities for this ESF are covered in the Multijurdictional City of Shoreline Hazard Mitigation Plan.

## Article III. Responsibilities

### Section 3.01 Lead Agency – Police Department

(a) Develop and maintain warning procedures with the City.

(b) Maintain all available Police Department communication equipment in serviceable and ready condition.

(c) Disseminate warning information received through NWS or NAWAS to local emergency officials in accordance with Dispatch/ Communication Center standard operating procedures

(d) Assure proper working order of all equipment and frequencies through tests or normal day-to-day operations.

(e) Be prepared to activate a 9-1-1 transfer to the County's backup 9-1-1 service operator, should the County's 9-1-1 lines fail.

(f) Be prepared to move to a remote receiving and dispatching site should the City's dispatching systems fail.

(g) Arrange for additional or alternate communications capabilities as necessary.

(h) Establish communications capabilities with all City departments and outside agencies as necessary.

(i) Provide assistance with dissemination of warning information through all available communication systems.

(j) Direct emergency communications support activities of the City.

(k) Advise EOC on the status and capabilities of whole emergency communications system.

(l) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency

(m) Assess the need for, and obtain telecommunications industry support as required.

**Section 3.02 Support Agency**

(a) Emergency Operations Center

(I). Coordinate the dissemination of warning information through all available ***c***ommunication systems.

(II). ***Coordinate information of the event to appropriate staff utilizing all*** communication mediums available.

(III). Develop and maintain warning procedures for the City.

(IV). Activate CEMNET (two-way VHF radio system for state to KC ECC communications).

(V) Query wireless providers and local media for damage reports.

(VI) Assess the need for, and obtain telecommunications industry support as required.

(b) Administrative Services Department

(I). In consultation with the City of Shoreline IT Manager, or delegate, provides consultation and serves as a content expert for IT Security and City owned and/or operated communications equipment.

(c) Communications Manager/Other Designated Staff

(I). Coordinate the dissemination of alert and warning information through the city owned system

(II). Coordinate information of the event to appropriate staff utilizing all communication mediums available.

(III). Develop and maintain warning procedures for the City.

(d) All City Departments

(I). Maintain all available departmental equipment in serviceable and ready condition.

(II). Assure proper working order of all departmental equipment and frequencies through tests or normal day-to-day operations.

(III). Any city personnel may be required to perform door to door notifications.

(IV). Develop and maintain an inventory of departmental communications capabilities and resources.

(V). Provide communications support as requested.

(e) Radio Amateur Civil Emergency Services (RACES)

(I). Provide staffing and support under the Communications Unit at the EOC.

(II). Coordinate the activation and use of emergency nets using appropriate frequencies.

(III). Maintain and implement appropriate SOP's to support Ham Radio utilization, in coordination with EM Coordinator. (See Appendix B)

(IV). Serve as content experts on acquisition, maintenance, and use of appropriate equipment and resources to support Ham Radio utilization, including, but not limited to, HF SSB/CW, SL Repeater, Six M FM, UHF FM, VHF FM, and VHF Packet.

(f) King County Emergency Coordination Center – KCECC

(I). Activate EAS network for public information and warning.

(II). Activate CEMNET (two-way VHF radio system for state to KC ECC communications).

(III). Activate volunteer radio networks as necessary.

(IV). Facilitate the Regional Information Management System (RIMS) to allow for regional planning and communication.

(g) Washington State Emergency Management Division

(I). Maintain overall responsibility for planning and coordinating the emergency communications program within the state as identified in the Washington State Comprehensive Emergency Management Plan and the Washington State Emergency Communication Development Plan.

(II). May facilitate emergency communications through other state communications assets.

(III). Operate the WA EOC 24 hours a day as the primary warning point for the FEMA National Warning System (NAWAS), with operational assistance provided by the Washington State Patrol.

(IV). May activate the EAS to disseminate emergency information to the public.

(V). Provide coordination of State resources to provide support when local jurisdictions, as appropriate, when all local, regional and county resources have been expended.

(VI). Facilitate the requisition of resources from other states through the Emergency Management Assistance Compact (EMAC).

(VII). Request and coordinate Federal resources through the Federal Emergency Management Agency (FEMA)

**Article IV. Appendices A**

(a) Shoreline Auxiliary Communications Service

See Cyber Attack Annex for additional information on cyber attack response.

# SHORELINE AUXILIARY COMMUNICATIONS SERVICE

## Shoreline, Washington

SHORELINE AUXILIARY COMMUNICATIONS SERVICE

# City of Shoreline RACES Plan

Shoreline Auxiliary Communications Service
Shoreline Fire Department
17525 Aurora Avenue North
Shoreline, Washington 98133
Phone 206.533.6500 Fax 206.546.5719
www.shorelineacs.org

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# Table of Contents

**WHAT IS RACES?** ..... 4
**INTRODUCTION** ..... 4
**SCOPE** ..... 5
**PURPOSE** ..... 5
**OPERATIONS** ..... 5
**AUTHORITY** ..... 5
**AUTHENTICATION** ..... 5
**IDENTIFICATION** ..... 6
**IMPLEMENTATION PROCEDURES** ..... 6
**OPERATIONAL READINESS** ..... 7
**ANNEXES** ..... 8
**APPROVALS** ..... 9
**SHORELINE ACS EMERGENCY STATIONS AND LEADERSHIP** ..... 10
**LIST OF AUTHORIZED RACES RADIO FREQUENCIES** ..... 14
**FUNCTIONAL BLOCK DIAGRAM** ..... 15
**LOCAL CHECKLISTS AND MESSAGE FORMS** ..... 18

## What is RACES?

The Radio Amateur Civil Emergency Service (RACES) was founded in 1952 as a public radio communications service provided by a reserve (volunteer) amateur radio groups sponsored by local government agencies. **The RACES mission is to provide radio communications support for government sponsor agency(s) in situations where the capability or capacity of the sponsor agency's communications system are inadequate or not operational.** If the RACES team is activated, certified and licensed volunteer (unpaid) personnel are called to supplement radio communications for the government agencies they serve. Although the exact nature of each activation will be different, the common thread is radio and data communications. The Federal Communications Commission (FCC) is responsible for the regulation of RACES operations. RACES are administrated by a local, county, or state civil defense agency responsible for disaster services. In Shoreline, the RACES mission is provided by members of the Shoreline Auxiliary Communications Service (ACS0.

## Introduction

RACES are a special part of the amateur radio operations sponsored by the Federal Emergency Management Agency (FEMA). RACES were primarily created to provide emergency radio communications for civil defense preparedness agencies and are governed in the Code of Federal Regulations (CFR) Title 47, part 97, Subpart E, Section 97.407. Today, as in the past, RACES is employed during a variety of emergency/disaster situations where normal governmental radio communications systems are limited or not available because of infrastructure damage or limited capacity. RACES can be used include: natural disasters, technological disasters, terrorist incidents, civil disorder, and nuclear/biological/chemical incidents or attack.

RACES is an organization of dedicated, licensed amateur radio volunteers who provide radio communications in support of federal, state and local government agencies during times of an emergency/disaster. RACES provide essential communications and warning links to supplement state and local government assets during these emergencies/disasters.

The Amateur Radio Emergency Services (ARES) is the American Radio Relay League's (ARRL) public service arm for providing and supporting emergency communications, where needed, when an emergency/disaster strikes. For purposes within this plan, ARES organizations are identified as primarily providing support for non-government agencies during an emergency or disaster. ARES organizations/operators, during emergencies/disasters may be used if RACES resources are depleted or do not exist. If called upon to support government needs the ARES organization/operators will be considered as operating under RACES and operators will be registered as emergency workers in accordance with RCW 38.52 and WAC 118.04.

It should be noted that RACES and ARES licensed operators could hold dual registration in RACES and ARES. Further, it is encouraged by the ARRL that licensed amateur radio operators be

registered/certified as both and that cooperative efforts between RACES and ARES organizations be established and maintained. These combined radio communications services (RACES and ARES) are provided by the volunteer members of the Shoreline Auxiliary Communications Service (ACS).

## Scope

This plan provides guidance and direction to the Shoreline ACS Radio Amateur Civil Emergency Service (RACES) members and to federal, state, and local government officials on ACS capabilities and how to augment the radio communications needs of local, regional, state, and federal government organizations and officials during emergency and disaster conditions.

## Purpose

This plan is intended primarily to provide guidance for coordinated operation between **the City of Shoreline, Washington** government officials, Shoreline Fire Department, Shoreline Police Department and the RACES organization during times when there are extraordinary threats to the safety of life and/or property and emergency communications support is needed from RACES. Maximum benefits from a RACES organization can be obtained only through careful planning, funding, training, and policy support by state, county, and local governments and public safety agencies. This document identifies the organizations, agencies, and Emergency Stations and assigns definitive roles to each. This plan enables agencies and organizations having emergency public safety responsibilities to include the RACES organization in local emergency plans, funding, joint training, and emergency/disaster response programs.

## Operations

This document becomes the official radio communications operating plan for RACES and **the City of Shoreline, Police Department, Fire Department, and any other public safety functions** when signed by the city's Emergency Management Coordinator**.** Under this plan, the Emergency Management Coordinator is empowered to request the use of available publically owned, volunteer operated, communications facilities and personnel. Acceptance of/or participation in preparation or implementation of this plan shall not be deemed as a relinquishment or delegation of FCC license control, and shall not be deemed to prohibit an amateur radio service licensee or broadcast licensee from exercising independent discretion and responsibility in any given situation under the terms of his or her license, citizenship, and good judgement.

## Authority

Code of Federal Regulations (CFR) Title 47, part 97, Subpart E, Section 97.407.

## Authentication

The form of authentication that will be used between the activating official and the RACES organization is personal identification or knowledge of the individuals involved.

## Identification

The methods used to identify a RACES member and key personnel during a communications support operation are:

- Current Local Emergency Services Identification Card, City of Shoreline OEM issued
- Personal Acquaintance.

## Implementation Procedures

### Procedures for Government Officials

Upon notification or determination of an emergency condition or situation posing an extraordinary threat to life and/or property, the **City of Shoreline Emergency Management Coordinator** will contact the RACES Liaison Officer, the Shoreline ACS Assistant Team Manager for Operations. Unless otherwise noted the **Shoreline ACS assistant team for Operations** is the designated RACES Liaison Officer.

The list of the Emergency Stations and the individuals assigned to each Station are shown in Annex A of this document. It is the responsibility of the ACS team manager to ensure that a current copy of Annex A is updated annually and contains the names and contact information of the assigned team and members is delivered to the Emergency Management Coordinator.

The Emergency Management Coordinator, or a designated EOC Manager back-up, will use the following format when contacting the RACES Liaison Officer:

> "This is **(give name)**, City of Shoreline Emergency Management Coordinator. I request that the RACES organization be activated for **Shoreline, Washington** because of (description of emergency situation)."

In order to speed personnel activation during emergency conditions or provide other announcements, an authorized official may contact the **King County** Operational Area emergency alert system station and request that a public service announcement be made to assist activation of the RACES organization.

Upon cessation of the emergency condition, appropriate government officials will issue a termination notice.

# Activation and Deployment Protocol for Amateur Radio Operators

**Amateur Ration Operators should first assess their individual situations by following the readiness protocol and priorities in Annex D <u>IMMEDIATELY</u> after the incident or as soon thereafter as they are physically and emotionally able.** After 'clearing' the steps in the protocol, the RACES member(s) should check into the NET. Upon request by Shoreline Emergency Coordinator or if requested on the NET, members should report to the EOC or their assigned Station, check-in with or leave a note with the duty officer, and activate the equipment required for participation in the response using the frequencies found in annex B of this document.

The first RACES member able to activate a station becomes Net Control and remains Net Control until the EOC or ALTEOC station is fully activated and operational. At the time the EOC or ALTEOC station becomes fully operational the EOC radio operator will request Net Control authority and all other stations will relinquish Net Control responsibilities to the EOC COMM.

RACES members not assigned to a specific station or who are unable to reach their assigned station are requested to check in with Net Control when available for service, i.e. cleared the readiness protocol, or to advise when they will become available for service. Each member should advise Net Control of their situation, location, equipment operational status and availability for alternative communication assignments,

In the event that amateurs not living within the immediate area offer assistance, they will contact the EOC on the previously established frequencies for assignment and dispatch.

At the cessation of the emergency, authorized officials will initiate roll call from the EOC using any one or more of the previously established frequencies. RACES members will then acknowledge and confirm receipt of termination message.

## Operational Readiness

Periodic exercises and will be conducted by the Shoreline Auxiliary Communications Service Assistant Team Manager for Planning, Training, and Community to ensure equipment and team relevance, readiness, reliability, and resilience. Exercises shall be directed toward ensuring relevance, readiness, reliability, and resilience by practicing audio, and digital modes of communication between the Emergency Operations Center (EOC) and designated Emergency Stations as well as privately owned home, portable, and mobile stations. It is anticipated that operational readiness shall include the ability to provide auxiliary or backup communications on behalf of the Shoreline Fire and Police Departments as determined by the Emergency Management Coordinator who shall assist the Shoreline Auxiliary Communications Service in arranging quarterly joint planning and training exercises with those agencies.

## Annexes

Annex A: Shoreline Auxiliary Communications Services Emergency Stations and Leadership and Contact List

Annex B: Lists authorized Radio Amateur Communication Emergency Services, RACES, and Amateur Radio Emergency Services, ARES, Radio Frequencies.

Annex C: Functional Block Diagram

Annex D: Local Checklists and Message Forms

# Approvals

City of Shoreline Emergency Management Coordinator Date

Shoreline ACS RACES Officer Date

# Shoreline ACS Emergency Operations Member Roster and Primary Assignments

| Assignment | Name | Call | Home | Work | Cell | Pager | Email |
|---|---|---|---|---|---|---|---|
| ACS Team Manager | ALAN COBURN | KE7IBO | **206-542-3112** | **206-546-6277** | **206-595-9193** | **NOT IN SERVICE** | **Mrgreentrails @gmail.com** |
| Assistant Team Manager for **Operations RACES/ARES Liaison Officer** | JOHN LAPHAM | N7JJ | **206-418-8322** | | **206-418-8322** | **NOT IN SERVICE** | **Jlapham103141 @centurylink.net** |
| Assistant Team Manager for **Planning, Training, & ACS Community** | ANNE GARAY | K2MTN | **206-546-0105** | **206-386-9686** | **206-953-4197** | **NOT IN SERVICE** | **Annemgaray @gmail.com** |
| Assistant Team Manager for **Logistics** | ALAN COBURN | KE7IBO | **206-542-3112** | **206-546-6277** | **206-595-9193** | **NOT IN SERVICE** | **Mrgreentrails @gmail.com** |
| Assistant Team Manager for **Finance** | BRION NORTON | KB7UUE | **206-546-5572** | **201-543-8282** | **206-542-4039** | **NOT IN SERVICE** | **Kb7uue @arrl.net** |
| Assistant Team Manager for **Public Information, CERT, City and Agency Liaison Planning & Coordination** | PAT DUCEY | KF7NFE | **206-363-5122** | **206-763-2383** | **206-794-1048** | **NOT IN SERVICE** | **Plducey @gmail.com** |
| Assistant Team Manager for **Capital Projects & Equipment** | BRUCE RAWLINSON | W7BLR | **206-414-1767** | | **206-999-3053** | **NOT IN SERVICE** | **Brucerawlinson @gmail.com** |
| Technical Manager **Hardware/Software/Radios /Digital Equipment** | GARY HARRISION | N7XOO | **206-546-8187** | | **206-369-2871** | **NOT IN SERVICE** | **Gharrison39 @comcast.net** |
| Assistant Technical Manager | Not Assigned | | | | | **NOT IN SERVICE** | |

| Assignment | Name | Call | Home | Work | Cell | Pager | Email |
|---|---|---|---|---|---|---|---|
| Technical Manager **Repeater Administration, Operations, Planning and Coordination** | JOHN LEADEN | K7CHN | **425-774-4522** | | | | **jleaden @u.washington.ed** |
| Station 61 Team Leader | JOSH GIBBS | KD7PAJ | **206-533-8437** | **206-616-4361** | **206-777-5420** | | **Gibbsjj @gmail.com** |
| Station 61 Assistant Team Leader | DONNA BRENNAN | KE7ICG | | | **206-799-0749** | | **Donnabren1 @gmail.com** |
| Station 63 Team Leader | BRION NORTON | KB7UUE | **206-546-5572** | **206-543-8282** | **206-542-4039** | | **Kb7uue @arrl.net** |
| Station 63 Assistant Team Leader | VICTOR ESKENAZI | KD7OWX | | | **425-258-0821** | | **Atallshipsailor @gmail.com** |
| Station 64 Team Leader | DAVID NORLEN | WB6URD | **206-546-6481** | **206-310-4504** | **206-310-4504** | | **Wb6urd @arrl.net** |
| Station 64 Assistant Team Leader | JOSH LOGAN | KD7HGL | **206-533-9630** | **206-925-3175** | **206-795-7518** | | **Kd7hgl @gmail.com** |
| Station 64 Assistant Team Leader | CHRIS CAVIEZEL | KG7OFQ | **425-830-2542** | **206-764-3726 X1** | **425-830-2542** | **425-830-2542** | **Chris_caviezel.fire @gmail.com** |
| Station 65 Team Leader | Not Assigned | | | | | | |
| Station 65 Assistant Team Leader | LEE HOPF | K7LFP | **206-363-5734** | | **206-947-0196** | | **L62hopf @yahoo.com** |
| Station 65 Assistant Team Leader | RACHAEL ZION | KE7UIT | **206-418-8322** | | **206-861-6894** | | **Desert_place @centurylink.net** |

| Assignment | Name | Call Sign | Home | Work | Cell | Pager | Email |
|---|---|---|---|---|---|---|---|
| Communications Van Team Leader | JOHN SLOMNICKI | N7TPM | **206-546-6826** | **206-477-2871** | **206-423-1666** | **206-423-1666** | **John.slomnicki @metrokc.gov** |
| Communications Van Assistant Team Leader | FRANK BRENNAN | KD7UFA | **206-542-4639** | | | **206-541-0572** | **frankbren @gmail.com** |
| Communications Van Assistant Team Leader | MARC WEINBERG | K9PET | **206-546-8952** | | **206-755-4423** | | |
| Communications Van Assistant Team Leader | GAIL COBURN | KE7IBM | **206-542-3112** | | **206-595-8762** | | **Gailbymail @gmail.com** |
| ALT EOC Team Leader | BOB BIRKNER | N7AIR | **206-542-4623** | | | | **Robirkner @spro.net** |
| ALT EOC Assistant Team Leader | JOHN BERKMAN | W7VFQ | **206-546-3229** | | | | **Tinkerty @verizon.net** |
| ALTEOC Assistant Team Leader | JEFF MOORMAN | KB7RR | **206-367-2377** | **206-615-1286** | **206-795-1971** | | **Kb7rr @arrl.net** |
| ALTEOC Assistant Team Leader | ERIC TALLEY | KG7NNK | **206-237-0034** | **206-905-3734** | **206-384-0831** | | **Pipeboss32 @gmail.com** |
| ALTEOC Assistant Team Leader | VICKIE FONTAINE | KE7GUC | **206-546-5968** | **206-368-4772** | **206-963-2093** | | **Vickiefon @msn.com** |
| ALTEOC Assistant Team Leader | JAMES KEARNEY | N7SET | **206-695-2929** | | **206-293-1559** | | **N7set @n7set.com** |

| Assignment | Name | Call Sign | Home | Work | Cell | Pager | Email |
|---|---|---|---|---|---|---|---|
| Portable Emergency Radio Kit (PERK) Team Leader | PATRICK DUCEY | KF7NFE | **206-363-5122** | **206-763-2383** | **206-794-1048** | | **Plducey@gmail.com** |
| Portable Emergency Radio Kit (PERK) Assistant Team Leader | BRUCE RAWLINSON | W7BLR | **206-414-1767** | | **206-999-3053** | | **Brucerawlinson@gmail.com** |
| Portable Emergency Radio Kit (PERK) Assistant Team Leader | BARRY KEECH | KF7AOH | **206-542-8968** | **206-542-5105** | **206-465-0516** | | **Bkeech@bkwa.com** |
| Civil Air Patrol Liaison | MICHAEL SINCLAIR | KE7DQB | **206-845-1089** | **206-748-7304** | **425-354-8139** | | **Sinclair.michael@comcast.net** |
| Red Cross Liaison | TOM DeBartolo | KF7NEZ | **206-542-2453** | **206-349-3321** | **206-349-3321** | | **Tpdebartolo@comcast.net** |
| King County Regional Control Center Emergency Services ARES / RACES Coordinator | KIRK BELLAR | N7UK | **206-365-7446** | **425-342-2975** | **206-465-2873** | | **N7uk@arrl.net**<br><br>**Kbellar@comcast.net** |

# List of authorized RACES Radio and Shoreline Station to Station Operational Frequencies

| COMM LINKS | FREQUENCY AND TONE |
|---|---|
| State EOC | 3.985 MHz |
| King County EOC | 52.05 – 54.0 MHz |
| Shoreline Station to Station | 900 MHz |
| Shoreline Primary UHF Repeater | 442.825 MHz 103.5+ |
| Shoreline Secondary UHF Repeater | 440.300 MHz 103.5+ |
| Shoreline Simplex VHF | 145.770 MHz 103.5+ |
| Shoreline WINLINK | W7AUX on 145.770 MHz 103.5+ |
| CEMNET FREQUENCY | F1 45,20 MHz |

## Functional Block Diagram

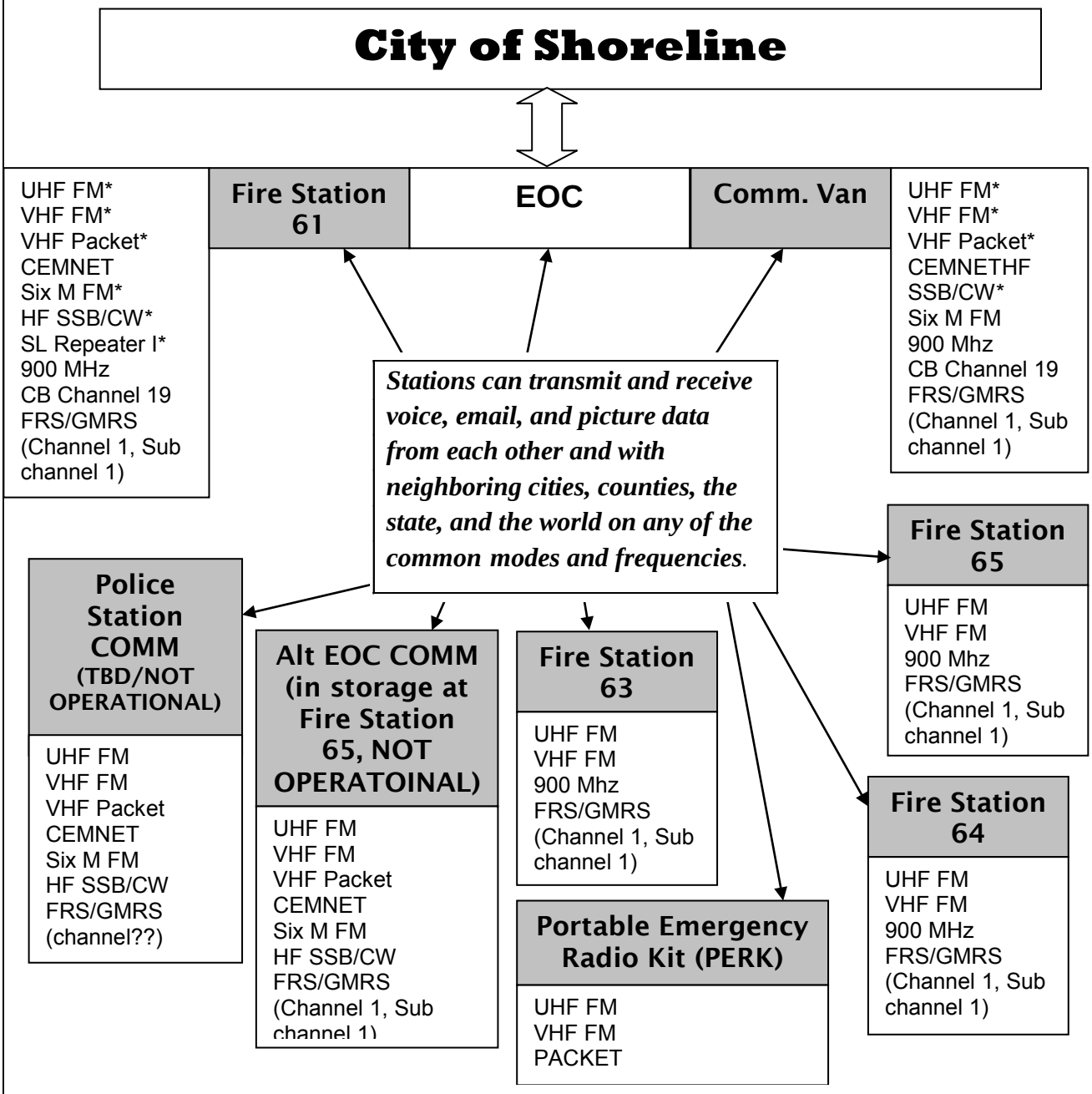
ACS Amateur Radio Capabilities Available for RACES Support of the City of Shoreline, Washington (as of May 2015)

Notes/abbreviations used for following diagram:

| | |
|---|---|
| ACS | Auxiliary Communications Service |
| ARES | Amateur Radio Emergency Services (ARES) is the American Radio Relay League's (ARRL) public service arm for providing and supporting emergency communications for non-government organizations, where needed, when an emergency/disaster strikes. |
| CEMNET | The Washington State Military Department, Emergency Management Division (EMD) operates a statewide, very high frequency (VHF) low-band radio system, as the primary backup communication link between the state EOC and local EOC's throughout the state. It also serves as a link to other agencies such as the state departments of Ecology and Health, the UW Seismology Lab, and Harborview Medical Center (**F1 (45,20 MHz))** CEMNET is tested weekly with local emergency management jurisdictions on the following schedule Tuesdays, 0900. |
| Comm. Van | Communications Van –equipped with public safety (fire and police), air, Coast Guard, and VHF, UHF, AND HF amateur banded radio gear – can be deployed remote sites – is normally housed at a Shoreline Fire HQ Station 61 |
| EOC | City of Shoreline's Emergency Operations Center – collocated at Fire Station 61 |
| HF SSB/CW | High frequency – usually voice (but can be Morse code) – range of frequencies available to provide local through worldwide communications |
| RACES | Radio Amateur Civil Emergency Service (RACES) is a FEMA authorized service provided by FCC licensed, reserve volunteers to government agencies during periods of extraordinary threat or actual damage to public property or health and welfare at the behest of the authorized Emergency Management Coordinator. |

| | |
|---|---|
| SL Repeater I | Shoreline Repeater I– automatic repeating station located on the Christa tower – to extend geographic coverage and rebroadcast UHF FM communications for broader, more consistent coverage (442.825, 103.5+) |
| SL Repeater II | Shoreline Repeater II– automatic repeating station located atop Fire Station 61 – to extend geographic coverage and rebroadcast UHF FM communications for broader, more consistent coverage. (440.300, 103.5+) |
| Six M FM | Very high frequency (around 50 megahertz / 6 meters) – frequency modulated voice communications with local coverage, but signals can “skip” internationally if conditions are right. |
| UHF FM | Ultra high frequency (around 440 megahertz) – frequency modulated voice communications with local, line of sight coverage |
| VHF FM | Very high frequency (around 144 megahertz) – frequency modulated voice communications with local, line of sight coverage |
| VHF Packet | Very high frequency (around 144 megahertz) – digital message (format for sending/receiving typed messages and images (email and pictures)– |
| Note 1 | Most team members own, operate, and maintain home radio capabilities similar to the publically owned capabilities and in many cases more capability than the publically owned, e.g. hand held and car mounted units, to provide additional personal/portable EMERGENCY/DISASTER communications. These units can operate from several hours to several days on standby battery and generator power. |

## City of Shoreline, Police, and Fire Publically Owned, Volunteer Operated And Maintained Radio RACES/ARES Capabilities Diagram:



## Local Checklists and Message forms

Insert reproducible copies of local checklists and message forms in this annex

# Determine Your Readiness for Deployment and Service

**Remember: "First things first AND don't become a victim!"**

1. Are you safe and secure and is your safe and secure situation sustainable for at least three days, i.e. do you have at least a three day supply of durable (will survive aftershocks, rain, wind, snow, etc.) shelter, food, and water for yourself at your location given probable seasonal weather and temperature conditions?

2. If you are safe and secure, are your family and loved ones safe and secure and is their situation sustainable for at least three days, i.e. do they have at least a three day supply of durable (will survive aftershocks, wind, rain, snow, etc.) shelter, food, and water at their location given probable seasonal weather and temperature conditions?

3. If your family and loved ones are safe and secure, have you alerted your out of state contact(s ) and apprised them of your location, health status, sustainability of situation (see item #1), contact information, and intentions and have they acknowledged receipt of your message?

4. If you and your loved ones are safe and secure, check the status of people in your immediate neighborhood or area, e.g. if on the freeway check nearby cars and occupants for injury, resources (shelter, water, food, medical training, emergency training, two way radios, etc.), and start and coordinate planning for next actions to seek shelter and safety.

5. If your neighbors are safe and secure, can your GOKIT sustain you for three days, e.g. the kit has three gallons of water ready to deploy with you? If not can you make your kit "GO KIT READY", e.g. add the 3 gallons of water?

6. If your GOKIT is fully ready to sustain you for at least three days, do you have reliable and serviceable transportation, e.g. is your automobile fully fueled, reliable and in good mechanical condition and ready for transportation? Listen to local radio stations for traffic updates and road closures.

7. Can you begin monitoring 442.825 and/or 440.300 for traffic and to become situationally aware of community needs and conditions? Determine if you have a clear path(s) to your

assigned ACS station, e.g. on the ground confirmation if you are proximate likely and known choke points (bridges, landslide prone slopes, etc.? Listen 442.825 and to local radio stations for traffic updates and road closures.

8. If you have 'cleared' steps 1 thru 7 above to your satisfaction then go to page 7 and follow activation and deployment protocol.

# CITY OF SHORELINE
# 800 MHz RADIO OPERATIONAL GUIDELINES

## Purpose

Establish a guideline for the use of radios to require compliance with all federal and state guidelines.

## Procedures

### Talking on the radio

NIMS (**N**ational **I**ncident **M**anagement **S**ystem) and other regulations require that local agencies must use "Plain Language" and are to no longer use "10"codes when responding to multi-discipline emergencies. This is to prevent varying codes used in different areas from being misinterpreted and adding confusion. Please use "Plain Language".

- When hailing a user; "receiver" from "caller", i.e., Shoreline Base from 102
- When answering a hailing call; answer; Shoreline base, go ahead.
- Information received; "Copy"
- End of transmission; "Your radio call number/location + clear", i.e., "102 CLEAR"
- When contacting multiple users say "Break" between transmissions to each user.

### Radio Courtesies

- Wait until the air is clear before transmitting.
- Information should be clear and concise, keep it to the point, others may be waiting to transmit.
- This is not your personal walkie talkie; it is used by numerous emergency responders. Use, determined to be "playing" will be called in to the City and your radio number identified. This will pinpoint who is misusing the radios.
- If you must have ongoing conversations please use an alternate City channel until you are done.
- Please notify base if you intend to operate on a different channel for any length of time so that you can be located if needed.

### 800 MHz Access

- Multiple agencies including Shoreline Fire and Shoreline Police have radio channels common to ours so that we may contact each other directly. If this happens, alter your radio call number by adding the appropriate name to the front of your call ID, i.e., "CITY 102".

### Emergencies

- Emergency calls have priority to all other calls and should be made on the current primary City channel, ZA SH-CTY, this is the channel monitored by City Hall base and is used because it is the City's highest priority channel. The radio air is to remain "open" between the emergent caller and the base unit until further notice.
- Part of the reason for radio assignments is to better identify the person needing emergency assistance and get them help as quickly as possible. Each radio produces a unique ID and can be used to identify the owner. Please do not trade radios.

****URGENT** IF YOU PRESS THE ORANGE BUTTON;**

- Your radio is automatically changed to channel 16, (Emergency), bank A, B, or C and cannot be changed back. Emergency dispatchers are alerted that you are in a life threatening situation and in need of immediate assistance. The dispatch center will contact you on the emergency channel. You must answer. Turning off the radio cancels the action but does not allow the dispatcher to know it was a mistake. This is taken very seriously, considered priority one and worked until solved.
- If you accidentally press this button, call 801-2700, let City Hall know and stay on your radio.

**Sample Radio Conversation**

- 102 - "EOC Base from 102"
- EOC - "EOC Base, go ahead"
- 102 - "I am at 1206 N 185th St inspecting the building and found that all of the windows for the main lobby on N 185th are broken."
- EOC - "Copy, 1206 N 185th St all windows of the main lobby are broken on N 185th".
- 102 – "Break, 291 did you copy that information?"
- 291 – "This is 291, I did copy. I am responding to the site with plywood and people to secure the building."
- 102 – "102 Copy, 291 is responding to the site with plywood and people to secure the building. 102 clear"
- 291 – "291 clear"
- EOC – "EOC Base copies, thank you, EOC Base clear"

This type of communication is referred to as "verbatim" discussion. Respond to the caller by repeating the content of their message back to the caller. This allows any misunderstanding to be corrected immediately and prevents the likelihood of a poor transmission of information or response. When the information is accurately captured it cuts down on idle radio chatter and allows other monitoring users to be clear on what is taking place. With fewer resources the importance of a correct initial response is critical.

**ESF COORDINATOR:** **Public Works Director**

**LEAD AGENCIES:** **Public Works Department**
**Department of Planning and Community Development**

**SUPPORT AGENCIES:**

Emergency Operations Center
Customer Response Team
Parks, Recreation, & Cultural Services
Fire Department
Police Department
Zone 1 Coordinator
King County Emergency Coordination Center
Washington State Emergency Management Division

## Article I. Introduction

### Section 1.01 Purpose

(a) The purpose of this ESF is to provide for the coordination and organization of capabilities and resources to ensure the delivery of services, technical assistance and evaluation, engineering expertise, construction management, coordination with utility providers for emergency repair of water and wastewater treatment facilities, in consultation with Seattle Public Utilities (SPU), distribution for emergency potable water and ice, debris removal, emergency power and other support to prevent, prepare for, respond to and recover from natural and manmade disasters within the City of Shoreline (City).

(b) The purpose is also to ensure there are procedures in place for the timely restoration and/or replacement and full functioning of community lifeline and other critical infrastructure/facilities and vital public services following disaster events.

### Section 1.02 Scope

This ESF addresses necessary public works and planning and community development activities including, but not limited to:

(a) Damage assessment

(b) Debris and wreckage clearance and disposal

(c) Temporary repair of essential/critical facilities

(d) Inspection of facilities for structural condition and safety

(e) Emergency permitting and inspections

(f) Demolition of unsafe structures

(g) Emergency contracting to support public health and safety, such as providing for debris removal, potable water, ice, and power

(h) Provision of basic sanitation support excluding portable sanitation facilities,

**Section 1.03 Situation**

(a) In a public emergency, damage to public works and engineered systems may be significant. Structures may be destroyed or severely weakened. Homes, public buildings, and other facilities may have to be reinforced or demolished to ensure safety. Public utilities may be damaged and be partially- or fully-inoperable.

*(b)* Debris may make streets and highways impassable. A public emergency may affect the lives of many local response personnel and their facilities and prevent them from performing their prescribed emergency duties. Similarly, equipment in the immediate emergency area may be damaged or inaccessible. Sufficient resources may not be available to local agencies to meet emergency requirements. Federal and/or private assistance may be required to identify and deploy resources from outside the affected area to ensure a timely, coordinated effective response. *(The City of Shoreline has a separately published Debris Management Plan that is a comprehensive plan on how we will manage debris after a debris causing event).*

**Section 1.04 Assumptions**

(a) A public emergency occurring within the region will have a negative impact on the transportation network

(b) A public emergency within or adjacent to the City has the potential to cause loss of life, property, and/or disruption of normal life support.

(c) The City may be heavily dependent on outside agency assistance in order to repair significant damage to infrastructure within the City, including water, sewer, gas, electricity, and other critical infrastructure systems.

(d) Infrastructure damage and communications disruptions will inhibit efficient coordination of transportation support during the immediate and post-disaster period.

(e) Initial damage reports may be fragmented and provide an incomplete picture concerning the extent of damage to critical infrastructure.

(f) Access to emergency areas will be dependent upon the reestablishment of ground and water routes. In many locations, debris clearance for access and emergency road repairs will be given top priority to support immediate lifesaving emergency response activities.

(g) To minimize threats to public health, emergency environmental waivers and legal clearances will be needed to dispose of emergency debris and materials from demolition activities. Under federal regulations, local authorities are responsible for obtaining required waivers and clearances. Federal agencies are responsible for complying with appropriate federal environmental and historic preservation statutes.

(h) Construction equipment and materials and significant numbers of personnel having engineering and construction skills might be required from outside the disaster area. Primary agencies and support agencies will perform tasks under their own authorities, as applicable.

(i) With the loss of essential public services, basic needs such as refrigeration, electrical power, and water may be lost. Expedient temporary means to provide power to predetermined facilities, water, and ice supplies must be coordinated by Public Works.

(j) In terrorist incidents, including Weapons of Mass Destruction (WMD), response leadership functions will be taken on by the Federal Government, specifically those related to assuming control during debris removal operations in the National Response Framework.

(k) The City may be heavily dependent on outside agency and vendor assistance in order to repair significant damage to systems supported by Public Works and Engineering.

(l) Response time will likely be slowed. Primary and Support departments are often “first responders” for transportation incidents, power outages, water main breaks, landslides, and other frequent and typical emergencies. The need to conduct “field size-ups” after a disaster event will slow a department’s initial response. Faced with requests for services routed through the EOC as well as other potentially competing demands for assistance, department control centers will need to prioritize disaster response efforts. Department response to lower priority requests, therefore, may be substantially delayed.

**Section 1.05 Policies**

(a) All activities within ESF 3 – Public Works and Engineering will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) It is the policy of the City to provide public works services to lands and facilities under City jurisdiction. Other services to private property, such as debris collection or fee adjustments, may be offered if approved by the City Council.

(c) Permitting fees and normal inspection procedures will stay in effect following a disaster unless otherwise directed by the City Council.

(d) The City may collect for any costs incurred by its authorized representatives, contractors, and sub-contractors in carrying out any necessary work on property needed to protect public health and safety, including debris removal, demolition of unsafe or abandoned structures, removal of debris and wreckage, and administration costs. The collection of these costs and penalties may include billing the owner or placing a lien on the property and withholding further permits to the permittee or property until the penalties are paid.

(e) It is the policy of the City to utilize the inspection guidance in the Applied Technology Council - ATC-20-1, the field manual for post earthquake safety evaluation of buildings, to survey damaged buildings for safety.

(f) City departments, under an Emergency Proclamation, may need the authority to go on private property to evaluate and repair utilities that jeopardize the integrity of public and private property or threaten public health or the environment.

(g) The City will coordinate issues relating to water and wastewater services with the providers of services to the City: Seattle Public Utilities, Shoreline Water District and Ronald Wastewater District, to ensure an effective and efficient response to water and wastewater issues resulting from a disaster.

(h) Assistance may be obtained from the private sector at cost as provided for by RCW 38.52.390.

(i) As a signatory of the King County Regional Disaster Framework and through local mutual aid agreements, the City will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator and KC ECC, whenever possible.

## Article II. Concept of Operations

### Section 2.01 General

(a) All operations conducted within the scope of Public Works function, will utilize the Incident Command System (ICS) in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF).

(b) The City will coordinate, as appropriate, with jurisdictions within Zone 1 though the Zone 1 Emergency Coordinator (Z1 EC); King County Emergency Coordination Center and Snohomish County Emergency Operations Center and the Washington State Emergency Operations Center to ensure expeditious resolutions to transportation issues resulting from an emergency or disaster.

(c) The Incident Command System (ICS) will be used by the Public Works Department (PW), Department of Planning and Community Development (P&CD), Parks, Recreation and Cultural Services (RRCS) and Customer Response Team (CRT) for all field operations.

(d) The Incident Commander (IC) will provide regular status reports to the Emergency Operations Center (EOC).

(e) A major emergency or disaster may cause extensive damage to property and the infrastructure. Structures may be destroyed or severely weakened. Homes, public buildings, bridges, and other facilities may have to be reinforced or demolished to ensure safety. Debris may make streets and highways impassable. Public utilities may be damaged or be partially or fully inoperable.

(f) Access to the disaster areas may be dependent upon the re-establishment of ground routes. In many locations, debris clearance and emergency road repairs will be given top priority to support immediate lifesaving emergency response activities.

(g) Rapid damage assessment of the disaster area will be required to determine potential workload.

(h) Water and wastewater services are provided by special districts through franchise agreements. During an emergency or disaster, the reestablishment of services will be the responsibility of the service provider. However, the City will assist with efforts within the City as resources allow.

(i) The City will incorporate special districts into the City's exercise and drill activities and will coordinate with the districts in future planning efforts.

**Section 2.02 Organization**

(a) The City's Public Works Department is the lead agency for coordination of public works activities within this ESF. The Planning and Development Services is the lead agency for the permitting and building safety activities with this ESF.

(b) The City's staff will be mobilized on a case-by-case basis. This will normally be done by telephone or through the City's emergency notification procedures. As communication systems may fail in a major event, PW's, PDS, PRCS, and CRT staff should report to work as soon as possible following obvious major disasters according to the City's Emergency Staff Plan. (See ESF 5 Appendix E).

(c) Any site designated by the Incident Commander (IC) may serve as any of the six ICS facilities: incident command post, staging area, base, camp, helibase or heliport, or in any other function capacity appropriate for the situation.

(d) Area command will be utilized when multiple department/agencies are conducting field operations.

(e) Communications between the Incident Commander and the EOC will be through established channels. (See ESF #2 - Communications)

(f) The Directors of Public Works and Department of Planning and Community Development or their designees will report to the EOC to provide direction and control for department resources and coordination with the EOC. (See ESF 5, Appendix C, EOC Activation/Call out Information).

(g) Department personnel will operate according to departmental standard operating procedures (SOPs) and by exercising reasonable personal judgment when unusual or unanticipated situations arise and command guidance is not available.

(h) Significant numbers of personnel with engineering and construction skills along with construction equipment and materials may be required from outside the disaster area.

(i) The City may utilize volunteer emergency workers to assist with response efforts in accordance with WAC 118-04. (See ESF 7 Resource Support)

(j) Assistance from the County, State, and Federal governments may be needed to clear debris, perform damage assessments, structural evaluations, make emergency repairs to essential public facilities, reduce hazards by stabilizing or demolishing structures, and provide emergency water for human health needs and fire fighting.

(k) Resources or public works assistance may be available through existing mutual aid agreements and/or contracts through private businesses within the City, including using the King County Regional Disaster Framework or the State of Washington Mutual Aid System (WAMAS) or other mutual aid agreements.

(l) Emergency environmental waivers and legal clearances may be needed for disposal of materials from debris clearance and demolition activities for the protection of threatened public and private improvements.

(m) Earthquake aftershocks will require re-evaluation of previously assessed structures and damages.

(n) Water supply systems in the City are provided by Seattle Public Utilities (roughly west of I-5) and Shoreline Water District (roughly ease of I-5).

**Section 2.03 Actions**

(a) Preparedness:

(i) Coordination with Emergency Management (ESF 5) to assess potential damage, loss of functionality of essential facilities and volume of debris (by category) to scale missions requirements for each function under ESF 3

(ii) Conduct planning with other Public Works and Utility agencies and other emergency support functions to refine Public Works and Engineering operations.

(iii) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(iv) Manage inventory of equipment and other pre-designated assets that are essential to meeting the engineering and public works obligations.

(v) Maintain a list of Public Works assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources if applicable, (To date the City of Shoreline does not own any resources that are listed in the NIMS Resource Typing guide).

(vi) Assign and schedule sufficient personnel to implement public works tasks for an extended period of time,

(vii) Conduct vulnerability analysis at critical facilities and make recommendation to improve the physical security

(viii) Ensure lead agency personnel are trained in their responsibilities and duties,

(ix) Develop and implement emergency response and transportation strategies,

(x) Develop and present training courses for personnel, and

(xi) Maintain liaison with support agencies,

(xii) Conduct All Hazards exercises involving Public Works functions

(b) Response:

(i) Coordinate operations at the Shoreline EOC and/or at other locations as required,

(ii) Establish and maintain of a system to support on-scene direction/control and coordination with the EOC, King County ECC, WA State EOC, or other coordination entities as appropriate,

(iii) Coordinate with support agencies to develop, prioritize and implement strategies for the initial response to EOC requests,

(iv) Establish communications with appropriate field personnel to ensure readiness for timely response,

(v) Evaluate and task the public works and engineering requests for threatened and/or impacted areas, Implement Disaster Assessment Teams to determine post-event effect on emergency services, functional group resources and the ability to perform Continuity of Operations for essential functions,

(vi) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(vii) Coordinate with support agencies, as needed, to support emergency activities,

(viii) Coordinate with other jurisdictions' to obtain resources and facilitate an effective emergency response among all participating agencies, (If the EOC is activated this will be managed through the EOC).

(ix) Monitor and direct communication resources and response activities to include pre-positioning for response/relocation due to the potential impact(s) of the emergency situation

(x) Maintain a list of construction contractors and engineering firms that regularly assist the City

(xi) Prioritize and implement emergency clearing of debris from transportation routes to provide access for emergency response personnel, equipment and supplies in areas affected by an emergency or disaster

(xii) Provide trained personnel/crews to restore services and/or repair assets

(xiii) Provide equipment and trained personnel to perform debris clearance

(xiv) Provide heavy equipment and trained operators to perform work

(xv) Arrange for contracting with design or engineering professionals, contractor and equipment suppliers to augment/replace critical goods and services.

(c) Recovery

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

(d) Mitigation

(i) Mitigation activities for this ESF are covered in the City of Shoreline Hazard Mitigation Plan.

## Article III. Responsibilities

### Section 3.01 Lead Agency

**Public Works**

(a) Maintain operation of the public right of way, storm drain and street systems.

(b) Coordinate with local water and sewer purveyors as appropriate to identify and resolve issues where regional and local facility operations could affect one another. The department will communicate health and environmental hazards to the EOC and other appropriate agencies.

(c) Coordinate damage assessments of PW facilities, transportation routes and essential city owned buildings with Fire, Police and City staff assigned to this function. The department will provide for emergency repair and restoration of city owned facilities.

(d) Provide debris removal, emergency protective measures, emergency temporary repairs and/construction to:

(i) Maintain passable vehicular circulation on priority routes;

(ii) Control flooding on public drainage ways or resulting from the failure of public drainage ways;

(iii) Mitigate damage to public utilities;

(iv) Mitigate damage to any facility, public or private, resulting from the failure of public utilities.

NOTE: Detailed information for the removal and disposal of debris can be found in the City of Shoreline Debris Management Plan, published in a separate document.

(e) Coordinate with private utility companies and other private and public organizations responsible for drinking water, sanitary sewer, electricity, natural gas, telephone and solid waste collection services (community lifelines) to ensure all response and recovery operations within the City are done in an efficient and effective manner.

(f) Coordinate the containment and recovery efforts of leaks and spills that are determined to be of a non-emergent nature: i.e. oil sheen on waterways, diesel spills on roadways and parking lots. The Fire Department will coordinate efforts that are determined to be of an emergency nature (i.e. hazards to life or property).

(g) Perform and/or contract for major recovery work as appropriate for City-owned buildings and Public Works infrastructure.

(h) Provide expertise and recommendations for stability of slopes and sensitive areas.

(i) Coordinate all operations and resources in the field from the incident command post during response and recovery efforts

**Department of Planning and Community Development**

*(a)* Support initial inspection of structural conditions and safety as requested.

*(b)* Provide building inspections of public and private buildings as requested.

*(c)* Provide planners and technical staff to support fire, public works, and CRT with assessment, mapping and technical support.

*(d)* Provide enforcement actions: closing buildings, limiting entry, etc.

*(e)* Coordinate with the EOC and Public Information Officer on warnings, closures, and other public information.

*(f)* Provide expertise and recommendations for reconstruction, demolition and mitigation during the recovery period including stability of slopes and sensitive areas.

*(g)* Provide for the demolition of damaged and/or abandoned structures posing a threat to human safety.

*(h)* Assess and make recommendations for environmental damage to bogs, creeks, streams, slopes, bluffs, shorelines, and lakes.

*(i)* Review repair, reconstruction and replacement of structures for compliance with building, land use, and environmental regulations.

*(j)* Where necessary and appropriate, issue emergency permits to protect threatened public and private improvements.

*(k)* Document damages and costs.

*(l)* Maintains a listing of construction contractors and engineering consulting firms with active contracts who would be available to assist with infrastructure repairs.

*(m)* Maintains an alternate list of contractors and engineers who do not have active Jurisdiction contracts, but who have expressed interest in assisting.

**Section 3.02 Support Agency**

(a) Emergency Operations Center

(i) Request assistance, as appropriate, from multi-aid partners, Z1 Emergency Coordinator, KC ECC, and WA State EOC.

(ii) Coordinate incoming resources with the supplier's jurisdiction and incident command post.

(iii) Record information provided by the Incident Commander.

(iv) Track all information during response and recovery, including but not limited to, resources requested and received, expenses, and damages to report to KC ECC and WA State EOC for possible disaster assistance.

(v) Provide assistance to field activities as needed.

(b) All City Departments

(c) Maintain all available departmental equipment in serviceable and ready condition. Customer Response Team (CRT)

The Shoreline Customer Response Team is the point of contact for citizens' incoming trouble calls and dispatches a team to respond to necessary immediate repairs.

Responsibilities include:

(i) Provide customer communications and receive incoming emergency calls for repairs such as flooding, trees down, land movement and other disaster related problems.

(ii) Dispatch response teams to provide immediate services depending on available resources.

(iii) Coordinate with the Police and Fire Departments to provide initial damage assessment of city and critical public buildings.

(iv) Track the needs and locations of emergency requests and situations.

(v) Document information for the EOC and other responders.

(vi) Appropriate staff will be assigned to Public Works Maintenance Division to provide support when requested or called out by the Public Works Maintenance Division.

(d) Parks, Recreation and Cultural Services

(i) Appropriate staff will be assigned to Public Works Maintenance Division to provide support when requested.

(ii) Identify appropriate staging areas as needed.

(iii) Coordinate shelter, food and support for incoming resource teams.

(e) Fire Department

(i) Provide Support in beginning the initial Rapid Damage Assessment/Wind Shield Survey Inspections until Public Works Operations staff can assume the routes.

(ii) Provide support in establishing on-scene command posts.

(iii) Provide support in evacuation operations of citizens as appropriate.

(iv) Provide support to Public Works for non-hazardous spills or leaks.

(v) Provide emergency building shoring.

(f) Police Department

(i) Provide lead and support in evacuation operations as appropriate.

(ii) Provide assistance in implementing road closures, traffic control, and detours for roadways.

(iii) Provide perimeter control due to unsafe conditions.

(g) Zone 1 Coordinator

(i) Coordinate incoming requests for resources from jurisdictions within Zone 1.

(ii) Facilitate the acquisition and coordination of additional resources through KC ECC and State Emergency Operations Center.

(h) KC ECC

(i) Upon request, King and Snohomish Counties may provide coordination of county Public Work resources to provide support when local jurisdictions have exhausted their resources.

(ii) The KC ECC coordinates requests for resources to the state.

(i) State Emergency Operations Center

(i) Provide coordination of State resources to provide support when local jurisdictions, as appropriate, when all local, regional and county resources have been expended.

(ii) Facilitate the requisition of resources from other jurisdictions in the state through WAMAS.

(iii) Facilitate the requisition of resources from other states through the Emergency Management Assistance Compact (EMAC).

(iv) Request and coordinate Federal resources through the Federal Emergency Management Agency (FEMA).

## Article IV. Appendices

(a) Public Works Checklist

(b) Utility Emergency Contact Information

(c) Disaster and Situation Information Checklist

(d) Damage Assessment

Annex 1: Rapid Damage Assessment Routes and Checklists

## Article V. References

(a) National Response Framework

(b) National Incident Management System

(c) City of Shoreline Debris Management Plan

(d) Washington State Comprehensive Emergency Management Plan

(e) King County Regional Disaster Plan

(f) Applied Technology Council - ATC-20-1

(g) RCW 38.52

(h) WAC 118

## A. PRE-PLANNING

_____1. Identify evacuation and damage assessment routes

_____2. Recommend maps

_____3. Write SOP's for hazardous material response

_____4. Maintain minimum inventories:

a) Barricades
b) Portable sign stops
c) Traffic cones
d) Sand and rock
e) Sandbags

_____5. Develop lists of outside resources that might be utilized

_____6. Train personnel in damage assessment

_____7. Develop lists of resources

_____8. Participate in emergency planning and exercises

## B. EMERGENCY PERIOD - PUBLIC WORKS

_____1. Alert key personnel

_____2. Provide damage assessment with Fire Department

_____3. Placard structures as appropriate.

_____4. Determine integrity of pre-selected evacuation routes.

_____5. Clear routes of debris and wreckage.

_____6. Provide barricades and assist with roadblocks.

_____7. Support other services with:

a) Heavy rescue equipment
b) Personnel
c) Other assistance, as required

_____8. In the event of a Hazardous Materials incident:

a) Coordinate with the Fire Department on the containment and recovery efforts of leaks and spills that are determined to be of an non-emergent nature: i.e. oil sheen on waterways, diesel spills on roadways and parking lots.
b) Provide dirt, sand or shavings to absorb liquid materials, as required.

_____9. Document costs

_____10. Review Debris Management Plan and begin coordinated debris removal and disposal activities.

**C. PLANNING & DEVELOPMENT**

_____1. Alert key personnel.

_____2. Support initial inspection of structural conditions and safety as requested.

_____3. Provide building inspections public and private buildings as requested.

_____4. Provide planners and technical staff to support fire, public works, and CRT with assessment, mapping and technical support.

_____5. Provide enforcement actions: closing buildings, limiting entry, etc.

_____6. Provide engineering services and perform/contract for major recovery work, as appropriate.

_____7. Coordinate with the EOC and Public Information Officer on warnings, closures, and other public information.

_____8. Provide expertise and recommendations for reconstruction, demolition and mitigation during the recovery period including stability of slopes and sensitive areas.

_____9. Provide for the demolition of damaged and/or abandoned structures posing a threat to human safety.

_____10. Assess and make recommendations for environmental damage to streams, bluffs, shorelines, and river banks.

_____11. Review repair, reconstruction and replacement of structures for compliance with building, land use, and environmental regulations.

_____12. Where necessary and appropriate, issue emergency permits to protect threatened public and private improvements.

_____13. Document damages and costs.

**D. EMERGENCY OPERATIONS CENTER**

_____1. Send representative to EOC.

_____2 . Provide EOC direction in the event of a Public Works incident.

_____3. Notify EOC of prioritized roads to be cleared.

_____4. EOC representative will coordinate Zone #1 cities and with bordering agencies for information and resources.

_____5. EOC representative will keep the EOC staff updated on the status of roads, buildings and structures and other public works activities.

_____6. If there is a long-term situation, the status of roads will be updated as often as necessary, at least once a day.

**E. RECOVERY PERIOD**

_____1. Provide direction and control for significant recovery activities.

_____2. Coordinate a Recovery Team when needed.

_____3. Support clean up and disposal.

_____4. Restore public arterials and facilities.

**Electric / Power**
Seattle City Light (206) 684-3000
http://www.seattle.gov/light/

**Sewer**
Ronald Wastewater Management (206) 546-2494
http://www.ronaldwastewater.org/

**Water**
Seattle Public Utilities (206) 684-3000
http://www.seattle.gov/util/MyServices/Water/index.htm

-OR-

Shoreline Water District (206) 362-8100
http://www.shorelinewater.org/

(Water District Coverage / Service Depends on Location)

**Telephone**
Century Link (formerly Qwest) (800) 244-1111
http://www.centurylink.com

-OR-

Verizon (800) 483-1000
http://www.verizon.com/

**Garbage**
CleanScapes (206) 763-4444
http://www.cleanscapes.com

**Solid Waste Disposal**
Transfer Station
(Garbage and Recycling)
2300 North 165th Street (206) 296-4466

http://your.kingcounty.gov/solidwaste/facilities/shoreline-transfer.asp?ID=346

# Appendix C – Disaster and Situation Information Checklist

Operations Staff will be assigned to collect information about the incident and relay that information the City's EOC when it is activated so decisions can be made on how best to utilize and plan for resources. Planning must include an assessment of the present and **projected** situation, constantly considering contingencies. Proactive incident management depends on an accurate assessment of the incident's potential and a prediction of likely outcomes.

In addition to assessment of the situation status, there is a critical need to maintain information about resources committed to the incident and projected resource requirements.

Operational Phase:

- ☐ Collect organize and analyze information regarding the incident and resources.
- ☐ Disseminate information to Shoreline EOC staff.
- ☐ Prepare displays, situation boards, briefings, and reports as needed.
- ☐ Develop an effective incident action plan with the Planning Section Chief.
- ☐ Anticipate changes in resource needs.
- ☐ Update displays and maps as new information becomes available.
- ☐ Document and maintain files on EOC activities.
- ☐ Organize current information for the EOC Situation Report and forward to the Planning Section Chief.

Information of common interest and use to the overall emergency, and that which provides the most complete picture of the situation, will be displayed. Other staff may either report information to the EOC Manager, the Public Information Officer or enter their information in the Emergency Operations Center SharePoint site. ICS forms can be used to document information and event progression in the field. Copies of ICS forms are on the city's computer system and hard copies are in the EOC.

# MISSION ESSENTIAL SERVICES

Please **'X'** the box in the appropriate column. If you have ***Reduced Capacity*** or ***Non-functional*** systems, please indicate a reason why in the ***comments*** area of the category.

| ***Category*** | ***Normal*** | **Reduced Capacity** | ***Non-Functional*** | ***No Info*** | |
|---|---|---|---|---|---|
| | | | | | |
| **Transportation Overall** | | | | | |
| **Streets, Roads, Bridges** | | | | | |
| **Rail Service** | | | | | |
| **Transit Service** | | | | | |
| **Pipelines** | | | | | |
| ***Comments:*** | | | | | |
| ***Communications*** | | | | | |
| Telephone Service | | | | | |
| Cell service | | | | | |
| Radio System | | | | | |
| Broadcast Radio, TV, Cable | | | | | |
| Internet, LAN, WAN | | | | | |
| ***Comments:*** | | | | | |
| **Water/Wastewater** | | | | | |
| Drinking Water | | | | | |
| Wastewater | | | | | |
| Storm Water | | | | | |
| Solid Waste | | | | | |
| ***Comments:*** | | | | | |
| **Fire Fighting** | | | | | |

| | | | | | |
|---|---|---|---|---|---|
| Fire Fighting Capability | | | | | |
| ***Comments:*** | | | | | |
| **Mass Care** | | | | | |
| Shelters | | | | | |
| ***Comments:*** | | | | | |
| **Health and Medical** | | | | | |
| Hospitals & Clinics | | | | | |
| Adult Care Facilities | | | | | |
| Public Health Services | | | | | |
| Medical Labs & Supplies | | | | | |
| ***Comments:*** | | | | | |

| | | | | | |
|---|---|---|---|---|---|
| **Hazardous Materials** | | | | | |
| Haz-Mat Response Capability | | | | | |
| ***Comments:*** | | | | | |
| **Food** | | | | | |
| Food Supply | | | | | |
| ***Comments:*** | | | | | |
| **Power** | | | | | |
| Electric Utilities | | | | | |
| Natural Gas | | | | | |
| Petroleum | | | | | |

| | | | | | |
|---|---|---|---|---|---|
| *Comments:* | | | | | |
| Emergency Services | | | | | |
| E-911, PSAPs | | | | | |
| Emergency Operations Centers | | | | | |
| EMS, Ambulance | | | | | |
| ***Comments:*** | | | | | |
| **Financial Services** | | | | | |
| Financial Institutions | | | | | |
| **ATMs** | | | | | |
| ***Comments:*** | | | | | |
| **Correctional Facilities** | | | | | |
| Holding cells | | | | | |
| ***Comments:*** | | | | | |
| **Government Services** | | | | | |
| Other City Systems | | | | | |
| Schools | | | | | |

| | | | | | |
|---|---|---|---|---|---|
| ***Comments:*** | | | | | |
| **Law Enforcement** | | | | | |
| **Police Services** | | | | | |
| **Public Safety Status** | | | | | |
| ***Comments:*** | | | | | |
| ***Overall Assessment*** | | | | | |

## I. INTRODUCTION

A. Purpose

To provide urgent initial, detailed, and structural damage assessment in order to prioritize initial response activities and determine the immediate need for outside assistance. Also, to provide for restoration or relocation of critical services in damaged city buildings.

B. Scope

This Appendix applies to all assessment activities in the City of Shoreline related to damage resulting from natural and human-caused disasters.

## II. POLICY

The head of each Shoreline Department is responsible for establishing policy and procedures for assessing damage of their departments and facilities and reporting that information to the EOC.

## III. PLANNING ASSUMPTIONS

A. There is a need for three types of damage assessment:

1. Initial Rapid, for an expedient assessment of what has happened city-wide to prioritize initial response activities and determine the immediate need for outside assistance. (Often referred to as Windshield Survey).

2. Detailed, to document the magnitude of private and public damage for planning recovery activities and to justify requests for state and federal financial assistance.

3. Structural, to evaluate buildings and provide safety placards.

B. Initial reports may be fragmented and provide an incomplete picture of the extent and magnitude of damage to the community.

C. There may be a shortage of individuals qualified to assess the damage.

D. Special purpose districts, and public utilities will make detailed damage assessment reports to the City EOC.

E. Schools are expected to make an initial damage assessment of their buildings and report to the EOC if activated or to the Customer Response Team.

## IV. CONCEPT OF OPERATIONS

After any hazardous event that impacts the City of Shoreline, other than one leading to a routine emergency such as a fire, accident, etc., a damage assessment of the affected area will be conducted.

A. General

1. There are no city departments whose inherent function would include an assessment of damage throughout the city; therefore, this must be a cooperative effort among all departments capable of contributing to the effort.

2. The EOC Planning Section will coordinate and compile damage assessment information supplied by all departments that employ field crews (i.e., Fire, Police, Public Works, CRT, P&CD, and Park Maintenance staff).

3. Primary damage assessment shall be done by on-site Fire and Police staff immediately following a disaster. Public Works operations staff will provide secondary damage assessment, including utility connections of city buildings and forward the information to the EOC.

4. Public Works will be responsible for making necessary and reasonable repairs to city facilities or designated shelters.

5. The EOC will prioritize damage assessments performed by other city departments for city buildings. Priority will be given to facilities that provide critical and essential services.

6. All city departments will report to the EOC the status of the facilities for which they are ordinarily responsible.

B. Rapid Damage Assessment (Windshield) is for the rapid assessment of what has happened city-wide to prioritize initial response activities and determine the immediate need for outside assistance.

1. A rapid (or windshield) damage assessment is carried out as rapidly as possible to provide first responders and the Emergency Operations Center (EOC) with an immediate sense of the type and magnitude of damage. The focus is on:
   - threat to life
   - fires
   - immediately dangerous situations such as hazardous material incidents, trees down, landslide risk, etc.
   - safety of roads, bridges and transportation
   - communications infrastructure
   - damage to critical city and business structures

2. Rapid damage assessment will generally begin during the hazardous event, such as a flood or windstorm, or immediately following, such as after an earthquake, and continue until the EOC has developed a picture of the types and magnitude of damage throughout the city and King County.

3. After the initial emergent event of a disaster, Fire crews will begin driving the initial pre-established rapid damage assessment routes (Windshield Surveys). On duty police staff will immediately check on the status of the city's critical assets and high profile sites. Once city operations staffs are available they will assume driving the routes from the Fire Department so as to allow the Fire department to deploy staff to engage in calls for service. Routes and forms are in the Rapid Damage Assessment Packets located in all City Operations vehicles, at each Fire Department, at the Police Department and at the EOC. (See Annex 1 – Rapid Damage Assessment Forms & Routes)

4. Although difficult to contemplate, it may be prudent to bypass an apparently urgent situation to continue damage assessment activities. There may be an even more urgent need down the road.

5. Life and safety items identified while doing the Rapid Damage assessment will be reported immediately to Police or Fire dispatch

and/or to the EOC depending on who identifies it. All items will be documented on the forms and brought to the EOC to be given to someone or team designated to evaluate the damage. This information will assist in determining if a Proclamation of Disaster should be declared by the City Manager.

6. Public Works and Planning and Department of Planning and Community Development will coordinate post-disaster safety evaluation of damaged buildings and structures at the appropriate time after preliminary damage assessment. Public Works will take the lead on structures such as bridges and pipes; Planning taking the lead on buildings covered under the International Building Code. The preferred method of post-earthquake safety evaluation will be the use of ATC-20 (Applied Technology Council).

7. The EOC will coordinate damage assessment to ensure appropriate prioritization of activities and provide for the coordination and/or allocation of City resources.

8. The city may want to document reports of damage for private property so as to best identify an accurate picture of the city-wide damage status.

9. Surveys will be compiled in the EOC and information obtained forwarded to King County Department of Emergency Management.

10. Public Works will coordinate training of city staff in primary evaluation techniques.

11. Buildings can be placarded by the Customer Response Team as Green – safe, Yellow – limited safe, or Red – no entry at this time. Appeals of these decisions can be directed to Planning and Development.

12. Following rapid damage assessment, and as necessary, responders will establish response priorities, attending to the needs of the public in a way that provides maximum life-saving potential. If local resources are insufficient to respond to all urgent needs in a timely manner, additional resources will be requested through mutual aid agreements or through the EOC.

13. EOC staff will analyze the information received, develop city-wide response priorities and coordinate resources accordingly. EOC staff will also disseminate damage information to appropriate government officials, the media, and the public.

14. Public Works will coordinate with Public Health - Seattle & King County regarding impacts to water and sewer systems and the health implications thereof.

**C. Detailed Damage Assessment**

1. A detailed damage assessment is needed to document the magnitude of private and public damage for planning recovery activities, to justify requests for state and federal financial assistance, and to meet the informational needs of the public.

2. Detailed damage assessment will generally begin following the completion of response activities to protect life and property. Depending on the nature and magnitude of damage, detailed assessment could last for several days.

3. Initial detailed damage assessment of residential and business structures will be conducted by the Planning and Development Services with the support of other departments, or outside consultants. This data will be provided to the EOC which will add value and insurance information. When requested, EOC or emergency management staff will forward private damage assessment information to the state for determination of whether the City of Shoreline qualifies for state and federal assistance for individuals, families and businesses.

4. Depending on the nature of the hazard, such as an earthquake or flood, Department of Planning and Community Development will conduct structural inspections of publicly or privately owned structures and businesses to determine whether they are safe to enter or to occupy. Public Works will inspect utilities and road structures. Subsequent engineering evaluations to determine corrective action or to appeal the city's action, will be the responsibility of the property owner or occupant.

5. Additional agencies may be involved with private damage assessment depending on the nature of the hazard, information received by the EOC, information discovered by the building inspectors, or decisions made by the Recovery Team, if established.

6. Detailed damage assessment of public property and facilities will be conducted by the cognizant organization. Specialized assistance will be requested from appropriate county organizations or private sources, as appropriate.

7. Any Shoreline Department or public agency suffering damage from a hazardous event will document the damage on preliminary damage assessment forms available from the EOC or emergency management staff.

8. Completed preliminary damage assessment forms will be returned to the EOC or emergency management staff. Staff will compile the information and, when requested, forward it to state emergency management for a determination of whether Shoreline qualifies for state and federal public assistance.

9. Generally, preliminary damage assessment forms must be provided to the state before any determination is made as to the availability of public assistance.

10. EOC staff will disseminate damage information to appropriate government officials, the media, and the public.

**D. Structural Damage Assessment**

1. A more detailed structural damage assessment may be carried out in a variety of ways, by:

   - City staff in the building
   - Customer Response Team
   - Planning and Development Services staff
   - With King County Support
   - Outside structural engineers

2. This is a more detailed damage assessment by structural engineers and will be used to identify structures that need to be closed, demolished, or become a post-disaster project.

**E. Administrative Services Department**

ASD will develop a system for tracking of necessary financial expenditures for securing and repairing city facilities and equipment.

## I ANNEXES

Annex 1 – Rapid Damage Assessment Forms & Routes

# ANNEX 1 – RAPID DAMAGE ASSESSMENT FORMS & ROUTES

## RAPID DAMAGE ASSESSMENT

**Route** _____ **Date** _____ **Time** _____ **Priority**

**Name(s):** _____

**Location/Address:** _____

**Type of Structure:** Residential _____ Multi-Family _____ Commercial _____

**Road Conditions:** Passable _____ Impassable _____

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Road is gone | Yes | No | Cracks | Yes | No | Sinkholes | Yes | No |
| How much road remains? | | % | Trees/Debris Blocking | Yes | No | Uneven Pavement | Yes | No |

**Life Safety:**

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Fire | Yes | No | Trapped people | Yes | No | Deceased | # | |
| Structure Collapse | Yes | No | Injured | Yes | No | Evacuation | Yes | No |

**Utilities:**

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Wires | Up | Down | Broken Utility Poles | Yes | No | Water coming out of the ground | Yes | No |
| Arcing/Sparking | Yes | No | Smell of Gas | Yes | No | Sewage coming out of the ground | Yes | No |

**Ground/Soils:**

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Slide | Yes | No | Washout | Yes | No | Sinkhole | Yes | No |

**Resources Needed:**

| | | |
|---|---|---|
| Law Enforcement | Public Works | Water |
| EMS | Transportation | Gas |
| Fire | Food | Electric |
| Search & Rescue | Sheltering | Building & Safety |

**Potential/Imminent Hazards:**

_____

**Notes:**

_____

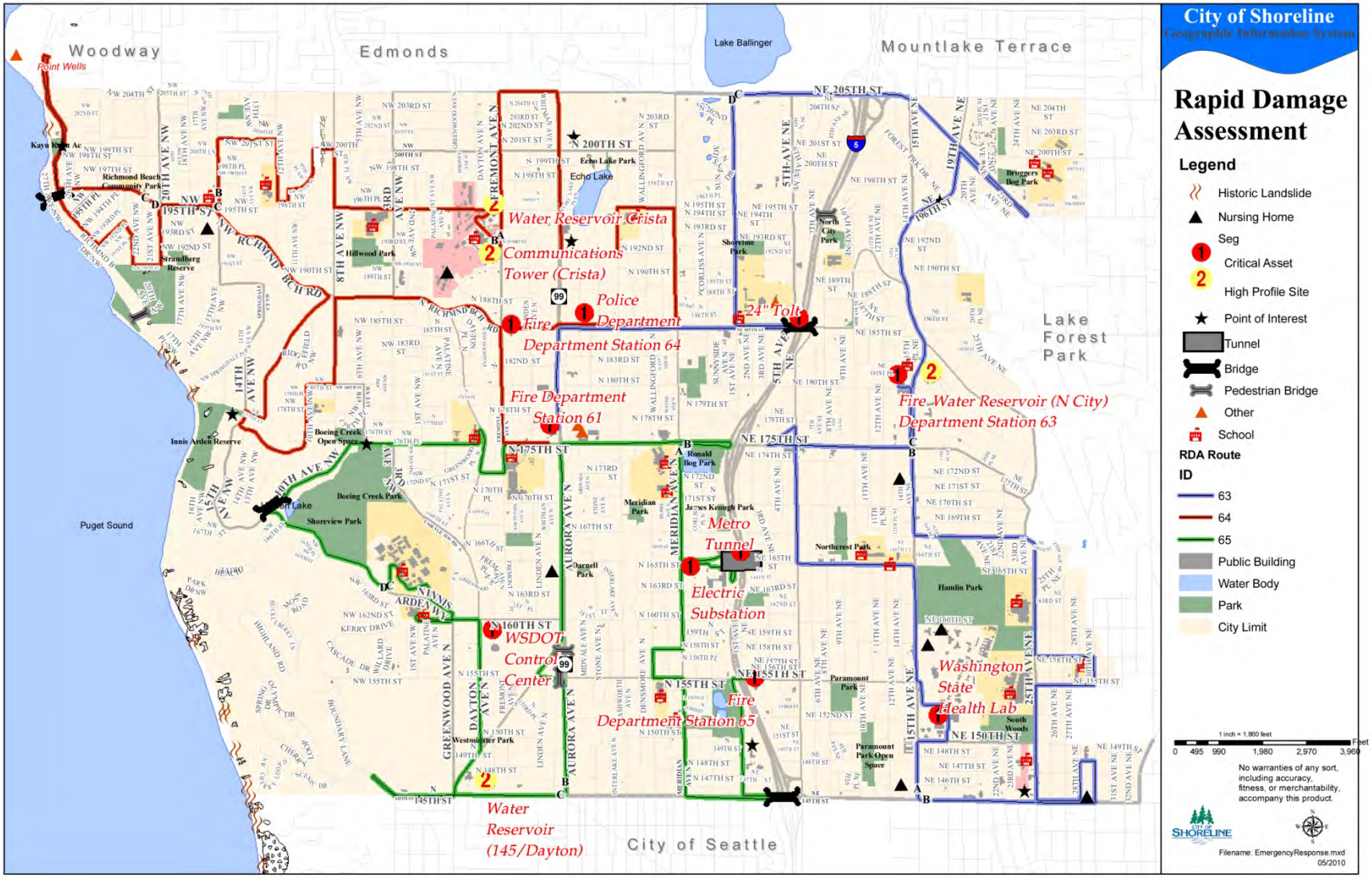
_____

_____

_____

Rapid Damage Assesment.xls10/22/2010

# ANNEX 1 – RAPID DAMAGE ASSESSMENT FORMS & ROUTES



# ANNEX 1 – RAPID DAMAGE ASSESSMENT FORMS & ROUTES

**City Of Shoreline** **RAPID DAMAGE ASSESSMENT** **Overview**

**Route 63**

**Starting Address**
**1410 NE 180th St**

| Segment - Time | Looking at... | Physical Location | Note |
|---|---|---|---|
| A - 8 Minutes | Water Storage Tanks, Towers, steel 3.7 MG, .4 Concrete | 18012 15th Ave NE | High Profile |
| | I-5 Underpass - N 175th St | I-5 @ N 175th St | High Profile |
| | Shoreline Library | 345 NE 175th St | |
| | Ridgecrest Elementary School | 16516 10th Ave NE | |
| | Shoreline School District Bus Barn & Fuel Site | 1224 NE 165th St | |
| | Fircrest Special Housing unit | 15230 15th Ave NE | |
| | W.R. Geibt State Public Health Lab | 1610 NE 150th St | Critical Asset |
| B - 6 Minutes | KC Housing Authority - Paramount Apartments | 1750 NE 145th St | |
| | Pinehurst Park Nursing Home | 2818 NE 145th St | |
| | Watson Groen Christian School | 2400 NE 147th St | |
| | Shorecrest High School | 15343 25th Ave NE | |
| | Briarcrest Elementary School | 2715 NE 158th St | |
| | Kellog Middle School | 16045 25th Ave NE | |
| C - 5 Minutes | I-5 Underpass - N 205th St / State Route 104 | I-5 @ N 205th ST | High Profile |
| D - 7 Minutes | Spartan Gym | 18560 1st Ave NE | |
| | Sports Stadium | 18560 1st Ave NE | |
| | I-5 Overpass - NE 185th St (24" watermain crosses here) | I-5 @ NE 185th St | High Profile |
| | Shoreline Police Station | 1206 N 185th St | Critical Asset |
| | Shoreline City Hall | 17500 Midvale Ave N | Critical Asset |

All Routes Overview.xls10/22/2010

# ANNEX 1 – RAPID DAMAGE ASSESSMENT FORMS & ROUTES

**City Of Shoreline** **RAPID DAMAGE ASSESSMENT** **Overview**

**64**

**Starting Address**

**719 N 185th St**

| Route | Segment - Time | Looking at... | Physical Location | Note |
|---|---|---|---|---|
| | A - 7 Minutes | Aurora Village | Aurora Ave N @ N 200th St | |
| | | Water Storage Tanks, Elevated Tanks, Steel, 1 & 2 MG | Fremont Ave N @ N 195th St | High Profile |
| | | Radio Tower | 19303 Fremont Ave N | |
| | | Kings Elementary School | 19531 Dayton Ave N | |
| | B - 7 Minutes | Einstien Middle School | 19343 3rd Ave NW | |
| | | Syre Elementary School | 19645 12th Ave NW | |
| | C - 7 Minutes | Richmond Beach Saltwater Park - E Soils | 2021 NW 190th St | |
| | | Richmond Beach Saltwater Park - Ped Bridge over RR | 2021 NW 190th St | High Profile |
| | | Vehicle Bridge to 27th Ave NW | Richmond Beach Dr @ NW 195th Ct | High Profile |
| | | Point Wells | 20500 Richmond Beach Dr | |
| | D - 7 Minutes | No specific items for review | | |

All Routes Overview.xls10/22/2010

# ANNEX 1 – RAPID DAMAGE ASSESSMENT FORMS & ROUTES

**City Of Shoreline** **RAPID DAMAGE ASSESSMENT** **Overview**

**65**

**Starting Address**
**145 NE 155th St**

| Route | Segment - Time | Looking at... | Physical Location | Note |
|---|---|---|---|---|
| | **A - 7 Minutes** | I-5 Underpass - NE 155th St | I-5 @ NE 155th St | High Profile |
| | | Aegis Assisted Living Facility | 15100 1st Ave NE | |
| | | I-5 Overpass - NE 145th St | I-5 @ NE 145th St | High Profile |
| | | Evergreen Elementary School | 15201 Meridian Av eN | |
| | | Parkwood Elementary School | 1815 N 155th St | |
| | | Metro Bus Barn & Bus Tunnel under I-5 | Meridian Ave N @ N 163rd St | |
| | | Shoreline Electrical Substation | Meridian Ave N @ N 163rd St | Critical Asset |
| | | Meridian Park Elementary School | 17077 Meridian Ave N | |
| | **B - 5 Minutes** | Shoreline City Hall | 17500 Midvale Ave N | Critical Asset |
| | | Arden Rehab and Healthcare Center | 16357 Aurora Ave N | |
| | | 2 Concrete Ped Underpasses | Aurora Ave N @ N 155th St | |
| | **C - 8 Minutes** | Water Storage Tank, Tower, Steel, 1 MG | Dayton Ave N @ N 145th St | High Profile |
| | | The Highlands Guard Shack | Access off 3rd Ave NW @ NW 145th St | |
| | | Washington State DOT Control Center | 15700 Dayton Ave N | Critical Asset |
| | | Highland Terrace Elementary School | 100 N 160th St | |
| | | Shoreline Community College | 16101 Greenwood Ave N | |
| | **D - 7 Minutes** | Hidden Lake Vehicle Bridge | On 10th Ave NW north of NW 167th St | |
| | | Sinkhole location of 1996 | 6th Ave NW @ NW 175th St | |
| | | St. Lukes Catholic School | 322 N 175th St | |
| | | Dayton Ave Wall | St Lukes Pl @ N 175th St | |
| | | Shorewood High School | 17300 Fremont Ave N | |
| | | Shoreline Fire Station HQ - EOC | 17525 Aurora Ave N | Critical Asset |

All Routes Overview.xls10/22/2010

# ANNEX 1 – RAPID DAMAGE ASSESSMENT FORMS & ROUTES

## City of Shoreline Critical Assets and High Profile Sites

### Critical Assets

| Site | Location |
|---|---|
| Shoreline electrical substation | Meridian Ave N @ N 165th St. |
| W.R. Geibt Public Health Laboratory | 17th Ave NE @ NE 150th St. |
| Shoreline Police Department | 1206 N 185th St. |
| WASDOT control center | 15700 Dayton Ave N. |
| Shoreline Fire Station/EOC * | 17525 Aurora Ave N. |

* Not considered a critical asset until activated or at DHS Threat Condition Red, at that time the EOC is moved up to number 4 position

### High Profile Sites

| Site | Utility | Location | Capacity | Type of Tank |
|---|---|---|---|---|
| Water Storage Tanks | SPU | Dayton Ave N @ N 145th St. | 1 Million Gallon | Above Ground Tower, Steel |
| | SPU | Fremont Ave N @ N 195th St. | Two Tanks, 1 & 2 Million Gallon | Elevated Water Storage Tanks, Steel |
| | Shoreline | 15th Ave NE @ NE 180th St. | 3.7 Million Gallon** & .4 Million Gallon*** | **Above Ground Tower, Steel & ***Above Ground Reinforced Concrete |
| Crista Communications Tower**** | Crista | Visible from Fremont Ave N @ N 190th | | |
| I-5 Overpass | WSDOT | N 145th | | |
| I-5 Underpass | WSDOT | N 155th | | |
| I-5 Underpass | WSDOT | N 163rd, *Metro Bus Barn* | | |
| I-5 Underpass | WSDOT | N 175th | | |
| I-5 Overpass | WSDOT | N 185th | | |
| I-5 Overpass | WSDOT | N 195th, Pedestrian Bridge | | |
| I-5 Underpass | WSDOT | NE 205th (SR104) | | |

**** Subject to communications tests

Critical Assets and High Profile Sites.xls10/22/2010

**ESF COORDINATOR:** **Fire Chief**

**LEAD AGENCIES:** **Fire Department**

**SUPPORT AGENCIES:**
Police Department
Public Works Department
Customer Response Team
All Departments
Mutual Aid Fire Departments
King and Snohomish County Fire Services Coordinators
Zone 1 Emergency Coordinator
King County Emergency Coordination Center
Washington State Emergency Management Division
Washington State Patrol
South Puget Sound Regional Fire Resources Coordinator
Federal Emergency Management Agency

## Introduction

### Section 1.01 Purpose

**(a)** This document is designed to provide guidance to qualified personnel for activities including; firefighting, rescue, and emergency medical services and to effectively coordinate fire response resources within the City of Shoreline (City).

### Section 1.02 Scope

**(a) Fire**

This ESF addresses all firefighting responses including the detection and suppression of fires for:

(i) City urban and rural fires

(ii) Wildland fires in mutual aid communities and/or state call-out

(iii) Mutual aid fire mobilization

(iv) Regional and state fire mobilization

(v) Fires occurring separately or coincidentally with a significant natural or technological disaster

(vi) Initial damage assessment

(vii) Hazardous material event recognition and identification, incident command, and operations level support. (See ESF #10 Hazardous Materials Response)

**The scope of this section will not attempt to address details regarding mutual aid and regional fire mobilization responsibilities and procedures that are contained in other documents.**

EMS for mass casualty incidents (MCI) and disasters are addressed in ESF # 8 Public Health and Medical Services.

## Section 1.03 Situation

**(a)** The management of a large firefighting operation is complex, often involving dozens of firefighting resources. Fire resulting from, or independent of, but occurring coincidentally with, a public emergency may place extraordinary demands on available resources and logistics support systems.

**(b)** A public emergency may result in numerous urban fires. The damage potential from fires in urban areas during and after a public emergency exceeds that of all other causes. Fires may have the potential to spread rapidly, cause extensive damage, and pose a serious threat to life and property. Available firefighting resources may be difficult to obtain and utilize because of massive disruption of communication, transportation, utility, and water systems

## Section 1.04 Assumptions

**(a)** Urban fires may result from a natural disaster. They also may occur as the result of another significant event. Large, damaging fires may be common.

**(b)** At the time of a public emergency, there may be fires burning in multiple locations in the Shoreline. These fires will draw upon the same resources (engines or other tactical and support resources) that would be needed to support firefighting and other emergency operations. It must be assumed that some firefighting resources will become scarce, resulting in the public emergency-related firefighting operations competing for resources.

**(c)** The 800 MHz radio communication may be interrupted in certain situations.

**(d)** Bridge failures, traffic, landslides, damaged road systems, air traffic restrictions, and so forth, may hamper access, making conventional travel to the fire location extremely difficult or impossible.

**(e)** A public emergency within or adjacent to the City has the potential to cause loss of life, property, and/or disruption of normal life support.

(f) In widespread disaster situations, mutual aid firefighting resources that are typically utilized on a daily basis will most likely be unavailable to assist when they are most needed.

**Section 1.05 Policies**

**(a)** All activities within ESF 4 – Firefighting will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

**(b)** As a signatory of the King County Regional Disaster Framework through, Washington State Fire Mobilization or through Washington State Mutual Aid System (WAMAS) and other local mutual aid agreements, the City & Fire Department will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator (Z1 EC) and King County Emergency Coordination Center (KC ECC), whenever possible. And utilize these same systems when requesting assistance.

**(c)** During all emergency situations (clarify; All vs. during a regional disaster?), the Shoreline Fire Department (FD) will mobilize all available apparatus and personnel required to respond to the situation commensurate with personnel availability and anticipated scheduling needs.

**(d)** Priority shall be given to life safety, incident stabilization, property conservation, and environmental conservation, in that order

**(e)** The FD will provide Basic Life Support (BLS) and Advanced Life Support (ALS).

**(f)** All mutual aid fire and emergency medical responders who provide emergency medical assistance in the City will operate under the direction of the FD.

**(g)** Mobilized Fire resources will be coordinated through the Fire Rep at the King County Emergency Coordination Center in conjunction with Fire Dispatch centers and Fire Agency reps.

**(h)** The Washington State Fire Mobilization Plan establishes mutual aid within the State. Requests for assistance are coordinated by the Washington State Emergency Operations Center.

**(i)** Washington has signed on to the Emergency Management Assistant Compact (EMAC) to accept aid from outside the state. Requests for assistance from these States will be coordinated by Washington State Emergency Operations Center.

**(j)** Medical response for multiple casualty incidents or large numbers of casualties will be provided through the current King County Multiple Casualty Plan as approved by the King County Fire Chiefs.

**(k)** All requests for assistance will be submitted to and coordinated through Z1 EC, KC ECC and the Washington State Emergency Operations Center.

## Article II. Concept of Operations

### Section 2.01 General

**(a)** The Incident Command System (ICS) will be used for all field operations.

**(b)** The Incident Commander (IC) will provide regular status reports to the Emergency Operations Center (EOC) through the Fire Department Operation Center (FDOC) (if established).

**(c)** At least one incident command post will be established for the coordination of field operations. The unified command structure will be used when multiple departments/agencies are responding to an event.

**(d)** The FD provides fire protection and emergency medical services by contract to the Facility at Point Wells and the city of Woodway. Coordination with this facility and City during major emergencies and disasters will be coordinated through the Shoreline Fire Department Operation Center (FDOC). Snohomish County maintains jurisdiction for the Pt Wells facility and will provide support during a hazardous materials incident.

**(e)** Communications will be through established channels. The primary mode of emergency communications would take place on the 800 MHz radio communications system. Secondary communication systems would be cellular normal telephones or activation of the Shoreline Auxiliary Communications Services Team (Ham radios).

**(f)** A major emergency or disaster may cause extensive damage to property and the infrastructure. Structures may be destroyed or severely weakened. Homes, public buildings, bridges, and other facilities may have to be reinforced or demolished to ensure safety. Debris may make streets and highways impassable. Public utilities may be damaged or be partially or fully inoperable. Large scale fires could outbreak, including some from gas leaks Firefighting capabilities may be significantly hampered or impossible as a result of severe damage to water supply system(s).

**(g)** Fire Zones and Mutual Aid

(i) King County is divided into three (3) Fire Zones. Shoreline is located within Fire Zone 1. The King County Fire Resources Plan (separately published document) provides for the coordination of countywide fire resources during localized emergencies.

(ii) The FD has automatic aid agreements with numerous agencies throughout King and Snohomish Counties. Assistance may be requested through existing mutual aid agreements when local resources are inadequate, as outlined in RCW 39.34.030 For Emergency Management purposes, it is considered "Mutual" aid as opposed to Automatic aid.

(iii) In situations when local mutual aid is not available or has been expended, the provisions for regional/state fire mobilization apply and the City may request assistance through Z1 EC, KC ECC and/or the Washington State Emergency Operations Center. All requests from the City will be coordinated through the EOC.

(iv) The County Fire Service Coordinator will coordinate the distribution of incoming fire resources in major emergencies involving areas greater than a single Fire Zone. Coordination for Zone 1 activities shall be through the King County Zone Coordinator and the KC ECC. Communications for this coordination will normally be between the Shoreline EOC and KC ECC.

(v) The Emergency Management Assistance Compact has been established with all 50 states. Requests for assistance from Emergency Management Assistance Compact states will be coordinated by the Washington State Emergency Operations Center. Requests will be made through the EOC to EC, KC ECC, or directly to Washington State Emergency Operations Center.

(vi) Each local, state or federal agency will assume the full cost of protection of the lands within its respective boundaries unless other arrangements are made. Fire protection agencies should not incur costs in jurisdictions outside their area without reimbursement unless there is a local mutual aid agreement between those jurisdictions. It is essential that the issue of financial limitation be clarified through proper official channels for efficient execution of fire support.

(vii) Efficient and effective mutual aid among the local, county, state, and federal fire agencies require the use of the ICS in accordance with the NIMS together with compatible firefighting equipment and communications.

**(h)** Local Mass Casualty plans will detail operational concepts and responsibilities so that the EMS system existing in the area will be capable of providing mass casualty emergency medical services during an emergency/disaster. (See ESF #8 Public Health and Medical Services)

**(i)** Access to the disaster areas may be dependent upon the re-establishment of ground routes. In many locations, debris clearance and emergency road repairs will be given top priority to support immediate lifesaving emergency response activities.

**Section 2.02 Organization**

The Shoreline FD is the lead agency for the coordination of all fire and emergency medical service activities within the City.

**(a)** The Fire Department has five Fire Stations: (5 listed)

Station #61 (Headquarters)
17525 Aurora Avenue North
Shoreline, WA 98133

Station #62
1851 NW Richmond Beach Rd.
Shoreline, WA 98177

Station #63
1410 NE 180th
Shoreline, WA 98155

Station #64
719 N 185th Street
Shoreline, WA 98133

Station #65
145 NE 155th Street
Shoreline, WA 98155

**(b)** The Fire Chief or his/her designee shall provide direction and control over department resources and coordination with the EOC.

**(c)** On scene management of emergencies will utilize the ICS in accordance with the NIMS and NRF.

**(d)** Fire and EMS personnel shall operate according to specific directives, department standard operating procedures (SOPs), and by exercising reasonable personal judgment when unusual or unanticipated situations arise and command guidance is not available

**(e)** The notification method used to mobilize off-duty personnel shall be by telephone, whenever possible (cell phone or text).

**(f)** The Shoreline Fire Department will work in coordination with City of Shoreline departments and outside agencies.

## Section 2.03 Actions

### (a) Preparedness:

(i) Conduct planning with regional Fire Services and other emergency support functions to refine fire service operations.

(ii) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(iii) Maintain a list of Firefighting assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources,

(iv) Assign and schedule sufficient personnel to implement Firefighting tasks for an extended period of time,

(v) Conduct vulnerability analysis at critical facilities and infrastructure and make recommendation to improve their vulnerability if any are noted. (Critical facilities are identified in the Windshield Survey routes that the Fire Department uses to assess damage after a major incident),

(vi) Ensure lead agency personnel are trained in their responsibilities and duties,

(vii) Develop and implement emergency response and firefighting strategies,

(viii) Develop and present training courses for Firefighting personnel, and

(ix) Maintain liaison with support agencies,

(x) Conduct All Hazards exercises involving Firefighting

### (b) Response:

(i) Coordinate operations in the Shoreline EOC and/or at other locations as required by assigning a Fire representative,

(ii) Coordinate needs and response actions with each fire station

(iii) Establish and maintain of a system to support on-scene direction/control and coordination with the EOC, King County ECC, State EOC, or other coordination entities as appropriate,

(iv) Establish mutual aid procedures for the following resources; fire suppression, interoperable communications and others as appropriate

(v) Coordinate with support agencies to develop, prioritize and implement strategies for the initial response to EOC requests.

(vi) Establish communications with appropriate field personnel to ensure readiness for timely response,

(vii) Implement Disaster Assessment Teams to determine post-event effect on emergency services, functional group resources and the ability to perform Continuity of Operations for essential functions,

(viii) Monitor and direct firefighting resources and responses activities to include pre-positioning for response/ relocation due to the potential impact (s) of the emergency situation

(ix) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(x) Coordinate with support agencies, as needed, to support emergency activities,

(xi) Obtain other resources through the Statewide Fire Mobilization and/or the King County Regional Disaster Mutual Aid Agreements,

(xii) Coordinate with other Jurisdictions' to obtain resources and facilitate an effective emergency response among all participating agencies,

(xiii) Monitor and direct firefighting resources and response activities to include pre-positioning for response/relocation due to the potential impact(s) of the emergency situation

**(c) Recovery**

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

**(d) Mitigation**

(i) Mitigation activities for this ESF are covered in the Multijurdictional Hazard Mitigation.

## Article III. Responsibilities

## Section 3.01 Lead Agency

### (a) Fire Department

(i) Provide leadership in directing, coordinating and integrating overall Jurisdictional efforts to provide fire service assistance to affected areas and populations.

(ii) Coordinate and direct the activation and deployment of urban and suburban fire agencies' personnel, supplies and equipment and provide certain direct resources.

(iii) Utilize the ICS for all emergency/disaster response activities in accordance with the NIMS and NRF.

(iv) Provide fire suppression and control, and immediate life safety services within Shoreline and fire service contract areas.

(v) Maintain a list of resources, which includes apparatus, equipment, personnel and supply sources.

(vi) Implement the King or Snohomish County Fire Resource Plan when appropriate. (separately published documents)

(vii) Develop departmental standard operating procedures (SOPs) for use during major emergencies and disasters.

(viii) Provide regular status reports and information regarding operational and resource needs to the EOC.

(ix) Provide a representative to the EOC to assist in the prioritization and coordination of citywide response efforts as well as regional coordination with KC ECC, when appropriate.

(x) The alert system utilized to mobilize Fire Department personnel shall be the established call out system or other means as determined by Command Staff. As communication systems may fail in a major event, Fire staff should report to work as soon as possible following obvious major disasters regardless of whether they have been notified

(xi) Coordinate and direct the activation and deployment of urban and suburban fire agencies' personnel, supplies and equipment and provide certain direct resources.

(xii) Manage firefighting and other emergency incidents in accordance with each department's Standard Operating Guidelines and under the direction of ESF 4 Firefighting representatives or designee.

(xiii) Re-assess priorities and strategies throughout the emergency according to the most critical fire service needs.

(xiv) Assist with emergency evacuations and re-entry of threatened areas.

## Section 3.02 Support Agency

### (a) Police Department

(i) Utilize the ICS for all emergency/disaster response activities in accordance with the NIMS and NRF.

(ii) Provide support for firefighting activities including security, traffic control, and crime scene support.

(iii) Provide evacuation coordination, assist in door-to-door notifications, and provide security to evacuated property.

### (b) All City Departments

(i) Maintain all available departmental equipment in serviceable and ready condition.

### (c) Public Works Department

(i) Utilize the ICS for all emergency/disaster response activities in accordance with the NIMS and NRF.

(ii) Coordinate with local water purveyors to ensure adequate water supply for fire suppression.

(iii) Assist with technical rescue.

(iv) Manage debris removal.

### (d) Customer Response Team (CRT)

(i) Utilize the ICS for all emergency/disaster response activities in accordance with the NIMS and NRF.

(ii) Provide traffic control, as needed.

(iii) Manage road closures, as appropriate.

(iv) Be available for building inspections to ascertain if they should not be occupied or only partially occupied after a fire.

**(e) Mutual Aid Fire Departments**

(i) Adjacent Mutual Aid Fire Departments will respond as requested to the extent of their available resources.

**(f) King and Snohomish County Fire Service Coordinators**

(i) Coordinate with the County's EOC for equitable allocation of incoming fire resources from out of the area.

**(g) Zone 1 Emergency Coordinator**

(i) Coordinate the zone-wide allocation of fire resources during regional emergencies through the local EOCs and the KC ECC to ensure equitable distribution.

**(h) King County ECC**

(i) Provide resources and coordinate support as requested.

**(i) State Emergency Operations Center**

(i) Provide coordination of State resources to provide support when local jurisdictions, as appropriate, when all local, regional and county resources have been expended.

(ii) Facilitate the requisition of resources from other states through the Emergency Management Assistance Compact.

(iii) Request and coordinate Federal resources through the Federal Emergency Management Agency (FEMA).

**(j) Washington State Patrol (WSP)**

(i) Provide coordination of State resources to provide support when local jurisdictions, as appropriate, when all local, regional and county resources have been expended.

**(k) South Puget Sound Regional Fire Resources Coordinator**

(i) Coordinate mobilized resource assistance to regional jurisdictions per the Washington State Mobilization Plan and the Regional Fire Defense Plan (separate documents).

**(l) Federal Emergency Management Agency (FEMA)**

(i) Administers fire suppression assistance to the state pursuant to PL 93-288 of the Disaster Relief Act of 1974, Section 417, when a fire destruction threat would constitute a major disaster.

(ii) Provides training for fire suppression and hazardous materials control to local fire jurisdictions through the National Fire Academy in Emmitsburg, Maryland.

## Article IV. Appendices

**(a)** Mutual Aid Resources

## Article V. References

**(a)** The National Response Framework

**(b)** The National Incident Management System

**(c)** Washington State Comprehensive Emergency Management Plan

**(d)** Revised Code of Washington, 39.34.030, 38.54, 76.04, 43.63A, 38.52; and Title 52 and 35 RCW

**(e)** Washington State Mutual Aid System (WAMAS)

**(f)** Washington State Fire Services Resource Mobilization Procedures

**(g)** King County Fire Resource Plan

**(h)** King County Hazardous Materials Emergency Resource Plan

**(i)** King County Multiple Casualty Incident Guide

**(j)** Snohomish County Fire/EMS Resource Plan

The following agencies are the mutual aid resources that border the City of Shoreline:

King County Fire Department #16
Northshore Fire Dept.
18030 73rd Ave NE
Shoreline, WA 98011
(425) 486-2784

Seattle Fire Department
Contacted by dispatch as available

Snohomish County Fire Department #1
12310 Meridian Ave.
Everett, WA 98208
(425) 551-1249

**ESF COORDINATOR:** **Emergency Management Coordinator**

**LEAD AGENCIES:** **City Manager's Office**

**SUPPORT AGENCIES:** **All City Departments**

**Zone 1 Emergency Coordinator**

**King County Emergency Coordination Center**

**Washington State Emergency Management Division**

## Article I. Introduction

### Section 1.01 Purpose

(a) Emergency Support Function (ESF) # 5 Emergency Management is responsible for supporting overall activities of the City of Shoreline (City) relating to large scale incident management. The City's emergency management organization provides the core management and administrative functions in support of the Emergency Operations Center (EOC) and the City's Comprehensive Emergency Management Plan (CEMP).

### Section 1.02 Scope

(a) This ESF serves to support all City departments and the EOC across the spectrum of incident management from mitigation and preparedness to response and recovery.

### Section 1.03 Situation

(a) A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to field efforts to save lives and protect property. ESF #5 will support initial assessment of developing situations and will provide timely and appropriate information to support local agencies in determining whether federal assistance will be required.

**Section 1.04 Assumptions**

(a) In a public emergency situation, there is a need for a central-collection point in the EOC, where situation information can be compiled, analyzed, prioritized, and prepared for use by decision makers.

(b) The field units are the most immediate source of vital information for the EOC staff regarding damage and initial response needs.

(c) There is an immediate and continuous demand by officials involved in response and recovery efforts for information about the developing or ongoing public emergency situation.

(d) A public emergency within or adjacent to the City has the potential to cause loss of life, property, and/or disruption of normal life support.

(e) The City may be heavily dependent on outside agency and vendor assistance in order to adequately respond to emergencies.

(f) There may be a need to rapidly deploy field observers or assessment personnel to the emergency area to collect additional critical information about resource requirements for victims or to conduct an immediate situation assessment to determine initial local response requirements

(g) Early damage assessments will be general and incomplete and may be inaccurate. Rapid assessment of the emergency area is required to determine critical needs and to estimate potential workload or requirements for federal assistance.

(h) Regional emergency coordination and planning is critical to ensure regional transportation stability.

**Section 1.05 Policies**

(a) All activities within ESF 5 – Emergency Management will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) ESF# 5 is responsible for establishing the support infrastructure within the City to satisfy the requirements for mitigation, preparedness, response, and recovery efforts.

(c) As a signatory of the King County Regional Disaster Framework through the Washington State Mutual Aid Services (WAMAS), and other local mutual aid agreements, the City will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible. The City will utilize these same systems when requesting assistance from another jurisdiction.

(d) The City has established Mutual Aid Agreements with Shoreline Community partners to request assistance in the event of a disaster. In addition, the Shoreline Police have Mutual Aid Agreements with surrounding cites. The city also is a signature to the King County Regional Disaster Framework, for Public and Private Organizations. In addition the city may need to request support through WAMAS. In the event additional resources are required, the City will make requests to the Zone 1 Emergency Coordinator (Z1 EC), King County Emergency Coordination Center (KC ECC), and the Washington State Emergency Operations Center. Requests to Z1 EC and KC ECC may be made simultaneously. All requests for assistance will be initiated by the EOC based upon information from the field command posts.

(e) ESF #5 outlines the coordination of resource allocation. ESF #5 staff identifies and resolves resources allocation issues identified by the incident command post and the Incident Commander (IC).

(f) ESF #5 staff provides the informational link between the City and the Z1 EC, KC ECC, and the Washington State Emergency Operations Center.

(g) ESF #5 provides representatives to staff key positions in the EOC. The City has chosen EOC's that meet critical facility building requirements so that they are less vulnerable to damage. However, during a disaster the city's critical facilities, to include the EOC, could have been damaged and should be assessed for damage as soon as possible as to whether they are capable of operating during an emergency and so that continuity of government services can be assessed. (See Appendix F for a list of the Public Critical Facilities in the City of Shoreline and which ones have alternative power). Alternate facilities and procedures for using them may need to be considered if a facility becomes damaged or isolated.

(h) All requests for assistance will be submitted to and coordinated through Z1 EC, KC ECC and Washington State Emergency Operations Center.

(i) May task support agencies to provide technical expertise and information necessary to develop accurate assessment and analysis of a developing or ongoing situation.

## Article II. Concept of Operations

### Section 2.01 General

(a) ESF #5 provides a trained and experienced staff to fill management positions in the Command, Operations, Planning, Logistics and Finance and Administration Sections of the EOC. Staff assigned to the EOC besides meeting the NIMS/ICS training requirement, participates in EOC exercises at least annually to ensure they understand their training.

(b) The EOC staffed by ESF #5 and other ESFs when activated, monitors potential or developing incidents and supports the efforts within the City In addition, the EOC coordinates operations and situations reports to the Z1 EC, KC ECC, and the Washington State Emergency Operations Center, as appropriate.

(c) ESF #5 supports the activation and deployment of first responders within the City during a disaster.

(d) To identify urgent response requirements during a disaster, or the threat of one, and to plan for continuing response, recovery and mitigation activities, there will be an immediate and continuing need to collect, process and disseminate situational information. The EOC will synthesize information gathered to gain accurate situational awareness of the event. The EOC will strive to analyze that information so that there is a clear common operating picture between the field and the EOC. This will support resource allocation and sound decision making.

(e) Information will be provided by trained field personnel, responders, volunteers, the public, the media, social media, and others.

(f) Procedures, protocols and plans for disaster response activities provide guidelines for operations at the Emergency Operations Center and in the field. The Basic Plan, the Essential Support Functions, and corresponding their Appendices, Annexes, and Job Aids describe ESF 5 capabilities (based on National Planning Scenarios, Universal Task List and Core Capabilities) are the basis of these guidelines. Periodic training and annual exercises are also conducted to enhance effectiveness.

(g) A large event requiring regional, state and/or interstate mutual aid assistance will require ESF 5 implementation. ESF 5 will coordinate with support agency counterparts to seek and procure, plan, coordinate and direct the use of any required assets.

(h) Information, particularly initial information, may be ambiguous, conflict with information from other sources or with previous information from the same source, or be limited in detail.

(i) Information collection may be hampered due to many factors including: damage to communication systems; communications system overload; damage to the transportation infrastructure; effects of weather, smoke, and other environmental factors.

**Section 2.02 Organization**

(a) ESF #5 is organized in accordance with the National Incident Management System (NIMS). The ESF #5 structure supports the general staff functions described in the NIMS. These functions include:

(b) Command Support

(i) ESF #5 supports the command functions by providing senior staff, incident action planning capabilities, information, administration, logistics, and financial support functions.

(c) Operations

(i) EOC staff will serve as the Operations Section Chief and Operations Branch Director positions to coordinate the human resources, infrastructure support, emergency services and mitigation and community recovery branches (various ESFs also provide key staff for these areas); process requests for assistance, and initiate and manage the mission assignment and/or the reimbursement agreement.

(d) Planning

(i) ESF #5 provides the Planning Section Chief position. ESF #5 provides for the collections, evaluation, dissemination and use of information regarding incident prevention and response actions and the status of resources. The planning section is responsible for coordinating the incident action planning process. This includes preparing and documenting incident priorities; establishing the operational period and tempo; and developing contingency, long-term, and demobilization planning,

(e) Logistics

(i) ESF #5 provides staff for the Logistics Section Chief to manage the control and accountability of supplies and equipment; resource ordering; delivery of equipment, supplies and services; resource tracking; facility location and operations; transportation coordination; communications to support the incident, and information technology systems services and other administrative services. The Logistics Section coordinates closely with ESF #7 Resource Support and with the Z1 ECC, KC ECC, and the Washington State Emergency Operations Center.

(f) Finance/Administration

(i) ESF #5 provides staff for the Finance and Administration Section Chief to monitor funding requirements and incident costs. The Finance/Administration Section is responsible for employee services, including security for personnel, facilities and assets.

**Section 2.03 Actions**

(a) Preparedness:

(i) Conduct planning with ESF 5 support agencies and other emergency support functions to refine fire service operations

(ii) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency

(iii) Maintain a list of ESF 5 assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources

(iv) Assign and schedule sufficient personnel to implement ESF5 tasks for an extended period of time

(v) Conduct vulnerability analysis at critical facilities and make recommendation to improve the physical security

(vi) Ensure lead agency personnel are trained in their responsibilities and duties

(vii) Develop and implement emergency response strategies

(viii) Develop and present training courses for ESF 5 personnel

(ix) Maintain liaison with support agencies

(x) Conduct All Hazards exercises involving ESF 5

(xi) Acquire, analyze and disseminate information and intelligence on disasters and their impacts is fundamental to effective use of intelligence to establish operational and logistical objectives and priorities

(xii) Coordinate appropriate exercises to test readiness of the CEMP

(b) Response:

(i) Whenever the EOC is activated Emergency Management Director and EOC Manager will make every reasonable effort to respond as quickly as possible to perform roles assigned by the CEMP.

(ii) In an EOC activation support organization personnel assigned or dispatched by their organizations to ESF-5 will make every reasonable effort to respond as quickly as possible to the EOC when notified, and perform respective duties as assigned.

(iii) Coordinate operations at the ESF 5 position in the Shoreline EOC and/or at other locations as required.

(iv) Establish and maintain of a system to support on-scene direction/control and coordination with the EOC, King County ECC, Washington State Emergency Operations Center, or other coordination entities as appropriate.

(v) Coordinate with support agencies and community partners to develop, prioritize and implement strategies for the initial response to EOC requests. (See Appendix C for contact information of support agencies and partners).

(vi) Establish communications with appropriate field personnel to ensure readiness for timely response.

(vii) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings.

(viii) Coordinate with support agencies, as needed, to support emergency activities.

(ix) Obtain other resources through the King County Regional Disaster Framework, for Public and Private Agencies, WAMAS and/or the Regional Mutual Aid Agreements.

(x) Coordinate with other Jurisdictions' ESFs or like function to obtain resources and facilitate an effective emergency response among all participating agencies.

(xi) Monitor and direct communication resources and response activities to include pre-positioning for response/relocation due to the potential impact(s) of the emergency situation.

(c) Recovery

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

(d) Mitigation

(i) Mitigation activities for this ESF are covered in the Hazard Mitigation Plan.

## Article III. Responsibilities

### Section 3.01 Lead Agency

(a) City Manager's Office

(i) Manage City staff in their emergency management duties.

(ii) Amend the CEMP as needed

(iii) Oversee the administration of all Emergency Management programs.

(iv) Plan, coordinate, and direct the work of City departments to prepare for, mitigate against, respond to and recover from a disaster.

(b) Emergency Management Coordinator/Office of Emergency Management

(i) Oversee the daily operations of all Emergency Management programs.

(ii) Activates and convenes City assets and capabilities to prevent and respond to a disaster and coordinates with regional, county, state and federal emergency management organizations as needed.

(iii) Coordinate planning activities including immediate, short-term and long-term planning. The response planning and operations implementation priorities are developed in coordination with the Incident Commander (IC).

(iv) Coordinate the overall staffing of the EOC and field, including which ESFs are activated, the size and composition of the organizational structure, the level of staffing at the EOC, incident command post, and response personnel.

(v) Approve the budget submission of the Emergency Management Performance Grant (EMPG) and other appropriate grants.

(vi) Networking with officials of all City departments and commissions, neighboring jurisdictions, state and federal governments, and the City's community at-large.

(vii) Oversee the administration of EM budget and provide daily oversight and support of the EM programs.

(viii) Prepare, or oversee preparation of, mitigation and homeland security grant proposals.

(ix) Maintain the Hazards Mitigation Plan and Comprehensive Emergency Management Plan (CEMP), Recovery Plan, and serve as the City's coordinator for monitoring the plan's implementation. Together with City department managers, measure the degree of hazard reduction that is being achieved, in addition to developing new strategies that may be required. The latter may involve interim and/or longer term actions.

(x) Assist departments maintain assigned ESF and Incident Annexes, in addition to department emergency management plans, policies or procedures.

(xi) Assist departments maintaining the Continuity of Operations Plans (COOPS).

(xii) Assist departments in appropriate training for their assigned ESF

**Section 3.02 Support Agency**

(a) All City Departments

**(i)** Support agencies responsibilities and capabilities are outlined in the CEMP Basic Plan and each of the ESFs. Every ESF has detailed responsibilities of the lead and support agencies for every aspect of response and recovery during a disaster. Every ESF directly relates to the management of an emergency or disaster.

**(ii)** Support agencies provide personnel to the EOC as requested, to assist ESF operations and provide reports to ESF #5. All city departments, as appropriate, identify staff liaisons or points of contact to provide technical and subject-matter expertise, data, advice, and staff support for operations that fall within the domain of each department. Support capabilities of other departments may be used as required and available.

**(iii)** All City departments will provide support to the emergency management operations as required.

(b) Zone 1 Emergency Coordinator

(i) Coordinate the zone-wide allocation of resources during regional emergencies through the local EOCs and the KC ECC to ensure equitable distribution.

(c) King County ECC

(i) Provide resources and coordinate support as requested.

(ii) Coordinate the county wide allocation of resources during regional emergencies

(d) State Emergency Operations Center

(i) Provide coordination of State resources to provide support when local jurisdictions, as appropriate, when all local, regional and county resources have been expended.

(ii) Facilitate the requisition of resources within the state through the use of WAMAS.

(iii) Facilitate the requisition of resources from other states through the Emergency Management Assistance Compact (EMAC).

(iv) Request and coordinate Federal resources through the Federal Emergency Management Agency (FEMA).

**Article IV. Appendices**

(a) Proclamation of Local Emergency – A 1 & A 2

(b) Emergency Operations Center Handbook

(c) EOC Activation Procedures

(d) Lines of Succession

(e) Emergency Management Employee Procedures

(f) Critical Facilities

**Article V. References**

(a) National Response Framework

(b) CEMP Basic Plan

(c) King County Regional Disaster Framework for Public and Private Agencies

Shoreline Comprehensive Emergency Management Plan (CEMP)
Emergency Support Function (ESF) # 5
Emergency Management
Appendix A1 – Proclamation of Local Emergency

WHEREAS, the Emergency Management Coordinator/Incident Commander and/or their designee have reported to the undersigned that the following emergency situation: _____ has resulted in, or threatens to result in, an imminent threat to the health and safety of the citizens of Shoreline and the traveling public, an imminent danger to public and private property, and an imminent threat of serious environmental degradation. Failure to take immediate action may result in a real, immediate threat to the proper performance of essential functions; and/or will likely result in material loss or damage to property, bodily injury, or loss of life; and

WHEREAS, all available resources are/will be committed to responding to this civil emergency, and the severity of this emergency is beyond the capability of local resources and requires the City to request supplemental assistance; and

WHEREAS, Shoreline Municipal Code 2.50.060 authorizes the City Manager to make rules and regulations reasonably needed to protect life, property, and the environment and to issue any proclamation of local emergency authorizing the City of Shoreline to take necessary measures to combat a disaster, protect persons, property and natural resources, provide emergency assistance to victims of the disaster and exercise powers authorized in RCW 38.52.070; and

WHEREAS, the severity of this disaster is beyond the capability of local resources to adequately respond constituting an emergency as defined by the City of Shoreline Comprehensive Emergency Management Plan and necessitates the utilization of emergency powers granted under RCW 38.52.070;

WHEREAS, in the judgment of the undersigned, extraordinary measures are required to protect the public peace, safety and welfare;

NOW, THEREFORE, I, _____, the _____**[City Manager]** of Shoreline, Washington, do hereby proclaim a civil emergency exists within the City of Shoreline due to a_____.

In accordance with Shoreline Municipal Code 2.50.060, the undersigned hereby further proclaims the following orders are in effect immediately within the areas described below **[Cross out or modify as appropriate for situation]**:

1. A general curfew is hereby imposed within the following described area: _____ requiring all citizens to remain within their residences between the hours of _____;

2. All business establishments within the following described area:_____ _____ are hereby ordered to close immediately and remain closed until further order;

3. All bars, taverns, liquor stores and other business establishments where alcoholic beverages are sold or dispensed within the following described area:_____ shall close immediately and remain closed until further order; **[optional proviso]:** provided that with respect to those business establishments which are not primarily devoted to the sale of alcoholic beverages and in which such alcoholic

beverages may be removed or made secure from possible seizure by the public, the portions thereof utilized for the sale of items other than alcoholic beverages may remain open;

4. The sale, distribution or giving away of firearms and/or ammunition for firearms is hereby prohibited until further order in the following described area: _____;

5. The sale, distribution or giving away of gasoline or other liquid flammable or combustible products in any container other than a gasoline tank properly affixed to a motor vehicle is hereby prohibited until further order in the following described area: _____;

6. All business establishments where firearms and/or ammunition for firearms are sold or dispensed within the following described area:_____ shall close immediately and remain closed until further order; **[optional proviso]:** provided that with respect to those business establishments which are not primarily devoted to the sale of firearms and/or ammunition for firearms and in which such firearms and/or ammunition for firearms may be removed or made secure from possible seizure by the public, the portions thereof utilized for the sale of items other than firearms and/or ammunition for firearms may remain open;

7. All public places, including streets, alleys, public ways, schools, parks, beaches, amusement areas and public buildings within the following described area: _____ shall close to the public immediately and remain closed until further order;

8. The carrying or possession of firearms or any instrument which is capable of producing bodily harm and which is carried or possessed with the intent to use the same to cause such harm is hereby prohibited until further order within the following described area: _____; provided, that such order shall not apply to peace officers or military personnel engaged in the performance of their official duties;

9. The following additional orders are hereby necessary for the protection of life and/or property and shall be in effect until further order in the areas described:

_____
_____
_____

The above orders shall remain in effect until a subsequent order revoking same, and, if any such order remains in effect as of _____ **[date of next Council meeting]**, shall be presented to the City Council at its meeting on such date for ratification and confirmation.

Dated this _____ day of _____, _____..

_____
[signature]

_____
[Print Name],
**City Manager**

Approved as to form:

_____, City Attorney

By: _____

WHEREAS, the Emergency Management Coordinator/Incident Commander has reported to the City Manager of the City of Shoreline that beginning at (time) _____ on (date) _____ _____ a/an (type of event) _____ causing (type of damage) _____ in the City of Shoreline; and

WHEREAS, (Incident Description) _____

_____

creates a threat to life, property, and/or the environment; and

WHEREAS, all available resources are/will be committed to disaster work and the city requires supplemental assistance; and

WHEREAS, Shoreline Municipal Code 2.50.060 authorizes the City Manager to make rules and regulations reasonably needed to protect life, property, and the environment and to issue any proclamation of local emergency authorizing the City of Shoreline to take necessary measures to combat a disaster, protect persons, property and natural resources, provide emergency assistance to victims of the disaster and exercise powers authorized in RCW 38.52.070; and

WHEREAS, the severity of this disaster is beyond the capability of local resources to adequately respond constituting an emergency as defined by the City of Shoreline Comprehensive Emergency Management Plan and necessitates the utilization of emergency powers granted under RCW 38.52.070;

NOW, THEREFORE, IT IS PROCLAIMED BY THE CITY MANAGER OF THE CITY OF SHORELINE THAT:

A local emergency exists within the City of Shoreline due to (type of event) _____ and emergency powers as defined under RCW 38.52.070 and SMC 2.50 are enacted.

ADOPTED:

_____
City Manager
City of Shoreline:

Dated this ___ day of _____, _____

**LEAD AGENCIES:** **Community Services Division**

**SUPPORT AGENCIES: All Departments**

## I. INTRODUCTION

### A. Purpose

The purpose of this Appendix is to provide guidance and procedures for the activation and operation of the City of Shoreline Emergency Operations Center (EOC).

### B. Scope

This Appendix addresses the necessary information, description, and checklists for the EOC operations under the Incident Command System (ICS).

## II. EOC FUNCTIONS

The EOC will be activated to facilitate the following emergency functions:

- Overall command and control of emergency response and recovery activities
- Coordination of emergency resources
- Coordination with other agencies and jurisdictions
- Establishment of city-wide priorities and incident action plans
- Coordination of damage assessment
- Collection, evaluation and dissemination of damage assessment/disaster analysis information
- Coordination of public information
- Planning for next operational periods
- Begin planning for the recovery activities

## III. EOC LOCATIONS

A. The following locations have been designated for EOC setups:

| | |
|---|---|
| Primary | Shoreline Fire Department<br>Training and Resource Center<br>17525 Aurora Ave. North<br>Shoreline, Washington |
| Alternate | City of Lake Forest Park City Hall - EOC. 17425 Ballinger Way NE, Lake Forest Park, Washington |

B. Another location may be established if the primary and alternate EOC is not operational. The decision to relocate will be made dependent upon the circumstances but, as a general rule, reconstitution of command and control functions at the most advantageous site will be the preferred course of action.

## IV. EOC ACTIVATION

### A. Authority

The following have the authority to activate the EOC:

- City Manager/Director of Emergency Management
- Assistant City Manager
- EOC Manager (Level 1)
- Community Services Manager (Level 1)
- Police Chief or designee
- Fire Chief or designee
- Department Heads (Level 1)

### B. Levels of Operation

The level of EOC activation depends on the situation and the need for command or coordination, support and resources. The following chart shows the levels of EOC activation:

## EOC Levels of Activation

| LEVELS | SITUATION | SUPERVISION | ACTIONS |
|---|---|---|---|
| **Level I Monitoring Phase**<br><br>***An emerging situation is being monitored and may warrant the need for obtaining more resources in the future.*** | Minor flooding<br>Small fire<br>Small plane crash<br>Small HAZMAT spill<br>Severe weather warning<br>Terrorism alert | EOC Manager or designee<br><br>No emergency proclamation | 1. Make phone contact & determine status of all EOC personnel.<br>2. Make EOC room available in event of activation.<br>3. Assure communications, exercice radio communications. |
| **Level II Partial Activation**<br><br>***A situation that requires two or more departments to provide an effective response: resources may be required from other agencies.*** | Multiple jurisdictions<br>Large fire<br>Moderate earthquake<br>Minor to moderate flooding<br>Major transportation accident<br>Major HAZMAT spill<br>Major weather event | EOC Manager<br><br>Appropriate Departments<br><br>Activate needed ICS functions<br><br>Possible emergency proclamation | 1. Make phone contact & determine status of all EOC personnel.<br>2. Call in appropriate personnel.<br>3. Draft tentative shift schedule.<br>4. Set up and activate EOC.<br>5. Assure communications intact, exercice radio communications. |
| **Level III Full Activation**<br><br>***A situation beyond the ability of our organization to manage: additional resources are required and an emergency is proclaimed.*** | Large earthquake<br>Severe flooding<br>Severe winter storm<br><br>Requires great degree of coordination<br><br>Needs state and federal assistance | EOC Manager<br><br>All ICS functions<br><br>Emergency proclamations<br><br>City, County and/or State<br><br>Presidential Disaster Declaration | 1. Make contact with all EOC personnel.<br>2. Call in appropriate personnel for initial operational period.<br>3. Draft shift schedule.<br>4. Set up and activate EOC. |

## V. EOC LAYOUT

*To be posted in each EOC.*

**NOTE:**

**A receptionist will be in the lobby of the EOC's when activated to deal with incoming personnel.**

**Breakout rooms for the City Council to meet, or other strategy meetings to take place, will be assigned in the Fire Training Center based on the situation.**

**The media will not be addressed in or near the EOC.**

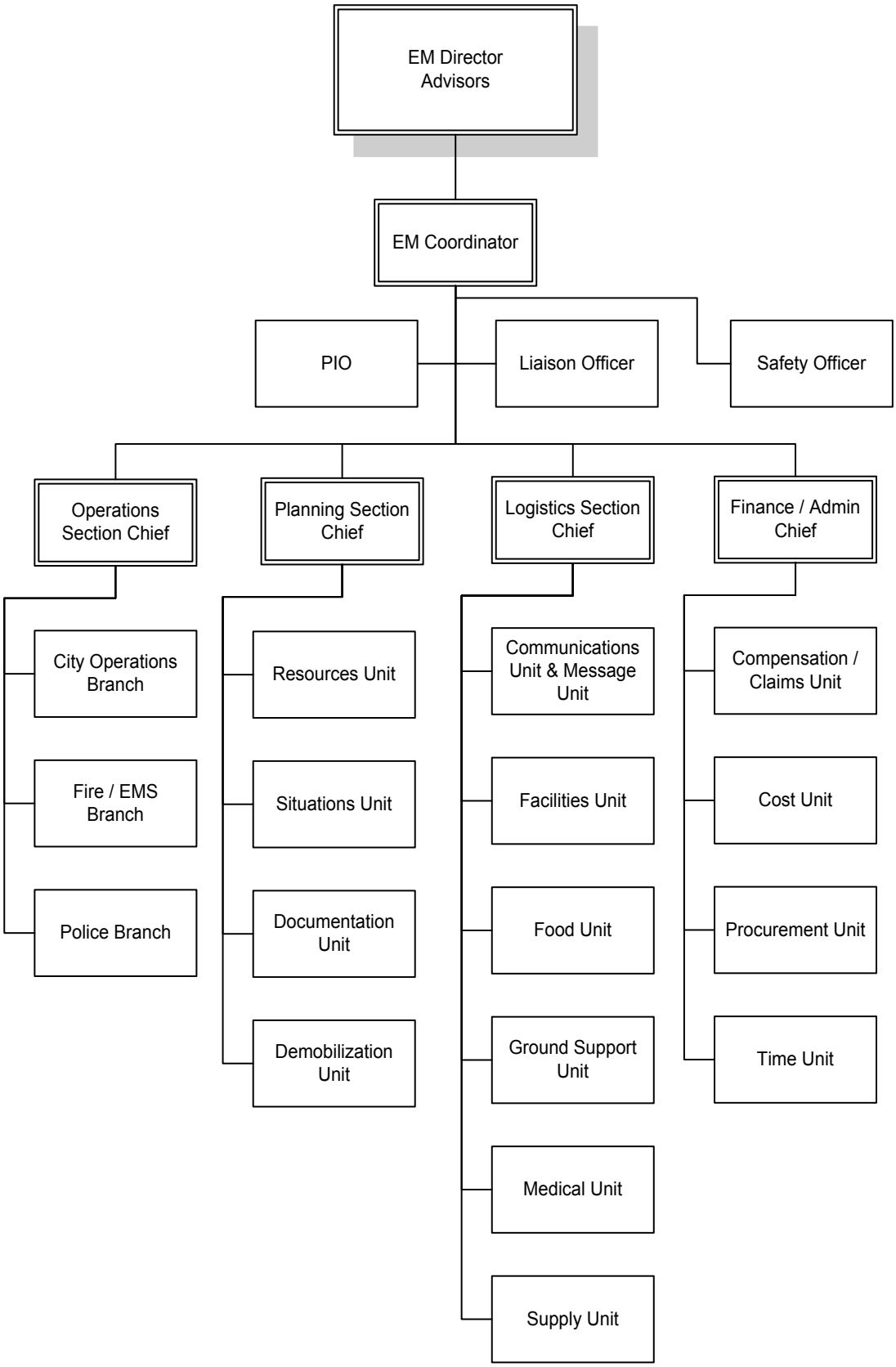
## VI. CONCEPT OF OPERATIONS

### A. General

The Shoreline Emergency Operations Center is designed to support Shoreline operations in response to an emergency or disaster. Involved agencies should be in touch with the EOC when it is activated to coordinate their agency's response with the overall city operation. At Level II or III, this may include city staff and agency representatives coming to the EOC.

### B. Incident Command System

The EOC organization follows the concepts of the ICS, with some modifications.


EM Director
Advisors
EM Coordinator
PIO
Liaison Officer
Safety Officer
Operations Section Chief
Planning Section Chief
Logistics Section Chief
Finance / Admin Chief
City Operations Branch
Fire / EMS Branch
Police Branch
Resources Unit
Situations Unit
Documentation Unit
Demobilization Unit
Communications Unit & Message Unit
Facilities Unit
Food Unit
Ground Support Unit
Medical Unit
Supply Unit
Compensation / Claims Unit
Cost Unit
Procurement Unit
Time Unit

## C. Incident Command System Organization

### 1. Command

a. The **EOC Manager (EMC) or designee** provides overall direction and control for the Emergency Management functions of the City of Shoreline and acts as the Emergency Operations Center Manager. The EMC reports directly to the City Manager during an EOC activation, who serves as the City's Emergency Management Director.

b. The **Emergency Management Director** is responsible for policy development and acts as the primary liaison with the elected city council members or with other officials concerning the emergency event, i.e. The King County Executive or other City Managers/Mayors.

### 2. General Staff

The following sections are part of the Incident Command System. They are activated on an as-needed basis. Some of these functions may be carried out by the EOC Manager and staff will be added as need arises.

a. **Operations Section** - Implements strategic and tactical actions at the incident scene, perimeter control, evacuation, fire suppression, rescue, clean-up, emergency medical, and decontamination.

b. **Logistics Section** - Responsible for communications, facilities, transportation, supplies, and specialized equipment.

c. **Planning Section** - Responsible for situation and resource status reports, documentation, incident planning, technical advisors, and demobilization.

d. **Finance/Administration Section** - Responsible for contracts, time keeping, cost compensation, claims.

### 3. Command Staff Functions

The following command functions may either be performed by the EOC Manager or delegated to staff:

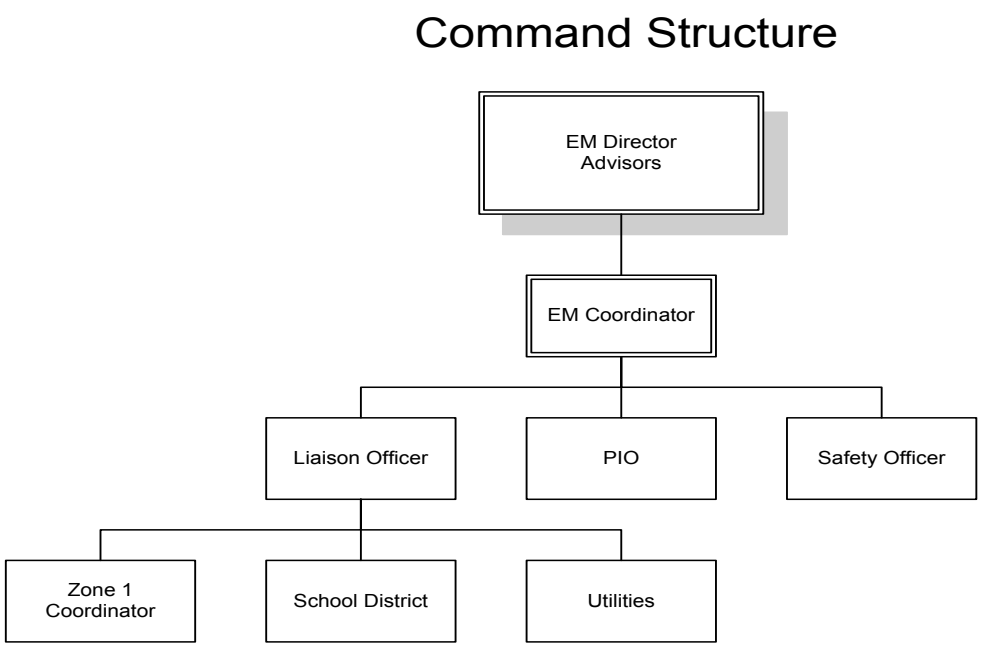
a. The **Public Information Officer (PIO)** and staff respond to media inquiries and develop emergency public information releases.

b. The **Safety Officer** oversees safety issues, provides warnings, checks on protective clothing and safety measures. (In the EOC format this function may or may not be needed)

c. The **Liaison Officer** provides coordination with city, Zone One, King County, State, Federal agencies and private businesses. These may include the School District and Utilities representatives.

d. **Advisors** may be available to provide guidance and support to the EOC Manager. This may consist of the City Manager, legal advisor, a ranking officer, or technical expert.

## VII. COMMAND SECTION AND CHECKLISTS




The command function is responsible for the specific command duties of decision-making, organization, public information, safety, and interagency coordination. It is responsible for the management of all five functions. In the event of a small incident, one individual may be able to easily manage all five responsibilities. In a major response to a citywide emergency, multiple

incidents, or an event impacting the entire region, a separate person may be assigned to handle each of the five functions.

In addition to these checklists, each position in the EOC has a Job Aid Book to assist with setting up the EOC, how to use the Shoreline communication systems, and how to de-mobilize the EOC.

## A. EOC MANAGER CHECKLIST

____ 1. Assess incident priorities.

____ 2. Determine goals and objectives.

____ 3. Develop and implement the incident action plan(s) with Section Chiefs.

____ 4. Develop an appropriate organizational structure.

____ 5. Manage incident resources.

____ 6. Coordinate overall emergency activities.

____ 7. Ensure responder safety.

____ 8. Coordinate activities of outside agencies.

____ 9. Authorize release of information to the public.

____ 10. Assign responsibilities as needed to the General Staff and Command Staff.

____ 11. Ensure notifications to the County and State are made and a mission number is obtained

**Oversees:**

General Staff:

- ❑ Operations
- ❑ Planning
- ❑ Logistics
- ❑ Finance/Admin.

Command Staff:

- ❑ Public Information Officer
- ❑ EOC Manager
- ❑ Liaison Officer
- ❑ Safety Officer if needed

**Designates Facilities:**

Emergency Operations Center
Incident Command Post(s)
Staging Areas

**Coordinates with:**

Other agencies involved in the emergency event.
Key General and Command Staff personnel.

## B. PUBLIC INFORMATION OFFICER CHECKLIST

**At the onset of an event:**

- ❑ Determine what the situation is, where the EOC is located and where they want you located.
- ❑ Advise them of how long it will take for you to reach your assigned location.
- ❑ Obtain briefing on situation from EOC Manager and determine limits of authority, such as pre-approval of press releases.
- ❑ Establish information center or press area near pre-defined area, coordinate location with EOC Manager.
- ❑ Obtain needed personnel and equipment.

**Duties:**

**After your arrival at your assigned area:**

____1. Meet with the EOC Manager, or their designee, to get an update as to the situation and any specific concerns.

____2. Establish a work area for yourself and an area for the media to be briefed. The media area should be a distance away from the EOC so there is no interruption in the work of the EOC.

____3. Set up the needed network to have access to the information you need. A part of this process is to make sure field personnel know you are in place and will be doing releases.

____4. Try to establish a set schedule for press conferences (such as every hour, every two hours). This will reduce interruptions and allow all to be aware when releases will be available.

____5. If possible, develop or obtain handouts with basic information concerning the emergency. This will assure that all in the media get the same information and reduce the number of questions you will be asked.

____6. Take a pro-active stance. Develop plans for informing the public on possible situations that may occur. This could include such things as street closures,

evacuations, information sheets on purifying water, guidelines for items to bring if evacuated to a shelter, etc.

____ 7. If possible, acquire at least one person to assist you in the paperwork and the information handling process of the job.

____ 8. Prepare information for the City's web site as needed.

____ 9.If possible, get access to a word processor and a copier.

____10. Sign onto the Regional Public Information Network and ensure press releases are posted to it.

**During the emergency:**

____ 1. Establish an event journal to log the emergency events and activities of the PIO function. This PIO event journal will be of value to track activities during the event and to evaluate activities after the emergency is over.

____ 2. Prepare all press releases concerning the disaster.

____ 3. Obtain approval for press releases from the EOC Manager.

____ 4. Coordinate with EOC Manager/IC, department representatives, and City Manager as needed.

____ 5. Establish a press release binder or folder. Keep copies of all press releases in chronological order.

____ 6. Have regular briefings with the EOC to assure that you have timely information and the facts that the EOC needs to be disseminated.

____ 7. Make extra copies of all press releases. This will allow you to update late-arriving media representatives without needing to recreate a release or to spend time giving the data verbally.

____ 8. Coordinate with King County and Washington State EMD PIO.

____ 9. Assist the EOC Manager with the preparation of Emergency Alert System (EAS) announcements.

____ 10. Assist in keeping the Mayor and City Council informed of the situation.

____ 11. Coordinate with other agencies PIO and participate in a Joint Information Center and/or a Joint Information System if established.

**Demobilization:**

____ 1. Assure all "loose ends" are taken care of and that there is someone available to handle any late-coming inquiries.

____ 2. Make sure that the PIO event journal is up to date and covers all activities of your office.

____ 3. Assure any information the public needs to access are released to the media and to those who will be contacts after the EOC is deactivated.

_____4. Notify a JIC/JIS of demobilization if applicable

**Reports to:** EOC Manager

**Oversees:** Other staff as needed.

**Coordinates with:**
EOC Manager
All departments and responders
Media
Regional Public Information Network (RPIN)
Joint Information Center or System, if established
All affected jurisdictions
King County PIO
WS EMD PIO

## C. LIAISON OFFICER CHECKLIST

**At the onset of an event:**

- ❑ Obtain briefing on situation from EOC Manager and determine scope of situation and assisting departments and outside agencies to coordinate.
- ❑ Establish a liaison communication center in pre-defined area in the EOC or Command Post.
- ❑ Obtain needed personnel and equipment.
- ❑ Review Job Aid Binder

**Duties:**

____ 1.Serve as point of contact for assisting or coordinating agencies.

____ 2.Coordinate management of participating agencies.

____ 3.Act as a diplomat between agencies when needed.

____ 4. Coordinate with mutual aid responders, county, state, and federal agencies.

____ 5. Work with private contractors to establish mission priorities, radio communication, and coordinate unified supervision.

_____6. Proactively solicit situational awareness of any external agencies and private business that are impacted by the event.

**Reports to:** Coordinator/IC

**Oversees:** Other staff as needed.

**Coordinates with:** Other departments
Other agencies
Mutual aid responders
Utilities
County, state, and federal support
Private businesses

## D. SAFETY OFFICER CHECKLIST

**At the onset of an event:**

- ❑ Obtain briefing on situation from EOC Manager and determine scope of situation and assist responding departments and outside agencies to identify safety issues and protect responders.

- ❑ Establish communication in pre-defined area in the EOC or Command Post.

- ❑ Obtain needed information such as weather, wind direction, disaster effects in surrounding areas, etc.

**Duties:**

____ 1.Serve as point of contact for safety issues.

____ 2.Coordinate placement and movement of participating agencies.

____ 3. Coordinate with mutual aid responders.

____ 4. Work with private contractors to ensure safety if needed.

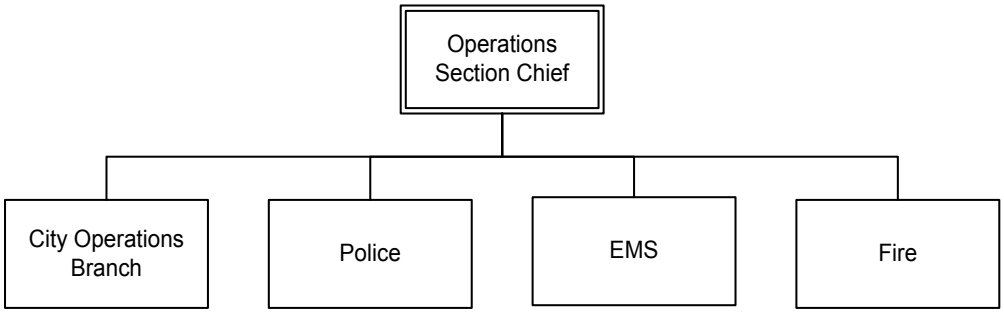
**Reports to:** Coordinator/IC

**Oversees:** Other staff as needed.

**Coordinates with:** Other departments
Other agencies
Mutual aid responders
County, state, and federal support

## VIII. GENERAL STAFF STRUCTURE AND CHECKLISTS

### A. OPERATIONS SECTION




The operations function delivers the "product" of the emergency response effort - the physical, front line activity needed to respond to the emergency and carry out the incident action plan (IAP).

The Operations Section is activated:

- When the EOC Manager is approaching an excessive span-of-control or is spread too thin.
- When the incident's complexity demands attention by the EOC Manager in functional areas other than operations (such as coordinating with several outside agencies).
- When running the operations function requires a technical background not possessed by the EOC Manager.
- When an event is spread over a wide area.
- An event will cover more than one operational period

## B. OPERATIONS SECTION CHIEF CHECKLIST

**At assignment to incident:**

- ❑ Report to Emergency Operations Center and obtain a briefing.
- ❑ Coordinate with EOC Manager and other EOC Sections on status.
- ❑ Ensure there are enough staff and liaisons to carry out response activities (police, fire, city operations group, i.e. public works, park maintenance staff, CRT operational staff, and operational staff of PADS).
- ❑ Evaluate need for staging area(s) and designate locations.

**Duties:**

____ 1. Direct and coordinate all tactical operations.

____ 2. Help EOC Manager and Section Chiefs develop goals and objectives for the emergency event.

____ 3. Track assistance requests and mitigation steps/solutions.

____ 4. Coordinate local and other resources in support of requests.

____ 5. Develop operational plans.

____ 6. Request or release resources through the EOC Manager.

____ 7. Consult with the EOC Manager on overall incident action plan (IAP).

____ 8. Keep EOC Manager and Planning and Logistics informed of situation and resource status within the section.

____ 9. Determine operational structure – Branches, Division, Groups, and Task Teams.

____ 10. Determine need and location of staging areas.

____ 11. Supervise staging area manager.

____ 12. Ensure liaisons report at termination of emergency event.

____ 13. Prepare summary report at termination of emergency event.

**Reports to:** EOC Manager

**Oversees:** EOC Ops representatives
Division and group supervisors within section
Other staff as assigned

**Coordinates with:** EOC Manager
Key staff under Operations Section
Mutual Aid Responders
Utilities
County, State and Federal Agencies

## C. OPERATIONS STAFF/AGENCIES CHECKLIST (FIRE, EMS, POLICE, PUBLIC WORKS, WSP, KC PUBLIC HEALTH, ETC.)

**At assignment to incident:**

- ❑ Sign in to EOC
- ❑ Report to Operations Chief and receive a briefing.
- ❑ Coordinate with EOC Manager and other EOC Sections on status.

____ 1. Report to Operations Section Chief.

____ 2. Handle messages and requests for assistance, as appropriate.

____ 3. Coordinate with EOC staff in response to disaster problems and situations.

____ 4. Carry out warning and notification call-outs.

____ 5. Maintain communication with respective agency management.

____ 6. Respond to problems and situations relative to agency responsibilities and capabilities.

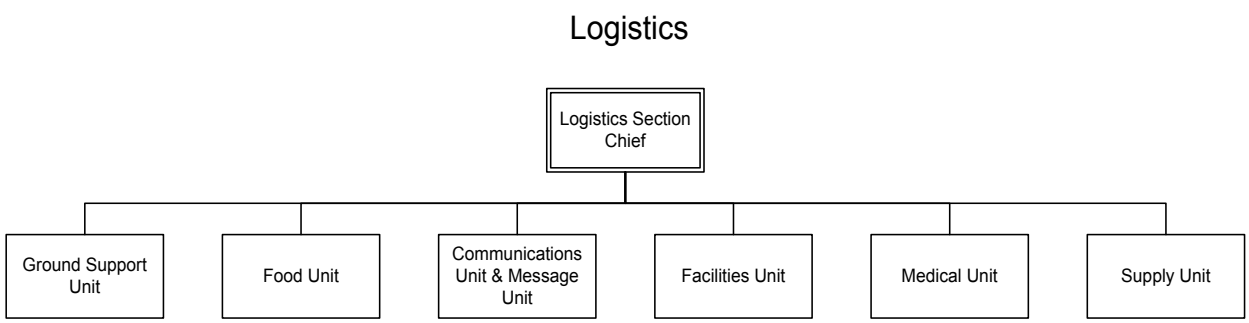
____ 7. Assists with preparing and distribution of the Situation Report (SITRPT) and the IAP.

____ 8. Keep Operations Section Chief informed of situation and solutions, respective agency status, resource availability, etc.

____ 9. Maintain status board with key agency information.

____ 10. Maintain staff journal of events.

## D. LOGISTICS SECTION




The logistic section is the support mechanism for the organization. Logistics provides services and support systems to all the organizational components involved in an incident, including facilities, transportation, supplies, equipment maintenance, fueling, feeding, communications and ***responder*** medical services. The logistics function involves securing the outside services and goods needed to support operations if needed.

The Logistics Section is activated:

- When significant outside tactical support is needed.
- When food, water, protection, or other supplies are needed to support operations personnel.
- When rental equipment is required.
- When materials must be purchased.
- For temporary housing and feeding of personnel.
- Because of need for mass feeding or shelter.
- When there is need for mass transportation.
- When facilities or open spaces/areas are needed.
- When the need to coordinate donation management has been identified.
- When the need to distribute materials (i.e. water, food, blankets, ice, etc) to the public has been identified.

## E. LOGISTICS SECTION CHIEF CHECKLIST

**At assignment to incident:**

- ❑ Report to EOC Manager and receive a briefing.
- ❑ Coordinate with other EOC Sections on status and development of the Incident Action Plan.
- ❑ Ensure there are enough staff and liaisons to carry out response activities.

**Duties:**

____ 1. Provide facilities, services, and materials for incident response.

____ 2. Oversee communications, medical and food services functions.

____ 3. Coordinate with Plans Section to keep current resource availability list up to date.

____ 4. Provide security for the EOC as necessary.

____ 5. Provide food, water, beverages, and bedding for the EOC.

____ 6 Coordinate with the Fire department to assign a medical unit for the personnel assigned to the event.

____ 7. Anticipate what might be requested and check on availability.

____ 8. Locate facilities, open spaces, and vehicles to meet the needs of the event

____ 9. Keep EOC Manager informed of activities within section.

____ 10. Coordinate with King County and Washington State EMD on points of distributions and donation management issues.

____ 11. Provide message control.
- ❑ See that messages are received, logged and assigned.
- ❑ Ensure message forms are numbered.

____ 12. Provide runners

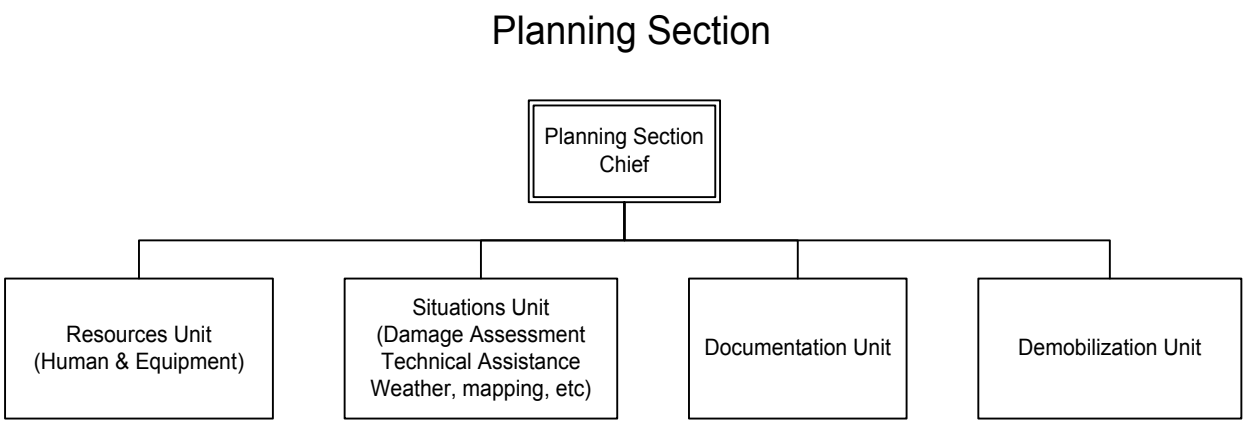
____ 13. Prepare a summary report at termination of the emergency event.

**Reports to:** EOC Manager

**Oversees:** Service Branch – Communications Unit, Medical Unit, Food Unit
Support Branch – Supply Unit, Facilities Unit, Ground Support Unit

**Coordinates with:** EOC Manager and Section Chiefs.

## F. PLANNING SECTION




The planning section is responsible for the collection, evaluation, dissemination, and use of information about the development of the incident and status of resources. This involves tracking the status of the incident and providing handling, analytical, and planning services. Information is needed to 1) understand the current situation, 2) predict probable course of incident events, and 3) prepare alternative strategies and control operation for the incident. The EOC Manager may personally deal with the planning, technical, and information handling aspects of an emergency unless delegated.

The Planning Section is activated:

- When the information flow has become too complex for the EOC Manager to track and manage the incident.
- When outside resources need to be contacted for information – county and state agencies, radio, TV, weather stations, road conditions, etc.
- When technical experts need to analyze and confer on a situation
- When the situation status requires planning for additional resources, dealing with mass casualties, traffic management plan, analyzing and planning for information obtained from damage assessments reports etc.
- When media is involved.
- When Situation Reports (Sitreps) are needed and an Incident Action Plan (IAP) is needed for the next operational period.
- When documentation is needed.
- When demobilization requires a plan.

## G. PLANNING SECTION CHECKLIST

**At assignment to incident:**

- ❑ Report to EOC Manager and receive a briefing.
- ❑ Coordinate with other EOC Sections on status.
- ❑ Ensure there are enough staff and liaisons to carry out response activities.

**Duties:**

____ 1. Manage information by:

- ❑ Collecting information on emergency event and resources.
- ❑ Evaluating information received.
- ❑ Disseminating information to EOC Operations.
- ❑ Using information to prepare the incident action plan.
- ❑ Use information boards and/or electronic boards to track status.

____ 2.Assist EOC Manager and Operations Section Chief in:

- ❑ Developing the incident action plan based on projected needs.
- ❑ Modifying the incident action plan to meet changing needs.
- ❑ Anticipating changes in resource needs.
- ❑ Preparing alternate strategies and tactical options based on projections

____ 3.Keep information, weather, maps, and status boards updated.

____ 4.Coordinate with Logistics Section on resource availability.

____ 5.Prepare Situation Reports (SITREPS) and Resource Status (RESTAT) reports.

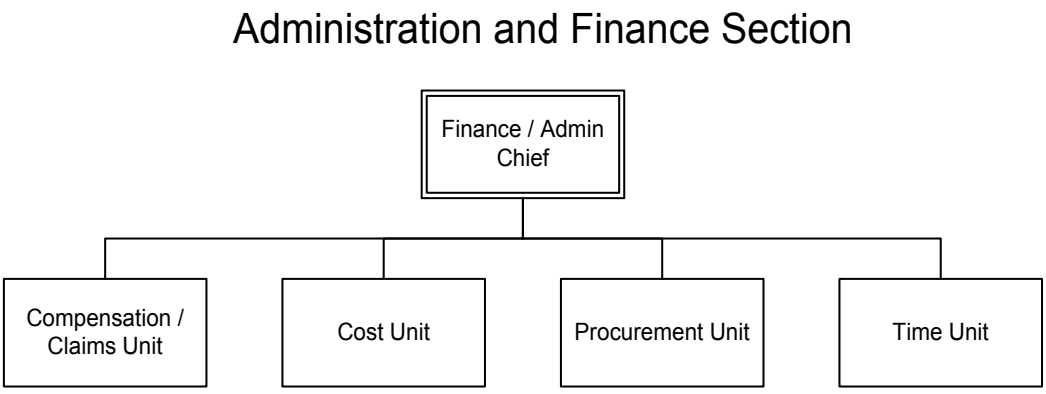
____ 6.Prepare an Incident Action Plan (IAP) for the next operational period.

____ 7.Keep message file. Track requests for assistance.

____ 8.Prepare summary report and termination of emergency event.

**Reports to:** EOC Manager
**Oversees:** Staff as needed.
**Coordinates with:** EOC Manager and Section Chiefs.

## H. ADMINISTRATION AND FINANCE SECTION




The Finance/Administration Section is responsible for managing all financial aspects of an incident and manages all the administrative and business considerations of the incident. Administrative staff may be required from the onset of an incident to assist in answering telephones and provide clerical support. This section may advise on risk management issues and needs. In addition, this section will oversee the technical support needs of the Emergency Operations Center.

The Finance Section Chief may spend relatively little time on direct field support issues unless significant costs may be incurred or resources purchased. Their attention may need to be directed toward business recovery and post-disaster conditions.

The Finance Section is activated:

- When significant costs may be incurred.
- When time of staff needs to be tracked.
- Venders need to be identified
- When contracts need to be negotiated and signed for with venders.
- When issues are identified pertaining to compensation and claims
- When business recovery is impacted.
- In post-disaster conditions.

The Administration Section is activated:

- When information must be captured and logged.
- When clerical support is needed.

## I. FINANCE AND ADMINISTRATION COORDINATOR CHECKLIST

**At assignment to incident:**

- ❑ Sign in to EOC.
- ❑ Report to EOC Manager and receive a briefing.
- ❑ Coordinate with other EOC Sections on status.

**Duties:**

____ 1. Oversee financial affairs:

- ❑ Track all incident costs.
- ❑ Evaluate financial considerations of the emergency event.
- ❑ Oversee budgeting and future payments.
- ❑ Assign responsibilities as needed to Time, Procurement, Compensation/ Claims, Procurement, and Cost Recovery.

____2. Oversee clerical support and data entry.

____ 3. Assign and oversee technical support staff to manage the information needs of the incident.

**Reports to:** EOC Manager

**Oversees:** Staff as needed.

**Coordinates with:** EOC Manager and Section Chiefs
Legal staff
Private venders.
County, State and Federal Agencies, primarily for recovery activities

This check list is to serve as a guide for notification of key personnel and regional partners in the event an emergency occurs that would require activating the EOC in the City of Shoreline.

- ☐ The City Manager or his/her designee will authorize the activation of the EOC for the City of Shoreline.
- ☐ Staff notification will be made by using the Shoreline (Everbridge) employee alert/notification system. The designated administrators (Communications Manager, Emergency Management Coordinator, CRT Staff, Community Services Manager, HR Management) to the site will activate the EOC sections as decided on by the City Manager and the Emergency Management Coordinator. Phone calls, texts, and emails will go to the appropriate staff.
- ☐ The Resource Unit, within the Planning Section, will track responses from employees on the Shoreline Alert system.
- ☐ As Department Heads/Sections Chiefs respond to the EOC they will check with the Resource Unit, within the Planning Section, to see who will be coming to assist with their sections and build a staffing plan based on this information.
- ☐ Once the EOC is activated, King County ECC and the State Emergency Operations Center should be notified. If appropriate, a mission number should be requested from the State.

Other Considerations:

- ☐ At the time of activation, the City Manager's Office shall determine where the EOC will be activated and to which level, 1, 2, or 3 (see below).
- ☐ If there are any specific directions to city staff about reporting to work the CMO's administrative staff shall place them on the City's Emergency Outgoing Hotline, (206) 801-2255 in addition, this same information will be sent out to all Staff utilizing Shoreline Alert employee notification system.
- ☐ If phone lines are not available other communication devises will be utilized to the extent possible to ensure notifications, i.e. 800 radios, email, cell phones, or email.
- ☐ When no communication is available after a significant emergency event city staff should assume that the City's Emergency Staffing Plan has been activated and respond to the EOC accordingly.
- ☐ Notification of our Community Partners in the Regional and State of our activation and obtaining a State mission number are also key notifications to make when we are activated.
- ☐ In order to ensure continuity of government, the EOC may be activated when City Hall has lost power for a significant period of time as the phone and data lines will no longer work.
    - When any staff member (IT, CRT, Police) are notified that the power is out and the probability is that it will be out for an extended period of time, longer than 2 hours, they shall immediately notify the City Manager's Office.

- The EOC may be activated to answer critical calls for service. At that time a determination will be made, depending on the event, which sections of the EOC and how many staff will be needed to maintain this critical function.

Level I Monitoring Phase - *An emerging situation is being monitored and may warrant the need for obtaining more resources in the future.*

Level II Partial Activation - *A situation that requires two or more departments to provide an effective response: resources may be required from other agencies*

Level III Full Activation - *A situation beyond the ability of our organization to manage: additional resources are required and an emergency is proclaimed.*

*(See EOC Appendix B - Handbook for examples).*

**Determine which location for the EOC will be activated.**

A. Primary – Shoreline Fire Training Center
B. Alternate - Lake Forest Park City Hall/EOC

NOTIFICATION CHECKLIST

**Phone numbers of staff in this section have been removed – contact the City of Shoreline Emergency Coordinator if you have a need for any phone numbers.**

**EOC SUPPORT STAFFING - Should be captured in the EOC Sharepoint System, but if needed can be captured below.**

**Communications Unit**

| Call | Position | Name | Time Called | Initials |
|---|---|---|---|---|
| | Call Taker | | | |
| | Call Taker | | | |
| | Runner | | | |
| | Security | | | |
| | 800 Radio Operator | | | |
| | Comm Unit Leader | | | |

**Amateur Radio**

| | | | | |
|---|---|---|---|---|
| | Team Leader | | | |
| | Operator | | | |
| | Operator | | | |
| | Operator | | | |
| | Operator | | | |

**EOC Planning Section**

| | | | | |
|---|---|---|---|---|
| | Section Chief | | | |
| | Documentation | | | |
| | Situation | | | |
| | Resource | | | |
| | Demobilization | | | |

**EOC Logistics Section**

| | | | | |
|---|---|---|---|---|
| | Section Chief | | | |
| | Facilities Unit | | | |
| | Supply/ Food Unit | | | |
| | Ground Support/Transportation | | | |
| | Shelter Group | | | |

**EOC Finance & Administration Section**

| | | | | |
|---|---|---|---|---|
| | Section Chief | | | |
| | Time Unit | | | |
| | Procurement Unit | | | |
| | Compensation and Claims Unit | | | |
| | Cost Unit | | | |
| | IT Support | | | |

**EOC Operations Section**

| | | | | |
|---|---|---|---|---|
| | Section Chief | | | |
| | Law Enforcement | | | |
| | Fire Dept | | | |
| | City Operations | | | |
| | Security | | | |
| | Other | | | |

**EOC Command**

| | | | | |
|---|---|---|---|---|
| | Emergency Manager Director | | | |
| | Emergency Operations Center Manager - EMC | | | |
| | PIO | | | |
| | Liaison Officer | | | |
| | Safety Officer (if needed) | | | |

## EOC ACTIVATION BENCHMARKS

**Decision to Activate Plus 30 Minutes**

- Notifications of Emergency Management staff, Manager, Mayor and appropriate staff
- Staffing needs identified, call outs started
- EOC Set-up started
- City's Emergency Outgoing Hotline updated, (206) 801-2255

**Decision to Activate Plus 1 Hour**

- At least some of EOC staff have arrived
- Staffing need identified and notifications completed
- Basic situation identified, rapid impact assessment started
- EOC set-up completed

**EOC Open Plus 1 hour**

- Initial EOC actions completed
- Support staff positions identified and notifications completed
- Coordination staff identified and notifications completed
- Message logger and router positions staffed
- Information and analysis section staffed
- Rapid impact assessment continues (windshield survey)

**EOC Open Plus 2 Hours**

- First briefing, briefing schedule posted
- Initial damage information available
- City departments assessing response capability
- Planning Section prepares Situation Report
- Report any weather related damage to NWS

**EOC Open Plus 4 Hours**

- Damage assessment continues
- Initial contact made with all utilities, surrounding jurisdictions and situation reports requested.
- Situation report written and sent out to all interested parties
- Evaluate staffing needs for next 24 hours and make notifications
- Identify EOC facility needs for next 24 hours; food, maintenance, office supplies
- Identify staffing needs for relief

**EOC Open Plus 8 Hours**

- Assessment of general areas of damage should be complete
- General situation of neighboring counties and cities should be known
- Logistics section in place
- Plans and recovery functions working
- Coordination group has moved from damage assessment to coordination of resources

***SHIFT CHANGE FOR EOC - BRIEF RELIEF CREW (This is done generally after 12 hours under activation. RETIRING CREW REMAINS ON SHIFT FOR 30 MINUTES TO OVERSEE SMOOTH TRANSITION OF INCIDENT***

**EOC SETUP CHECKLIST**

____ 1.Direct setup of EOC:

- √ Arrange Fire Department Training Room for EOC usages as pre-determined.
- √ Establish EOC security
- √ Place department identification cards at each table position, per attached drawing.
- √ Distribute material to ensure every position has adequate supplies
  - ♦ Telephone
  - ♦ Note pad
  - ♦ Pencils
  - ♦ Telephone books
  - ♦ Resource books
  - ♦ SOP books
  - ♦ Laptop computers
- √ Setup and supply status boards
  - ♦ Dry erase markers
  - ♦ Dry erasers
- √ Setup flip charts and sign-in board

____ 2.Assign someone to take telephone messages.

____ 3.Assign someone to post the situation information and key contact numbers on maps and status boards.

____ 4.Notify Washington State Division of Emergency Management Duty Officer (1-800-258-5990) for mission number and/or situation report.

____ 5.Notify the City of Bellevue Zone One if the situation is regional

____ 6. Notify King County Office of Emergency Management, as situation requires.

(ECC Office – 206-423-6119 Duty officer if no call back in 10 minutes, call KC Dispatch Supervisor at: 206 296-3311, ECC Activations: ecc.kc@kingcounty.gov for PIO needs King County JIC: jic@kingcounty.gov

____ 7.Ensure that all necessary warnings and notifications have been made. If not, either make them, or direct someone to make them.

____ 8.Obtain an updated weather report, if appropriate. Use Weather Net if available, if not NOAA information is available at (206) 526-6083/(206) 526-6857 or 162.550 MHz; or on the web, TV, or radio. Post the information and plan to get updates as necessary.

____ 9.Keep an accurate log of activities.

## EOC DEACTIVATION CHECKLIST

- Notify King County EOC 206-423-6119
- Notify the WA State EOC 253-512-7000
- Notify City Departments
  - Police 206-801-2710 or 206-296-3311
  - Fire 206-533-6500
- Notify public utilities
- Notify surrounding municipalities
- Notify all agencies that were notified of activation (National Weather Service, School District, Community College, etc)
- Return room to ready state
- Deactivate EOC phones
- Secure building

## EOC DISPLAYS, MAPS, STATUS BOARDS

- *All changes shall indicate the DATE and TIME of the change*
- *The person updating the display shall INITIAL all changes*
- *Changes will be made ONLY by personnel in charge of that EOC function or their Designee*
- *Official authorities will verify information on display boards before being posted*
- *Information of display boards is not necessarily for public or media dissemination*
- *Check with the EOC Supervisor if unknown what information is public knowledge*

Suggested information for display - white boards, flip charts, clipboard

Significant Events
City Department Status
Deaths
Injuries
Transportation Systems
Utilities
Structures
Hospital Status
EOC Staffing
Evacuation Areas
Event Logs
Incident sites, Command Posts, Incident Commander and Phone Numbers
Public Information Officers and Phone Numbers
Resources distributed and plotted on map
Resources requested
Environmental conditions
School status
Shelter locations and status
Time of next briefing
Utility status
Weather conditions and predictions

## EOC REPRESENTATIVE CHECKLIST

| | |
|---|---|
| 1. Check In: | Upon arrival at the EOC sign check-in board |
| 2. Determine Status: | Check status boards and determine immediate situation. |
| 3. Confer: | Check with EOC Director and previous section representative. |
| 4. Determine: | Review messages and determine immediate actions. Forward messages are required. |
| 5. Damage Assessment: | Monitor damage assessment and the status of capabilities and resources. |
| 6. Response/Recovery: | Monitor response and recovery needs for field support, technical support, and resource needs. |
| 7. Coordinate Actions: | Coordinate requests for information, outside assistance and executive decisions and or actions. |
| 8. Assist: | The section leader or EOC Director in developing and revising short-and long-term plans of action for supporting the field commands and the public. |
| 9. Inform: | Keep your department/agency current of all pertinent information, including that resulting from:<br>• Interaction with counterpart EOC representatives.<br>• Action plan development meetings.<br>• Information from status boards. |
| 10. Ensure Safety: | As appropriate, ensure that all warning information that affects safety and survivability of Shoreline resources is relayed to appropriate personnel immediately, even if it has been disseminated by other means. |
| 11. Participate: | At the request of the EOC Director, participate in status briefings, and policy group meetings. |

**Elected Officials**
Mayor
- *(determined by majority vote of city council)*

Deputy Mayor
- *(determined by majority vote of city council)*

City Council Member

**City Manager's Office**
City Manager
Assistant City Manager
Intergovernmental Program Manager
Senior Management Analyst

**Administrative Services Division**
Director
Finance Manager
Information Services Manager
Purchasing Officer

**City Clerk's Office**
City Clerk
Deputy City Clerk

**Community Services Division**
Manager
Emergency Management Coordinator
CRT Supervisor
Neighborhood Coordinator

**Human Resources Department**
Human Resources Director
HR Analyst

**Legal Department**
City Attorney
Deputy City Attorney

**Police Department**
Police Chief
Operations Captain
Admin. Captain
Detective Sgt.

**Fire & EMS Department**
Fire Chief
Assistant Fire Chief
Battalion Chief
Ranking Officer

**Parks, Recreation, and Cultural Services**
Director
Recreation Superintendent
Parks Superintendent

**Department of Planning and Community Development**
Director
Building Official
Planning Manager
Permit Services Manager

**Public Works Department**
Director
Operations and Utilities Manager
Transportation Services Manager
Capital Projects Administrator
Traffic Engineer
PW Maintenance Supervisor

## 1.1 Emergency Staffing Plan

**City Personnel Policy:**

As provided in Section 5.05 of the City's personnel policies: "The City is in the business of providing vital public services. This means that the City does not cease its operations during times of inclement weather or natural disasters" and has a commitment to continue to provide vital services to the community during emergency conditions, while maintaining a primary concern for the safety of City employees and their families. "Therefore, all employees are asked to make every reasonable effort to report to work during such times even if it is inconvenient."

**Activation of the Emergency Operations Center (EOC):**

In the event of a widespread emergency or disaster the City's Operational staff will need to respond to assist with response activities. The Emergency Operations Center, which is located at the Shoreline Fire Headquarters and Training Facility, will be activated to assess the situation in the City of Shoreline. (See ESF 5 Appendix C EOC Activation Procedures as to how the EOC will be activated). Staff assigned to the EOC should respond and assist with the situation assessment (see EOC Staffing Chart). Staff assigned to the City's Operations functions from Public Works, Customer Response Team, and Park Maintenance will respond to Hamlin Park Maintenance Facility for deployment. Department Directors are responsible for ensuring their staff knows their assignments during such an event. It is important to note that not everyone will be reporting through their daily assigned department director. In the activation of the EOC, staff will be assigned to perform either through a Section Chief or a Command Staff member like the Incident Commander.

**Notifying the City:**

Employees assigned to the EOC or to Operations must attempt to notify the City if they are unable to report to their work assignment in the EOC or in the field.

**Continued Staffing of Emergency:**

After the situation assessment, the City Manager or his/her designee may decide that the situation will require staff over an extended period of time. He/she will then initiate, through the Resource Unit of the Planning Section of the EOC, which is staffed by Human Resources, a staffing plan to ensure coverage of essential services for the duration of the event. This could include modifying the work schedule to a potentially longer work day than considered normal, including a 12 hour or longer staffing plan. Every attempt will be made to notify all City employees of this staffing decision and when they will be needed to work.

For employees who are required to remain at work upon the occurrence of a disaster or activation, departments shall make every effort to allow employees to check promptly on the status of their families and homes, provided that doing so does not compromise emergency response functions as defined in the City's Comprehensive Emergency Management Plan.

**If You Are Not At Work During the Emergency:**

If the EOC is activated, and you are not at work, you can call and/or email the EOC to give a status report as to your availability at (206) 801-2700 or at eoc@shorelinewa.gov. Your status report provides useful information for staffing for the duration of the event. If you are at work you will be given direction as to if you should remain or when you will need to return. You may also receive information from the City through the Everbridge emergency notification system.

## 1.2 Departmental Emergency Staffing Plan for Catastrophic Events

**Emergency During Non-business Hours:**

If a widespread catastrophic event should occur, such as a large earthquake in the greater Seattle Metropolitan area during non-business hours, and there is no way to communicate to employees, the following plan will be in affect:

1. The EOC will be activated to coordinate the City's response to the event. All staff who are assigned to the EOC shall make every effort to respond to staff the EOC and report to your Section Chief or the Emergency Management Coordinator (EMC). On an annual basis the EOC Staffing Chart will be evaluated and updated as needed.

2. If you are assigned to the City's Operations Team (Public Works, Park Maintenance, and CRT), or a staff person who supports them administratively, you should respond and report in to the Incident Commander. Once a determination is made as to who has been able to make it to work, the Resource Unit of the Planning Section in the EOC will begin working out a staffing plan in conjunction with the Public Works Utility and Operations Manager, to enable the City to meet the most immediate service needs to the community for the next operational period. This plan can also include the use of mutual aid and the Registered Disaster Volunteer Workers (Shoreline CERT members).

## 1.3 Emergency Contact Information

All regular employees are required to keep the City of Shoreline Employee Emergency Contact Information in their Employee Online account current so that the City can contact your family during times of emergencies.

Each department will have a protocol that allows for an appropriate way to contact their employees to relay any emergency information or need. In addition, employees are encouraged to use the City's Emergency Outgoing Hotline at (206) 801-2255 for general information and/or specific direction.

## 1.4 Emergency Preparation Encouraged

All City employees are encouraged to preplan for the safety and welfare of their families and homes. All City employees are encouraged to have emergency provisions for their families and homes to survive a minimum of 72 hours if a crisis necessitates it.

## 2.1 Issued Equipment

The City of Shoreline has issued equipment to many employees to be able to communicate with other staff and to perform their assigned functions. If you have been issued such equipment, i.e. radios, phones, flashlights, etc., you are required to maintain the assigned equipment in a state of operational readiness and have immediate access to it.

1. If any assigned equipment becomes lost, damaged, or does not work the employee should report this to their supervisor immediately.

2. Supervisors will ensure all City owned equipment is repaired or replaced as soon as practical after being notified of its status by the assigned employee.

# City of Shoreline Critical Public Facilities List - Availability and Alternative Power list 2015
# CEMP ESF 5 Appendix F

| Facility Type: (medical, emergency response, water/waste water, etc) | Priority: 1, 2, 3 (life saving, life sustaining, other) | Facility Name | Has Alternative Power | Address | County | City | Zip | POC Name (facility POC is best) | Work Phone/Cell | Email |
|---|---|---|---|---|---|---|---|---|---|---|
| CITY FACILITY | Coordination among Gov Agencies | Shoreline City Hall | No | 17500 Midvale Ave N | King | Shoreline | 98133 | Richard Conley | 206-801-2354 | rconley@shorelinewa.gov |
| CITY FACILITY | Life, Safety, Health | Richmond Highlands Recreational Center | No | 16544 Fremont Ave N | King | Shoreline | 98133 | Richard Conley | 206-801-2354<br>206 391-9603 | rconley@shorelinewa.gov |
| CITY FACILITY | Life, Safety, Health | Shoreline Pool | NO | 19030 1st Ave NE | King | Shoreline | 98155 | Richard Conley | 206-801-2354<br>206 391-9603 | rconley@shorelinewa.gov |
| CITY FACILITY | Life, Safety, Health | Shoreline Maintenance Facility | Yes | 16006 15th Ave NE | King | Shoreline | 98155 | Richard Conley | 206-801-2354<br>206 391-9603 | rconley@shorelinewa.gov |
| COURTHOUSE | Restoration of Essential Services | King County Court District -Shoreline Court House | No | 18050 Meridian Ave N | King | Shoreline | 98133 | King County Courts | 206 477-1774<br>206 423-6606<br>206 296-0641 | |
| CITY FACILITY | Life, Safety, Health/Mass Care Facilty | Spartan Gym - Primary Shelter Site | Yes | 202 NE 185th St | King | Shoreline | 98155 | Richard Conley | 206-801-2354<br>206 391-9603 | rconley@shorelinewa.gov |
| FIRE and EOC | Life, Safety, Health - City Primary EOC | Station 61 - Shoreline Fire Department | Yes | 17525 Aurora Ave N | King | Shoreline | 98133 | Tim Dahl | 206 533-6500<br>206 795-3350 | tdahl@shorelinefire.com |
| FIRE | Coordination among Gov Agencies | Station 63 - Shoreline Fire Department | Yes | 1410 NE 185th St | King | Shoreline | 98155 | Tim Dahl | 206 533-6500<br>206 795-3350 | tdahl@shorelinefire.com |
| FIRE | Coordination among Gov Agencies | Station 64 - Shoreline Fire Department | Yes | 719 N 185th St | King | Shoreline | 98133 | Tim Dahl | 206 533-6500<br>206 795-3350 | tdahl@shorelinefire.com |
| FIRE | Coordination among Gov Agencies | Station 65 - Shoreline Fire Department | Yes | 145 NE 155th St | King | Shoreline | 98155 | Tim Dahl | 206 533-6500<br>206 795-3350 | tdahl@shorelinefire.com |
| FIRE | Coordination among Gov Agencies | Station 62 - Shoreline Fire Department (Children's Safty Center) | Yes | 1851 NW 195th St | King | Shoreline | 98177 | Tim Dahl | 206 533-6500<br>206 795-3350 | tdahl@shorelinefire.com |
| POLICE | Coordination among Gov Agencies (City Back up EOC) | Shoreline Police Department | Yes | 1206 N 185th St | King | Shoreline | 98133 | Richard Conley | 206-801-2354<br>206 391-9603 | rconley@shorelinewa.gov |

**ESF COORDINATOR:** Recreation Superintendent

**LEAD AGENCIES:** Parks, Recreation, and Cultural Services Department
Community Services Manager
Human Services Planner

**SUPPORT AGENCIES:**
All City Departments
Human Services Organizations
American Red Cross
Public Health, Seattle King County
King County Emergency Coordination Center
Washington State Emergency Management Division

## Introduction

### Section 1.01 Purpose

(a) This document has been developed to provide for the coordination of efforts to address the non-medical mass care, housing and human services needs of residents following an emergency or disaster.

### Section 1.02 Scope

(a) This ESF promotes the delivery of services and the implementation of programs to assist individuals, households and families impacted by an emergency or disaster. This ESF includes three primary functions: mass care, housing, and human services.

(b) Mass care involves the coordination of non-medical mass care services to include sheltering of victims, organizing feeding operations, providing emergency first aid at designated sites, collecting and providing information on victims to family members, opening a cooling/warming center, coordination of the feeding and medical care of pets, and coordinating bulk distribution of emergency relief items. The City will coordinate with King County Emergency Coordination Center (KC ECC) when determining the need to open or address any of these needs. They will also coordinate with KCECC and the State of Washington's EOC Logistics Section when the need is determined to set up a Point of Distribution Center (POD).

(c) Housing involves the provision of assistance for short and long-term housing needs of residents. This is addressed in the City of Shoreline Recovery Plan.

(d) Human services will be provided primarily by local disaster organizations and various counties, state and federal government agencies, when available. The range of services needed by residents will depend on the emergency. In the event of a presidential disaster declaration, additional emergency welfare services may become available to eligible residents. These may include low-interest loans, food stamps, disaster counseling, and unemployment benefits. These services are coordinated through a State or Federal Disaster Assistance Center which is established following the presidential disaster declaration. The City of Shoreline (City) will coordinate with the Zone 1 Coordinator (Z1 EC), King County Emergency Coordination Center (KC ECC) and/or directly to the Washington State Emergency Operations Center in arranging for appropriate work space and equipment for the operation of a Disaster Assistance Center in the event one is established within the City.

(e) All medical needs of populations that need sheltering will be coordinated with the King County Emergency Coordination Center and Public Health - Seattle King County.

(f) Often people who seek shelter have with them domesticated pets. Coordination of a shelter in King County that has a co-located pet shelter will be coordinated with King County ECC and the American Red Cross. Shelters for pets and livestock will be activated by Regional Animal Services of King County with help from WSU Extension, local veterinary and volunteer animal care organizations. Pets and livestock shelters may be separated from shelters for citizens. All reasonable and practical steps will be taken to ensure that shelters do not become contaminated. KCECC has MOU's in place to set up sheltering needs for vulnerable populations and pets. The City of Shoreline will coordinate with KCECC if such needs are identified.

(i) If the City recognizes a need to shelter a significant amount of community members who have domesticated pets and they cannot get to one of the regional shelters described above and resources are available, the City will make a reasonable effort to implement plans that will be made with one of our community partners, veterinary care givers, faith based organizations and/or schools, to locate a facility that can accommodate both. The Parks Department has a template on how to set up a co-located pet and human shelter. This can only be done if there are sufficient enough staff and other resources to support the plan safely. Residents are encouraged to have a plan in place for both themselves and their pets so they have a place to go to if they need to evacuate that is already pet friendly.

Section 1.03 Situation

(a) A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to staff efforts to save lives and protect property.

(b) Disasters can occur without warning. Shelters, first aid, mass care, cooling, comfort and feeding sites may have to be set up with little-or-no warning or advance notice.

(c) Slowly developing disasters, such as slowly-rising flood waters, may result in more time for warning and evacuation, but might cause the displacement of a large population. Such hazards may necessitate opening shelters and conducting mass care activities outside of impacted areas.

(d) Sheltering-in-place, restriction of movement, and non-congregate sheltering are required to prevent the spread of contagious diseases during a pandemic incident. These actions may necessitate the establishment of sustenance sheltering operations at the local and regional level that may require state-level support.

(e) Some people may be reluctant to evacuate their homes because of their pets. It will be necessary for local jurisdictions and private citizens to plan ahead for the rescue, evacuation, shelter and feeding of a portion of the pet population.

(f) It may be necessary to convince some people to evacuate from an unsafe condition. These people may be elderly, physically challenged or have functional needs that may not be able to be adequately addressed in a sheltering situation.

(g) There is a large population of persons with functional needs that will require special services and considerations in a sheltering or evacuation situation.

(h) Institutionalized populations will need special consideration in sheltering and evacuation situations. These considerations may include security, special housing needs, and other special needs.

(i) All medical sheltering needs will be coordinated with Public Health Seattle King County. Medical sheltering is covered to some extent through agreements with local hospitals to set aside beds and other resources during an emergency that causes a medical surge. In addition, resources may need to be identified to respond to the requirements of those who seek emergency shelter and depend on mechanical medical devices to maintain life.

**Section 1.04 Assumptions**

(a) Pets and livestock will not be allowed in shelters due to sanitation and safety concerns. The City recognizes the comforting and therapeutic effect animals have on humans, especially during a disaster; therefore, every attempt will be made to locate pet shelters in close proximity to shelters designated to shelter people.

(b) The City does not maintain food stocks or meals on an everyday basis for mass meals. Instead, the City will work with the Red Cross, other NGO's and local venders that are sources of food stuffs and other supplies that can be converted from normal use to support an ongoing mass care operation during times of emergency. The need to feed a large amount of people will be coordinated with KCECC and their ESF #6 section.

(c) The City will make an effort to provide equitable geographic distribution of shelter locations in the city in order to serve the broadest base of population, but will locate shelters on a case-by-case basis, balancing appropriate and available facilities with affected populations.

(d) Public and private volunteer organizations and the general public will have to utilize their own resources and be self-sufficient for a minimum of seven days. This includes supplies of food, water, and medication.

(e) Local mass care providers, who rely heavily on volunteers, have emergency response plans but will not have the resources to adequately respond to mass care needs during the initial stages of an incident as their volunteer pool may be greatly impacted by the disaster.

(f) People will often evacuate an area before orders to evacuate are given.

(g) Some persons will resist or ignore evacuation orders and/or shelter in-place orders.

(h) People with functional needs that cannot be adequately addressed in a nonmedical shelter may present themselves to non-medical shelters and may need to be relocated. An influx of mass care professionals and volunteers may strain resources in an impacted area. State-level mass care personnel will be prepared to support their own logistical needs when assigned to the site of a disaster.

(i) Local law enforcement agencies will need to be able to fill the needs for crowd control and security at mass care facilities for at least the first 72 hours of an incident.

(j) A public emergency within or adjacent to the City has the potential to cause loss of life, property, and/or disruption of normal life support.

(k) The City may be heavily dependent on outside agencies and vendor assistance in order to adequately respond to emergencies.

(l) The City is heavily dependent on the ARC and other Volunteer Organizations to provide sheltering operations.

(m) Early damage assessments will be general and incomplete and may be inaccurate. Rapid assessment of the emergency area is required to determine critical needs and to estimate potential workload or requirements for federal assistance.

(n) Regional emergency coordination and planning is critical to ensure regional transportation stability.

**Section 1.05 Policies**

(a) All activities within ESF 6 – Mass Care, Housing and Human Services will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) As a signatory of the King County Regional Disaster Framework, through the Washington State Mutual Aid System (WAMAS), and through local mutual aid agreements, the City will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible. The City will utilize these same systems when requesting resources.

(c) During a disaster, the City will make requests for assistance to cities through WAMAS. In the event additional resources are required, the City will make requests to the Zone 1 Emergency Coordinator (Z1 EC), King County Emergency Coordination Center (KC ECC), and the Washington State Emergency Operations Center. Requests to Z1 EC and KC ECC may be made simultaneously. All requests for assistance will be initiated by the EOC based upon information from the field command posts.

(d) It is the responsibility of City departments and personnel to conduct activities within this ESF. The Parks, Recreation and Cultural Services Department and Human Services will facilitate these activities until such time as other organizations such as American Red Cross (ARC), Salvation Army, religious organizations and/or other human service organizations are able to take over operations to provide mass care, housing, and human services within the City

(e) While the City anticipates assistance from human service organizations, such as the ARC, there is no guarantee that assistance will be available. The City will develop plans and processes with the understanding that there may be few or no external resources available.

(f) All appropriate government, volunteer, and private sector resources will be utilized, as available. The disaster information system is established and operated by the ARC. The system will consist of those persons identified on shelter lists, National Disaster Medical System (NDMS), casualty lists, and any other information made available by the City of Shoreline, state, or federal Emergency Operations Center (EOCs) and hospitals. This information will be collected, verified, and made available to immediate family members upon the consent of the sought person, if possible, within or outside the affected area. Information on those injured and remaining within the affected area will be limited to that provided by local medical units to the system. Information on casualties evacuated from the affected area to other medical facilities will be restricted to that provided by NDMS tracking capability. The listing of public emergency-related deaths will be limited to officially confirmed fatalities that are done by the King County Medical Examiner's Office. The disaster information system operation will be discontinued as soon as it is practical.

**Article II. Definitions**

| Word | Definition |
|---|---|
| ARC (American Red Cross) | Non-Profit organization that can provide Mass Care in disasters and/or emergencies. |

## Article III. Concept of Operations

### Section 3.01 General

(a) The Incident Command System (ICS) will be used for all field operations. The Incident Commander will report information and requests to the Emergency Operations Center (EOC) Manager.

(b) At least one incident command post will be established for the coordination of field operations. The unified command structure will be used when multiple departments/agencies are responding to an event.

(c) HR will work with the Parks, Recreation and Cultural Services Department and Administrative Services to locate emergency shelter for City employees and their immediate families.

(d) Individual assistance to disaster victims will be provided primarily by local disaster organizations and various county, state and federal government agencies. The range of services needed by disaster victims will depend on the specific disaster and could include temporary housing, furniture, building/repair supplies, and occupational and mental health services.

(e) The City will pre-designate areas to serve as points of distribution (PODs) for the disbursement of items such as ice, water, food, etc. in coordination with ESF #11 Agriculture and Natural Resources. Multiple sites will be pre-determined throughout the City to ensure that drop sites are outside of the damaged area.

(f) The City will pre-designate city-owned public facilities or other public and private facilities that may be used as emergency shelter facilities when:

(i) there will be a delay in opening ARC shelters;

(ii) there are not enough ARC shelters to accommodate the need of the population;

(iii) the ARC is unable to open shelters within the City, for any reason;

(iv) or it is the most expedient method for providing temporary shelter during a disaster.

(g) It is a realization that providing mass care and housing during a large scale event will overwhelm every social service agency in the Puget Sound area. Dependent on the hazard and the severity of the disaster, the City may have limited shelters and limited resources to manage those shelters. All shelter operations during emergencies and disasters will be coordinated through the EOC.

(h) In a disaster, the EOC may submit requests to the Z1 EC, KC ECC and/or the Washington State Emergency Operations Center for assistance from the ARC, Salvation Army and other voluntary organizations to provide sheltering and meet the emergency needs within the City

(i) The ARC may be available to activate, manage and support public shelters and provide related services needed by displaced populations during the sheltering period. The activation of the shelter system may include the provision of emergency food, water, shelter, clothing, health and mental health care to disaster victims, and crisis training for City staff and volunteers to assist in the Red Cross operations.

(j) The ARC is congressionally mandated to provide emergency mass care services to populations affected by natural or manmade disasters. As a primarily volunteer agency, those services can take some time to mobilize initially.

(k) Throughout the response and recovery phase of a disaster, the Parks, Recreation and Cultural Services Department and Human Services will continue to coordinate with the ARC, Salvation Army, faith-based organizations and other human services organizations to provide mass care, housing, and human services within the City.

(l) The Parks, Recreation and Cultural Services Department and the Administrative Services Department will coordinate with appropriate City departments to identify safe areas of the City, inspect potential shelter facilities for building safety, identify safe routes of travel, determine the appropriate number and locations of shelters, duration of use, etc.

(m) Parks, Recreation and Cultural Services Department, if they have the available staff, will coordinate the management of City-owned or City operated facilities serving as interim shelter facilities until such time as a recognized public service organization can assume shelter operations or the shelter is no longer needed. In addition, the City will coordinate the opening of a shelter with neighboring cities so that scare resources can be shared. Activation of pre-identified facilities for sheltering will be coordinated by the Parks, Recreation and Cultural Services Department through the EOC.

(n) City personnel may be requested to serve as emergency workers in shelters. The City has a cadre of Registered Volunteer Disaster Workers, CERT's, who have also been trained in Shelter Management. The Human Resources Department (HR) and the City's Volunteer Coordinator will be responsible for coordinating the assignments for volunteers with other City departments. (See ESF #7 for additional information on the use of volunteers).

(o) The EOC will work with KC ECC to coordinate county, state and federal services needed in sheltering and recovery services, when appropriate.

(p) Public information regarding shelter availability and locations shall be released through the designated Public Information Officer (PIO).

(q) In the event of a presidential disaster declaration, additional emergency welfare services may become available to eligible disaster victims. These services may include low-interest loans, food stamps, disaster counseling, and unemployment benefits. These services are normally coordinated through a State or Federal Disaster Assistance Center established following the disaster declaration.

**Section 3.02 Organization**

(a) The Parks, Recreation and Cultural Services Department are the lead agency for the coordination of ESF 6 activities within the City. The Community Services Manager and the Human Service Planner will assist with this ESF by providing technical advice on organizations that can assist those citizens who have special need, disabilities, English as their second language or not spoken at all, elderly, and homeless.

**Section 3.03 Actions**

**(a) Preparedness:**

(i) Conduct planning with other mass care support agencies and other emergency support functions to refine mass care service operations.

(ii) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(iii) Assign and schedule sufficient personnel to implement mass care tasks for an extended period of time,

(iv) Conduct vulnerability analysis at critical facilities and make recommendation to improve the physical security

(v) Ensure lead agency personnel are trained in their responsibilities and duties,

(vi) Develop and implement emergency response strategies relating to Mass Care, Housing and Human Services,

(vii) Develop and present training courses for Mass Care personnel, and

(viii) Maintain liaison with support agencies,

(ix) Conduct All Hazards exercises involving Mass Care

**(b) Response:**

(i) Coordination with the EOC in the assessment of public need to determine the opening or closing of public shelters before and after an emergency or disaster event

(ii) Coordination with Logistics in establishing, managing and supplying mass feeding sites, including locations of Points of Distribution (POD's)

(iii) Mass Care, in conjunction with Office of Emergency Management, will maintain a current list of all agencies (public and private) that can provide mass feeding in times of disaster. The list will provide specific information, to include:

1) Number of persons each agency can feed two meals a day and sustainment period.

2) Number of staff or volunteers available for cooking and/or serving.

3) Major equipment lists, e.g., field ranges, mobile feeding units, refrigeration, vehicles, etc.

(iv) Catastrophic Event - It is anticipated that tens of thousands of people could be stranded, need to be evacuated, and/or need to be sheltered following a catastrophic event. To that end, catastrophic planning has been done by 8 counties in the Puget Sound Region, to include King County. Since the City of Shoreline is within that planning area, portions of the Catastrophic Planning will be added as Appendix's for our referral during events of this nature. (See Appendix C to this ESF for the Puget Sound Regional Catastrophic Preparedness Program EVACUATION AND SHELTERING ANNEX). The Annex describes the coordination of regional efforts for evacuation and for the provision of emergency temporary shelter, mass feeding, and other basic human needs to residents and visitors of the Puget Sound area who require such assistance following a regional emergency or catastrophic disaster.

**(c) Recovery**

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

**(d) Mitigation**

(i) Mitigation activities for this ESF are covered in the City of Shoreline Hazard Mitigation Plan.

## Article IV. Responsibilities

### Section 4.01 Lead Agency

**(a) Parks, Recreation and Cultural Services Department**

(i) Develop plans for and coordinate the utilization of City facilities and park sites for use as reception centers/staging areas or shelters and provide staffing, as available.

(ii) Coordinate with the ARC and other human services organizations in the development of plans for and coordinate the utilization of other public and private facilities for use as reception centers/staging areas or shelters and provide staffing as available. Coordinate with the Coordinated Assistance Network (CAN) (http://www.can.org), as appropriate.

(iii) Provide coordination of agencies and activities to ensure adequate shelter needs are met. Use the ARC Shelter Operations Workbook (separately published document) as the Parks, Recreation and Cultural Services Department's standard operating procedure (SOP) to set up temporary emergency shelter until the ARC can take over if they are able.

(iv) Coordinate with the City's EOC to determine mass care needs. Coordinate with Z1 EC and KC ECC for outside agency/organization support.

(v) Provide staff, supplies, equipment and facilities to assist ARC or other support organizations to provide emergency reception, sheltering and feeding operations.

(vi) Coordinate resources of other providers such as other human service agencies, churches, schools and private businesses who can or want to assist in relief efforts.

**(b) Community Services Manager/Human Services**

(i) Coordinate the implementation of social services programs, as appropriate, during emergency operations.

(ii) Coordinate with social service organizations, relief agencies, the Red Cross, etc. Coordinate with the Coordinated Assistance Network (CAN), as appropriate.

(iii) Maintain liaison with organizations that outreach to at risk populations; the elderly, people with disabilities, and/or those who do not speak English or where English is their second language to identify ways to meet their needs during an emergency.

**Section 4.02 Support Agency**

**(a) Emergency Operations Center**

(i) Coordinate with KC ECC for activation of county, state and federal sheltering and recovery services.

(ii) Coordinate the collection of information regarding disaster, damage and request activation of shelters.

(iii) Provide coordination with provider agencies and city departments, as appropriate.

(iv) Coordinate public information to ensure that necessary information is disseminated to the public.

(v) Utilize the registered Disaster Worker Volunteers (CERTS and Amateur Radio Team), when available and feasible, to assist with activities like: checking on vulnerable populations, staffing for shelters, and distribution of information into communities that are without power or where English is not spoken.

**(b) Fire Department**

(i) Provide fire suppression and coordinate emergency medical services at shelters and assist as needed.

**(c) Police Department**

(i) Establish security, maintain law and order at shelters.

(ii) Provide crowd and traffic control at public shelters.

(iii) Assist in providing emergency communication between shelters and EOC.

(iv) Assist in identifying safe routes to shelters.

**(d) Human Resources Department**

(i) Work in coordination with the Parks, Recreation and Cultural Services Department to provide sheltering for City employees and their families as necessary.

(ii) Coordinate registrations and use of city staff and temporary emergency workers at city operated shelter facilities.

(iii) Assist in locating suitable sites for Disaster Assistance Centers when requested.

(iv) Provide support to Parks, Recreation and Cultural Services Department for mass care, housing and human services operations as requested.

(v) Identify sites for collection, storage and distribution of donated goods.

**(e) Administrative Services Department**

(i) Coordinate private donations and community offers of assistance.

(ii) Assist with computer and/or telephone services in shelters when appropriate.

(iii) Develop system for the tracking of necessary financial expenditures such as manpower, vehicles, food, water, etc.

(iv) Provide for installation and maintenance of computer, telephone and other office equipment in the event that the Disaster Assistance Centers are activated.

(v) Provide support to Parks, Recreation and Cultural Services Department in mass care, housing, and human services operations as requested.

(vi) Develop system for the tracking of necessary financial expenditures such as manpower, vehicles, food, water, etc.

(vii) Coordinates distribution of donated goods. Assist PRC with locating needed facilities for the shelter of staff and/or community members

**(f) Public Works and Engineering Department**

(i) Coordinate disposal of solid waste from shelters.

(ii) Assist in emergency repairs at shelters as appropriate.

(iii) Assist in crowd control operations with signing and barricades.

(iv) Assist in identifying safe routes of travel for shelter staff and transport of supplies.

(v) Assist in providing emergency radio communication between temporary shelters and EOC.

(vi) When requested and prior to opening of a shelter, provide building safety inspections of the pre-designated building that will serve as shelters.

**(g) All City Departments**

(i) Provide staff, as necessitated by extent of disaster, to assist with coordination of temporary shelter and shelter services and provide backup to Parks, Recreation and Cultural Services Department staff in the use of city facilities for staging/reception areas or temporary shelters.

**(h) American Red Cross (ARC)**

(i) Act as the lead support agency for emergency shelter operations, when available.

(ii) Coordinate with the City, specifically the Parks, Recreation and Cultural Services Department on all mass care operations.

(iii) Provide food, clothing, temporary housing, mobile canteen service, medical service and other necessities to disaster victims, when available.

(iv) Provide health and welfare inquiry services, when available.

**(i) Other Human Services Organizations**

(i) Provide emergency feeding and shelter in coordination with the City of Shoreline's Human Services and Parks, Recreation and Cultural Services Department.

(ii) Collect donated food, clothing and other supplies for mass care operations.

(iii) Provide counseling to disaster victims.

(iv) Identify special needs populations and coordinate with the EOC and King County ECC what their specific needs are and how we can address or mitigate them.

**(j) Shoreline School District**

(i) Shoreline School District does not necessarily provide their schools as shelters. However, if needed, and they agree, the some of the schools may be considered as places of refuge, provide a place for people to gather and receive information, charge a cell phone, perhaps have some opportunity to receive some warm food and take a shower.

**(k) Faith Based Organizations**

(i) Does not necessarily provide their facilities as shelters. However, if needed, and they agree, some of the facilities may be considered as places of refuge, provide a place for people to gather and receive information, charge a cell phone, perhaps have some opportunity to receive some warm food and take a shower. The City maintains a data base of faith organizations that may be able to assist during times of emergencies.

**(l) Zone 1 Emergency Coordinator**

(i) Provide coordination between the emergency coordination centers in Zone 3, Zone 5, KC ECC, human services organizations during a disaster, whenever possible.

(ii) Serve as a coordination portal between local emergency operation centers within Zone 1, human service organizations and county, state and federal agencies for sheltering and recovery as appropriate.

(iii) Coordinate the zone-wide allocation of resources during regional emergencies through the local EOCs and the KC ECC to ensure equitable distribution.

**(m) Public Health - Seattle & King County**

(i) Assists with environmental health assessments and conduct inspections to ensure that environmental controls are provided to assure safe and healthful conditions at emergency shelter and meal site facilities to include; communicable disease prevention, basic sanitation/cleaning protocols, food safety, waste disposal, vector control, injury prevention, lighting, ventilation and potable water.

(ii) Coordinates the response of regional veterinarian services and animal care groups, which may include establishment of emergency pet shelters.

(iii) Directs and manages medical needs shelters.

(iv) Supports City of Shoreline's Human Services Department and the American Red Cross in meeting demands for mental health services.

(v) Provides guidance and direction for the care and handling of deceased shelter occupants. If necessary, provides facilities and personnel for a temporary morgue.

**(n) King County ECC**

(i) Provide coordination between the human services organizations and the City during a disaster.

(ii) Respond to request from EOC manager to coordinate shelter needs, mass feeding needs, and warming/cooling shelters within the region when the need is identified and work with ARC to assist with this coordination. Serve as a coordination portal between local emergency operation centers, human service organizations and county, state and federal agencies for sheltering and recovery as appropriate.

(iii) Provide back-up communication at shelters through Radio Amateur Civil Emergency Services (RACES) as appropriate. Note that the Shoreline Amateur Radio Team has this capability.

(iv) Provide resources and coordinate support as requested.

(v) Provide support and coordination with Regional Animal Services of King County, to provide for abandoned, injured, and deceased animals including pets that were left unattended when the household is evacuated to shelters and livestock. This may include setting up temporary shelters to house pets and other lost or stray animals. These animals will be brought to the pet shelter where they will be issued identification, given emergency veterinary care if needed, vaccinated, cared for, fed and maintained by employees of the Regional Animal Services of King County volunteers; or placed in temporary foster care at alternate sites. To the extent facility and human resources are available, pet shelters will be located in different geographical sectors of the City associated with the locations and needs of the shelters designated to house people.

(vi) The Regional Animal Services of King County and/or City staff and/or volunteers shall have the discretion to make independent decisions regarding animal and livestock care and handling for all incoming animals, including the administration of vaccinations and medications, the insertion of identification microchips, and humane euthanasia of sick, injured or dangerous animals.

**(o) Washington State Department of Health**

(i) Supplements local health agencies in the regulation and inspection of consumable foods at the point of consumption.

**(p) State Emergency Operations Center**

(i) Coordinate requests from local and county governments for state agencies and private organizations having emergency mass care capabilities local and regional resources have been expended.

(ii) Provide overall coordination for the provision of individual recovery assistance programs implemented within the state.

(iii) Alerts those state and local agencies with individual recovery assistance program responsibilities in the event of a large scale disaster that will expand the resources available within the affected communities.

(iv) Provide coordination of resources requested through WAMAS.

(v) Facilitate the requisition of resources from other states through the Emergency Management Assistance Compact (EMAC), when all local, regional, county and state resources have been expended.

(vi) Request and coordinate Federal resources through the Federal Emergency Management Agency (FEMA).

Article V. Appendices

(a) Standard Operating Procedures (SOP's) for Temporary Shelters

(b) King County CEMP Regional Shelter Operations Incident Annex

(c) Puget Sound Region Evacuation and Sheltering Plan

**Article VI. References**

(a) Shelter Operations Participant's Workbook, American Red Cross

(b) Washington State Comprehensive Emergency Management Plan

## A. PRE-PLANNING

1. ____ Develop plans for coordinating a temporary emergency shelter, including vulnerable populations and animal care.
    - City of Shoreline's pre-designated shelter is the Spartan Recreation Center

2. ____ Identify possible shelter locations if the above location is not available or damaged and not useable
    - American Red Cross Pre-Approved Sites
    - Faith-Based Facilities
    - Partner with an a joining city
    - Short term – schools can be considered

3. ____ Coordinate with King County Office of Emergency Management and the King County American Red Cross if additional site(s) are needed

4. ____ Coordinate with WA State EOC to pre-locate Points of Distribution (POD's) as needed.

## B. EMERGENCY PERIOD

1. ____ Alert key shelter trained personnel and volunteers

2. ____ Determine shelter needs, information should be gathered from:
    - EOC Manager
    - Incident Commander
    - Frequency of citizen requests
    - Request made to Logistics Team by field staff or American Red Cross

3. ____ Determine:
    - Situation
    - Hazards
    - Possible numbers to be sheltered
    - Locations
    - Expected duration

4. ____ If the EOC is activated call King County Office of Emergency Management to request shelter support. They will contact the American Red Cross of King County to coordinate with other shelter requests.

5. ____ The Red Cross will activate shelter, if staffing allows. If Red Cross cannot do this, the City will activate their trained staff and volunteers.

6. ____ Provide staff, supplies, equipment, and facilities to support shelter activities

7. ____ Coordinate with the Public Information Officer to direct citizens to shelter Locations

8. ____ Coordinate with Public Health Seattle King County for medical needs shelters and other shelters for people with special needs, to include language, needs of sight and hearing impaired.

9. ____ Coordinate with KC ECC and AMR about the need for mass feeding and/or warming/cooling centers

10. ____ Coordinate the distribution of items like food, water, ice, etc with KC ECC and Emergency Agencies in Snohomish County if appropriate.

11. _____ Coordinate with KC ECC and Emergency Agencies in Snohomish County if appropriate, for assistance for pet and livestock sheltering needs.

## C. ACTIVATION OF A TEMPORARY SHELTER

1. ____ If American Red Cross cannot respond immediately, determine shelter location either city resources or from the list of authorized shelter maintained by the Red Cross. Then coordinate with owners.

2. ____ Locate the Shelter File Box in the Facility Manager's Office at the Spartan Recreation Center. It contains:
   - Shelter Operations Manual
   - Shelter locations
   - Lists of trained staff and volunteers
   - Registration forms
   - Opening/closing check lists
   - Lists of supplies
   - Set-up diagram
   - Types of shelters to consider opening

3. ____ If City employees staff the shelter, coordinate with the Red Cross to obtain cots, blankets, and nurse's kits from the Red Cross Shelter Supply Facility located on the campus of Shoreline Community College.

4. ____ There is a small quantity of cots, blankets, water, rations and medical supplies maintained on site at the Spartan Recreation Center.

5. ____ Activate personnel to open a temporary shelter, including Parks and Recreation, trained CERT Volunteers and other city departments that have staff they can assign. This can be coordinated with the Human Resources Department.

6. ____ Use *American Red Cross Shelter Operations Participant's Workbook* for Standard Operating Procedures to open the shelter

7. ____ Use Mass Care Forms in the Shelter Registration Book which is located in the Shelter File Box maintained by the facility manager of the Spartan Recreation Center

8. ____ Emergency Public Health Services will be provided by the Seattle/King County Public Health Department. Notify them of the activation at (206) 296-4620.

9. ____ Feeding the occupants will need to be considered
   - The Red Cross will bring a mobile kitchen if they staff the shelter
   - If the Red Cross cannot staff the shelter the number of occupants in the shelter will determine if you can purchase food and feed them from the small kitchen in the shelter or arrange with the Senior Center or another organization that can feed large numbers.

10. ____ Refer to Opening Checklist in the Shelter Handbook located in the Shelter File Box

## D. RECOVERY PERIOD

1. ____ Assist in closing of shelter and mass feeding operations

2. ____ Assist in restoring facility to normal use

3. ____ Complete documentation and reports

4. ____ Replenish shelter items used during the activation

5. ____ Refer to Closing Checklist in the Shelter Handbook located in the Shelter File Box

**The City of Shoreline is a signatory of the King County Region Disaster Framework – this is adopted from it:**

## Responsibilities

| Primary Agencies | Responsibilities |
|---|---|
| **King County Cities and King County Government** | King County cities and government will provide mass care in accordance with their comprehensive emergency management plans as mandated in RCW 38.52. The King County Department of Natural Resources and Parks Recreation Division will provide staff and resources to set up and manage shelters in unincorporated King County in partnership with the Red Cross, and in selected cities with mutual aid agreements. All shelters will be managed in accordance with nationally recognized Red Cross standards.<br>If overwhelmed, the impacted cities will proclaim a disaster and request aid from their regional emergency coordination zone. Regional Disaster Plan for Public and Private Organizations in King County, Washington<br>The Basic Plan, ESF-6: MASS CARE, |
| **Regional King County Emergency Coordination Zones** | Regional King County Emergency Coordination Zones will provide support to cities in their zone for mass care by identifying and coordinating public, private, and volunteer resources within the Zone. All shelters will be managed in accordance with nationally recognized Red Cross standards. If the impacted zone is overwhelmed, it will request aid through the King County ECC. |
| **Private Sector Organizations** | Private sector organizations will provide support for mass care in the cities in which they reside if resources are available. |
| **Support Agencies Responsibilities**<br>**Public Health- Seattle & King County** | Provide inspections and health services to shelters throughout the King County Region and coordinate the activation of any medical needs Sheltering in the County. |
| **Amateur Radio Organizations in King County** | If resources are available, provide portable communications capability between shelters and emergency coordination zones. |
| **American Red Cross** | Provide representatives in the King County ECC for coordination of shelter requests as part of the Health and Human Services Team.<br>Provide mass care for localized events not requiring |

| | |
|---|---|
| | activation of the King County ECC.<br>Initial resources (staff, supplies, locations) to provide mass care shelters, feeding, and emergency first aid for shelters during large disaster events if available. Provide resources and staff for emergency food service supporting shelters and responders, if resources permit. |
| **King County Animal Services,<br>WSU King County, Washington State Animal Response Team** | Provide representatives in the King County ECC for coordination of animal issues, including both pets and livestock. Regional Disaster Plan for Public and Private Organizations in King County, Washington<br>The Basic Plan, ESF-6: MASS CARE, HOUSING AND HUMAN SERVICES |
| **Extension and Other Veterinary<br>and Animal Care Organizations** | Provide and/or designate resources, staff and volunteers for animal rescue, mass care and sheltering<br>Provide for the identification, planning, logistics, operation and management of animal rescue, mass care and sheltering as defined in the WA State and the King County<br>Emergency Management Plan, ESF 11-Agriculture & Natural Resources Annex |
| **Washington Department of Agriculture WARM Team (WSDAWARM)** | The purpose of the Washington Animal Response Management (WARM) Team is to coordinate the response of state agencies in assisting local and volunteer organizations<br>to provide all animals affected by natural or technological disasters with emergency medical care; evacuation; rescue;<br>temporary confinement, shelter, food and water; and identification for return to the owner. |
| **Washington Department of Fish<br>and Wildlife (WDFW)** | The Washington State Department of Fish and Wildlife (WDFW) is a support agency to the WARM Team under ESF 11, Appendix B, of the Washington State Comprehensive<br>Emergency Management Plan and provides expertise and response to issues impacting wildlife health, rescue, and sheltering. |

# City of Shoreline

# Comprehensive Emergency Management Plan (CEMP)

# Essential Support Function (ESF) 6

# Appendix B

# King County CEMP Regional Shelter Operations Incident Annex

## Created by King County OEM

## Pages 168

Note:

This document was created by King County OEM and maintained by King County OEM. The City of Shoreline incorporates this document into its CEMP in order to improve regional collaboration and coordination. This document may have a different header, footer, page numbers, and references than the rest of the ESF. For more information, please contact King County OEM.

# KING COUNTY, WASHINGTON
# EMERGENCY MANAGEMENT PLAN
# REGIONAL SHELTER OPERATIONS INCIDENT ANNEX

**PRIMARY AGENCY:** King County Office of Emergency Management

**SUPPORT AGENCIES:**
American Red Cross Serving King & Kitsap Counties
King County Department of Community & Human Services
King County Department of Natural Resources & Parks
King County Department of Transportation
King County Finance & Business Operations Division
King County Office of Information & Resource Management
King County Prosecuting Attorney's Office
King County Public Information Officers
King County Risk Management
King County Sheriff's Office
Public Health–Seattle & King County
Regional Animal Services of King County
Washington State Animal Rescue Team
Washington State Department of Agriculture

## I. INTRODUCTION

### A. Mission

The mission of the Regional Shelter Operations Incident Annex is to provide operational direction for King County Government and regional partners to coordinate and provide a safe, temporary site to efficiently supply food, water, shelter, sanitation services and information to displaced persons who require such support during a major disaster or emergency. This includes providing the necessary resources to support transportation, health care, housing of pets, security, crisis counseling, assistance in establishing eligibility for disaster assistance, and other entitlements and basic disaster related needs.

This Annex is designed to be implemented in a multi-agency environment. A disaster requiring large numbers of people to be sheltered in King County will be managed by an Incident Command. No single agency is capable of providing and/or coordinating the required range of services and depth of funding, nor is any single agency staffed to manage an incident of the scope or magnitude in which regional sheltering is needed. Non-governmental partners will also play an important role and should, if possible, participate in ongoing planning activities. The size, complexity and speed of the operation will demand a preplanned approach to which a team can train.

### B. Purpose

Regional sheltering is an organized way of providing safe havens for large numbers of people temporarily displaced from their dwellings by natural, technological or man-made emergencies or disasters. The purpose of this Annex is to:

- Set forth the activities and responsibilities of county and/or city governments and

non-governmental agencies responding to or acting in support of regional shelter operations.

- Establish lines of authority between agencies and communications for supporting regional shelter operations.

- Describe regional shelter operations within King County.

## C. Scope

This Annex is specifically designed to address the need for temporary care and sheltering during large-scale emergencies and/or major disasters which produce a need exceeding the capabilities of unincorporated King County, cities, tribes, regional partners and special purpose districts. The Annex does not apply to day-to-day emergencies. Typically, the cities, county, tribes, regional partners, special purpose districts depend on the American Red Cross to respond to day-to-day emergencies requiring sheltering using their own resources.

The partnership of departments and agencies across the whole of King County Government is a vital importance of this Annex. The Annex identifies various sheltering options and services that depend on the support of King County governmental agencies. Examples of activities include coordinating shelter operations, providing information and instructions to the public, supporting shelter and mass feeding operations, transportation of displaced residents to shelters, providing medical assistance, and security activities at shelter sites.

This Annex is also dependent on a variety of other governmental agencies, volunteer organizations, and community service resources working in a collaborative effort to provide services to displaced residents before, during and after a major disaster.

## D. Shelter Management Activities

A variety of shelter types and activities are required to implement this Annex in addition to partnerships with key non-governmental entities. At the county level, an Incident Command is established to manage the many activities key to successful regional shelter operations such as feeding and security. Generally, the American Red Cross (ARC) establishes and operates shelters for people in coordination with the local jurisdiction(s). King County follows this practice and conducts shelter operations in partnership with ARC under their guidelines. Associated with the sheltering of people are shelters for their domestic pets and livestock which are managed by Regional Animal Services of King County (RASKC). Additional shelters are provided for unique populations and individuals with medical needs beyond those available in a general population shelter.

## E. Limitations

King County Government and its sheltering partners will make every reasonable effort to provide satisfactory assistance and service during shelter operations. There is no guarantee perfect assistance and service will be practical or possible.

### F. Activation of Regional Shelter Operations Incident Annex

The King County Emergency Coordination Center (KCECC) and/or the King County Office of Emergency Management (KCOEM) Duty Officer will activate the Regional Shelter Operations Incident Annex when shelter assistance is requested by local jurisdictions, with an expected or real population in need of sheltering exceeds local capability or 500 persons. A Regional Shelter Management IC will be established to oversee care and shelter operations. Support Agencies will provide direct support to the IC and the appropriate Shelter Management IC Section. The Regional Shelter Management IC will conduct an initial staff briefing on pertinent information regarding the incident, to include a situation update, estimated number of evacuees and projected needs in the KCECC.

## II. POLICIES and AUTHORITIES

The Regional Shelter Operations Incident Annex will be implemented in accordance with the policies and authorities of the King County Comprehensive Emergency Management Plan (CEMP) and the National Incident Management System (NIMS). NIMS provides a nationwide framework for enabling federal, state, local, and tribal governments and private-sector and nongovernmental organizations to work together effectively and efficiently to prevent, prepare for, respond to, and recover from domestic incidents regardless of cause, size, or complexity. All participating agencies will apply the principles of NIMS to all care and shelter management activities.

Funding authorities will be derived from the King County Executive and in conjunction with state and federal proclamations, declarations and guidelines.

## III. SITUATION and ASSUMPTIONS

### A. Situation

King County is vulnerable to several types of emergencies and disasters, including floods, hazardous material accidents, fires, earthquakes, wildfires, and acts of terrorism for which the sheltering capabilities of cities, tribes, regional partners and special purpose districts would be exceeded (see the King County Hazard Identification and Vulnerability Analysis). King County is prepared for sheltering residents of unincorporated King County. However, when other jurisdictions exceed their capacity for sheltering and request assistance, King County will initiate the regional shelter operations. The principal agency responsible for coordinating regional sheltering operations in King County is the King County Office of Emergency Management (KCOEM).

### B. Planning Assumptions

- The King County Executive will proclaim a state of emergency and the King County Emergency Coordination Center (KCECC) will be activated.

- King County Government will make every reasonable effort to provide satisfactory assistance and service during shelter operations. There is no guarantee perfect assistance and service will be practical or possible.

- King County Departments will support Regional Sheltering in accordance with the KC CEMP Department Basic Responsibilities section.

- The American Red Cross Serving King & Kitsap Counties Chapter will provide, as resources permit, dormitory services at shelters as a primary partner of King County.

- Typically only 10% to 20% of the affected population will seek public shelter. A high percentage of evacuees will seek shelter with friends, relatives or find their own means of shelter rather than go to a public shelter.

- The Regional Shelter Management IC, Administration and Finance Section will provide guidance on capturing agency disaster response costs for future reimbursements. All KC Departments will submit necessary and appropriate documentation to KCECC Public Assistance at the conclusion of regional shelter operations.

- The assumption is any local jurisdiction shelter in operation will close when the jurisdiction requests King County implement regional sheltering.

- King County may be required to shelter and serve in excess of 5,000 evacuees for 10 to 30 days with follow-up services for some evacuees exceeding 120 days because their community and/or homes are either inaccessible or uninhabitable due to disaster-related damages.

- Public Information Officers and professionals will coordinate together to provide accurate, consistent, and timely information to the public before, during and after a disaster or major emergency.

- Participating agencies will identify personnel to implement their responsibilities, develop internal procedures consistent with this Annex, participate in planning efforts and train personnel (internally or externally) to perform the duties and responsibilities described in this Annex.

- Regional sheltering of significant numbers of evacuees will be of intense interest to local and potentially national media.

- Some individuals will decline assistance and services.

- King County may not be able to assist all individuals as desired by the cities, tribes, regional partners and special purpose districts.

- Shelter operations will comply with the legal codes of the State of Washington, King County and the jurisdictions in which they operate.

- Emergent volunteers will become available via solicitation through the local media at time of activation and throughout ongoing coordination with members of voluntary organizations.

- Volunteers requiring specific certifications and training will be solicited, identified and trained during the planning phase.

- Most transportation and utility infrastructure are fundamentally intact and capable of delivering fuel, electricity, water, food and other supplies or these services can be supplied by alternate means.

- Disasters overwhelming King County sheltering resources will be robustly supported by state and federal partners.

## IV. CONCEPT OF OPERATIONS

### A. General

The King County Regional Shelter Management Incident Command (IC) is the lead operational entity responsible for coordinating regional shelter operations during large-scale disasters which overtax individual municipalities.

Regional shelters will be the focal point for providing essential shelter and care services. Regional care includes sheltering (general population, people with medical needs, unique populations, pets and livestock), feeding operations, emergency first aid and triage, distribution of emergency items, and assisting with reuniting family members. King County departments, state and federal partners, and volunteer organizations will support the Shelter Management Team with specialty resources to provide these services during regional shelter operations.

King County will take steps to initiate Memorandums of Agreement or Memorandums of Understanding with property owners and supporting agencies, activate contingency contracts, and mobilize various agencies and partners to identify and establish a regional sheltering capability.

Shelter sites will be selected based on the situation and in accordance with the decision matrix in Tab 10-Synchronization Matrix. The public will be notified of when and where shelters will be established and how transportation may be arranged for those requiring public transportation. Additional information such as what to bring and limitations on the services and other details will also be provided via the public information network. Populations will be directed to specific shelters based on the location and/or services provided at each shelter. Residents of the shelters will be provided sustaining food, water, sanitation and medical assistance. It is beyond the scope of this Annex to provide substantial medical assistance, pharmacological support, or other services beyond the immediate safety and sustenance of the resident. Individuals unable to join the general population shelter due to specific needs will be directed to the appropriate shelters.

Sheltering may be provided only to a small regional area up to and including very large shelters for catastrophic incidents.

### B. Notification and Implementation

<u>Sheltering Request</u>:

- Cities will notify the King County Emergency Coordination Center or the King County Office of Emergency Management Duty Officer when their shelter needs are projected to exceed local capacity and request King County assistance. Notification will follow normal coordination processes between jurisdictions and the King County Office of Emergency Management.

Sheltering Decision:

- When a request for sheltering is received, King County Office of Emergency Management will evaluate the likely shelter requirements of the region, verify the types of shelters needed, and implement this Annex to establish a regional shelter system. Depending on the shelter requirement, the King County Emergency Coordination Center staff or the Director of King County Office of Emergency Management, in coordination with American Red Cross, will make the decision about which shelter(s) to open. Small regional shelters are approved at the King County Emergency Coordination level. Shelters supporting over 1,000 individuals must be approved by the Director of King County Office of Emergency Management or their designee (see Tab 10 - Synchronization Matrix).

Shelter Plan Implementation:

- Regional shelters will operate under the overall direction of an Incident Command System (ICS) that is staffed as appropriate for the size and range of shelter operations.

- The King County Office of Emergency Management Duty Officer or King County Emergency Coordination Center will contact participating agencies and advise them the Regional Shelter Operations Incident Annex is activated and the location designated personnel should report to establish the Regional Shelter Management Incident Command (IC) or "Shelter Management Team" for regional shelter operations.

- The Regional Shelter Management IC will conduct an initial briefing for the IC Command and general staff shortly after activation. The briefing will include a situation report, the time and location of shelter activation, staffing patterns, safety messaging, public information, planning, operations, logistics and administration and finance.

- Supervisors who have responsibilities at the activated shelters will be required to provide a brief overview of how they plan to execute their duties and identify any resource gaps. Assistance and services at the regional shelters will be provided through the Regional Shelter Management ICS. This process is intended to provide essential services to evacuees and disaster assistance.

American Red Cross:

- The American Red Cross, as a principal shelter partner, will normally be involved in the regional shelter decision and aware of the requirement to establish shelter

operations. Both verbal and written (electronic) notification will be provided to the American Red Cross by King County Office of Emergency Management.

- Normally, only a small local Red Cross shelter staff is available on short notice. For large shelter operations, staffing will be provided through the national level of the American Red Cross. It may take up to 72 hours for augmenting staff to arrive. If major sheltering is required more quickly, King County Office of Emergency Management and/or the Regional Shelter Management IC will coordinate the requisite resources to provide the needed capability and capacity.

Public Information:

- Public information will be coordinated and disseminated using the Joint Information System (JIS) through by Joint Information Center (JIC) with headquarters at King County Emergency Coordination Center and remote operating locations at the regional shelter(s). The JIC will provide press releases, handle media inquires, and coordinate site visits (see Tab 5 – External Affairs).

## C. Shelter Operations Overview

Regional Shelter Operations – Incident Command:

- Regional shelter operations will function in accordance with the Regional Shelter Management ICS depicted in this Figure 1 of this Annex and applicable functional Tabs. Command functions include: Operations, Planning, Logistics, Administration and Finance, Shelter Supervisors, Public Information, and Safety. Detailed information on these functions is included in Tab 6 – Regional Shelter Management. Information on how the Section, Branches, and elements of the ICS will operate is found throughout the functional Tabs of this Annex.

- Volunteer organizations will assist and help coordinate many facets of regional sheltering operations. To properly use volunteer capability, regional shelters needing assistance must identify and coordinate their needs directly with the IC.

Transportation:

- Transportation for evacuees will be in accordance with Tab 1 – Transportation. While it is expected that many evacuees will self present at shelter sites, others will require emergency evacuation and transportation. Shelter clients may also require movement to and from assistance centers, shelter locations, and major transit pick-up points.

- The Transportation Group will coordinate transportation resources. Local jurisdictions will provide operational control at mass transit/transportation pick-up sites. Shelter and assembly/collection point operators will be responsible for coordinating and administering daily operations of transportation at these sites, including a system for accounting of all evacuees and any assignment to a particular transport.

- Transportation of small pets that are properly contained is provided for under this plan. Transportation of livestock and large animals will be coordinated through King County Animal Care and Control.

Pets and Livestock:

- Pets brought to the General Population Shelter will be housed in a separate Owned Animal Pet Shelter collocated (when possible) with the General Population Shelter in accordance with Tab 3 – Pet Sheltering.

- Stray and lost animals will be collected and managed by Regional Animal Services of King County in accordance with Tab 3 – Pet Sheltering.

- Livestock will be housed in a "Rural Community Shelter" collocated with the Pet Shelter and General Population Shelter for the owner(s) of livestock and pets. Regional Animal Services of King County will oversee the Rural Community Shelter animal operations, as well as manage the pet and livestock shelters. American Red Cross will operate the General Populations Shelter component. Washington State Animal Rescue Team will support the Livestock Shelter in accordance with Tab 4-Livestock Sheltering.

Security:

- Security will be provided for shelter sites and feeding kitchen sites in accordance with Tab 7 – Shelter Security. Shelters will have three security zones – the dormitory, the private property where the shelter is located, and the public and private areas surrounding the shelter. King County Sheriff's Office is the primary agency coordinating security operations.

- Any person (evacuee, visitor, staff, etc.) deemed a security risk will be denied entrance to regional shelter facilities to include the mobile kitchens supporting regional shelter operations.

Unique Populations:

- Unique populations (i.e. Registered Sex Offenders) will be housed in the Unique Populations Shelter under the supervision of King County Sheriff's Office and in accordance with Tab 9 – Unique Population Sheltering. As these persons are expected to be known to law enforcement staff, a Public Information notification process will be developed, to the extent possible, to notify members of the unique population of the location(s) of their shelters prior to actual disasters or evacuations.

Shelter Services:

- Shelter residents will receive food and water, bedding and cots for sleeping, access to adequate sanitation facilities, will be housed indoors out of the weather, and if possible will be provided shower facilities, laundry facilities, emergency telecommunications and access to disaster-related services.

- All displaced persons at the shelters will be expected to reside within the shelter and will not be allowed to shelter in their vehicles or in the associated parking lot.

- Information, registration, clothing, feeding, crisis counseling, resettlement assistance and other services will be provided at all shelters to the extent possible and as appropriate for the shelter population in accordance with this Annex. Plans will include provision of nominal medical response similar to an Emergency Medical Technician for lifesaving response and minor medical assistance.

- Evacuees cannot be denied benefits or otherwise subjected to discrimination contrary to statue. The intention of King County is to provide care and shelter to every individual seeking it, turning away none that are willing to accept the rules associated with the shelter sites. Some individuals may be required to shelter separately; however, the variety of shelters must be minimized to the extent possible to meet basic safety and health requirements.

- Distinctive durable identification will be provided to all registered evacuees and shelter staff in order to identify them as either shelter clients or members of the shelter team.

- Shelter staff will provide distinctive durable identification (ID) to all registered evacuees and regional shelter staff to identify them as either shelter clients or members of regional shelter staff.

Procurement of Services and Equipment:

- A variety of services may be contracted by the Shelter Management Team ranging from all utilities including bulk garbage pickup, water, sewer, natural gas and power to a selected few of these items if the venue is a functioning and managed facility. Contracts and Memorandums of Agreement or Understanding may obligate King County to reimburse venue owners for a variety of costs.

- Feeding supplies and equipment will be purchased by King County, Washington State and/or the federal government as well as any variety of supplies consumed during regional shelter operations.

- Agencies incurring expenses during regional sheltering operations will maintain complete and comprehensive records and receipts for later potential reimbursement. Agencies participating in King County Regional Shelter Operations must follow the fiscal, procurement, and contracting policies established by King County Finance and Business Operations Division. King County and/or the state of Washington have procurement and contracting authority for regional sheltering.

## D. Concurrent Implementation of Other Plans

The Regional Shelter Operations Incident Annex will be implemented concurrently with the King County Comprehensive Emergency Management Plan, local, regional, state and federal response and emergency operations plans to include the National Response Framework (NFR) and Washington State Comprehensive Emergency Management Plan (CEMP). Local response plans may be implemented due to a variety of emergencies. For example, the Public

Health – Seattle & King County Influenza Plan may be in progress or the Tab 4 - Livestock Sheltering may be implemented independently in response to other incidents not requiring regional sheltering.

## E. Types of Shelters

Regional shelter operations will involve one or more of the following shelter types based on the sheltering needs of King County, cities, tribes, regional partners and special purpose districts for King County. Regional shelter operations will ensure appropriate care is provided and adequate shelter staff is available at each shelter depending upon the needs of the population residing in the shelter whenever possible.

| Type | Description | Examples |
|---|---|---|
| **General Population Shelter** | Evacuees who are independent and capable of self-care requiring minimal support for minor illnesses and injuries. | Well, able-bodied; sprains, strains, cuts, colds; those taking medication for stable acute or chronic conditions such as arthritis. |
| | Evacuees with conditions requiring observation or minor supportive assistance in activities of daily living. Independent with family/caretaker support. | Require use of wheelchair or assistive device but can transfer; stable diabetics (insulin or diet controlled); those who are currently stable but on medications for cardiac or respiratory conditions; and those with controlled hypertension, or renal problems. |
| | Evacuees with conditions requiring some level of privacy or separation and not requiring non-skilled or continuous health care support from shelter staff if adequate staff and privacy area available. | Require assistance from family member/caretaker in activities of daily living and have that person with them; those with portable oxygen in use and knowledge of how to administer; those with non-infectious TB receiving daily treatment. |
| **Alternate Care Facility** | Evacuees requiring frequent or continuous monitoring for potentially life threatening conditions or requiring bedding or bathroom facilities not available in General Populations Shelter. Those with needs for pharmacy support. | Incontinent persons or those requiring assistance with toileting; those with limited mobility who cannot sleep on a cot or transfer. Individuals requiring skilled nursing supervision with their medications. |
| | Evacuees requiring skilled care, continuous observation, or special equipment and services usually found in a hospital. | Individuals needing IV feeding or medication, bedridden requiring total care. |
| **Unique Populations Shelter** | Populations that need to be segregated from General Population and Medical Needs Shelters. | Registered sex offenders. |
| **Pet Shelter** | Sheltering and care for owned, stray and lost animals. Separation of animals that could be dangerous to people or other animals. | Dogs, cats, birds, ferrets, small mammals, reptiles and arachnids. Exotic animals are not accepted. |
| **Livestock Shelter** | Shelter and care for livestock. | Bovines, equines, swine, poultry, camelids, rabbits and small pocket pets. |
| **Rural Community Shelter** | Pet Shelter, Livestock Shelter, and General Population Shelter located at the same general location. | Displaced residents who own livestock and pets that evacuate, need shelter and will care for their animals. |

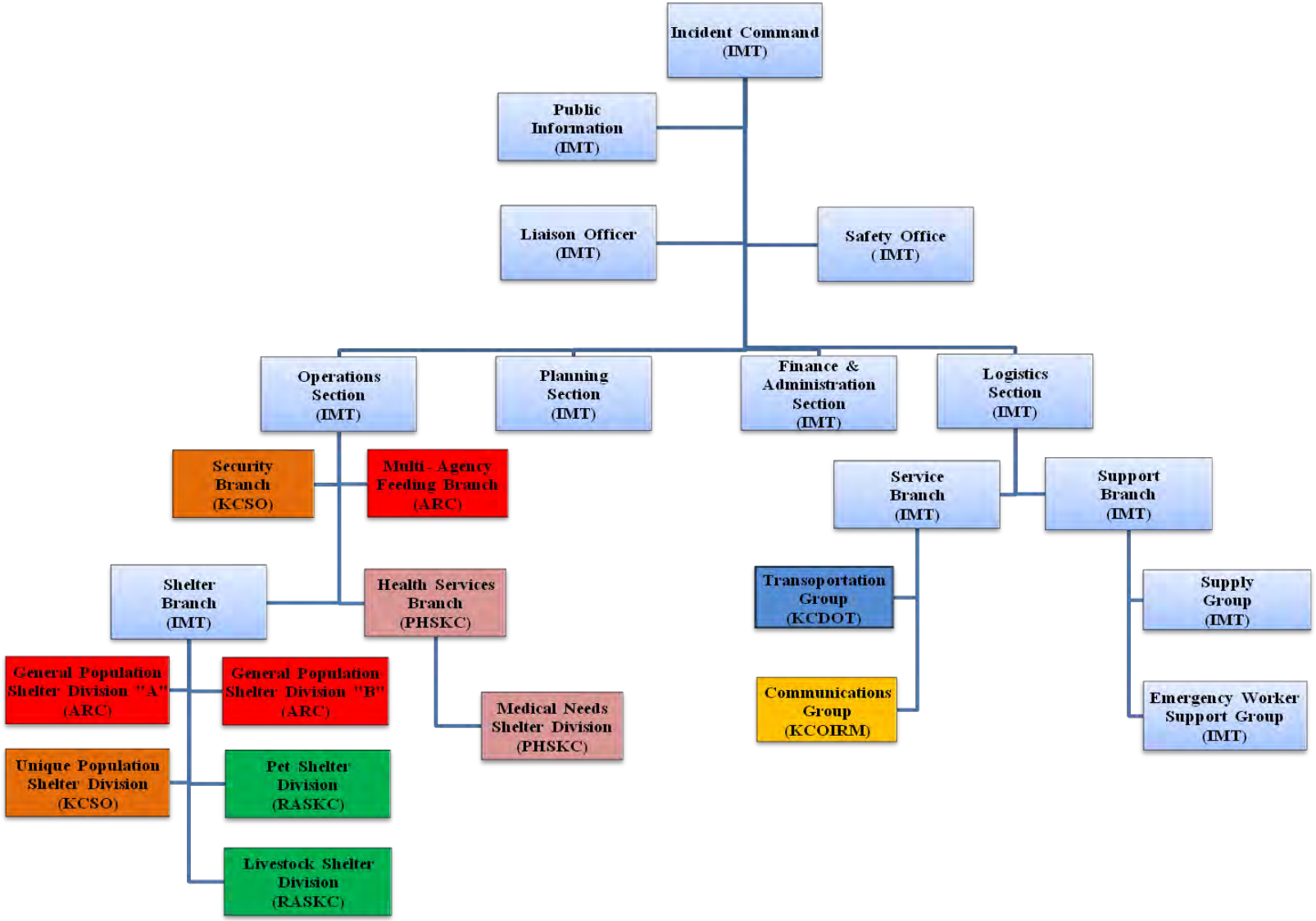



**Figure 1 – ICS Structure: Regional Shelter Management Team**

## F. Organizational Structure

Implementation of this Annex will be organized and executed in accordance with the National Incident Management System (NIMS) Incident Command System (ICS) as depicted in Figure 1 – ICS Structure: Regional Shelter Management Team. Appendix 1 of this Annex provides basic ICS Organization Charts for each Shelter Division, except Health.

- **Command Staff**: King County Office of Emergency Management designates the Shelter Management Team functions under a delegation of authority from The King County Executive's Office. The Shelter Management Team is lead by the King County Office of Emergency Management (or King County Emergency Coordination Center) Incident Manager or their designee. Typically, the Incident Manager is management or lead personnel from the King County Office of Emergency Management. The Shelter Management Team command staff will be selected by KCOEM Incident Manager and will consist of a Public Information Officer, a Safety Officer, and a Liaison Officer position (when required). The Shelter Management Team IC selects all Section and Branch Directors

- **Operations Section**: The Operations Section Chief supervises all shelter operations with the collaboration and support of the King County Sheriff's Office, Public Health-Seattle & King County, American Red Cross Serving King & Kitsap Counties, King County Department of Records, Animal Care and Control, Washington State Animal Rescue Team and other partner and support agencies. King County Office of Emergency Management will assist in training of other county staff to ensure successful execution and continuity of operations for regional care and sheltering. The Branch Supervisors report to the Operations Section Chief. Supervision of branches and performance of branch duties is done by various agencies described in this Annex, the associated functional Tabs, and as depicted on Figure 1 – ICS Structure: Regional Shelter Management Team.

    - Security Branch – provides oversight of all security operations and services at shelter sites, feeding locations, and operating and support locations as designated by the Shelter Management Team in accordance with Tab 7-Security. The Branch Director is responsible for the coordination of this function and the resourcing of staff and equipment to provide the necessary security services, which may include resourcing from outside agencies law enforcement agencies and private security.

    - Multi-Agency Feeding Branch – provides management and oversight of care functions for mass feeding activities at shelter sites and for active workers supporting shelter operations in accordance with Tab 11-Multi-Agency Feeding Plan. The Multi-Agency Feeding Branch Director will be appointed by the Regional Shelter Management Team IC in coordination with American Red Cross. The Branch Director will identify and coordinate the appropriate branch staffing as well as staffing and resources needed to support fixed and mobile kitchen operations.

    - Shelter Branch - provides management oversight of the core functions in the General Populations Shelter in accordance with Tab 6-Regional Shelter Management, Tab 3-Pet Sheltering, Tab 4-Livestock Sheltering, Tab 6-Regional Shelter Management, and Tab 9-Unique Population Sheltering. The

American Red Cross will lead the General Population Shelter Division; King County Sheriff's Office will lead the Unique Population Shelter Division; and King County Animal Care and Control will lead the Pet, Livestock and Rural Community Shelter Divisions.

- Health Services Branch – provides management and oversight of the core functions for health services and medical needs during regional care and sheltering operations in accordance with Tab 8-Human Medical Support. Public Health – Seattle & King County is the lead for the Medical Needs Shelter Division. The Branch Director will oversee Basic Life Support (BLS) and health care functions at shelter locations and alternate care facilities. ESF 4, Fire and EMS will coordinate support in conjunction with the Health Services Branch.

- **Planning Section:** The Planning Section Chief oversees the collection, analysis and dissemination of information relevant to on-going regional shelter operations and planning activities. The Planning Section writes situation reports, incident action plans, and responds to information requests in coordination with the Joint Information Center (JIC). This section will gather information from various sources and distribute reports to the King County Emergency Coordination Center and partner agencies. They will track information about shelter census, response operations, and related events and plan future actions and operations.

- **Administration and Finance Section**: The Administration and Finance Section Chief is generally a representative selected from King County's Finance and Business Operations Division. Section staffing is the responsibility of King County Government. The size and composition of the Administration and Finance Section will be as directed by the Shelter Management Team based on the dictates and scope of operations. This section will not be activated during most incidents and the functions of the section carried out by the King County Emergency Coordination Center in direct support from the Shelter Management Team.

- **Logistics Section**: The Logistics Section Chief supervises all service and support functions in collaboration and support of King County Office of Information and Resource Management, King County Department of Transportation, Metro Transit and other public, private and volunteer agencies. The Branch Supervisors report directly to the Logistics Section Chief. Supervision of branches and performance of branch duties is done by various agencies described in this Annex, and associated functional Tabs, and as depicted on Figure 1 – ICS Structure: Regional Shelter Management Team. The Branch Supervisors report to the Logistics Section Chief.

  - Service Branch – provides management and oversight for transportation and communications that support evacuation, regional sheltering operations. The following groups report directly to the Service Branch Supervisor.

    - Transportation Group: Coordinates and arranges for ground transportation from affected areas to shelter sites, and transportation between shelter sites, assistance centers, and major transit centers or distribution points. The King County Department of Transportation is responsible for coordinating and providing this capability through collaboration with public and private transportation partners.

- Communications Group: Works with agencies to satisfy radio, telephone and information system required for the entire shelter operations to include the Incident Command Post (ICP) all shelter sites, multi-agency feeding kitchens (fixed and mobile) and other support activities. The coordination and procurement of the requisite communications capability for regional shelter operations is the responsibility of King County Office of Information & Resource Management (OIRM).

- Support Branch – provides management and oversight for acquisition of supplies and the coordinating emergency workers. The following groups report directly to the Support Branch Supervisor.

  - Supply Group: Coordinates resources and provides all materials and equipment required to support regional shelter operations to include shelter supplies and consumables, food products and equipment for multi-agency feeding kitchens and ICP equipment. The Supply Group will work closely with the American Red Cross and Regional Shelter Management IC Logistics Section to accomplish its mission.

  - Emergency Worker Support Group: If a large incident requires emergency worker support, this group would help to coordinates and provide housing, transportation and meals for emergency workers supporting regional shelter operations requiring these services.

## V. RESPONSIBILITIES

### A. Primary Agency

**King County Office of Emergency Management will**:

- Identify and designate the Incident Command for the Shelter Management ICS, which most likely will include requesting the support of a Type II Incident Management Team, and provide staff for the Shelter Management IC Planning Section, as needed.

- Maintain this Annex and coordinate it within King County Government, the State of Washington and non-governmental partner organizations. Support events such as tabletop exercises, plan review workshops and review of resources seminars.

- Identify additional, potential shelter locations beyond those of partner agencies to the extent possible.

- Take the lead in coordinating, promulgating and/or maintaining all Memorandums of Understanding (MOU) between King County and partner non-governmental, private and public organizations critical to the implementation of this Annex.

## B. Support Agencies

**All King County Government Agencies will support Regional Shelter Operations with resources and/or staff as directed in the KC CEMP Basic Department Responsibilities Section. Support specific to Regional Sheltering is defined below.**

**American Red Cross Serving King & Kitsap Counties will**:

- Support and staff general population shelters and coordinate/manage multi-agency feeding operations as delineated in this Annex and all applicable functional tabs per their charter, chapter directive, and MOA with King County (referenced documents attached).
- Provide shelter client services such as crisis counseling, emergency supplies and disaster assistance.
- Provide staffing and representation to the IC when and as requested.
- Assist King County OEM in maintaining and updating this Annex, Tab 6-Regional Shelter Management, Tab 11-Multi-Agency Feeding Plan, and Mass Care Task Force Food Product Procurement Standard Operating Procedure.

**Regional Animal Services of King County will**:

- Manage and coordinate volunteers, including veterinarian services, and equipment for Pet Shelter operations in accordance with Tab 3-Pet Sheltering.
- Provide management oversight of livestock shelter operations in accordance with Tab 4-Livestock Sheltering and the King County MOU with the Washington State Animal Rescue Team (WASART).
- Assist King County OEM in maintaining and updating this Annex, Tab 3-Pet Sheltering and Tab 4-Livestock Sheltering.

**King County Department of Community & Human Services will**:

- Support identification and coordination of Disaster Mental Health services.

**King County Department of Natural Resources & Parks will**:

- Maintain and provide available shelter equipment to support regional shelter operations.

**King County Department of Transportation will**:

- Provide and/or coordinate staff for the IC Transportation Group and provide management oversight of King County Department of Transportation (DOT) resources supporting regional shelter operations.

- Support evacuations from the affected areas to designated shelter sites, safe areas and/or rally points located in a variety of jurisdictions. This support is dependent on the identification of these locations by either the affected jurisdictions and/or the King County ECC.

- Provide transportation service from designated shelter sites to established transportation routes and/or transit centers.

- Provide special assistance with Access vans at the request of the IC on an as needed basis.

**King County Finance & Business Operations Division will**:

- Provide and/or coordinate procurement staff for the IC Logistics Section.

**King County Office of Information & Resource Management will**:

- Manage communications infrastructure and deployable equipment (such as radios) for the Shelter Management IC and King County resources in direct support of regional shelter operations.

- Provide operational radios and arrange for ad hoc infrastructure support at shelter locations.

- Provide information technology resources such as laptop computers when the resources supplied by supporting agencies are insufficient to meet the operational need.

**King County Public Information Officers will**:

- Provide and/or coordinate Public Information Officer (PIO) staffing and/or support for the IC and all appropriate shelter divisions within the IC.

**King County Sheriff's Office will**:

- Provide and/or coordinate security for King County regional shelter operations.

- Provide management oversight of overall security operations.

- Manage and provide/coordinate staffing for Unique Population Shelter operations.

- Provide and/or coordinate staffing for the IC Security Branch and shelter Security Units.

**Public Health-Seattle & King County will**:

- Coordinate and provide emergency health services for regional shelter operations.

- Provide and/or coordinate staffing for the Shelter Management IC Health Services Branch and shelter Health Services Units.

- Coordinate and provide environmental health services.

- Provide triage, Basic Life Support (BLS) care and nurse care on-site at shelter locations.

- Plan, coordinate, resource and provide shelters for medically fragile populations when needed.

- Coordinate movement of fragile populations from general population shelters to medical needs shelters, alternate care facilities and/or appropriate healthcare facilities.

**Washington State Animal Rescue Team will**:

- Provide knowledgeable personnel and appropriate equipment to operate the Livestock Shelter in accordance with Tab 4-Livestock Sheltering and the MOU with King County.

**Washington State Department of Agriculture**

- Assist with animal disease tracking and carcass disposal at shelters, when requested.

**ANNEX TABS:**

Tab 1 – Transportation
Tab 2 – Communications
Tab 3 – Pet Sheltering
Tab 4 – Livestock Sheltering
Tab 5 – External Affairs
Tab 6 – Regional Shelter Management
Tab 7 – Security
Tab 8 – Human Medical Support
Tab 9 – Unique Population Sheltering
Tab 10 – Synchronization Matrix
Tab 11 – Multi-Agency Feeding Plan
Appendix 1 – Shelter ICS Organization charts

# TAB 1
# TRANSPORTATION

**PRIMARY AGENCY:** King County Department of Transportation

**SUPPORT AGENCIES:** King County Sheriff's Office
Public Health-Seattle & King County
Sound Transit
Washington State Department of Transportation
Washington State Patrol

## I. INTRODUCTION

### A. Purpose

To provide ground transportation support to King County regional shelter operations and the Regional Shelter Management Incident Command (IC) during disasters and incidents requiring regional sheltering. This plan does not address transportation for shelter operations in local jurisdictions unless specifically noted.

### B. Scope

The transportation mission will be performed between affected jurisdictions, shelters, King County and vicinity. The transportation mission includes:

- Initial evacuation, as requested by the affected jurisdictions, for persons requiring transportation out of a disaster area and/or to a shelter.
- Transportation for evacuees between assistance centers, medical needs shelters, unique population shelters, pet shelters and livestock shelters.
- Transportation for staff between staff housing, shelters and the Regional Shelter Management Incident Command Post (ICP).
- The Operations Section Chief may require contracted transportation for which King County Department of Transportation (KCDOT) will provide advice and expert guidance as appropriate.
- Transportation of livestock to the livestock shelters is an owner/evacuee responsibility.
- Unique needs will be directly coordinated through the Regional Shelter Management IC, Logistics Section.

### C. Limitations

Availability of King County Department of Transportation (KCDOT)-owned transportation assets is limited and may impact the ability to provide support to the entire service area, especially during transit peak periods. Requests for KCDOT-owned assets will be prioritized against all known transportation requirements.

## II. POLICIES

The Transportation Group will operate within the current, established protocols and policies of the King County Comprehensive Emergency Management Plan (CEMP), Regional Shelter Operations Incident Annex and KCDOT procedures.

## III. SITUATION and ASSUMPTIONS

### A. Situation

See Regional Shelter Operations Incident Annex.

### B. Planning Assumptions

Transportation of people away from danger areas and to shelters will be a highly visible process and must be tightly linked with public communication.

When possible, jurisdictions will identify several pick-up locations for people seeking transportation to shelters. These locations will be made public in advance, to the extent possible.

Jurisdictions are responsible for identifying assembly points and preparing evacuees for transport to designated shelter or transfer locations. Assembly point location selection should consider ease of ingress and egress for transportation providers as well as the availability of off-street parking to accommodate large vehicles, such as public transit and private motor coaches.

Support at assembly/collection points is the sole responsibility of the jurisdiction. Support may include but is not limited to:

- Ensuring each evacuee is in possession of only the necessary/authorized items that can be taken on the provided transportation vehicle.
- Preparing a roster of evacuees that accounts for all passengers on each individual transport.
- Providing an escort for evacuees who may require personal support to make the trip from the assembly/collection point to the shelter.
- Ensure small pets to be transported are properly contained.
- Other administrative actions that assure safety and accountability of evacuees.

The selection of King County regional shelter sites will take into account public transportation accessibility and proximity to existing public transportation infrastructure to facilitate mobility.

Jurisdictions are responsible for all administrative functions at local shelters and assembly/collection sites. Such functions include having adequate staffing and support resources as well as a system for accounting for all evacuees and any assignment to a particular transport.

KCDOT will coordinate the set-up of contract services with third party transportation providers to provide specified transportation services. Shelter and assembly/collection point operators will be responsible for coordinating/administering daily operations of such services.

KCDOT, in coordination with the King County Procurement and Contract Services Section (PCSS), will provide emergency contracts for transportation (buses, vans). Annual periodic review will be used to evaluate which of these contracts will be in place in advance of an incident.

Support for clients at any governmental shelter location will be considered valid transportation dispatches but are prioritized based on need and known danger to persons.

## IV. CONCEPT OF OPERATIONS

### A. General

The Transportation Group will be located at the Regional Shelter Management Incident Command Post (ICP) and will coordinate the transportation requirements for each of the various regional shelter locations. The National Incident Management System (NIMS) will be used. Transportation services will be provided as described in the Regional Shelter Operations Incident Annex, this TAB or as approved by the Logistics Section Chief. Decisions as to where shelters will be located, when they will become available and when to move certain populations to shelters will be situational dependant and will require last minute adjustments in transportation planning. In accordance with the King County Emergency Management Plan, ESF1 responsible agencies are expected to coordinate transportation needs in support of regional shelter operations jointly with ESF-6, ESF 8 and the KCDOT Department Operating Center.

### B. Staffing

KCDOT will identify and provide the necessary staffing to support the Regional Shelter Management IC and regional shelter operations. The staffing will be based on twelve-hour shifts, as specified in the Regional Shelter Operations Incident Annex. The personnel (FTE by Position) required for each 12-hour shift (partial staffing may be feasible during night time hours) will be determined by KCDOT in coordination with the Regional Shelter Management IC, Logistics Section Chief and KCECC.

### C. Equipment

KCDOT will determine the resources required to meet regional shelter operation needs and provide the resources and/or coordinate the support necessary to meet any shortfalls. The Transportation Group will request additional resources through the Regional Shelter Management IC Logistics Section. The Logistics Section will in-turn coordinate, purchase and/or contract the required resources. KCDOT staff will provide any needed laptop computers and accessories for IT support at the ICP, shelters, and assembly/collection point locations. The Regional Shelter

Management IC will be provided internet access, telephones, radios and other communications support, as requested.

### D. Organization

The Transportation Group will organize in accordance with Regional Shelter Operations Incident Annex, Incident Command System (ICS) Structure.

### E. Procedures

The Transportation Group is responsible for:

- Coordinating the transportation of evacuees from various jurisdictions to the designated regional general population shelters.
- Coordinating transportation between shelters.
- Assisting with tracking and reporting of KCDOT support for special needs populations. Reporting is intended to simply track pickup at requested sites and delivery to a shelter.
- Ensuring pending changes to operations are shared with KCDOT, ESF-1 and the JIC for dissemination to the public.
- Reports status of operations and recommend changes to the Operations Section Chief and coordinate operational planning with the Shelter Division Supervisors, submitting final plans through the Operations Section Chief.

## V. RESPONSIBILITIES

### A. Primary Agency

**King County Department of Transportation will:**

- Provide staff to support the transportation management needs of the Regional Shelter Management IC and shelter operations.
- Provide or coordinate transportation resources as needed to support shelter operations in coordination with the Regional Shelter Management IC Logistics and Operations Sections.
- Perform all applicable roles and responsibilities identified in the King County Comprehensive Emergency Management Plan (CEMP) and ESF 1-Transportation to the CEMP.

## B. Support Agencies

**Public Health-Seattle & King County will**:

- Coordinate transportation arrangements for individuals under client care who require Access Van support or have special transportation needs evacuating to Alternate Care Facility.

**Sound Transit will**:

- Support valid transportation requests for assistance in accordance with established agreements with KCDOT.

**Washington State Department of Transportation will**:

- Provide and/or coordinate support from outside of King County to augment the transportation resources supporting the Regional Shelter Management IC and shelter operations.

**Washington State Patrol will**:

- Coordinate road closure and related safety information with KCDOT and WSDOT.

**TAB 2**
**COMMUNICATIONS**

**PRIMARY AGENCY:** King County Office of Information Resource Management

**SUPPORT AGENCY:** King County Office of Emergency Management

## I. INTRODUCTION

### A. Purpose

This Tab provides guidance and identifies responsibilities for coordinating the establishment and maintenance of the communications services necessary to meet the operational requirements of regional shelter operations.

### B. Scope

Coordinate and provide technical support for voice, data, and radio communications at, and between, regional shelter sites and Shelter Management Incident Command.

### C. Limitations

- Support will be limited to available resources and equipment from King County government and/or vendor support.
- No equipment will be purchased prior to the point of an identified need. (exemption 800 MHz radios)
- Skilled county/vendor staff will have competing priorities and will be deployed based on the disaster-specific objectives as set by the Executive.
- Support may be severely limited based on the state of the transportation infrastructure. Such a limitation applies to both staff response and any shipped equipment.
- 800 MHz radios must be pre-staged by KC OEM and configured by KCOIRM.

## II. POLICIES

See Regional Shelter Operations Incident Annex.

The County is committed to compliance with the ADA requirements as described in Chapter 7 of the ADA Tool Kit. http://www.ada.gov/emergencyprep.htm

## III. SITUATION and ASSUMPTIONS

### A. Situation

See Regional Shelter Operations Incident Annex.

### B. Planning Assumptions

- It may take hours to days to identify, procure, and implement technology solutions based on the state of the infrastructure and the availability of county staff/vendors/partners.
- The sites for a shelter are not determined until the need has been assessed and decided.
- Multiple sites might need to be setup in an immediate fashion, yet never be used.
- Shelter sites might need to be moved, increased or decreased in size.
- Shelter sites could be used for additional capabilities, such as resource centers for displaced citizens requiring additional technological needs not described in the plan, but within an immediate response.
- As funding resources are available, a cache of radios will be purchased, pre-configured by KCOIRM, and stored by OEM prior to an incident.
- Shelters will be equipped with the highest capacity possible.
- The scope of this effort includes county employees staffing shelters.
- To the maximum extent possible, agencies staffing the Regional Shelter Management IC will supply their own staff with laptop/portable computers, cellular phones, and 800 MHz radios.
- In an effort to select shelter sites that will best support technology, refer to the criteria listed in Appendix A.

## IV. CONCEPT OF OPERATION

### A. General

King County Office of Information Resource Management (KCOIRM) will, at the request of the Regional Shelter Management IC Logistics Group, coordinate communications support to the Regional Shelter Management IC at all its operating locations to include but not limited to the Regional Shelter Management Incident Command Post (ICP) and each designated shelter location.

If the Regional Shelter Management IC is established at KCECC, support will still be required at shelter locations. However, if it is necessary to set up any operations in an ad hoc location to provide shelter services, a significant support effort may be required to establish adequate communications over time in a phased process.

### B. Organization

The Communications Group (Logistics Section) will organize in accordance with the Regional Shelter Operations Incident Annex, Incident Command (ICS) Structure.

### C. Procedures

KCOIRM and the Communications Group will coordinate communication needs and services with the Logistics Group. KCOIRM will evaluate the communications infrastructure and available resources against the Regional Shelter Management IC's projected communication needs and coordinate the required support.

When shelter operations are activated, communications will be established between the Regional Shelter Management IC, each shelter location, and the KC ECC. The communication resources of state, local, and federal agencies as well as private vendors may be required as the situation dictates. As a general rule, the following will be provided:

- Internet connectivity
- A limited number of workstations/laptops and printers
- Voice communication services

Communications service for shelter clients will be coordinated by the Shelter Management IC with commercial telecommunications companies to provide landline and cellular telephone services as well as internet access. Shelter clients will be encouraged to use their own cellular service to the maximum extent possible.

## V. RESPONSIBILITIES

### A. Primary Agency

**King County Office of Information Resource Management will**:

Review existing vendor contracts and investigate enhancements/new contracts, in addition to any contracts the Logistics Group may have, to enable communications for shelter operations. KCOIRM will coordinate with local partners to gain information about, and access to, local caches of equipment to supplement any hardware that may be provided by vendors and other parties. KCOIRM will review emergency procurement practices which can be implemented on an emergency basis at any of a number of venues.

### B. Support Agency

**King County Office of Emergency Management will**:

Use the Logistics Section of the KC ECC to assist KCOIRM in procuring communications support/resources that are beyond the scope of vendor services and staff capability.

**APPENDIX A**—In order to support technology and voice communications preference would be given to shelter locations and ICP sites that meet the following criteria:

- Stable power supply
- Operational telecommunications system (e.g. land lines, operational cellular service towers within range)
- Within range of an operational radio communication network
- Wireless internet service available through cellular service provider, KC WAN connection on-site, or dial-up internet access available

Equipment needs will be defined as appropriate to the type of shelter, size, and number of staff supported.

# TAB 3
# PET SHELTERING

**PRIMARY AGENCY:** King County Animal Care and Control

**SUPPORT AGENCIES:** King County Department of Natural Resources and Parks
King County Office of Emergency Management
Public Health-Seattle & King County
National Animal Sheltering Partners
Regional Human Sheltering Partners
Regional Animal Sheltering Partners
Washington State Department of Agriculture
Washington State Animal Response Team

## I. INTRODUCTION

### A. Purpose

This Tab provides a framework for maintaining support for pets and their owners during the emergency shelter phase of a disaster. Provisions for sheltering livestock are provided in Tab 4 of the Regional Shelter Operations Incident Annex though both functions are managed by King County Animal Care and Control (KCACC). This Tab incorporates key portions of the KCACC Emergency Animal Response Plan within the context of a sheltering environment.

### B. Scope

This Tab is intended to provide guidelines for animal care and control in King County to minimize animal and human suffering in the event of a large-scale emergency. It addresses animal sheltering needs throughout King County and its cities during a major emergency or disaster and is aimed at small and large animals that may be affected by an emergency, whether they are owned or stray, and includes animals which are incapable of being cared for by their owners, or are a danger to themselves or the public. Animal care includes care and feeding of animals. The primary goal of the pet sheltering effort is to facilitate the reuniting of all animals with their owners. Every attempt will be made to reunite lost animals with their owners, but if animals cannot be returned to their owners, they will be handled in accordance with established animal control procedures.

### C. Limitations

Only the following pets are accepted in King County Pet Shelters:

- Dogs
- Cats
- Small Birds (see Tab 4-Livestock Sheltering for chickens or other species of poultry)
- Small Reptiles
- Small mammals such as ferrets
- Arachnids

Other types of pets (exotics) must be protected or sheltered at the owner's expense and at a place where the pet is controlled else it will be treated as if captured by animal control.

Owners are expected to provide any special diets or medications for their pets and to administer medications as if they were at home with the animal.

Voluntary veterinary services, if available, will be limited.

## II. POLICIES

Pets Evacuation and Transportation Standards (PETS) Act of 2006 - Section 613 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5196b). The PETS Act requires state and local authorities to include plans for pets and service animals in their disaster plans to qualify for grants from FEMA.

King County Code Title 11.

Washington State Comprehensive Emergency Management Plan, ESF 11, Appendix B – State Animal Response Plan.

Service animals will be allowed in General Population Shelters. All other animals/pet will be sheltered as appropriate in pet or livestock shelters.

Individuals may bring up to two (2) pets to the shelter and are expected to supply their own cage appropriate for the animal to be sheltered.

## III. SITUATION and ASSUMPTIONS

### A. Situation

See Regional Shelter Operations Incident Annex.

### B. Planning Assumptions

Owners will have sufficient warning to obtain cages and supplies.

Owners will provide daily care and management. King County may obtain feed and other supplies as deemed necessary. Pet shelter space may not be heated. Owners must bring bedding materials, if needed.

Emergency animal shelter locations will be identified prior to a notice incident, such as flooding, and as expeditiously as possible for no notice incidents such as earthquakes.

Some resources will not be readily available, including search and rescue resources, animal food and trained volunteers.

Pet sheltering is an integral portion of an effective general population shelter plan as animal owners and caregivers may avoid or postpone evacuation unless sufficient accommodations are made for their animals.

King County will have Memorandums of Understanding in place with local animal welfare organizations to provide assistance with the emergency response, including assistance with animal sheltering, animal rescue, animal control and animal identification.

Other animal shelters in the area will be able to provide limited assistance by accepting additional animals displaced by an incident and/or disaster.

Recognized rescue groups will provide animal emergency sheltering in accordance with this Tab.

## IV. CONCEPT OF OPERATIONS

### A. General

KCACC and/or the King County Office of Emergency Management (KCOEM) can implement this Tab to establish pet shelters. King County's animal sheltering plan is based on two primary animal shelter services:

- Emergency animal sheltering of animals displaced by the disaster or found stray ("Stray Animal Shelters")

- Emergency animal shelters located near human shelters (Red Cross shelters, for example) for owned pets evacuees bring with them to the human shelters ("Owned Animal Shelters")

If possible, an emergency shelter for injured animals and/or quarantined animals will be established. Until such a shelter is established, injured animals and/or quarantined animals will be accepted at other emergency animal shelters and will be kept separated from healthy owned and stray animals. A record of each animal taken into a shelter will be completed and maintained. These records will include breed, species, description, pickup location and owner information, if available. Emergency shelter services for animals will be provided for as long as possible. Volunteer services, including volunteer veterinary services, will be coordinated by KCACC and Public Health-Seattle & King County through the Public Health Reserve Corps program.

Stray hold periods for animals in Stray Animal Shelters will be extended to seven (7) days after the disaster strikes. This extension of the normal stray hold period will be reviewed after the first seven (7) days and may be continued as long as necessary. The extension will be reviewed every seven (7) days until conditions warrant a return to the normal 72-hour stray hold. Animals brought to Owned Animal Shelters are primarily cared for by their owners. An animal in an Owned Animal Shelter which has not been visited by their owner for a 48-hour period will be moved to the Stray Animal Shelter.

Partner agencies authorized by King County for Stray and Owned Animal Shelter operations include: the American Humane Association, the Humane Society of the United States, Code 3 Associates, United Animal Nations, the Seattle-King County Veterinary Medical Association, Humane Evacuation Animal Rescue Team, and other agencies as may be named by King County.

The American Humane Association will be the lead partner agency for Owned Animal Shelter operations. Humane Society of the United States will be the lead partner agency for Stray Animal Shelter operations. Animals in owned animal shelters will be cared for primarily by their owners. Pet owners will be responsible for feeding, walking, medicating and cage/kennel cleaning. King County and/or partnering agencies will provide care for animals in owned animal shelters only as a back-up.

KCACC will coordinate with Public Health-Seattle & King County and, if necessary, Washington State Department of Agriculture and other agencies, on the proper methods of handling and disposal of dead animals.

## B. Organization

Pet sheltering locations will have a staff consistent with the scope of their operations and shelter population. In general, shelter staff will register pets, provide care when owners are not present, ensure animals are fed and properly managed, coordinate veterinary care, report status of operations to the Regional Shelter Management IC through the Pet Shelter Division Supervisor, provide security and protection for the animals and maintain a clean environment. All Pet Shelter Units will operate in accordance with this Tab and, to the extent possible, use the normal day-to-day procedures of their parent agencies.

King County and its partners will have the ability to operate larger, centralized emergency animal shelters and small emergency animal shelters located throughout the county to ensure services are available should transportation be severely impacted by an emergency.

- A list of potential animal shelter locations and types is available in Appendix B of the King County Animal Emergency Response Plan. KCACC is responsible for entering into sheltering agreements with the owners of the potential shelter locations and managing those agreements.

- Detailed procedures for opening and operating an emergency animal shelter are listed in the Shelter Appendix of the King County Animal Emergency Response Plan.

As the lead agency for animal emergency functions, KCACC will manage implementation of this Tab under an ICS structure. KCACC will staff the Pet Shelter Division in the Regional Shelter Management IC (see Regional Shelter Operations Incident Annex) and support agencies will report through the local pet shelter managers to the Pet Shelter Division Supervisor. The Pet Shelter Division Supervisor reports to the IC Operations Section Chief while coordinating and collaborating with the KCACC supervisory function established for the incident.

All animal emergency response activities will be coordinated with the King County Emergency Coordination Center (ECC) and/or King County OEM when a Regional Shelter Management IC is not established.

Pet sheltering operations will involve two separate and distinct types of shelters. The Owned Animal Shelters will be co-located with the General Population Shelters housing the owners or situated as nearby as possible to facilitate animal maintenance by the owner and to minimize transportation needs. The location of Stray Animal Shelters will be entirely at the discretion of KCACC and not dependent on the location of any other shelter type. KCACC is responsible for establishing animal shelters in accordance with the needs identified by the Regional Shelter

Management IC, coordinating/providing staffing for the shelters and organizing/operating the shelters in accordance with this Tab.

## C. Pet Shelter Operational Responsibilities

Pet Shelter Manager (Owned and Stray): Responsible for overall management of the respective pet shelter to:

- Initiate the set-up of pet shelter operations.
- Supervise pet shelter staff and volunteers.
- Coordinate with the American Red Cross (if applicable).
- Maintain an incident log.
- Close-out of pet shelter operations.
- Submit Pet Shelter Report to the Regional Shelter Management IC, Planning Section and King County ECC.
- Notify pet shelter staff team leaders and volunteer leader of activation.
- Maintain staff and volunteer work schedules.
- Coordinate with other agencies (Humane Society, PAWS, rescue groups, Seattle King County Veterinary Medical Associations and other Veterinary groups, boarders, kennels, groomers, etc.)
- Act as the point of contact for the public.
- Coordinate procurement and delivery of supplies.
- Ensure provisions are in place for safe and sanitary collection and disposal of animal waste and dead animals.

### 1. Pet Shelter Planning Unit

The Planning Unit will work with the Operations and Logistics Units to:

- Keep abreast of staffing needs for upcoming shifts.
- Produce the daily situation report in coordination with the Pet Shelter Manager and transmit the report to the Pet Shelter Division Supervisor.
- Develop the Pet Shelter Action Plan for each operational period and communicate the plan to all shelter staff.

- Keep abreast of incident situation and changing conditions, document number of volunteers supporting shelter operations and assist with general shelter operations, as needed.

**2. Pet Shelter Operations Unit**

The Operations Unit will:

- Register evacuees and their animals using appropriate forms.
- Take a photo of animal with their owner(s).
- Perform animal intake and health assessment.
- Assign animal to crate and properly label crate with owner identification.
- Maintain file of all animals currently in the Pet Shelter and report the daily census to the Pet Shelter Planning Unit.
- Assist owners when they come to walk, feed or care for their pet.
- Coordinate with the on-site veterinarian to deal with pet health care issues
- Walk and/or feed pets as necessary.
- Monitor pets for stress and/or behavior problems. Report any abnormal observations to owners and the Pet Shelter Manager.
- Monitor supplies, food and environmental conditions.
- Assist in break-down and cleaning of the animal crates and the Pet Shelter as a whole.

  <u>Animal Registration Team</u>:

  - Provide a table for owner registration and immediately taking a photo of the animal with its owner and attaching it to the registration form.
  - Designate a space for team members to fill out the animal intake forms and do a health assessment on the animal.
  - Assign the animal to an appropriately sized crate or kennel and ensuring water, towels or bedding is provided. Immediately label crates with the owner's name, pet's name and any special needs.
  - If the owner brings their own crate, verify it is clearly labeled with their name, making note it is the owner's crate on the intake form, and place the crate in the appropriate area.

- Keep all leashes, collars, food bowls, toys or bedding the owner provides with the animal, either inside the crate or directly on top of it.

- Provide each owner with a wrist band to signify their authorization in pet area; only one (1) wrist band per family.

Volunteer Coordination Team:

- Staff a separate table or area away from the Animal Intake area for volunteer registration. This area should be available for team members and volunteers to store personal gear such as coats, bags, etc. and have access to chairs for rest breaks, to eat snacks away from animal areas and set-up of cots for night shifts.

- Ensure volunteers have a photo identification badge.

- Ensure volunteers fill out a registration form.

- Ensure volunteers check-in/check-out with the Pet Shelter Manager.

- Produce and coordinate the volunteer work schedule with the Operations Unit Leader.

- Request volunteer veterinary support through the public Health-Seattle & King County Medical Reserves Corps (MKC).

Animal Maintenance Team:

- Ensure NO animal is outside its crate and/or kennel without a leash and identification tag. Only designated team members, volunteers or animal owners will be allowed to remove any animal from its crate and/or kennel.

- Ensure dogs are walked at least twice a day for 20-minute intervals.

- Ensure potable water is available to dogs at all times.

- Ensure self-feeders, if used, are mounted in such a way dogs cannot urinate or defecate in them.

- Manage the blankets and/or towels used for dog bedding to ensure sufficient quantities are readily available should soiling occur.

- Provide owners with plastic bags for clean-up each time they walk their dog.

- Service (cleaning) cat kennels at least twice a day.

- Ensure cat litter and a pan is provided in each cat cage.

- Ensure water and dry food is available to cats at all times.
- Verify dogs, cats and ferrets are current in rabies vaccinations.
- Request rabies vaccination.
- Ensure all small mammals are caged at all times.
- Ensure reptile cages are cleaned daily and in a manner to prevent risk of salmonella transmission to staff and owners.

3. **Pet Shelter Logistics Unit**:

The Logistics Unit will:

- Set up signage and registration area at designated Pet Shelter.
- Inventory facility space and note present conditions.
- Configure pet shelter space (dogs, cats, isolation wards, materials).
- Set up trash cans, fans, plastic sheeting, crates and supplies.
- Ensure adequate supplies of crates, food, plastic bags, disinfectant, etc.
- Coordinate special supply needs with Pet Shelter Manager.
- Coordinate the location of trash disposal, pet walking areas and needs of staff with the Pet Shelter Manager.
- Track the need for volunteers with the Operations Unit and coordinate volunteer resources through the Pet Shelter Division Logistics Group.
- Break down the pet shelter, clean-up the area and complete a final check of area at the end of sheltering operations.

## D. Pet Shelter Standard Operation Procedures

- All staff and volunteers must complete respective training requirements.
- Team members and volunteers must be at least 18 years old.
- Team members and volunteers will wear identification.
- The Shelter Manager is in charge of shelter operations and has the authority to set specific rules, approve variances to policies, dismiss volunteers, determine staffing levels and refuse to accept animals.
- Only pet owners, team members and volunteers may remove animals from crates.

- Unless needs dictate otherwise, owners are responsible for administering medications to pets.

- Pets in the Pet Shelter will not have contact with other pets.

- Owners will be asked to provide proof of vaccinations. Vaccinations will be noted on the registration and intake forms. During disasters and/or evacuations, it is highly probable pet owners may not remember to bring proof of vaccination. The registration forms will indicate the pet owner accepts the risks of boarding their pet in the Pet Shelter.

- At least two (2) team members or volunteers will be present at all times. When animals are in residence, the facility will never be left unattended.

- The Pet Shelter Manager will devise and post an emergency evacuation plan for the Pet Shelter in case of fire, severe weather or power failure.

- Pet owners, if possible, will feed, walk and care for their animals.

- Animals will be fed once a day and walked at least twice a day, as appropriate.

- Each crate, cage or kennel will be cleaned and disinfected before being used by another animal. All food and water bowls must be cleaned and disinfected and new bedding provided for the next animal.

- The facility will be left as clean as it was before the Pet Shelter was set up at the end of shelter operations.

- Spontaneous volunteers will not be allowed to work in the Pet Shelter unless a variance is necessitated by lack of trained volunteers and approved by the Pet Shelter Division Supervisor.

**E. Pet Shelter Rules for Owners**

In some cases, the owners of animals in emergency pet shelters will be co-located in General Population Shelters. In these instances, the pet owners are expected to care for their animals to the greatest degree possible. In all instances, the basic guidelines and responsibilities for owners caring for their own animals are:

- Owner shelter visitation hours will be 7:00 a.m. to 7:00 p.m.

- Owners will wash their hands or apply hand sanitizer upon arrival at the shelter and will wash hands with soap and running water just before leaving the shelter.

- Owners must have identification with them, on their cat or dog and on animal cage at all times.

- If possible, provide written proof of vaccinations.

- Owners agree to feed, water, sanitize and exercise their cat or dog on a scheduled frequency of no less that twice daily. Owners must care for their animals before 10:00 a.m. and then again between the hours of 5:00 p.m. to 7:00 p.m.

- Owners will not permit others to handle or approach their animal(s). Cage doors will be latched and secured with wire or rope.

- Owner shall permit their animal(s) to be examined to determine if medical or stress conditions are present and require attention. Owner will also agree to the administration of medication to alleviate any symptoms.

- Owner agrees that if their animal(s) become unruly, aggressive, show signs of contagious disease or is infected by parasites (fleas, ticks, lice, etc.) the pet(s) may be removed to a more isolated location and/or receive treatment for the parasites.

- Owner acknowledges that failure to follow these rules may result in the removal of their animal(s) from the shelter.

- Owner acknowledge that any decision concerning the care and welfare of their animal(s) and the shelter population as a whole are within the sole discretion of KCACC, whose decisions are final.

- After the emergency, any pet found abandoned or without owner in the shelter will result in the animal being relocated to KCACC with final disposition left to the discretion of KCACC.

**F. Facility Operational Procedures**

Animal Registration Area:

Establish an animal registration area near a strategic entry point for segregating "owned" animals from "stray" animals and those requiring quarantine or veterinary treatment. The registration area will need room for photographing, as a picture will be taken with animal and owner, if the animal is owned.

Volunteer Registration Desk:

Establish a registration desk for volunteers and support agencies and organizations.

Supplies/Storage Area:

Establish an area to store supplies, such as food, cages and cleaning supplies.

Signage:

Clearly mark all doors to the area as a Pet Shelter. Clearly mark one area for Animal Intake. Post policies and procedures for pet care and feeding. Designate and clearly post a "dog walk" area (flagging is best for this).

Cleaning:

Surface areas within the shelter will be disinfected and sanitized with a solution suitable for antibacterial/antiviral situations. Clorox clean-up wipes or other appropriate hand sanitizer will be used by all staff, volunteers, owners and visitors. The trash cans used to handle animal waste will be lined with liners at least 3millimeters thick or greater. Staff, volunteers and owners will use disposable cleaning cloths (or high grade paper towels) for cleanup activities.

## G. Animal Areas Set-Up

A triage area will be created near the Registration Desk where the Animal Intake Form and animal assessment are completed. The animals will be identified, photographed, examined and assigned to an appropriate shelter area. Species should be separated (dogs/cats/birds) as well as those animals with special needs (i.e., sick, under stress, or aggressive behavior).

Dogs:

The dog kennel or crate should be large enough for the pet to stand up, turn around comfortably and for space to place food and water. If shelter capacity permits, crates or kennels will be spaced 12 inches or more apart. Crates will be oriented to keep animals facing away from each other to the maximum extent possible. Food and water bowls, identification tag, leash and bedding will be provided for each occupied crate. The owner's name, pet's name and owner contact information (cell phone, pager, shelter sleeping location, etc.) will be prominently posted on each kennel for owned or identified pet. A sheet will be provided to cover the sides of crates for dogs sensitive to noise, activity, or other dogs.

The dog area should be sited close to an exit door which facilitates ready access to the dog walk area. Contingency plans should be developed for an indoor dog walk area in a separate room or remote area of the shelter to mitigate adverse weather or dangerous conditions. The Operations Unit should specifically assign a team member or volunteer to maintain the dog walk area(s).

A separate area with the shelter will be provided for dogs that are sick and for those without proof of vaccination. Dogs that are seriously ill or that pose a health risk to others should be transported to a local veterinarian, if possible. Contact the on-call veterinarian for assistance. Aggressive animals must be securely contained and dogs in heat should be isolated. Water container should be rust proof, cleaned daily, and mounted so the animal cannot tip it over or urinate in it.

Cats:

Cats should be kept in an area of the shelter separate from dogs, as well as in the quietest part of the shelter away from doors and other activity. Sick cats, or cats without proof of vaccination, should be separated. The kennel or crate used for cats should be large enough for the pet to stand up, turn around comfortably and have sufficient room for placement of food and water bowls and a litter box/container. Food and water bowls, a litter box, identification tag and bedding will be provided for each occupied crate. The owner's name, pet's name and owner contact information (cell phone, pager, shelter sleeping location, etc.) will be prominently posted on each kennel for owned or identified pet. Litter boxes will be provided in an area where owners can take their cats out of the crates for exercise and/or feeding. A sufficient quantity of blankets or towels for bedding will be readily available should soiling occur. Cays in heat will be isolated to the extent possible.

Birds:

An area for birds away from drafts and temperate extremes will be designated in the shelter. All birds must be in fully ventilated bird cages. Food, water, identification tag and newspaper will be provided for all occupied bird cages. A shelter team member with bird expertise should be identified to assess birds during registration and intake and provide assistance in identifying a suitable location in the shelter for the bird area. Cages may accommodate up to three (3) birds with owner concurrence and if the birds are socialized, free of disease and ample mobility is allowed for each. Sheet will be provided to cover birdcages at night and to deter noise, as necessary.

Ferrets:

Ferrets may be housed up to three (3) in a cage with the owner concurrence and if they are socialized, free of disease and ample mobility is allowed for each. Food, water, identification tag and bedding will be provided for each occupied cage. Cages must be of sturdy construction, chew-proof and deep enough to allow for appropriate bedding. Bedding must be changed regularly and dispose of it in a sealed plastic bag.

Small Mammals:

Food, water, identification tag and bedding will be provided for each occupied cage. Cages must provide ample mobility and be well ventilated. The cages and/or containers used must be chew-proof. Odor-inhibiting bedding material such as wood chips or shredded paper will be provided. Bedding will be changed regularly and dispose of it in a sealed plastic bag.

Reptiles:

Reptiles should be kept in an area separate from other animals and near electrical outlets for portable heaters. Food, water, identification tag and bedding, if required, will be provided for each occupied cage.

Arachnids:

If at all possible, arachnids will be located away from other animals. Water and an identification tag will be provided for each occupied cage. The owner is responsible for feeding and providing any bedding or natural materials (twigs, grass) as required.

## V. EQUIPMENT and SUPPLIES

Emergency animal shelters require a number of materials and supplies. The equipment and supplies listed below are specific to the specified shelter location/operation.

### A. Registration Area

| *Item* | *Quantity* | *Item* | *Quantity* |
|---|---|---|---|
| Radio's (walkie-talkie) | | Clip Boards | |
| 3 Ring Binders | | Note pads | |
| Portable fans for kennels | | Caution Tape | |
| Paper Protectors | | Sharpie markers | |
| Cell phone | | Scissors | |

| | | | |
|---|---|---|---|
| Paperwork | | 4 x 6 cards | |
| Refrigerators for can foods | | Microchip scanner | |
| Slip Leads | | Duct tape | |
| Digital camera/camera and film | | Easel stands for signage | |
| Stapler/Staples | | Table and chairs | |
| Flea treatment | | Signage | |
| Sticky Note Pads | | Avery labels, plane white | |
| Pens, markers, pads | | Avery labels assorted colors preprinted (intact male, intact female, in heat, geriatric, people aggressive, animal aggressive) | |
| Paper Clips | | Color wrist bands for registered owners/and animals. | |
| Catch pole | | | |

### B. Dog Shelter Areas

| ***Item*** | ***Quantity*** | ***Item*** | ***Quantity*** |
|---|---|---|---|
| Muzzles various sizes | | Brooms/Dust Pans | |
| Trash Cans | | Mops, buckets, sponges | |
| Carriers of various sizes | | Ear Plugs | |
| Zip Ties | | Table and chair | |
| Can openers | | Human first aid kit | |
| Whistles | | Animal first aid kit | |
| Spray bottles | | Leashes, collars and harnesses | |
| Rubber Gloves | | Quality rope | |
| Hand disinfectant | | Signage | |
| Cleaning Product | | Water | |
| Paper towels | | Assorted foods | |
| Dish Soap | | Blankets and towels | |
| Heavy duty plastic bags | | | |

### C. Cat shelter areas

| ***Item*** | ***Quantity*** | ***Item*** | ***Quantity*** |
|---|---|---|---|
| Heavy gauntlets / cat gloves (welder gloves are acceptable as an alternative) | | Table and chair | |
| Trash Cans | | Human first aid kit | |
| Carriers of various sizes | | Animal first aid kit | |
| Rubber Gloves | | Leashes, collars and harnesses | |
| Can openers | | Quality rope | |
| Cleaning Product | | Litter and pans | |
| Spray bottles | | signage | |
| Dish Soap | | Water | |
| Hand disinfectant | | Assorted foods | |
| Broom/Dust Pans, Mops, buckets, sponges | | Blankets and towels | |
| Paper towels | | Cat litter and disposable pans | |
| Heavy duty plastic bags | | | |

## V. RESPONSIBILITIES

### A. Primary Agency:

**King County Animal Care and Control will**:

- Direct the overall animal sheltering.

- Determine when and where to establish emergency animal Shelters and when to close them.

- Develop Memorandums of Understanding (MOU) with all response partners and ensure that all MOUs are up to date and valid.

- Provide and/or coordinate staffing for:

    - Pet Shelter Division.

    - Pet Shelters (Owned or Stray Shelters).

- Coordinate animal shelter volunteer activities.

- Provide administrative and technical support for rescuing stranded animals. Provide animals with food, shelter, first aid, supplementary veterinary care and other urgent immediate needs during emergencies.

- Be responsible for overall coordination of animal sheltering with King County OEM.

- Be responsible for overall coordination of animal shelter with support agencies.

- Develop and maintain procedures for activating and deactivating animal shelters.

- Maintain a resource listing of animal shelter equipment, supplies, facilities and their availability.

- Maintain a listing of emergency animal shelter locations and administer any agreements needed for the use of such.

- Assist in providing transportation for pets to animal shelters, if resources are available.

- Establish a program to unite animal and owners located in the shelters.

**B. Supporting Agencies:**

**King County Department of Natural Resources and Parks will**:

- Coordinate with KCACC and King County OEM on identifying properties that could serve as emergency animal shelter sites.

**King County Office of Emergency Management will**:

- Inform King County Animal Care and Control (KCACC) of the need for animal rescue, sheltering or feeding.

- Inform KCACC of areas to be evacuated, and when possible, the approximate number of evacuees and small and large animals.

- Identify resources to support and assist with animal emergency sheltering activities.

- If necessary, in coordination with KCACC, establish a call center number for animal retrieval and other animal-related information.

**Public Health-Seattle & King County will**:

- Coordinate the volunteer element of this Tab through the Public Health Reserve Corps program.

- Coordinate with KCACC on the deployment of volunteer Veterinarians and volunteer Veterinary Technicians.

- Support public health services in emergency pet shelters to include inspections, sanitation and environmental health concerns.

- Provide guidance to KCACC on the proper disposal of deceased animals that may impact the public health.

- Provide assistance in the investigation of animal bites with regard to rabies quarantine and to provide post exposure rabies prophylaxis to rescue personnel, if not available through regular medical services.

- Track notifiable and reportable conditions in animals that lead to human disease.

- Act as liaison to Washington State Department of Health and Centers for Disease Control and Prevention (CDC).

- Advise on human health issues and procedures for management of animal wastes and dead animals.

- Provide recommendations to assure adequate vaccination of animal care workers when available.

**National Partners will**:

- Provide leadership and operational support as identified in this Tab.

**Regional Human Sheltering Partners will**:

- Work with KCACC on locating emergency pet shelters as close to human shelters as possible.

- Provide mobile canteen services to animal shelter staff if possible.

**Regional Animal Sheltering Partners will**:

- Provide leadership and operational support as identified in this Tab.

- When possible, accept animals for emergency sheltering from King County or from owners during disasters impacting King County.

- When possible, loan resources and trained staff to King County during disasters impacting King County or the region.

**Washington State Animal Response Team (WASART) will**:

- Provide leadership and operational support as identified in Tab 4.

- Respond with available resources when requested by King County OEM or KCACC.

**Washington State Department of Agriculture will**:

- Assist in identification of support resources such as veterinary staff, carcass disposal, and disease tracking when requested.

**Attachment 1**
**Pet Owner Sheltering Agreement**

I, _____ the owner of _____ understand that emergencies exist and that limited arrangements have been made to allow my animal to remain in the shelter facility. I understand and agree to abide by the pet care rules contained in this agreement and have explained said rules to any other family member accompanying me and my pet.

1. My pet will remain contained in its approved carrier except at scheduled times. During scheduled relief time, my pet will be properly confined with leash, harness and muzzle (if necessary). Scheduled times will be strictly adhered to.

2. I agree to properly feed, water and care for my pet as instructed by King County Animal Care and Control or designee. (Before 10am and again between the hours of 5pm-7pm)

3. I agree to properly sanitize the area used by my pet, including proper waste disposal and disinfecting.

_____
Signature

# TAB 4
# LIVESTOCK SHELTERING

**PRIMARY AGENCY:** Regional Animal Services of King County

**SUPPORT AGENCIES:** King County Office of Emergency Management
Public Health Seattle King County
Washington State Animal Response Team
Washington State Department of Agriculture

## I. INTRODUCTION

### A. Purpose

This tab focuses on the sheltering of evacuated livestock at a Rural Community Shelter during a disaster.

### B. Scope

Specific types of livestock will be accepted for sheltering as defined in this tab. Livestock will be co-located with owners and their pets at a Rural Community Shelter. Owners will be responsible for transporting their animals to the Rural Community Shelter location, providing care for their animals while sheltered, and will be required to shelter themselves nearby.

### C. Limitations

The livestock section of the Rural Community Shelter will only accept the following types of animals equine, bovine, camalid (lamas, alpaca), ruminant (sheep and goats), swine, poultry (includes foul), rabbits and small pocket pets (gerbils, hamsters, guinea pigs, etc.)

The livestock section of the shelter will not accept exotic (example: lizards, iguana, snakes, etc.)or diseased animals. Owners will be responsible for sheltering these animals off site from the Rural Community Shelter.

King County is only able to provide a physical location to which owners can evacuate their stock. The location may not be sufficient to support 100% of livestock owners wishing to shelter.

## II. POLICIES

Regional Animal Services of King County (RASKC) is the legal authority for livestock shelter oversight within King County.

Livestock shelter operations will function under all applicable local, state and federal legislation, codes and/or ordinances.

## III. SITUATION & ASSUMPTIONS

### A. Situation

Rural areas of King County will be impacted by disasters that require the relocation and temporary sheltering of a variety of livestock animals. The Rural Community Shelter site will be the appropriate location for livestock owners to bring their animals for shelter.

### B. Planning Assumptions

Emergency shelter location selection will be disaster/incident dependent; the Rural Community Shelter site will be capable of accepting livestock.

Shelter sites will include the capability for water, power, stables, troughs and other livestock support similar to that available at an animal exposition center.

In a developing disaster owners will most likely have early warning to initiate transportation of animals to the Rural Community Shelter site, but not in a spontaneous incident.

Owners will provide daily care and management of their livestock. King County will not provide animal care, feeding, cleaning or exercise support.

King County will have a Memorandums of Understanding in place with national and local animal welfare organizations to provide assistance with the emergency response, including assistance with animal sheltering, animal rescue, animal control, and animal identification.

### C. Activation of Livestock Sheltering

When the King County Emergency Coordination Center (ECC) or the King County Office of Emergency Management (OEM) Duty Officer determines the need for regional livestock shelter operations, RASKC will be notified. RASKC will in-turn notify the appropriate resource partner to assist with livestock shelter operations, this most likely will be Washington State Animal Response Team (WASART).

During incidents that can be forecast, the intent is for livestock sheltering operations to commence before general population sheltering, when the need for livestock sheltering off site from owners property is identified. The King County ECC will work with localities to identify the appropriate conditions and approximate numbers of at risk livestock in the affected areas in order to develop a notification process for those owners.

## IV. CONCEPT OF OPERATIONS

### A. General

The current partner organization supporting King County livestock shelter operations is WASART. Livestock shelter operations will be managed by RASKC in collaboration with WASART and in accordance with the RASKC and WASART Memorandum of Agreement (MOA). WASART will use the attached Standard Operating Guidelines for Support of King County Shelter Operations (see Attachment 2) to support livestock shelter operations.

Pet shelter operations for livestock owners with pets will be in accordance with Tab 3-Pet Sheltering Plan. Owner sheltering will be supported in accordance with Tab 6-Shelter Management. Shelters for owners/owner's representatives and families may differ from that of the general population due to the nature of livestock sheltering. For example, King County plans to obtain access to local recreational vehicle (RV) parking spaces so owners can bring RVs to the Rural Community Shelter site(s), when possible.

Volunteer veterinary services, will be coordinated by RASKC through the Public Health Reserve Corps program in conjunction with the Seattle/King County Veterinary Medical Association and local veterinarians.

Logistic support will be requested through the Shelter Management Team or King County ECC when the incident does not require a delegated Shelter Management Team be established but a Rural Community Shelter is required.

### B. Livestock Shelter Operations

King County OEM is responsible for entering into sheltering agreements with the owners of potential shelter locations and managing the agreements.

Detailed procedures for operating an emergency livestock shelter are contained in Attachment 2 to this Tab.

## V. RESPONSIBILITIES

### A. Primary Agency

**Regional Animal Services of King County will:**

- Manage and/or coordinate livestock shelter operations in accordance with this Tab and internal operating procedures.
- Accept and process unclaimed and relinquished animals from the livestock shelters.
- Implement a process to reunite lost livestock and owners.
- Develop adoption and foster care procedures for abandon and/or unclaimed livestock.
- Coordinate volunteer veterinary services through the Public Health Reserve Corps program in conjunction with the Seattle/King County Veterinary Medical Association and local veterinarians.

### B. Support Agencies

**King County Office of Emergency Management will**:

- Establish sheltering agreements with the owners of potential shelter locations.

**Public Health Seattle & King County will**:

- Assist in managing sanitation standards.
- Assist in tracking of animal disease.
- Assist in activation and coordination of Veterinary Reserve Corps resources for use by RASKC.

**Washington State Animal Response Team will:**

- Staff operation of the livestock shelter component of the Rural Community Shelter in accordance with the Memorandum of Agreement (Attachment 1) with King County and the WASART Emergency Livestock Shelter Standard Operating Guidelines for support of King County Shelter Operations (Attachment 2)

**Washington State Department of Agriculture will:**

- Assist with disease testing, tracking and disposition of livestock.
- If needed, activate the WARM Team to assist in the disaster.
- Assist with disposal of animal carcasses as needed.

**Attachment 1**
**Memorandum of Agreement**

**(INTENTIONALLY LEFT BLANK – MOA PENDING)**

**Attachment 2**
**WASART Standard Operating Guidelines**

# Emergency Livestock Shelter

# Standard Operating Guidelines

# For Support of King County Shelter Operations

# TABLE OF CONTENTS


Emergency Livestock Shelter Standard Operating Guidelines ..... Page 3

I. WASART Mission Statement ..... Page 4

II. WASART Concept of Operations ..... Page 4

III. Animal Disaster Response ..... Page 6

IV. Animal Evacuation/Rescue SOGs ..... Page 7

V. Animal Disaster Shelter Checklist ..... Page 11

VI. Animal Disaster Shelter SOGs ..... Page 12

VII. Supply Acquisition and Distribution ..... Page 17

VIII. Coordinate Volunteer Services ..... Page 19

IX. Shelter Demobilization ..... Page 20

X. Appendix ..... Page 21

A. ICS – Job Descriptions ..... Page 21

B. WASART Organization Chart ..... Page 30

***To Be Added***

C. WASART Points of Contact ..... Page

D. King County Points of Contact ..... Page

E. Animal Welfare Points of Contact ..... Page

F. Forms ..... Page

G. Safety Contingency Protocols ..... Page

H. Volunteers Dress Code ..... Page

**Washington State Animal Response Team**
**King County Emergency Livestock Shelter**
**Standard Operating Guidelines for supporting King County Shelter Operations**

## I. Mission Statement

In the event of a disaster, the Washington State Animal Response Team (WASART) is committed to helping ensure that as many livestock and other animals survive as possible. To achieve this goal, WASART will support establishing emergency livestock shelter and assist Regional Animal Services of King County (RASKC) in providing care for livestock affected by a disaster.

### WASART priorities

1. Responder Safety

2. Animal survival;

3. Assist Regional Animal Services of King County with finding options for placement of unclaimed and/or relinquished livestock.

WASART personnel will work within the NIMS National Incident Command Structure. All evacuation/rescue operations will be conducted in a safe and ethical manner and in compliance with all state laws. WASART personnel and volunteers will treat animals humanely at all times. Any individual or group violating these principles or who seek to deprive a rightful owner of their animal will be asked to cease operations in a disaster response and leave the area.

## II. Concept of Operations

### A. Livestock impacted by disaster

1. Potential hazards, such as flooding and hazardous materials incidents, may require evacuation of residents from a selected area. WASART is committed to minimizing animal suffering and human anguish by providing temporary shelter for livestock.

2. WASART and its volunteers will perform livestock related disaster relief in a lawful and ethical manner at all times.

### B. Developing Disaster Actions

1. Review livestock shelter operations plans and procedures.

2. Confirm task assignments and place response team(s) and volunteer groups on alert status.

3. As conditions worsen, WASART will begin to mobilize and stage equipment.

4. Begin record keeping in accordance with FEMA requirements of disaster-related expenses and continue for duration of the emergency. Documentation must include hours worked by volunteers, equipment and supplies purchased or used for response. However, at this time FEMA provides limited to no reimbursement for animal shelter costs.

### C. During Disaster

RASKC will notify WASART that a Rural Community Shelter is being established.

## III. Response

A WASART member will respond to the King County ECC or Shelter Management Team Incident Command, if established, to assist with coordinating livestock sheltering needs.

a. Identify the severity of impact this incident has or will have on the local animal population, veterinarians, and the ability to obtain animal supplies.

b. Identify the types of animals affected and what equipment and personnel will be required to conduct an effective shelter mission.

As directed by RASKC, WASART will support the following actions to provide any or all of the emergency services listed below.

## IV. Disaster Sheltering

### A. General

1. WASART will deploy teams to respond to any disaster in King County when requested by the jurisdictional authority for animal control. WASART will work with local animal control and other animal agencies and organization when available to organize transport, sheltering, and staff.

### B. Emergency Sheltering

WASART will establish a temporary livestock shelter to receive and provide care for livestock.

### C. Deceased Animals

WASART shelter personnel will catalog deceased animals they encounter by utilizing paperwork developed by WASART or provided by the RASKC.

1. Personnel will list the deceased animal, a complete description, any tags, collars or other identifying information, and the location where it was found.

2. When possible, a picture with a case board that lists location, date, sex and age of deceased animal will be documented and placed into the animal database.

3. WASART Field Response Teams will not pick up deceased animals.

### D. Health Recommendations

Volunteers working with animals in the disaster area are encouraged to obtain Hepatitis A and B, Tetanus, and Rabies Pre-exposure vaccination prior to disaster response.

## V. Animal Disaster Shelter Checklist

### A. Coordinate shelter facilities using available shelter facilities or confinement areas or develop temporary shelter areas in cooperation with RASKC.

To set-up an emergency livestock shelter, follow the checklist below.

1. Confirm Shelter Manager assignment.

2. Confirm shelter location

    a. Existing shelter facility with expansion room for an indeterminate number of animals within the confines of existing buildings or outside area.

    b. A building which can be modified for use as an emergency livestock shelter.

    c. Must have access to existing animal housing or be able to build animal holding area(s) for animals of different species, age, size, and temperament.

    d. Shelter area must have access to utilities: electric power, ventilation or heat as necessary, water, waste water system, trash and animal waste disposal.

    e. Shelter facility and grounds must be able to be secured as much as possible.

    f. Shelter facility must be accessible to owners whose animals are being housed in the shelter and to shelter staffs.

    g. Shelter facility must have secure and vector free storage space available or brought in to store animal equipment, feed and supplies.

    h. Shelter should have access to the following equipment:

        1.) Working refrigerator for vaccines and medicine.

        2.) Copier for records.

        3.) Water hoses for sanitizing.

        4.) Computers to enter animal tracking information.

            i. Shelter must have animal handling, medical and cleaning supplies.

3. Confirm veterinary medical staff for shelter.

    a. Shelter must have access to medical supplies.

b. Shelter medical staff will have access to a secure storage area for controlled drugs to treat injured and sick animals.

## VI. Animal Disaster SOGs

### A. Animal Care Procedures

WASART will endeavor to provide care for animals housed in a temporary livestock shelter so that as many animals as possible survive the disaster and recovery process.

1. Animal Inventory

Establish a system to register identification data in an effort to coordinate animals with their owners. Track activities of animal shelter and confinement faculties. Keep computer and/or paper records on all animal received and their disposition, if any. These records will include the following: a registration number; date of registration; location of receiving shelter; species; breed; sex and whether altered; color and any description or other markings; who brought in; owner information; age; any collars, tags, microchip or other type of identification; condition of animal. A copy of the registration record in some sort of 'stall card' format, including the registration number and other general information on the animal, will be kept with each animal at all times.

2. Animal Housing

Use available stall/pen facilities and available premium caging. However, if these are not available, modify and use accessible alternatives. These may include, but are not limited to: crates, either wire or Vari-kennel plastic types; other pre-made pens, stalls, cages/crates; or confinement facilities designed from available fencing or other materials. Facility alternatives will be evaluated on their accessibility to shelter workers and the owners of animals being housed at the shelter, access to utilities and space provisions and security. These might include, but are not limited to: private barns or stables, including those for exhibits or shows, pastures or paddocks, boarding stables, etc.

3. Animal Feeding

Owners will have primary responsibility for feeding their animals. If owners are unable to care for their animals, shelter staff will attempt to maintain feedings at twice per day, or as required for a particular species of animal.

4. Animal Watering

All animals will be provided with fresh water daily, and kept available to them at all times. Whatever containers are available will be used, disinfecting them as needed and between animals. (Note: rabbits and other small animals are watered using small crockery-type dishes or watering bottles.)

5. Animal Exercise

Owners will have primary responsibility for exercising their animals. If the owners are unable to provide exercise, animals will be exercised as time, facilities and volunteers are available. Scheduled walks and/or exercise decisions will be made on an individual/situational basis.

6. Animal Housing Cleaning

Owners will have primary responsibility for cleaning the shelter area in which their animal is being housed. Shelter staff will be available to assist and oversee that a thorough cleaning of all animals' housing on a daily basis occurs, according to the needs of the individual species. See cleaning protocols for detailed procedures.

## B. Animal Intake

a. Temporary Emergency Shelter

When animals arrive to the shelter on an emergency basis because the owner needs help with temporary housing/care, these animals will be tracked with an agreement signed by the owner. The owner must agree to keep in contact with the shelter. These animals may at times be transferred/exported to other facilities (where the afore-mentioned agreement must be honored) or sent into foster care when possible/available, if the incident dictates the need.

b. Quarantine

If an animal poses a health threat to other animals or people the animal will be transferred to an appropriate veterinary or animal control facility, if available.

1. Animal Identification

When possible, photographs of each animal with their owner will be taken and included with the registration forms.

2. Animal Examination

Every animal that is received will be given a routine, general examination as soon as possible after receipt. This should include aging, sexing, and checking for any injuries or signs of illness. Any animals that have signs of illness or injury are assessed by a veterinary technician and referred for a veterinary examination if available. Some animals may be frightened or fractious upon receipt and may need to be allowed some time to adjust before examination and routine treatment is attempted again.

3. Animal Decontamination

If it is necessary to perform decontamination baths on any animal, we will use a Chlorhexidine gluconate solution such as Nolvasan or Betadine. This needs to have a contact time of 10 minutes on the animal.

4. Animal Treatments

Any veterinary care that animals may require will be given at the level able as directed by RASKC designated veterinarians, based upon the situation. There will be no elective surgeries or other procedures that are not considered immediately necessary.

6. Animal Isolation

If an animal is considered to have a contagious disease (either zoonotic or to other animals), when resources allow, an isolation area will be set up to hold these animals. Periods of isolation and type of treatment will be determined by a veterinarian when available.

7. Animal Disposition

All animals taken into the temporary shelter must be placed with owners or to other locations under the direction of RASKC. Anyone attempting to remove an animal without authorization must leave the shelter area and may be handed over to authorities.

a. Stray/Lost Return to Owners

Stray/Lost Animals will be returned to their owners as soon as possible, pending some proof of ownership from the individual/family. This may be in the form of purchase receipts, adoption agreements, registrations, microchip records, veterinary records/receipts, boarding records/receipts, grooming records/receipts, or photographs. Each situation will be handled and considered individually, with more difficult determinations ruled on by the Shelter Manager. Records of vaccinations and treatments while in the temporary shelter will be provided to owners.

### C. Feral and Dangerous Animal Policy

In accordance with safety concerns, any feral or vicious animal will be held for 2 days when possible in order to allow it to acclimate itself to its new surroundings. However, this may not be possible due to safety and space considerations. Caging/stalling may not be adequate to hold these animals without risk to other animals and/or people.

### Supply Acquisition and Distribution

Coordinate with the Shelter Manager, Shelter Management Incident Command Logistics, or King County ECC to provide water, food, and other physical needs to animals; store and distribute animal food and medical supplies to the shelter upon request. Essential supplies will be stationed at the emergency livestock shelter to provide food, water, medical supplies and other physical needs to animals.

## IX. Coordinate Volunteer Services

The success of our mission is largely dependent on bringing a number of skilled individuals to fulfill the needs of this plan. Disaster volunteers could be called upon to help conduct evacuation/rescue, sheltering and clerical duties involved in the disaster response.

## A. Requirements

When possible, all prospective volunteers are required to attend an orientation prior to beginning their volunteer service.

1. Be at least 10 years of age (with direct adult supervision).
2. Be registered as a WA State Emergency Worker, either through WASART, KC OEM or as an emergent volunteer through KC OEM.
3. Report to the Volunteer Management Leader.
4. Complete the WASART Volunteer Agreement.
5. Complete the WASART Assumption of Risk, Release and Indemnification Agreement.
6. Complete the WASART Volunteer Application.
7. Adhere to WASART's mission and policies at all times.

## B. Disaster Shelter Volunteer

Assist owners to care for sheltered livestock, muck out stalls and pens, sanitize animal cages and dishes.

1. Maintain clean housing following Shelter cleaning guidelines.
2. Water and feed the animals as directed.
3. Assist owners in the Shelter.
4. Communicate 'red flags' to Shelter staff/supervisors
5. Adhere to Shelter mission and policies at all times
6. Treat animals humanely and animal owners, staff and volunteers with compassion
7. Report to: Shelter Supervisor.
8. Location: emergency livestock shelter.
9. Hours available: as assigned
10. Dress Code: as required by WASART directive
11. Qualifications: minimum of 10 years of age (with direct adult supervision). Ability and desire to learn about animal breeds and behavior and to recognize/respond to body language of animals
12. Willingness and ability to work under challenging conditions in a time of crises to ensure that as many animals as possible survive the disaster

13. Ability to repeatedly bend, lift, walk and stoop

14. Willingness to be trained and supervised by WASART members

## X. Demobilization of the Livestock Disaster Shelter

**Coordinate the consolidation or closing of the emergency shelter, personnel and supplies as directed by RASKC**. The Shelter Manager will scale back the operations of the shelter and necessary personnel as the need diminished.

a. The Shelter Manager is responsible for making the decision to operate the shelter at a reduced level and or close the shelter based on the number of animals under its care.

b. Any animals still under the care of the shelter at the time of demobilization and still within the holding period will be transferred into the care of RASKC, or its designee.

c. Animals that have been permanently surrendered by their owners or custodians may be transferred to RASKC or its designee.

d. Any animal not claimed within the established holding period from the opening of the emergency shelter will be considered abandoned and will be transferred into the custody of RASKC or its designee.

e. Donated resources not utilized by WASART will be processed in accordance with King County Logistic guidelines.

f. Complete all documentation including animal statistics, expenses, and volunteer and equipment hours and submit to the Shelter Manager.

## APPENDIX D
## JOB DESCRIPTIONS

**In the event of a disaster, the following positions will be filled by WASART members or their designees. A line of succession will be maintained and updated to assure that qualified personnel are available.**

### I. WASART Leader

**Line of succession** (will be completed when the incident occurs)

**Position Description**:

The Lead initial responsibilities include:

- Assessing the situation or reviewing current briefings
- Coordinating the need for shelter with RASKC
- Ensuring adequate safety measures
- Maintaining a log of all incoming messages and requests
- Act on all requests
- Coordinate with RASKC and KC ECC to accomplish mission
- Coordinate all requests for animal care through the Shelter Manager
- Provide the Shelter Manager with tracking of all paperwork, maps, supplies, and personnel
- Provide the Shelter Manager with a daily written report, or as otherwise requested, detailing all activities performed including recommendations for improvement

### A. Public Information Officer

**Line of succession** (will be completed when the incident occurs)

**Position Description**

The Public Information Officer (PIO) is responsible for coordinating with the KC JIC/JIS for content development of information for public release. This role may also include providing media support on site at the emergency livestock shelter.

### B. Safety Officer

**Line of Succession** (will be completed when the incident occurs)

**Position Description**

The Safety Officer is responsible for and assigned to develop measures for volunteer safety within the emergency livestock shelter under the direction of the Shelter Manager and Shelter Site Safety Officer.

## II. Operations

### A. Livestock Shelter Operations Branch Director

**Line of Succession** (to be completed when incident occurs)

**Position Description**:

Shelter Operations Branch Director shall be a WASART Operations Leader or Team Leader. He/she shall be responsible for the livestock shelter operations. All shelter personnel will be under the supervision of the Shelter Manager or his/her designee. All facilities, equipment, supplies and animals will be under the direct control of the Shelter Manager.

***Duties and Responsibilities***:

- Maintain a smooth operation of the livestock emergency shelter.
- Hold briefings to coordinate all sections are required
- Ensure coordinators are following though with their duties
- Provide a list of needed supplies and equipment to the WASART Lead for forwarding to Shelter Manager.
- Adjust personnel as needed to accomplish the mission
- Supply updates, requests for supplies and personnel through the WASART Lead
- Provide the WASART Lead, with a daily written report detailing all activities performed, including recommendations for improvement

1. Intake Supervisor

   The WASART Lead will appoint the Intake Supervisor. He/she will be responsible for receiving all animals into the emergency livestock shelter, creating all paperwork, and providing two pictures of each animal for identification.

   The WASART Lead will appoint the Animal Care Coordinator. He/she will be responsible for caring for animals' needs (i.e., food, water, shelter, medical attention, grooming, and exercise), and maintaining a daily care routine.

   ***Duties and Responsibilities:***

   - Check in all animals received at the emergency livestock shelter, maintaining written records of each animal with photos for UD
   - Coordinate with the WASRT Lead to establish an Animal Intake site

- Assist the WASART Lead with the set up of the Animal Intake area and the Lost Animal Reclaim area.
- Complete Animal Intake Form.
- Take two (2) pictures of the animal.
- Label pictures with animal intake number, date of arrival, and sex.
- Staple picture to Animal Intake Form in lower right corner.
- Place other picture with owner intake form.
- Write the animal intake number on the ID band or tag and place on animal's neck or leg band, and provide band for owner.
- Leave existing collars or halters on animals.
- Label cage/pen/stall with animal intake number, date of arrival, and sex.
- If animal has been admitted and is on any medication, send animal to veterinarian for check-up.
- Locate an Animal Volunteer to assist owners to move animal to a cage/pen/stall.

a. Lost Animal/Reclaim Volunteer

***Duties and Responsibilities***:

- Have owner fill out Lost Animal Form
- Ask owner for a picture of the animal if available.
- Compare Lost Animal Form to Stray Animal Book at the Animal ID and Registration area. DO NOT allow owner past your table.
- Advise the Shelter Manager of animal match so he/she may release animal to owner.
- Ask for ID if animal is being released to them.

2. Shelter Supervisor

***Duties and Responsibilities***:

- Set up shelter areas
- Assign personnel to key positions including Safety Officer, Documentation/ID Specialist.
- Coordinate smooth operation of shelter. Ensure personnel are managing assigned tasks.

- Make requests for more supplies or personnel though the WASART Lead.
- Ensure all record keeping is being maintained.
- Do not get involved with animal care. You must maintain the operation of the livestock shelter.
- Hold a briefing to distribute information to all personnel and volunteers.
- Assign volunteers to such positions as Intake, Housing, Feeding and Watering, First Aid, Exercise, Sanitation, etc.
- Assign personnel to the positions of Lost Animal/Reclaim Volunteer, Animal Volunteer, and Shelter Volunteers.
- Confirm that all paperwork is being completed.

a. Animal Care Coordinator

***Duties and Responsibilities*:**

- Assist owners with daily maintenance care for all animals, i.e., food, water, shelter, grooming, exercise, etc.
- With owners, move all injured animals directly to Emergency Animal Care Coordinator for immediate attention
- Assist WASART Lead with cleanup
- Maintain Daily records of care animals received (food, water, exercise, grooming, etc.), if not provided by owner.
- Maintain a log of daily activities
- Maintain all animal records
- Provide the WASASRT Lead with a daily written report, or more frequently if requested, detailing all activities performed including recommendations for improvement
- Confirm that all animals are being cared for properly
- Confirm that all animals have proper ID and records attached.

b. Animal Care Volunteer

***Duties and Responsibilities***:

- Set up animal housing by animal type and species. Designate separate areas for stray and quarantine animals.

- Assist Supply Unit Leader with set up of animal food and supply storage and distribution areas and help maintain. Report any needs to Supply Coordinator.

- Assist Supply Unit Leader with set up of animal housing cleaning area and maintenance.

- Assist owners to move animals from animal intake area to housing. (Protective gloves should be worn.)

- Assist owners to care for animals (i.e., food, water, clean, groom, exercise).

- Assist owners to take injured animals to veterinarian.

- Report any changes of animal status to WASART Lead and Veterinarian.

## III. Planning Section Chief

**Line of Succession** (will be completed when incident occurs)

**Position Description**:

The Planning Section coordinates with the WASART Lead and is responsible for a wide range of written documents to include, but not limited to, the Livestock Shelter Incident Action Plan, documentation, and demobilization.

## IV. Logistics Section Chief

**Line of Succession (**will be completed when incident occurs)

**Position Description**:

Logistics is primarily responsible for providing internal support for shelter services. He/she will be responsible for maintaining all needed supplies to operate the livestock shelter, including but not limited to food, water, feed, equipment, clerical supplies, and fuel. He/she will maintain all receipts and records of supplies for the shelter.

### A. Communications Unit Leader

He/she will be responsible for maintaining communications between the WASART Lead, the Shelter Operations Director, the Shelter Manager utilizing or linking into the existing Rural Community Shelter communication system.

***Duties and Responsibilities***:

- Responsible for communications between the WASART Lead and Shelter Director, etc. (i.e., memos).

- Provide operators for all equipment

- Provide daily updates of key personnel phone lists.

- Prepare information sheets for the WASART Lead.
- Provide list of needs from other sections to give to the WASART Lead.
- Provide photos and videos of relief efforts for documentation.
- Maintain a file of all documents created in the shelter.
- Maintain a message log.
- Provide the WASART Lead with a daily written report, or more frequently as requested, detailing all activities performed, including recommendations for improvement.

**B. Volunteer Management Unit Leader**

***Duties and Responsibilities***:

- Sign in and out all volunteers on sign-in board.
- Have all volunteers fill out the Shelter Personnel Medical and Emergency Form.
- Place a colored UD band on all volunteers in accordance with the day of the week being worked.
- Have each volunteer fill out an identification card. It should be placed in an ID holder together with the volunteer's current driver's license and be visible on the volunteer's person at all times.
- Take a picture of each volunteer and attach it to the bottom right corner of the Shelter Medical and Emergency Form.

**C. Supply Unit Leader**

The WASART Lead will appoint the Supply Unit Leader. He/she will be responsible for maintaining all needed supplies to run the shelter, including but not limited to food, water, feed, equipment, clerical supplies and fuel. He/she will maintain all receipts and records of supplies for shelter.

***Duties and Responsibilities***:

- Coordinate with the Shelter Manager to choose a reception and distribution site.
- Coordinate with the Shelter Manager for delivery of needed supplies.
- Provide a list of supplies on hand and supplies needed to the Shelter Manager.
- Maintain proper storage of all supplies received and distributed.
- Distribute all supplies as needed to requesting Directors or Supervisors.
- Maintain log of all supplies received and distributed.

- Maintain log and give receipts for al donated supplies. Keep copy of all receipts.
- Provide daily distribution of supplies.
- Provide water and food for animals and relief personnel.
- Provide the WASART Lead with a daily written report, or more frequently if requested, detailing all activities performed, including recommendations for improvement.

## V. Finance/Administration Section Chief

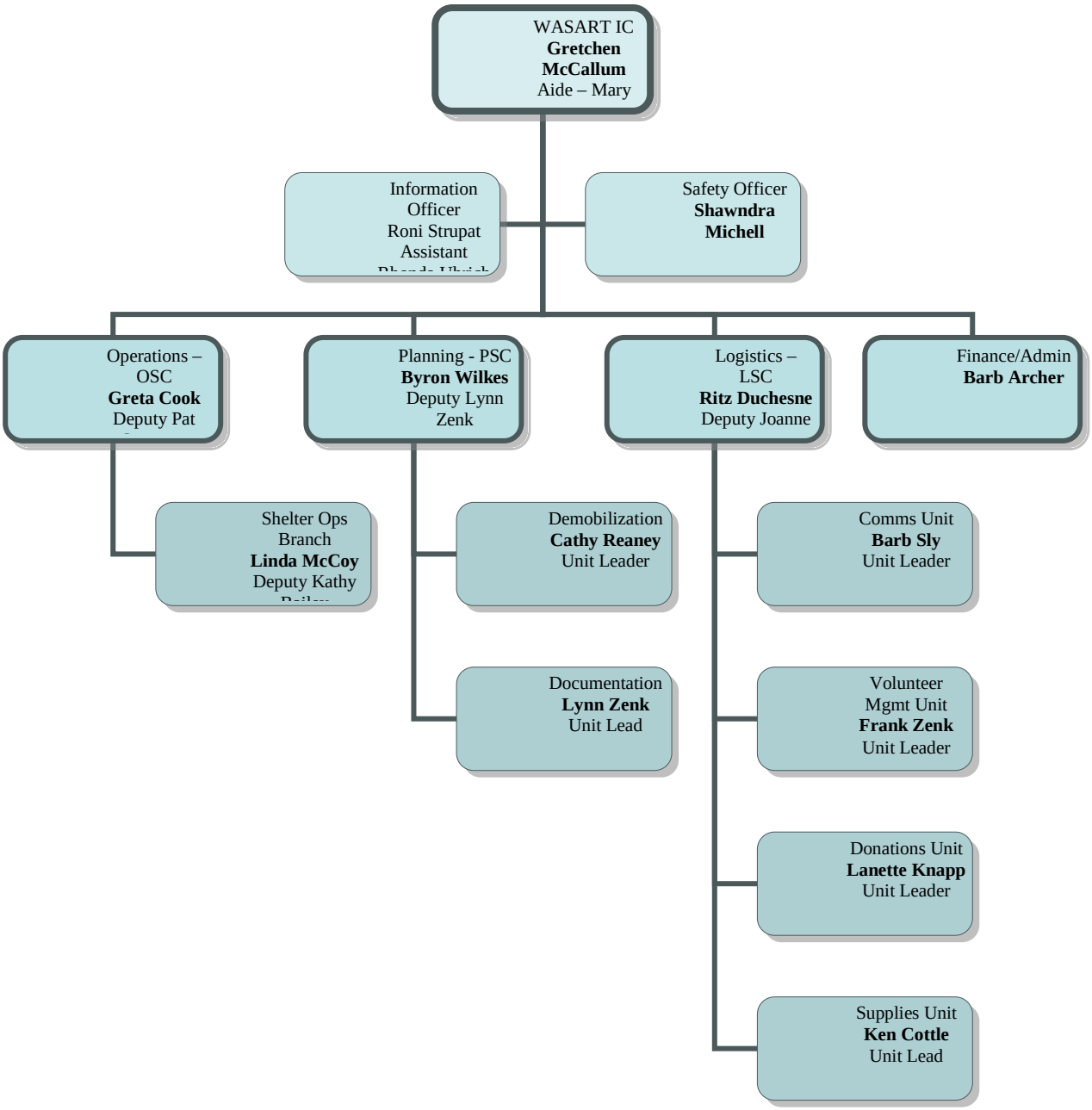
**Line of Succession** (to be completed when incident occurs)

**Position Description**:

Finance/Administration is responsible for financial management, analysis, cost projections, and tracking of all costs related to the incident. He/she will be responsible for maintaining a copy of all documents and records pertaining to the operation. These may include all reports, accounts receivable, requests, budget, personnel medical forms and emergency contacts, and animal records.

***Duties and Responsibilities***:

- Collect, record, and maintain a log of all donated funds and turn over to the WASART Lead. All non-monetary donations may be used as needed at the shelter or transferred elsewhere as needed.


WASART IC
**Gretchen McCallum**
Aide – Mary
Information Officer
Roni Strupat
Assistant
Safety Officer
**Shawndra Michell**
Operations – OSC
**Greta Cook**
Deputy Pat
Planning - PSC
**Byron Wilkes**
Deputy Lynn Zenk
Logistics – LSC
**Ritz Duchesne**
Deputy Joanne
Finance/Admin
**Barb Archer**
Shelter Ops Branch
**Linda McCoy**
Deputy Kathy
Demobilization
**Cathy Reaney**
Unit Leader
Documentation
**Lynn Zenk**
Unit Lead
Comms Unit
**Barb Sly**
Unit Leader
Volunteer Mgmt Unit
**Frank Zenk**
Unit Leader
Donations Unit
**Lanette Knapp**
Unit Leader
Supplies Unit
**Ken Cottle**
Unit Lead

# TAB 5
# EXTERNAL AFFAIRS

**PRIMARY AGENCY:** King County Office of Emergency Management

**SUPPORT AGENCIES:** American Red Cross Serving King & Kitsap Counties
King County Public Information Officers (PIO)
Regional PIO Network
Washington State Department of General Administration
Washington State Department of Social & Health Services
Washington State Military Department Emergency Management Division

## I. INTRODUCTION

### A. Purpose

This Tab establishes the process for the effective development, coordination, and dissemination of information to the public, including the media, regarding shelter operations to include types of shelters, shelter locations, guidance for those seeking shelter and timing of evacuations.

### B. Scope

A Joint Information System (JIS) will be used for regional coordination. A Joint Information Center (JIC) will be established at the King County Emergency Coordination Center (KCECC) with remote operations at Regional Shelter Management Incident Command Post and regional shelter locations as required.

### C. Limits

Information can only be as accurate as available at the time of coordination and public release.

## II. POLICIES and AUTHORITIES

See Regional Shelter Operations Incident Annex and ESF-15, External Affairs.

## III. SITUATION and ASSUMPTIONS

### A. Situation

Regional care and sheltering of more than a few hundred people is a complex operation involving different populations, critical shelter decisions, communication opportunities and the urgency of an impending disaster. Regional care and shelter operations can be required for any disaster displacing people from their normal domiciles; however, flooding is the most common cause. Timely information targeted to non-English speaking, deaf or hard of hearing, and 'fragile' populations as well as the public majority is the key to an effective response. Both preplanned and ad hoc messages must be delivered as part of an overall information campaign.

### B. Planning Assumptions

The media will proactively seek information on care and shelter operations and shelter clients.

The Regional Shelter Management Incident Command (IC) will be assigned a Public Information Officer, as will regional shelter locations with 200 or more clients or on an as required basis at other operation locations such as the Livestock Shelter, Medical Needs Shelter, etc.

Media will want to do live reporting from shelter locations.

Media will want access to the shelters prior to occupation to report on progress.

Media access to shelter clients will be coordinated through the JIC, Shelter Supervisor and American Red Cross when appropriate.

Certain populations and/or clients may be shielded from media access to maintain requested privacy.

Organizations supporting care and shelter operations will seek interviews with the media to describe their contributions to the operation.

## IV. CONCEPT OF OPERATIONS

### A. General

The primary and supporting agencies will sustain JIS operations by providing public information staff for the JIC, IC and shelter locations requiring a public information officer. These agencies will also adapt and practice JIC protocols to coordinate all information regarding the incident and care and shelter operations through the JIS. Each agency will designate at least one public information officer or representative to serve in the JIC.

Public information officers in the JIS will perform functions for their own agencies/jurisdictions as well as serve in positions within JIC functional groups and shelter PIO positions. Jurisdiction-specific activities might include:

### B. Key Objectives

Joint Information System (JIS):

- Maintain awareness of time-sensitive decisions such as where shelters are established, limits and requirements for people seeking public shelter (limits on personal effects, pets, etc.), travel routes and the type of assistance available at each shelter.

- Coordinate closely with the Transportation Group to maintain awareness of pickup points, route changes and related information.

- Provide PIO staff at shelter sites.

Shelter PIO Staff:

- Provide JIS information to facilitate media access including address, driving directions, points of entry, parking instructions/limitations, points of contact and hours of operation. Coordinate any special media requirements (e.g., space, power, etc.)

- Coordinate media visits with Shelter Supervisor and key staff. Develop internal messaging and act as spokesperson for the shelter staff. Help staff members prepare for interviews by media representatives. Help identify appropriate messages for shelter staff who may speak to media.

### C. Organization

All JIC actions will be coordinated with the King County ECC via the ECC Supervisor or his/her designee.

During any activation of the King County ECC, King County Public Information Officers from individual departments must be available to staff shelter locations and/or the Joint Information Center (JIC). If individual departments need specific public information support, it will be provided on a prioritized basis by the JIC.

The major functional areas requiring staffing are:

- King County/Regional JIC

- Regional Shelter Management IC PIO

- General Population Shelter PIOs. One to five such shelters could be established based on the scope and severity of the incident/disaster.

- Medical Needs Shelter PIOs. One to three such shelters could be established based on demand.

- Unique Population Shelter PIO.

- Livestock Shelter PIO.

- Owned Animal Shelter and Stray Animal Shelter PIO

Public Information Officers (PIOs) operating from shelter locations will bring their own Wi-Fi capable computer and cellular telephone. Shelter logistics will ensure the PIOs have access to a workstation, electrical power, wire-line telephone, extension cord, and surge protector. Television monitors and recording equipment may not be available at all operating locations but these resources will be sourced and acquired as needed to meet PIO needs.

## V. RESPONSIBILITIES

## A. Primary Agency

**King County Office of Emergency Management will:**

- Maintain the ECC facility, including the King County/Regional Joint Information Center.
- Provide the JIS with situational awareness of shelter operations, identifying information for public release.

## B. Support Agencies

**American Red Cross Serving King & Kitsap Counties shall:**

- Provide information on location of shelters, feeding kitchens and operations, assistance centers and the assistance being provided to people affected by the emergency, disaster or incident.
- Provide general PIO support, as requested, to the JIC.

**King County PIOs will:**

- Provide PIO staff to the JIS when requested.

**Regional PIO Network will:**

- Provide PIO staff to the JIS when requested.

# TAB 6
# GENERAL POPULATION SHELTER MANAGEMENT

**PRIMARY AGENCY:** King County Office of Emergency Management

**SUPPORT AGENCIES:**
American Red Cross Serving King & Kitsap Counties
King County Department of Community & Human Services
King County Department of Development & Environmental Services
King County Facilities Management Division
King County Department of Natural Resources and Parks
King County Department of Transportation
King County Finance and Business Operations Division
King County Sheriff's Office
Regional Animal Services of King County
King County Facilities Management Division
Public Health-Seattle & King County

## I. INTRODUCTION

### A. Purpose

This Tab identifies the method of supervision and coordination of general population shelter operations in support of King County shelter operations during disasters and incidents requiring regional sheltering.

### B. Scope

Municipalities provide sheltering for their citizens displaced as the result of a disaster in accordance with their respective ESF-6 Mass Care plans. Regional sheltering will be implemented when the estimated and/or actual sheltering need exceeds a municipality's capability and assistance is requested of King County. The King County Emergency Coordination Center (KCECC) will coordinate regional shelter operations to maximize the use of limited resources. Effective implementation requires the active participation of multiple King County agencies as well as non-governmental partners such as the American Red Cross (ARC). This Tab describes the responsibilities of King County agencies and non-government partners in the context of general population shelters.

The American Red Cross (ARC) Serving King & Kitsap Counties will partner with King County, to the limit of resources available, to manage the dormitory operations of regional general population shelters. The ARC will not manage all functions at the general population shelters.

## II. POLICIES

American Red Cross Shelter Management Procedures

International Association of Assembly Managers Mega-Shelter Best Practices

Association for Practitioners in Infection Control (APIC), "Infection Prevention and Control for Shelters During Disasters"

## III. SITUATION and ASSUMPTIONS

### A. Situation

Hurricane Katrina and the 2007 Southern California Firestorms validated the significance of an effective emergency plan for mass evacuations and sheltering. In the event of a prolonged disaster, the government may need to activate and operate large regional shelters. These shelters are major facilities used to house thousands of evacuees from the disaster area. The majority of displaced persons will shelter in private or rental housing; however a substantial number (10-20 percent) will seek government provided sheltering.

King County developed the Regional Shelter Operations Incident Annex to provide shelter to populations from multiple jurisdictions, ensure public safety and allow the most effective use of limited sheltering resources. Regional public shelters may house from several hundred up to several thousand people. These shelters provide the displaced population temporary refuge for a few weeks following an incident or disaster while these residents make the transition to long-term housing or return to their homes.

### B. Planning Assumptions

Disasters and/or incidents may occur in King County that will require the regional sheltering of thousands of displaced people.

Catastrophic incidents and disasters will produce needs which exceed the capabilities of incorporated jurisdictions and King County's assistance will be requested.

The American Red Cross (ARC) will manage regional, general population (dormitory) shelter operations on behalf and at the behest of King County government to the limits of their personnel and supplies. The ARC is only responsible for managing general population (dormitory) shelters.

Pet and Livestock Shelters will be managed by Regional Animal Services of King County (RASKC), with the assistance of other partner agencies, including Washington State Animal Response Team (WASART) who is a strategic partner to provide livestock sheltering services under a Memorandum of Agreement (MOA) with King County.

Service animals will be allowed in general population shelters. All other animals/pets will be sheltered as appropriate in pet or livestock shelters. King County will sponsor pet shelters at or nearby general population shelters.

Public Health-Seattle & King County (PHSKC) may already have one or more Alternate Care Facilities in operation before regional general population sheltering is required. PHSKC will manage all Medical Needs Shelters/Alternate Care Facilities supporting regional shelter operations.

The King County Sheriff's Office in collaboration with local/state law enforcement and King County government will manage Unique Population Shelters.

A Regional Shelter Management Incident Command (IC) will be established and part of its functions will be to directly oversee regional shelter operations, coordinate the significant multi-agency effort and logistics. Key King County agencies and departments will contribute personnel to staff this Incident Comand.

## C. Shelter Activation/Termination

The King County Emergency Coordination Center (KCECC) or King County Office of Emergency Management (KCOEM) Duty Officer will make the necessary notifications to implement regional sheltering. Upon activation, the designated staff for the command and general staff of the King County Regional Shelter Management Incident Command will meet in the King County Emergency Coordination Center or designated command post to determine how and to what extent the Regional Shelter Operations Incident Annex and its supporting functional Tabs will be implemented, and identify the requisite shelter location(s). This information will be forwarded to all participating King County agencies and non-governmental partners as expeditiously as possible to facilitate ad hoc planning.

The decision to initiate regional sheltering and the selection of shelter sites is a collaborative process involving key King County agencies and partners as well as affected jurisdictions and the jurisdictions in which the shelters will be located, see Tab 10-Syncronization Matrix. Regional shelters may host as few as 150 displaced persons or up to as many 2,000 people per shelter. Shelter locations will be identified as far in advance as possible. All efforts should be taken to ensure the facility selected meets safety and health standards as well as the following considerations:

- Appropriate climate control (heat/ air conditioning)
- Primary and back-up power supply
- Adequate restroom facilities or contract portable toilets (may need to be contracted)
- Adequate showers (contracted)
- Security (external and internal )
- Adequate area for feeding shelter clients and staff
- Located on public transportation route
- Meeting Americans with Disabilities Act Accessibility Guidelines
- Adequate parking, preferably with some covered parking

Inventories of appropriate shelter facilities are maintained by various entities. King County will maintain awareness of these inventories and will also maintain a list of properties with a potential for sheltering up to 2,000 people. If threat scenarios require and resources permit, King County will develop or maintain agreements with these property owners for emergency use of the property as a regional shelter. Two thousand person shelters are generally available from two sources:

- Sports and convention industries that maintain large sporting arenas and exhibition spaces with their own internal security, kitchen and shower capabilities.

- Large retail or warehouse spaces which provide primarily physical shelter and utility access, but little else.

Post earthquake, a facility inspection will occur before displaced persons can occupy the shelter. Contact will be made to the following agencies to coordinate facility inspections in King County:

- Local Building Development/Services Office

- King County Department of Development and Environmental Services

- King County Facility Management Division

- Public Health- Seattle & King County

Termination of shelter operations will commence when the affected jurisdictions deactivate response operations, recovery operations begin and evacuees have returned to their place of residence or alternative housing has been provided.

## IV. CONCEPT OF OPERATIONS

### A. General

Regional shelter operations will be initiated by the King County ECC during large scale disasters and incidents when the shelter capabilities of municipalities are exceeded and county assistance is requested. Regional sheltering could potentially involve activation of multiple and varying types of shelters such as Medical Needs Shelters, Unique Population Shelters, Livestock Shelters, and Pet Shelters and General Population Shelters. This tab pertains solely to general population shelter management. The American Red Cross Serving King & Kitsap Counties, in collaboration with King County OEM, will provide resources and personnel for regional shelter operations, coordinated through the ARC chapter headquarters, in accordance with the Chapter Disaster Response Plan, Regional Shelter Operations Incident Annex and this Tab.

### B. Organization

The functional organization structure for General Populations Shelter operations is shown in Figure 1. The key roles and responsibilities within each General Population Shelter are:

- **Shelter Division Supervisor** – Responsible for the overall shelter operations, coordinates resources and services with the appointed directors and reports to the Regional Shelter Management IC Operations Section Chief. King County OEM or the Regional Shelter Management IC will appoint the Shelter Division Supervisor for each General Population Shelter.

**Figure 1 – General Population Shelter Organization Chart**

- **Public Information Officer** – Responsible for establishing and maintaining effective relations with the public, media, facility clients and shelter staff. The PIO works in collaboration with the Joint Information Center (JIC) through the Joint Information System (JIS) and reports to the designated Shelter Supervisor. Each shelter PIO shall be appointed by and a representative of the JIC.

- **Safety Officer** – Responsible for the overall safety of General Population Shelter operations and collocated Pet Shelter operations. Provides daily safety briefings, reports findings and makes recommendations to the Shelter Division Supervisor. King County OEM or the Regional Shelter Management IC will source and appoint the Safety Officer.

- **Dormitory Management Unit** – Responsible for the coordination and delivery of shelter services, reporting all updates to the Shelter Supervisor and maintaining communications with appropriate directors. The ARC will staff the Dormitory Management Unit and appoint the Unit Leader.

- **Health Services Unit** - Responsible for initial client triage during registration and ongoing first aid during shelter sick-calls. Coordinates with Medical Needs Shelter Manager on evacuee/patient transfers, maintains communications and provide updates to the Shelter Supervisor. Public Health-Seattle & King County will appoint the Health Services Unit Leader and identify staff from appropriate healthcare organizations.

- **Registration Unit** – Responsible for registering all shelter clients and staff and submitting daily shelter occupancy data to the Regional Shelter Management IC Planning Section. American Red Cross Serving King & Kitsap Counties will staff this unit with personnel qualified and trained to perform the registration, screening and reporting processes.

- **Material Support Unit** – Responsible for coordinating resources and services vital to shelter operations. Maintains communication with all unit leaders, the Regional Shelter Management IC Logistics Section, the Regional Shelter Management IC Multi-Agency Feeding Branch and ARC Mobile Kitchen Manager.

- **Feeding Unit** – Responsible for feeding shelter clients and staff, maintaining a clean and sanitary dining area, arrange for the local public health inspector to visit and advise on local codes and health laws and provide the Shelter Supervisor with daily statistics on the number of meals and snacks served.

- **Security Unit** – Responsible for providing or coordinating security (internal and external) for the General Populations Shelter and collocated Pet Shelters.

## V. SHELTER OPERATIONS

### A. Registration Services

The Registration Unit Leader and staff are responsible for ensuring persons entering or leaving the shelter go through the registration process. The registration process supports the identification of clients with illnesses or other medical needs and alerting the Health Services staff. Without complete, legible and accurate information on shelter clients, the shelters ability to provide needed services is impaired. The Registration Unit will coordinate assistance and oversee the following services:

- Place the reception desk near the entrance to welcome those entering the shelter, to answer their questions, and to direct them toward the registration tables and registrars, allowing enough space for a waiting area.

- Post signage to direct clients to the registration area and post signs clearly marking the registration desk or tables.

- Work with the Material Support Unit and Security to ensure only one entrance to the building if at all possible to support effective registration efforts and provide a secure environment.

- Shelter clients and staff will be issued wristbands to identify they are authorized access to the common areas of the shelter. The Registration Unit will also develop protocols for the registration and escort of visitors authorized access by the Regional Shelter Management IC and/or Shelter Supervisor.

- Spontaneous Volunteer Registration – Registration, credentialing and tracking of all spontaneous volunteers shall be held at an alternate site to ensure proper credentialing procedures. The King County volunteer management section will be responsible for operation of this site. Volunteers who will be assigned to work in a shelter must have successfully completed an American Red Cross background check or equivalent and training before being assigned to shelter work. A form of identification will be utilized to identify volunteers.

- Shelter registration operations will be in accordance with ARC shelter procedures and the Memorandum of Understanding (MOU) between the ARC and King County. To the extent possible, translation services will be sought to assist with on-site translation into American Sign Language or to languages other than English.

## B. Food Services

The Feeding Unit will coordinate assistance with the appropriate agencies to provide meals, snacks and drinks to shelter clients and staff. Detailed information on food service support for shelter operations is contained in Tab 11 – Multi-Agency Feeding Plan. All food services will be provided in accordance with applicable health and sanitation requirements of Washington State and King County. Initial meal service will be limited to either cold or shelf stable meals. In some cases hot soups or a limited number of hot meals may be available from local kitchens. Large-scale hot meal service may not be available for up to 72 hours following the initiation of shelter operations.

## C. Dormitory Services

The Dormitory Management Unit will coordinate assistance with the appropriate agencies to provide the following services to the extent possible:

- Lodging will be provided to all registered clients to ensure each has the essential supplies to sustain life in a general populations shelter. This includes but is not limited to cots, blankets, first aid supplies, personal care products, sanitation supplies, hand/bath towels, antibacterial hand soap, diapers, baby food, infant formula and Infant care products.

- Laundry – Coordinate with various agencies/organizations for shelter client and staff laundry service.

- Spiritual and crisis counseling may be provided at designated shelter sites from volunteer clergy representing mainstream religious affiliations. Religious services will however not be conducted at the shelter. Religious proselytizing will not be permitted on the shelter property. The locations of nearby congregations will be provided through shelter information services without regard to denomination or sect.

- Recreational activities will be provided to the extent possible. These activities may include:

    - Board games, playing cards, books and stuffed animals would be a welcome diversion for children.

    - Family movies can be played on independently run screens, if available.

    - If it is anticipated the shelter will be open for more than a week, an entertainment schedule should be created.

- Information on available social services and disaster benefit registration procedures will be provided when and if available. In addition, every attempt will be made to provide flyers with information on job opportunities, banking services, pharmacies, hospitals and other services not provided on-site. This information will also be translated into the

major non-English languages common in the county.

- Information will be provided in coordination with the King County Department of Transportation on transportation modes and schedules for shelter clients and staff transport to/from shelter facilities. Unique transportation needs will be coordinated with the Regional Shelter Management IC Logistics Section.

## D. Public Information

The Public Information Officer (PIO) will coordinate with the Shelter Supervisor and Joint Information Center (JIC) to provide the following services:

- Information flow – Ensure accurate, timely information is provided to the Shelter Supervisor and JIC.

- Public Relations – Coordinate media events and coverage with the Shelter Supervisor and JIC.

The following information should be determined in coordination with the Shelter Supervisor and disseminated once approved:

- Designated parking at the facility for all media vehicles

- Press conference area

- Spokesperson for the facility

- Press release writer for the facility

- Telephone policy for dealing with the media

- Drop-off location for special appearances

- Holding location for VIP's while awaiting PIO

- Communication plan to include facility, Red Cross and FEMA

The Shelter Supervisor or the PIO will provide and/or coordinate daily briefings for shelter clients to give them an emergency situational update and make them aware of available disaster assistance programs. Whenever possible, representatives from law enforcement, fire departments or affected municipalities will be available to answer questions or make the reports. Information provided in periodic briefings will be made available to limited English proficient residents through on-site interpretation or by accessing language bank services. If any residents are deaf and understand American Sign Language (ASL), at least one full time ASL translator will be retained on the local shelter staff.

## E. Nonprofit and Faith-Based Organizations

The Material Support Unit will coordinate resource/service needs with the IC Logistics Section and supporting agencies. Establish relations with multiple nonprofit agencies and faith-based

organizations with the assistance of the Regional Shelter Management IC and King County ECC Logistics Sections to augment services for shelter operations.

## F. Health Services

Public Health-Seattle & King County (PHSKC) will support the ESF 8 response to any catastrophic incident and provide/coordinate staffing and management oversight of the Health Services Unit in each General Population and Unique Population Shelter established for King County regional shelter operations. PHSKC, in collaboration with ARC, will work with the appropriate agencies to provide the medical capabilities and services required. During catastrophic incidents and disaster, the ESF 8 Area Commander may assume this responsibility. PHSKC and/or the ESF 8 – Health and Medical Area Command will coordinate the following wide ranging services, dependant on available resources, in support of operational objectives:

- Assessment/Triage Team - Assess the medical conditions of evacuees to determine the priority of medical attention/services required and whether or not the evacuee should be transferred to the Medical Needs Shelter or available hospital/skilled care facility.

- Medical Clinic/First Aid/Sick-Call:

  - Provide 24-hour medical care for shelter clients including; infants, the elderly, or persons with disabilities.

  - Arrange for medical coverage by a physician, as needed.

  - Determine any needs for special diets (including formula and baby food for infants) and ensure that these needs are communicated to the feeding supervisor.

  - Assess the number and type of injuries and the age of the population affected, and plan preventive interventions.

  - Prevent pre-existing health problems from getting worse, when possible.

  - Refer persons to the Client Casework Services or Mental Health Services or community resources as necessary.

  - Establish communications with PHSKC, ESF 8 Area Command and other health care resources.

  - Follow up on care provided and on referrals made to assess if needs are being met.

  - In coordination with the Shelter Supervisor and Feeding Unit Leader, arrange for environmental public health assessment and sanitation inspections of the shelter facilities and related operations by public health officials.

  - Work with the Shelter Supervisor and Security Unit Leader to ensure the security of all medical supplies and equipment.

  - Provide a dedicated, trained basic life support team at each shelter with a population of 500 clients or more.

- Maintain appropriate Disaster Health Services records.

- Maintain open communication with Disaster Mental Health Services to ensure common health and mental health concerns are being addressed in a collaborative manner.

- Medical Transportation - Provide or arrange for transportation for medical patients to Alternate Care Facilities or hospitals and other care facilities.

- Morgue - The King County Medical Examiner will assess and facilitate the proper handling of deceased shelter clients.

- Equipment and Supplies (Functional) Needs – Health Services staff should coordinate with the Material Support Unit to provide the necessary other-than-medical-services for residents with functional needs within the shelter incident command section. All ESF 8 related medical functions will be coordinated through the Health and Medical Area Command and/or Public Health-Seattle &King County.

The Health Services Unit Leader can request disaster mental health services from the regional resources in coordination with Public Health-Seattle & King County, and the ARC (see ESF-8). These services are made available to those individuals in the general population who appear to be suffering a psychological reaction to the incident/disaster. This is in the form of psychological first aid and is not treatment of an existing psychiatric condition. The extent of the services available will be limited by the number of volunteer staff available, and will be deployed in a measured and thoughtful way in order to provide a response over time. In the event of a presidentially declared disaster, the goal is to provide services until a FEMA funded crisis counseling program can be implemented.

Persons with existing psychiatric conditions who are engaged in ongoing public mental health services will continue to be served by their outpatient mental health provider. Provider agencies are responsible for having business continuity plans and to prepare their clients to the extent possible with individual plans. If damage occurs to provider sites, whenever possible alternate sites will be identified and priority given to medication management and crisis services. The vast majority of these individuals will be stable and served in the General Population Shelters.

Persons who are identified as having symptoms of a mental illness and in need of psychiatric care will be served in the medical needs shelter according to the criteria outlined in Tab 8 - Medical. There is some capacity for mental health workers to be sent to these sites if needed to provide case management services and develop discharge plans. This may only be accomplished by diverting existing staff resources from the General Population Shelter(s) as described above. If symptoms are acute, out of control, and in need of a higher level of care clients will be triaged to an appropriate medical facility.

Individuals receiving opiate substitution treatment (OST) will be served in the general population shelters. OST clients normally have narrow access to treatment and must present at an opiate substitution treatment provider where they are known and actively in treatment. The opiate substitution treatment providers serving King County have agreed to voluntarily aid and assist each other by the interchange of resources and services in the event an incident or disaster situation should occur in which a treatment provider is unable to provide opioid replacement treatment to all or a portion of their patients.

In addition, the opiate substitution treatment providers considered a variety of specific needs including the deployment of clinical or administrative staff for activities such as dispensing, counseling and other medical care, to make best efforts to transport opioid substitution medication to where it is most needed; and if operational, use WATrac software to assist with sharing patient data such as identity and dosage verification, and clinically significant information.

## G. Security

The Security Unit Leader will coordinate with the appropriate agencies to coordinate or provide the following services:

- Internal Security

  - Screen packages, parcels, purses, briefcases, etc. to ensure prohibited items do not enter any shelter. This may also include random and/or continuous screening of individuals entering the shelters with hand-held devices. A list of prohibited items will be clearly posted at each entrance to each shelter.

  - Foot patrols to increase visibility should be used to prevent any criminal activity in both the perimeter and the interior of the facility.

  - Shower times may be extended to 24/7 if necessary to provide convenient access to clients. Security should include a staff member(s) of the appropriate sex near the designated shower area(s).

  - A procedure for residents to make complaints about misconduct of all types should be established. Law enforcement officials should be notified of such activities immediately.

- External/Perimeter Security

  - Security posts should be in the outermost areas of the facility, including areas designated for parking, reception and triage.

  - Posts should be at all entrances to the facility. An aggressive screening process should be employed utilizing the devices possible to detect prohibited items.

  - All doorways leading into the facility that are not declared to be access points should be locked from the outside while allowing emergency exit from within or manned to ensure re-direction through the authorized security checkpoints. The local and state fire code must be taken into consideration in securing doors to ensure adequate emergency exits are available.

  - Devices such as bicycle barricades can be used to facilitate an orderly queue of evacuees and assist in processing large numbers of people.

  - Secured designated areas for fresh air or smoking should allow persons to flow back into the facility without re-screening. Barriers may be used to keep these areas secure.

- At the authorized access points, a sign listing all of the shelter rules including but not limited to prohibited items, reentry times, and applicable policies should be displayed to encourage compliance. In some cases, signs may need to be in other languages.

- Traffic and Parking Operations

  - The Traffic Coordinator should develop a traffic/parking plan so that traffic, parking and security are organized, safe and efficient.

  - Consideration should be given to designated delivery locations, media traffic and parking and emergency response accessibility.

## I. Shelter Staffing

The following table provides the staffing guidelines suggested by the American Red Cross (ARC) for shelters operating on a 24-hour basis with three nine-hour shifts. The numbers reported by position are for 24-hours (i.e., there is only one Shelter Manager and one shift supervisor is on each 9-hour shift for a total of 3 each 24-hours). Circumstances may require two 12-hour shifts due to staffing limitations because less staffing would be required. The decision about shift duration will be made by the Regional Shelter Management IC in collaboration with the ARC and other stakeholder organizations, based on volunteer availability and the needs of the shelter(s).

| ***Position*** | ***200 Clients*** | | ***500 Clients*** | | ***2,000 Clients*** | |
|---|---|---|---|---|---|---|
| | ***Per Shift*** | ***Total*** | ***Per Shift*** | ***Total*** | ***Per Shift*** | ***Total*** |
| Shelter Manager | 1 | 1 | 1 | 1 | 1 | 1 |
| Site Supervisor | 1 | 3 | 1 | 3 | 1 | 3 |
| Admin Asst | 1 | 2 | 1 | 2 | 1 | 2 |
| Dormitory Supervisor | 1 | 3 | 3 | 9 | 11 | 33 |
| Dormitory Worker | 7 | 21 | 17 | 50 | 66 | 198 |
| Feeding Supervisor | 1 | 1 | 1 | 1 | 1 | 1 |
| Feeding Worker | 2 | 6 | 4 | 12 | 6 | 18 |
| Health Services Supervisor | 1 | 1 | 1 | 1 | 1 | 1 |
| Health Services Worker | 1 | 3 | 2 | 6 | 6 | 18 |
| Mental Health Supervisor | 1 | 1 | 1 | 1 | 1 | 1 |
| Mental Health Worker | 2 | 6 | 4 | 12 | 18 | 54 |
| Security (Non ARC) | 2 | 6 | 2 | 6 | 6 | 18 |
| **Total Staffing** | **21** | **54** | **38** | **104** | **119** | **348** |

A number of shelter staff positions will have shifting levels of activity. For example, during opening and closing, registration may require higher staffing numbers to efficiently process clients. During slower times, registration personnel could be moved to work the help desk. Shifting personnel is appropriate and can help to cover different tasks when necessary.

## V. RESPONSIBILITIES

### A. Primary Agency

**King County Office of Emergency Management will**:

- Coordinate general population shelter activities with support agencies and volunteer organizations.
- Provide and/or coordinate Regional Shelter Management IC staffing and Incident Command Post.

### B. Support Agencies

**American Red Cross Serving King & Kitsap Counties will**:

- Provide and/or coordinate resources to support regional sheltering operations in accordance with the Chapter MOU with King County.
- Provide meals at fixed feeding locations and provides mobile feeding, as assets allow.
- Coordinate emergency first aid services in shelters, fixed feeding sites and emergency first aid stations.
- Coordinate potable water and ice.
- Coordinate bulk emergency relief items, as needed.
- Coordinate and operate Disaster Welfare Injury (DWI) services.
- Coordinate transportation and needed supplies for ARC operations.
- Coordinate communications between shelters, feeding units, emergency first aid stations and relief operation locations.
- Maintains contact with the ARC representative in the King County ECC and State EOC.
- Evaluate the mass care needs and make recommendations to ARC National Headquarters for the allocation of resources.

**Department of Community and Human Services will**:

- Provide and/or coordinate mental health crisis response and involuntary detention services and outpatient mental health services for persons who suffer from reactions to the disaster.
- Be prepared to provide staffing for the Regional Shelter Management IC, if requested.

**Department of Development and Environmental Services will**:

- Provide personnel to conduct on site inspections of structures within King County to determine if potential shelter sites are safe for use or if entry should be restricted or prohibited.

- Assist in planning, permitting and design of public shelters by providing engineering and architectural support.

**Department of Natural Resources and Parks will**:

- Work with the King County ECC's to provide access to and utilization of regional shelter supplies, such as cots.

**King County Department of Transportation will**:

- Coordinate emergency transportation services with other private and public transportation providers for the movement of people, equipment and supplies in support of regional shelter operations.

**Finance and Business Operations Division will**:

- Provide emergency contracting assistance and financial and accounting support to regional shelter operations.

- Provide assistance in emergency financial management and in the preparation of County government emergency financial reports related to regional shelter operations.

- Provide in advance of emergency operations tools, instruction and detailed emergency procedures for tracking and purchasing of equipment and supplies needed to support emergency operations. Obligations of funds will be authorized by King County representatives of the ordering departments or agencies.

**King County Sheriff's Office will**:

- Provide and/or coordinate overall security operations for King County regional shelter operations to include:

    - General population shelter operations

    - Medical needs/alternate care facility operations

    - Unique population shelter operations

    - Multi-agency feeding operations

    - Pet and livestock shelter operations

    - Emergency worker shelters

- Water distribution and Logistics Staging Areas (LSAs)

- Provide and/or coordinate staffing for the shelter Security Units.

**Regional Animal Services of King County will**:

- Coordinate and integrate Pet Shelter operations for pet owner shelters collocated with general population shelters.

- Provide oversight and management of Livestock Shelter operations.

**King County Facilities Management Division will**:

- Assist with the identification of shelter locations and facilitate real estate procedures to secure rented/leased/donated space.

- Provide necessary facility repairs/renovations or alternate facilities if needed provided funding is available and permits allow.

- Coordinate for building inspections in support of shelter operations.

- Assist with site evaluations to assess ADA compliance, and if needed assist in adjustments required ensuring ADA compliance is met.

- Verify regional shelters established in accordance with this Tab are in compliance and adhere to appropriate fire and building codes, as required.

- Provide security guards for regional shelter operations, as requested and as staffing levels allow.

**Public Health-Seattle & King County will**:

- Coordinate and provide health technical assistance for Regional Shelter Operations, including triage, limited first aid care and treatment of minor injuries.

- Plan, coordinate, resource and provide shelters for medically fragile populations when needed. Coordinate movement of fragile populations from general population shelters to medical needs shelters, alternate care facilities and/or appropriate healthcare facility.

- Coordinate and provide environmental health assessments and sanitation assurance inspections of temporary evacuation and emergency shelters. Services may include evaluating and advising shelter management on:

    - Food safety

    - General safety

    - Indoor air quality

- Water supply and handling
- Wastewater disposal
- Fixed and portable sanitary facilities
- Solid waste handling and disposal
- Vector control
- General cleaning and sanitation practices
- Laundry operations

## VI. REFERENCES

American Red Cross Disaster Services Shelter Operations – Participant's Workbook, ARC 3068-11A, Revised September 2005

American Red Cross Mass Care Shelter Operations Management Toolkit, May 2007

# TAB 7
# SECURITY

**PRIMARY AGENCY:** King County Sheriff's Office

**SUPPORT AGENCIES:** American Red Cross Serving King & Kitsap Counties
Law Enforcement (City & County) in King, Pierce & Snohomish Counties
Washington State Military Department
Washington State Patrol

## I. INTRODUCTION

### A. Purpose

This Tab provides guidance and identifies responsibilities for providing an adequate level of security for various shelters established through activation of the Regional Shelter Operations Incident Annex to provide and maintain a safe environment.

### B. Scope

Shelter operations have three security zones: the dormitory, private property of the shelter and areas public, and private surrounding the shelters. Security will be provided for the overall shelter operations by commissioned officers and/or contract security personnel. This includes but is not limited to oversight and staffing of security operations in the various components of the Regional Shelter Management Incident Command (IC). The numbers of law enforcement personnel and/or private security personnel required will be dictated by the number of shelter clients and the required response to specific threats and/or incidents.

### C. Limitations

The Security Branch will make every reasonable effort to provide satisfactory assistance and service during shelter operations. Jurisdictions in which shelters are located are expected to cooperate and coordinate with the King County Sheriff's Office (KCSO) to prioritize the use of highly tasked personnel resources and provide law enforcement personnel to assist with security operations in areas under their jurisdiction. The KCSO is responsible for the overall security operation and is the subject matter expert and authority for the security planning efforts. Familiarity with cross-jurisdictional support agreements, officer accreditation issues and quality control of contracted security services are key factors to be considered and addressed.

## II. POLICIES

Personnel General Population, Medical Needs and Unique Population Shelters will comply with all applicable state and local ordinances and policies of the Regional Shelter Management Incident Command.

Violations of laws will be handled by the local law enforcement agency with jurisdiction on a case-by-case basis, as deemed appropriate.

Shelter staff will direct and control the movement of people within the shelters per the appropriate Memorandum of Agreement and the published policies of the partner agency.

## III. SITUATION and ASSUMPTIONS

### A. Situation

Hurricane Katrina and the 2007 Southern California Firestorms validated the significance of an effective emergency plan for mass evacuations and sheltering. In the event of a prolonged disaster, the government may need to activate and operate large, regional shelters. Regional public shelters can house from several hundred up to several thousand people. These shelters provide the displaced population temporary refuge for a few weeks to months following an incident or disaster while these citizens make the transition to long-term housing or return to their homes. Security of the clients housed within the shelters and the personnel and equipment required to conduct sheltering operations is of paramount concern and must be adequately addressed in the interest of public safety and to mitigate liability.

### B. Planning Assumptions

King County Sheriff's Office may be overwhelmed with response requirements stemming from the disaster and/or catastrophic incident creating the need for shelter operations. This will severely limit the Sheriff's Office ability to provide resources to the overall security operation.

King County Sheriff's Office can provide initial security six to 12 hours at General Population, Medical Needs and Unique Population Shelter locations. Security and law enforcement coverage beyond the first 12 hours will be provided through mutual aid, the Law Enforcement Mobilization Plan, military support to civil authorities or contract security service and/or a combination of all.

The King County Sheriff's Office will request mutual aid and/or assistance from other law enforcement agencies.

The local law enforcement agency having jurisdiction will be called upon to deal with specific threats or situations exceeding the capability of security personnel at the shelters and when violations of local and state law occur.

The local law enforcement agency having jurisdiction may post personnel on site if the agency's commander or his/her designee deems their presence necessary and appropriate.

Posting of such personnel may be at the discretion of the Regional Shelter Management IC Security Branch Director, Shelter Security Unit Leader, jurisdiction law enforcement commanders or at the request of the Regional Shelter Management Incident Command.

All law enforcement responses will be governed by the responding law enforcement agency's policies and procedures, by law and by proper operating protocols and technique.

### C. Activation

The King County Emergency Coordination Center (ECC) will analyze the need for regional sheltering. Security planning is a critical component of the preplanning, ad hoc planning and response planning processes. Security planning must incorporate known threat and site specific information to determine security requirements shelter operations. The KCSO representative supporting the King County ECC should therefore be part of the ECC work group analyzing potential shelter locations. Once a decision is made by the King County ECC to establish regional shelters, a Regional Shelter Management IC will be established to oversee shelter operations. Representatives from KCSO will be requested to staff the IC Security Branch. The IC may initially operate out of the King County ECC and subsequently relocate to an Incident Command Post (ICP) at an alternate location as the operation evolves. Security will be required at the ICP and all shelter operating locations. Activation of the General Population, Medical Needs and Unique Population Shelters and deployment of commissioned law enforcement/private security personnel will be triggered by initiation of the Regional Shelter Operations Incident Annex by the King County ECC and/or King County Office of Emergency Management (OEM) Duty Officer.

Personnel requirements for staffing the various shelters will be based on the expected number of evacuees and the level and nature of activity at the individual shelters. The resource requirements to support the overall security operation will be determined by the Security Branch Director, or designee, as soon as practical after notification of shelter operations will be initiated.

## IV. CONCEPT OF OPERATIONS

### A. General

Shelter operations have three security zones – the dormitory, private property of the shelter, and areas public and private surrounding the shelters. Dormitory areas are generally under the administration of the American Red Cross (ARC) using their operational procedures. These procedures were tested and validated in prior disaster situations. Dormitory security is covered in the ARC Memorandum of Understanding (MOU) with King County. The ARC and the shelter Security Unit will coordinate internal dormitory security operations. The security of the venue – the physical property in which the shelter is located - may be contracted by the venue owner or provided and/or coordinated the Regional Shelter Management Incident Command (IC) Security Branch using law enforcement resources or contract security. Venue security covers the entrances to the venue, security of property in the parking areas and, when necessary, management of traffic in the parking area. The final security zone is the public area surrounding the venue. Security for this zone will be provided by local law enforcement.

Law enforcement and private/contracted security personnel staffing the General Population Shelters, Medical Needs Shelter, Unique Population Shelter, Pet Shelters and Livestock Shelter Security Units will provide basic security and control of personnel at the direction of the Regional Shelter Management IC, Security Branch. The Security Branch will also provide and coordinate security for the mobile kitchen operating locations supporting multi-agency feeding for the IC. Security at all IC operating locations will be a collaborative effort involving the Security Branch Director, Shelter Supervisors and local law enforcement in the jurisdictions shelter operations are conducted.

A commissioned member of King County Sheriff's Office will serve as the Regional Shelter Management IC Security Branch Director. This role may, at times, be filled by the KCSO representative staffing the Law Enforcement desk at the King County ECC when appropriate and operationally practical. The Security Unit Leader positions at the various shelters may be staffed by the King County Sheriff's Office, local law enforcement and/or private contract security providers. Law enforcement personnel will provide regular reports as directed by the Security Branch Director.

Shelter Security Unit personnel on site will determine if/when specialized law enforcement resources are needed, in coordination with the Security Branch Director. The King County Sheriff's Office, along with officers from local jurisdictions will provide commissioned law enforcement resources to handle specific threats exceeding the capability of shelter security personnel and to respond to violations of local and state law.

The priority during shelter operations will be to provide an adequate level of security for all personnel at the shelter locations, to respond to and handle crimes occurring at the facilities and to provide for the orderly movement of people within the facility.

## B. Organization

See the Shelter Management Team Command System Structure chart in the Regional Shelter Operations Incident Annex and the General Populations Shelter Organization Chart in Tab 6. Each shelter will have a Security Unit in its IC structure to manage and coordinate security. While shelter security personnel will operate within the IC supervisory and management structure, they will comply with their respective agency's established policies, procedures, legal requirements and operational protocols.

## C. Staffing

The overall staffing required for shelter operations security will be at the discretion and direction of the Security Branch Director, as approved by the IC. The following table provides an estimated of the security staffing required for multiple operating locations in a neutral threat environment. The actual staffing numbers will be dictated by the situation and operating locations at the time Incident Annex implementation.

| Location/Function | Per Shift | 24-Hour Total* | Potential Source |
|---|---|---|---|
| IC Operations Section, Security Branch | 1 | 3 | KCSO |
| General Populations Shelter #1 (2,000 Clients) | 6 | 18 | KCSO / KCDAJD / Jurisdiction Officers |
| General Populations Shelter #2 (2,000 Clients) | 6 | 18 | KCSO / KCDAJD / Jurisdiction Officers |
| Unique Population Shelter (10-20 Clients) | 2 | 6 | KCSO / KCDAJD / Jurisdiction Officers |
| Medical Needs Shelter (250 Clients Maximum) | 2 | 6 | Officers from Jurisdiction |
| Owner Pet Shelter #1 | 1 | 3 | Private Security |
| Owner Pet Shelter #2 | 1 | 3 | Private Security |
| Stray/Abandon Pet/Animal Shelter | 1 | 3 | Private Security |
| Livestock Shelter (Enumclaw Expo Center) | 2 | 6 | Private Security – Enumclaw P.D. |
| General Populations Shelter, Enumclaw Expo Center Field House + Mobile Kitchen (200 Clients) | 2 | 6 | Private Security – Enumclaw P.D. |
| American Red Cross Field/Mobile Kitchen | 2 | 6 | KCSO / Private Security |

| | | | |
|---|---|---|---|
| Southern Baptist Mobile Kitchen | 2 | 6 | Private Security |
| Emergency Worker Camp (Estimated 250) | 2 | 6 | Private Security |
| **TOTAL** | **30** | **90** | |

*Three 9-hour shifts every 24-hours for up to 30+ days.

## D. Equipment Requirements

Security Branch and Shelter Security Unit personnel will need the following equipment items, unless otherwise provided by contract or MOU. The King County ECC/Regional Shelter Management IC Logistics will provide, purchase or contract for the following items at each location. The Security Branch Director, Security Unit Leader and Security Team Leaders at remote operating locations will have a phone and/or cellular phone, computer with internet access (supplied by the member's agency) and access to common office supplies such as fax, printers and copiers. The Security Branch will also make every effort to ensure each operation location has:

- Workstation and chair
- Portable radio system – preferably interconnected with local Red Cross radio systems either as identical equipment types or through cross banding of systems.
- Two-way radio receiver

## E. Communications

Security Unit personnel will use the means of communication deemed most efficient to communicate with the Security Branch Director or representative in the Operations Section. Law enforcement personnel will use their existing radio and cellular telephone equipment to communicate with the Security Branch Director and/or their respective agency dispatchers, as appropriate. The KCSO Communications Center may designate an alternate radio talk group for use by security and law enforcement personnel supporting shelter activities at all venues.

## F. Procedures

The three zones concept could potentially leave gaps in venue security. Security personnel can reduce the risk of such gaps by coordinating with their peers in each zone frequently during their shift to share information and identify potential threats.

Security Units and Teams will submit daily operational reports to the Regional Shelter Management IC Security Branch in accordance with the reporting requirements determined by the Security Branch Director.

All routine requests for security services and/or commissioned law enforcement officers will be made through the Security Branch and adjudicated and resolved by the Security Branch Director.

Emergency requests for commissioned law enforcement officers will be made by calling 911.

In the eventuality commissioned law enforcement personnel are not immediately available or on site, report law enforcement emergencies via the local 911 system. The Operations Section Chief and the Security Branch Director will be made aware of all such requests as soon as possible.

Security and shelter personnel will be posted so as to control the movement of personnel within the facility. They will be given adequate information prior to posting to allow them to direct people within the facility as necessary.

Any increase or decrease in security and/or law enforcement staffing levels will be determined by the Security Branch Director in consultation with the Operations Section Chief and the Regional Shelter Management IC.

One or more armed, uniformed law enforcement officer(s) may be posted at the entrance to each facility for security at the discretion of the Operation Section Chief and/or the Security Branch Director.

## V. RESPONSIBILITIES

### A. Primary Agency

**King County Sheriff's Office will**:

- Provide and/or coordinate security for King County regional shelter operations to include:
  - General Population shelter operations
  - Medical Needs/Alternate Care Facility operations
  - Unique Population Shelter operations
  - Multi-agency feeding operations
  - Pet and Livestock Shelter operations
  - Emergency worker shelters
  - Water distribution and Logistics Staging Areas (LSAs).
- Provide management oversight of overall security operations, to include security services provided by other security resource alternatives recommended/offer by King County Sheriff's Office (KCSO).
- Provide and/or coordinating staffing for shelter Security Units and Teams.
- Notify the King County ECC when security requirements exceed KCSO capability, identify the augmentation required to meet security needs and recommend potential sources of augmentation.

## B. Support Agencies

**Law Enforcement (City & County) in King, Pierce and Snohomish Counties will**:

- Provide staffing for shelter Security Units and Teams operating within the agency's jurisdiction in collaboration and coordination with KCSO.
- Provide the KCSO resources for shelter operations security in accordance with existing Mutual Aid Agreements, Memorandum of Understanding (MOU) and/or MOAs.
- Provide a commissioned law enforcement lead for each Security Unit and/or Team operating in the agency's jurisdiction using Washington National and State Guard resources for security augmentation.

**Washington State Military Department will**:

- Provided a declaration or proclamation by the Governor has occurred authorizing National Guard mobilization and that the mission is approved through the Washington EOC and National Guard Joint Operations Center (JOC), Washington National Guard personnel may assist King County and the WSP by providing supplementary security forces for King County regional shelter operations.

**Washington State Patrol will**:

- Assist King County authorities with local law enforcement operations and by providing supplementary security resources for King County regional shelter operations.

# TAB 8
# HUMAN MEDICAL SUPPORT

**PRIMARY AGENCY:** Public Health-Seattle & King County

**SUPPORT AGENCIES:** American Red Cross Serving King & Kitsap Counties
King County Office of Emergency Management
King County Department of Transportation
King County Private Ambulance Providers

## I. INTRODUCTION

### A. Purpose

The purpose of this Tab is to provide for the direction, coordination and mobilization of medical resources during emergencies and disasters requiring regional sheltering.

### B. Scope

Large shelters established to house displaced general population clients will require medical support to triage clients upon arrival, and to respond to ongoing medical and first aid needs. Additionally, some of the displaced population will require medical care exceeding the capability of the general population shelters and will require care at a Medical Needs Shelter or other medical facility.

## II. REFERENCES

King County Comprehensive Emergency Management Plan ESF-8 (Public Health & Medical Services)

King County Alternate Care Facilities & Medical Needs Sheltering, Standing Operating Procedure, June 24, 2009

King County Medical Evacuation and Transportation Plan

King County Emergency Medical Services (EMS) Basic Life Support (BLS) Standard of Care Protocols

## III. SITUATION and ASSUMPTIONS

### A. Situation

A number of evacuees may need minor medical attention at the general population shelters, while others will have medical conditions requiring more traditional healthcare services which are beyond the capabilities of a general population shelter. Public Health-Seattle & King County (PHSKC) is the agency responsible for coordinating the response to the health and medical needs of persons within King County. PHSKC will identify the best means of caring for evacuees

requiring medical supervision and/or inpatient care and establish one or more Medical Needs Shelters as needed in coordination with the Regional Shelter Management Team IC.

### B. Assumptions

King County Medical Examiner's Office will have jurisdictional authority for any and all deaths which occur in a King County operated shelter.

PHSKC will provide operations oversight of required medical services in accordance with ESF-8 (Public Health & Medical Services) and the Public Health-Seattle & King County, and King County Hospital Coalition, Alternate Care Facilities & Medical Needs Sheltering, Standing Operating Procedure, June 24, 2009.

Authorization to establish a Medical Needs Shelter/Assisted Care Facility resides with the Local Health Officer (LHO).

Staffing and supply of temporary facilities will depend upon the ability to mobilize and transport staff and supplies from regional cache's, private medical suppliers, registered volunteer rosters, and other sources and may take up to 72 hours.

## IV. CONCEPT OF THE OPERATION

### A. General

The PHSKC Duty Officer is the central point of notification for incidents requiring response by ESF 8 agencies. As the situation warrants or when requested by King County Office of Emergency Management (KCOEM), PHSKC will conduct a situation assessment, initiate surveillance and monitoring activities, and advise KCOEM and appropriate ESF 8 primary and support agencies of their findings. PHSKC will coordinate staffing for the King County ECC and the Regional Shelter Management Team with appropriate ESF 8 representatives.

### B. Organization

PHSKC serves as the lead agency for health and medical services and will provide and/or coordinate staffing for the Regional Shelter Management Team Health Services Branch. The Health Services Branch Director will determine the level of staffing and medical service to be provided, in accordance with this tab and the King County Alternate Care Facilities and Medical Needs Sheltering, Standing Operating Procedure, June 24, 2009 at the shelter sites. Operation of Medical Needs Shelter established in support of regional shelter operations is under the direction and control of PHSKC in accordance with established protocols. The Health Services Branch Director will monitor Medical Needs Shelter operations and provide at least one situational brief per operational period to the Regional Shelter Management Team Operations Section Chief and/or Incident Commander.

Medical resource support of medical shelter operations will be coordinated by PHSKC through the ESF 8 Area Command. Non medical logistical and resource support, including but not limited to transportation, feeding, communication, site security, non-medical supplies and services will be coordinated through the Regional Shelter Management Team Logistics Section.

## C. Human Medical Support

General Population Shelters with actual or expected client registration to exceed 500 will have at a minimum the following level of support on a 24/7 basis.

- A Triage Team will assess the medical condition of evacuees referred to them by American Red Cross during the shelter registration process to determine whether or not the evacuee can remain in the General Population Shelter or must be transferred to a Medical Needs Shelter or appropriate healthcare facility based on the medical findings at the time of assessment.

- A dedicated on site Basic Life Support (BLS) team will provide care consistent with King County Emergency Medical Services BLS standard of care protocols.

- Health services, on-site walk-in health clinic services:

    - Evaluation and treatment of common head, ears, eyes, nose and throat (HEENT) conditions.

    - Evaluation and treatment of mild to moderate asthma, chronic obstructive pulmonary disease (COPD), and pulmonary symptoms.

    - Evaluation of minor wounds and cuts.

    - Simple incision and drainage of abscesses.

    - Blood pressure and glucose checks (not daily monitoring).

    - Basic chronic disease checks including monitoring of blood pressure, glucose, peak flow, and weights.

    - Wound care, basic to medium complexity.

    - Evaluation of common gastrointestinal (GI) complaints and conditions.

    - Care of sprains, strains, and musculoskeletal conditions.

    - Medication refill of chronic stable medications except for chronic opiate, benzodiazepine or stimulant therapy in the absence of terminal illness that is documented by a health care provider.

    - Will see pregnant women for acute and self-limited non-related pregnancy related conditions if they meet the above criteria.

    - Infants with concerns for sepsis, elevated temp without an obvious source will be referred to an ER.

    - Over the counter medications.

- Prescription writing service.
- Health and hygiene support.

**D. Unique Population Shelters**

Health support at these sites will be dependent on the number of clients, types of services needed and medical resources available to assist. The Unique Population Shelter Lead and the Health Branch Director will determine the need to provide onsite medical support at these shelters.

**E. Alternate Care Facilities**

Alternate Care Facilities will care for individuals that meet/require the following:

- Support for management of chronic medical conditions for medically high risk patients who require sheltering and are unable to be sheltered within traditional shelters due to medical needs (in-patient nursing services).
- Convalescent care for displaced individuals.
- Prescription refill writing services and limited pharmacy dispensing.
- Countermeasure distribution (H1N1 vaccine, if available).

As capability increases and the situation dictates, Alternative Care Facility clinical activities will be implemented, in accordance with the Public Health-Seattle & King County, and King County Hospital Coalition, Alternate Care Facilities and Medical Needs Sheltering, Standing Operating Procedure, June 24, 2009

**F. Mental Health Services**

When needed, the Shelter Management Team Health Services Branch Director will coordinate with the appropriate agencies to provide crisis counseling. If necessary, extended services can be coordinated with community partners.

Individuals transferred from a General Populations Shelter to an Alternate Care Facility will not be accepted unless a thorough assessment by mental health staff at the General Population Shelter is done to ensure that:

1. The person's behavior/symptoms make them ineligible for staying at a General Population Shelter.
2. They are not best served in a hospital setting.
3. Other appropriate shelter/housing options are not available such as staying with loved ones or housing within the publicly funded mental health system.

For additional information on the admission and exclusion criteria, refer to the King County Alternate Care Facilities and Medical Needs Sheltering Standing Operating Procedure, June 24, 2009.

## V. RESPONSIBILITIES

### A. Primary Agency

**Public Health-Seattle & King County will**:

- Activate Health and Medical Area Command to support and coordinate medical sheltering efforts.
- Establish alternate care facilities to provide short term continuity of care operations until patients can be placed regionally or returned to their original living situation.
- Direct and manage medical surge capabilities including alternate care facilities, medication centers and temporary morgues.
- Manage and direct the mobilization of medical volunteers through the health and medical volunteer management system including public health medical reserve corps.
- Coordinate requests for medical resources for sheltering.
- Support disaster behavioral health providers in meeting demands for regional mental health services.

### B. Support Agencies

**King County Office of Emergency Management will:**

- Provide situational awareness of potential sheltering needs based on known or expected impacts.

**American Red Cross Serving King & Kitsap Counties will:**

- Provide emergency first aid and Disaster Health Services, as availability, training, and skills allow according to Red Cross Health Services protocols at general population shelters.

**King County private ambulance providers will:**

- Coordinate Basic Life Support (BLS) and Advanced Life Support (ALS) transport of patients to and from medical needs shelters and general population shelters.

**King County Department of Transportation will:**

- Coordinate transport assets for disabled and mobility challenged person to and from general needs and medical needs shelters, as resources are available.

# TAB 9
# UNIQUE POPULATION SHELTERING

**PRIMARY AGENCY:** King County Sheriff's Office

**SUPPORT AGENCIES:** Law Enforcement (City/County) in King, Pierce & Snohomish Counties
Public Health-Seattle & King County

## I. INTRODUCTION

### A. Purpose

This Tab supports clients of disasters and other emergencies that belong to populations which for various reasons are segregated from clients in the general population shelters. Registered sex offenders (RSOs) are the only segment of King County residence making up this population, alternately referred to as "unique population," at present.

### B. Scope

- Unique Population Shelter(s) will be established to provide sheltering during the emergency period and immediately following the disaster, as a result of evacuation. Occupancy in a Unique Population Shelter is not intended for prolonged periods due to the emergency nature of the activity and the requirements for mass feeding, bedding and adequate sanitary facilities.

- The Unique Population Shelter Division or King County Office of Emergency Management will collect and provide information about unique population clients in the emergency area. Such information will be used to aid reunion of families and individuals. Privacy of shelter clients will be maintained as per general population privacy policies.

## II. POLICIES

Chapter 9.94A RCW, Sentencing Reform Act of 1981

Chapter 9.95 RCW, Indeterminate Sentences

Chapter 4.24 RCW, Special Rights of Action and Special Immunities

RCW 71.09.250, Transition facility – Siting

## III. SITUATION and ASSUMPTIONS

### A. Situation

See Regional Shelter Operations Incident Annex.

### B. Planning Assumptions

The current registered sex offender population in the King County varies by location and over time; however, only a small number (less than 100) are expected to seek public shelter for any given disaster with the possible exception of a major earthquake.

The Unique Population Shelter will be a scaled down version of a General Population Shelter providing the same services, when appropriate and possible.

A Unique Population Shelter is designed for a client population of no more than 250. Additional sites will have to be opened when the actual number of clients exceeds this number.

When possible, the RSO population will be notified in advance of a notice incident (such as flood) of the shelter location established for them, its location and when it will be opened or available.

## IV. CONCEPT OF OPERATIONS

### A. General

The King County Sheriff's Office (KCSO), local law enforcement and the General Population Shelter Registration Team will assist in identifying and processing Unique Population individuals for transport to the Unique Population Shelter.

The KCSO will stand up and stand down the Unique Population Shelter and provide personnel to handle daily operations.

### B. Organization

Figure 1. Unique Population Organization Chart

The Unique Population Shelter organization will be tailored to the needs of what is anticipated to be a low census shelter.

**C. Shelter Operations**

See Tab 6 – General Population Shelter Management for general shelter operations. Certain exceptions to the standard list of services apply; however, in general these clients will not be deprived of essential resources or services.

**D. Public Information**

While operations will remain open and public, PIOs will make good faith efforts to prevent publicity which seeks to take advantage of the client's status or subject them to additional scrutiny beyond that of other shelters. If necessary, a PIO may be assigned to work directly with the Shelter Manager. The size of the shelter may not be able to support large media gatherings.

**E. Health Services**

The Health Services Unit Leader will coordinate with the appropriate agencies to provide services per Tab 6-General Population Shelter Management and Tab 8-Human Medical Support to include Triage at the intake function and access Medical Clinic/First Aid care. It may not be necessary to locate more than fundamental first aid at this shelter as a small shelter population does not require the same level of support as clients in the larger General Population Shelter. Most likely 9-1-1 will be the primary medical support for this shelter location.

**F. Mental Health Services**

The Health Services Unit Leader will coordinate with the appropriate agencies to provide crisis counseling. If necessary, extended services can be coordinated with community partners.

**G. Security**

The Security Unit Leader will work in conjunction with the Regional Shelter Management IC Security Branch Director and the Regional Shelter Management IC Safety Branch Director to identify specific needs and requirements for Unique Population Shelter.

- Dormitory Security
  - Foot patrols to increase visibility should be used to prevent any criminal activity in both the perimeter and the interior of the facility.
  - Shower times should be adequate to meet client needs but 24/7 operations should not be necessary due to the small client population in the Unique Population Shelter. Security should include a staff member(s) near the designated shower area(s).

- External/Perimeter Security will be consistent with security requirements for shelters in general as per Tab 6-General Population Shelter Management and Tab 7-Security. Law

enforcement agencies and/or the Washington State Department of Corrections must inform the King County ECC or Regional Shelter Management IC when and if specific security requirements exist for registered sex offenders in emergency sheltering.

## V. UNIQUE POPULATION PROTOCOL/PROCEDURES

### A. Processing Registered Sex Offenders (Unique Population) at Local Jurisdiction Evacuation Pickup Points

Local jurisdictions will help operate evacuation pickup points for those who cannot self evacuate to designated regional shelters. Registered sex offenders, alternately referred to as Unique Population, will also report to these locations for evacuation and transport. If a registered sex offender does arrive at a General Population Shelter, and either self identifies or is identified by registration staff as a registered sex offender (RSO) transportation to the Unique Population Shelter will be arranged.

### B. Processing Registered Sex Offenders (Unique Population) at Shelter Locations

Shelter personnel should adhere to the following procedures when self-evacuated registered sex offenders arrive at General Population Shelters and are identified:

- When an individual identifies himself/herself as a sex offender, shelter staff will request the individual present valid identification, if possible, and coordinate transportation for the RSO to the Unique Population Shelter.

- If an RSO presents at a General Population Shelter with his or her family, shelter staff will inform the RSO he/she will not be able to stay with other family members in a General Population Shelter. Shelter staff will also inform the other family members they are not allowed to stay with the sex offender in the Unique Population Shelter. **Note**: The families must be made aware that they will be separated for the duration of the emergency/disaster while they stay in public shelters. In cases where the registered sex offender is a single parent of a minor child, either the RSO's family will make provisions for the child/children to be placed with another family member or the KCSO will contact Child Protective Services to arrange alternate care.

- Shelter staff will provide the RSO with information on the location of the Unique Population Shelter and available transportation to the shelter. Law enforcement personnel located at the shelter may provide assistance in escorting RSOs out of the General Population Shelter, if necessary.

Shelter staff should adhere to the following procedures when Unique Population evacuees arrive at the Unique Population Shelter.

- Shelter staff will request the individual present valid identification, if possible.

- The Unique Population Shelter staff will register the client into the shelter.

- King County Sheriff's Office will coordinate daily operations and functions of the Unique Population Shelter with the Regional Shelter Management Incident Command, Operations Section.

- During operations, the staff of the Unique Population Shelter will work in pairs.

### C. Responsibilities of Registered Sex Offenders (Unique Population)

- Registered sex offenders are bound by law to present themselves as such in all emergency situations in which they require evacuation and sheltering assistance.

- If possible, the registered sex offender should have provided his/her full name, date of birth, social security number, and last address of registration to local law enforcement prior to the declaration of emergency.

- Registered sex offenders who violate emergency protocols may be subject to criminal punishment.

## VI. RESPONSIBILITIES

### A. Primary Agency

**King County Sheriff's Office will**:

- Manage operations of the Unique Population Shelter operations.

- Provide/coordinate staffing for Unique Population Shelter operations.

- When possible, notify RSO's of the location of the Unique Population Shelter, if possible in advance of the incident.

### B. Support Agencies

**Law Enforcement (City/County) in King, Pierce & Snohomish Counties will**:

- Assist KCSO with notification of RSOs residing in their jurisdictions as to the current Unique Population Shelter location.

- Provide shelter staffing assistance in accordance with existing Mutual Aid Agreements and/or Memoranda of Understanding or Agreement.

**Public Health-Seattle & King County will**:

- Coordinate and provide emergency health services at Unique Population Shelters to include triage, limited first aid care and treatment of minor injuries, when requested.

- Coordinate movement of fragile populations from Unique Population Shelters to Medical Needs Shelters, Alternate Care Facilities and/or appropriate healthcare facility.

**TAB 10**
**SYNCRONIZATION MATRIX**

| PHASES | PLANNING | PREPAREDNESS | RESPONSE | | | | | | | RECOVERY |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
| **phase ends** | **Flood Season Begins** | **Level 1 warning OR county needs to shelter 500+ people OR shelter livestock & owners.** | | | | | | | | **All Emergency shelter operations have ceased** |
| **Key Info** | Are required MOUs/MOAs/ Contracts in place? | What is the current & predicted trigger crtieria next 72 hours? | Where will shelters be located and when can clients be accepted? | What is the status of all shelters? | Livestock shelter OPEN (incl pets & people) | ACF is OPEN & 1 Gen. Pop shelter is OPEN | Every Shelter OPEN | | | |
| **status** | Have potential shelter sites been identified with a range of capacity to 2000 clients? | What are the predicted shelter requirements over the next 72 hours? | Coordinate with local jurisdiction for transport, frail, timing | What other events will affect shelter operations - eg disease? | What % of population in the affected area is seeking shelter & how many total? | | | | | |
| | What is the volunteer status of partner organizations? | What is the status of key personnel? | Are food and logistics requirements on order or inplace? | Ready to implement LOG status reporting? | Is sufficient food & equipment available? | | | | | |
| | Which agency will handle animals? | Are planning efforts complete for LOG, Comm & MOUs? | Implement Incident Cmd? | Are enough volunteers available? | | | | | | |
| | Do all King County Agencies have the plan & there been a tabletop review at least once? | Validate King County Department & Agency plans, staffing and readiness to support ICS if required | Do gaps still exist in transport, LOG, community services, security or staffing? | Are State and Federal Agencies standing by to assist if required? | | | | | | |
| | Do PIOs have access to operations details as they develop? | Has a short list of potential regional shelter sites been developed? | Ready to review & roll out public information plan? | What is the public feedback on the info plan? | Are there changes to the information plan required? | | | | | |
| | | | | | | | | | | |

**TAB 10**
**SYNCRONIZATION MATRIX**

| phase begins | Not in Flood Season | in Flood Season but no flooding predicted | Alert Population, Volunteers & Staff @ Flood-120 to -96hr | Standby Status Actions Required @Flood-96 to -72hr | Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr | Actions Required @Flood-48 to -24hr | *EVAC Order -24* | Mandatory Evacuation Action Required E -24 to Flood | Flood + 48 | Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes. |
|---|---|---|---|---|---|---|---|---|---|---|
| phase ends | Flood Season Begins | Level 1 warning OR county needs to shelter 500+ people OR shelter livestock & owners. | | | | | | | | All Emergency shelter operations have ceased |
| OEM Dir | Conduct Review of prior flood response and revise plans per lessons learned | Establish regular reporting times and formats | Select shelter locations and seek funding if required | Establish ICS reporting times and formats | | | | | | |
| | Maintain coordination with King County jurisdictions | review decision matrix for sheltering | Complete Letter of Delegation and establish ICS | Continue coord w/ Jurisd's | | | | | | |
| | Identify funding gaps | Coordinate funding for potential shelters, buy initial supplies | ECC to 24hr Ops | Track costs | ECC to 24hr Ops | | | | | |
| | Maintain coordination with King County jurisdictions | Lead jurisdictions in situation analysis | Coordinate implementation schedule | | | | | | | |
| | Brief council as required | Brief council as required | Brief Council | Brief Council | Brief Council | Brief Council | | Brief Council | Brief Council | |
| | | Escallate funding/coordiantion issues to County Exec as req'd | Coordinate w/ WS EOC | Track costs | | | | | | |
| Public Info | Develop overall camapign | ID current planning factors | Finalize info on transport evacuation points, travel routes, shelter sites, availability dates & times, pet guidance, frail population | Prepare full-spectrum information campaign | Coordinate messages and media w/ shelter staff | Coordinate messages and media w/ shelter staff | | Coordinate messages and media with multiple shelter staffs | | |
| | Review basic regional sheltering plan and Tabs | Complete ad hoc messages - DOT plans, shelter locations, limitations, etc. | | Participate in ICS as req'd | Report media issues regularly to OEM Dir. | Report media issues regularly to OEM Dir. | | Report media issues regularly to OEM Dir. | | |

**TAB 10**
**SYNCRONIZATION MATRIX**

| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning OR county needs to shelter 500+ people OR shelter livestock & owners.** | | | | | | | | **All Emergency shelter operations have ceased** |
| | Conduct low level 'be prepared' campaign | Coordinate with media and provide current information | train population guidance, media limitations, items not allowed in shelters, assistance information and home security tips. | identify State or Fed support req'd | Provide situation updates | Provide situation updates | | Provide situation updates | | |
| | Review plans for multicultural communications | Validate multicultural communications methods & implement | | train any new members to PAO staff | Provide staff for Shelter locations | Provide staff for Shelter locations | | Coordinate plan w/ State | | |
| | | Track, formulate and provide just-in-time info | Provide media updates, coordinate interviews | | Modify messages based on feedback | Modify messages based on feedback | | Coordinate plan w/FEMA | | |
| JIS/JIC | ID relationship of JIS/JIC to IC | Prepare to or establish JIC, level II operations | Establish JIC and staff ICS if requested. | | Prepare to or establish JIC, level III operations | Maintain level III operations | | Maintain level III operations | | |
| **OEM** | Volunteer Training | Establish ECC level II operations as req'd | | | | | | | | |
| | Review plans | review plan and coordinate all supporting agency actions | Coord KC Agency activities | | | | | | | |
| | Conduct CEMP training and exercises | Identify ICS staff limitations | Employ Decision Matrix | | | | | | | |
| | Seek replacement shelter sites | Validate list of potential shelters | Provide info to public | | | | | | | |
| | Validate partner preparations (ARC & WASART) | Consider stock levels of supplies | Coordinate w/Partners | | | | | | | |
| | Validate planning assumptions (population sizes, threat analysis, etc) | Validate funding levels, staffing, changes in Agency plans or duties, population issues | Establish operational baseline | | | | | | | |

**TAB 10**
**SYNCRONIZATION MATRIX**

| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning OR county needs to shelter 500+ people OR shelter livestock & owners.** | | | | | | | | **All Emergency shelter operations have ceased** |
| Regional Shelter Management IC | | Validate staffing & training | Activate | Deploy | Employ | | | | | |
| ECC | | Level 1 Operation | Activate | Deploy | Employ | | | | | |
| **KCACC** | develop general plans for pets | Validate info plan for locations, requirement, limitations | | | | | | | | |
| | Track & train on Livestock Plans | review livestock plan w/partner | | | | | | | | |
| Pet Shelter Teams | Review and revise detailed procedures | Collect cages & Provide for jurisdictions by request | | | | | | | | |
| Volunteer Mgmt | ID and train volunteers incl. veterinarians | Validate volunteer availability, schedules, limitations and location. | | | | | | | | |
| ICS Team | ID Team members & train | Coordinate volunteers and veterinarians | | | | | | | | |
| **ARC** | Conduct internal planning/MOA review | Conduct internal planning | | | | | | | | |
| Feeding Team | Plan jointly with jurisdictions & bulk distributors | Validate resource status | Activate | | Deploy | Employ | | | | |
| | Prepare feeding solutions | Prepare feeding solutions | estimate initial meal count and prepare 1st order | if Jail meals required, place order | deliver local food stocks, set up feeding sites | | | | | |
| | | Call for outside volunteers as required | identify feeding sites and plan site layouts | | Establish site security as required | | | | | |
| | | | coordinate with partners | | Participate in Feeding Group conferences | | | | | |

**TAB 10**
**SYNCRONIZATION MATRIX**

| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning OR county needs to shelter 500+ people OR shelter livestock & owners.** | | | | | | | | **All Emergency shelter operations have ceased** |
| | | | report status of kitchens and equipment | stage kitchens and equipment | | | | | | |
| Shelter Team | Review potential shelter list | Review sheltering plans for various scenarios and locations | Activate | | Deploy | Employ | | | | |
| | Inspect new shelter options | Review MOU w/King County if necessary | estimate shelter population and choose sites | Validate shelter sites & brief KC | | | | | | |
| ICS Team | Train volunteers | Train volunteers | Activate | Deploy | Employ | | | | | |
| **Parks** | Track sheltering resources (eg cots) | If req'd notify partners to initiate livestock sheltering | Collect & deliver bedding equipment as requested. | | | | | | | |
| | Participate in OEM CEMP training and exercises | Prepare for shelter support w/ volunteers and equipment | | | | | | | | |
| ICS teams | Identify personnel to support Shelter ICS | Identify resources potentially available for shelter support | ID team members for ICS positions & assign | | | | | | | |
| | | | | | | | | | | |
| **FBOD** | Develop cost capture procedures | | | | | | | | | |
| | develop & manage shelter contracts as req'd | | | | | | | | | |
| | Assign staff to shelter ICS or ECC (or both?) | | ID team members for ICS positions & assign | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

**TAB 10**
**SYNCRONIZATION MATRIX**

| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning OR county needs to shelter 500+ people OR shelter livestock & owners.** | | | | | | | | **All Emergency shelter operations have ceased** |
| **KCDOT** | ID and Train DOT EOC staff | develop shelter-specific transport plan | | | | | | | | |
| Special Needs | Coord w/PHSKC & DCHS to ID requirements & gaps | Call DH or 206-615-1854 to ID Aged & Disabled population & notify them of movement. | | | Deploy | Employ | | | | |
| Coordination | Develop detailed plans for emergency operations | Obtain checklist for drivers to assist A&D residents w/move | | | | | | | | |
| Information | Develop and validate information campaign | Connect volunteers with drivers for A&D physical assist | | | | | | | | |
| ICS Team | ID team and train | Verify personnel & consider swork schedules | | | Deploy | Employ | | | | |
| Evacuation Plans | ID routes, pickup points and jurisdiction support for threats | publish pickup point info, schedules, requirements | | | Deploy | Employ | | | | |
| **PHSKC** | Conduct Alt. Care Facility planning | ID likely sites for shelters & review for ACF siting | Establish Medical Needs shelter as req'd | | | | | | | |
| Sheltering | Review Logistics support plans | Review regional sheltering plans and update as required | Identify medical support for gen. pop. Shelters | | | | | | | |
| transpor -tation | Coordinate transportation plans | Communicate with potential med needs residents | Coordinate with partners for aged, mentally ill, drug dependant, etc. | | | | | | | |

**TAB 10**
**SYNCRONIZATION MATRIX**

| phase begins | Not in Flood Season | in Flood Season but no flooding predicted | Alert Population, Volunteers & Staff @ Flood-120 to -96hr | Standby Status Actions Required @Flood-96 to -72hr | Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr | Actions Required @Flood-48 to -24hr | *EVAC Order -24* | Mandatory Evacuation Action Required E -24 to Flood | Flood + 48 | Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes. |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning OR county needs to shelter 500+ people OR shelter livestock & owners.** | | | | | | | | **All Emergency shelter operations have ceased** |
| ICS Team | Coord w/ OEM for ICS planning & training | Coordinate with partners for aged, mentally ill, drug dependant, etc. | ID team members for ICS positions & assign | | | | | | | |
| **KCSO** | Conduct disaster Planning | revise work schedules | Assist or Coord local traffic management plan | | | | | | | |
| | Validate KC plans | ID augmentation requirements | Review Shelter plan and validate assumptions | | | | | | | |
| | Participate in tabletop exercises | Estimate backfill req'd and validate sources | Estimate backfill req'd and validate sources | | | | | | | |
| | Coordinate w/ OEM for unique population types | finalize Offender population definition and sheltering plans | Estimate KSO shelter req'mts and establish shelter. | | | | | | | |
| | ID threats to shelter clients & ID potential responses (eg gangs, drugs) | Conduct door-to-door in high threat areas to collect/distribute information | ID team members for ICS positions & assign | | | | | | | |
| ICS Staff | | | Activate | Deploy | Employ | | | | | |
| **DAJD** | ID alternate sites | validate relocation sites | | | | | | | | |
| Food Serv. Coord | devlop general feeding plans | coord w/ OEM as part of Feeding Team | | | | | | | | |
| Kitchen Teams | Develop standard menus for emergency feeding programs | review staff work schedules | ID team members for ICS positions & assign as req'd | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| **KCDCHS** | | | | | | | | | | |

**TAB 10**
**SYNCRONIZATION MATRIX**

| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning OR county needs to shelter 500+ people OR shelter livestock & owners.** | | | | | | | | **All Emergency shelter operations have ceased** |
| Plans | ID needs in various disaster scenarios | | | | | | | | | |
| Partnerships | ID groups for transport, communication, etc. | | | | | | | | | |
| Information | Develop multi-lingual info products | | | | | | | | | |
| Evacuation | ID methods & partners & test plans | | | | | | | | | |
| Support | Develop plan for in-shelter support teams | | | | | | | | | |
| Assistance | ID teams and services to be provided | | | | | | | | | |
| **WASART** | | | | | | | | | | |
| **Rescue Teams** | ID volunteers & train them | | Activate | Deploy | Employ | | | | | |
| **Shelter Teams** | ID volunteers & train them | | | | | | | | | |
| **Jurisdictions** | | | | | | | | | | |
| Plans | Develop/Coordinate plans | | | | | | | | | |
| Notification | Identify sites, schedules, requirements | | | | | | | | | |
| Evacuations | Identify teams, roles and support | | | | | | | | | |
| Assistance | Plan for post-disaster assistance | | | | | | | | | |
| | | | | | | | | | | |

**TAB 10**
**SYNCRONIZATION MATRIX**

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
| **phase ends** | **Flood Season Begins** | **Level 1 warning OR county needs to shelter 500+ people OR shelter livestock & owners.** | | | | | | | | **All Emergency shelter operations have ceased** |

**Worksheet 1**
**Decision Matrix**

| ***DECISIONS*** | **How will Command and Control be executed?** | **Will a Regional Shelter be set up?** | **Is KC prepared to initiate shelters and related services?** | **How soon can we begin to inform the population and jurisdictions?** |
|---|---|---|---|---|
| | | | | |
| ***FOCUS*** | ***INCIDENT COMMAND*** | ***SHELTER SIZE & LOCATION*** | ***SERVICE & PROVIDERS*** | ***INFORMATION & TIMING*** |
| ***KEY QUESTIONS*** | Will an Incident Command be established? | What is the predicted duration of the event? | Are the ICS and shelter operations established and properly staffed? | Is an information release being prepared for Dir. OEM review? |
| | Who will be the SMT IC? | How may people are in or requesting shelters now? | Is the local ARC chapter prepared to implement the shelter plan? | Is public transportation ready & TAB 1 being coordinated the Logistics? |
| | How will agencies and departments staff the SMT? | In what locations are people seeking shelter? | Are additional people needed to staff shelters and how are they qualified? | Where are the public transportation pick-up points established by cities? |
| | What will be the roles of the SMT and the KC ECC? | What is the estimate of ultimate shelter population and affected area? | What is the summary status related to opening the shelter(s) (info, transport, alt. care, animals, etc) | Which evacuation triggers have elapsed and which remain? |
| | Where will the SMT ICP be located? | Does the plan require phasing from initial shelters to mega-shelters? | Are there exceptions to the services supplied by KC departments and agencies per the sheltering plan? | What should people bring with them to shelters? What is NOT allowed on busses or in the shelter? |
| | What will be the SMTs initial staffing? | Are predetermined shelters available ? | Has the initial food order been placed and is the feeding group prepared? | Are any roads for travel to the shelter closed? |
| | Will staff be requested from outside King County? | Which sites are the best options & why? | Is WASART prepared for sheltering livestock? | Do cities have animal cages available (for busses)? |
| | What limits are there on information if any (open questions)? | What funding authorization is required to open the best sites? | Will any services require a new contract and if so is BOD prepared to support? | When will the pet shelter be ready to accept animals? |
| | How will KC Depts and Agencies be notified? | Which roads are likely to be available throughout the emergency providing shelter access? | Which departments have contingency contracts and are they prepared to execute immediately? | What species/types of animals and pet equipment is allowed or not allowed? |
| | What comm equipment is required for the ICS? | Which sites are recommended alternates? | Has the IC coordinated with the cities regarding bus pickup points, communications, etc. | What message needs to go out to aged, disabled and others needing assistance? |

**Worksheet 1**
**Decision Matrix**

| | | | | |
|---|---|---|---|---|
| | What will be the funding authority of the ICS? | How quickly can shelters be opened? | Are IC and shelter communications needs identified and available? | How will non-English-speaking people be informed? |
| | How will issues be escalated between Agencies and the IMT? | Is pet sheltering available nearby? | Is communications equipment ready to be issued to shelter staff? | What is the current status of livestock shelters and owners? |
| | What is the likely duration of the shelter emergency? | Has the Medical Needs Shelter been established? Where? | Is DOT ready to pick up Aging & Disabled persons incl. equipment? | How will people get communication services in the shelter? |
| | Is the Letter of delegation prepared? | How will KCDOT transport people seeking shelter? | Are personnel needed & available to assist with Aging/Disabled persons? | How will people maintain contact with family and get assistance? |
| | Who will notify media and when? | In which languages are the PAOs preparing messages? | Will preexisting contracts be commenced or enforced? Are costs being captured? | How will messages be coordinated w/cities & media |
| ***Final Decision*** | | | | |
| | | | | |
| ***Decision Participants*** | ***King County OEM*** | ***King County OEM*** | ***KCOEM*** | ***King County OEM*** |
| | | | ***PHSKC*** | |
| | | ***ARC*** | ***KCSO*** | |
| | | | ***ARC*** | ARC |
| | | ***KCSO*** | ***KCDOT*** | |
| | | ***KCDOT*** | ***KCACC*** | |
| | ***Local Jurisdictions:*** | | ***WASART*** | |
| | | ***Affected Jurisdictions:*** | ***KCOIRM*** | |
| | | | ***KCDNRP*** | |
| | | | | |
| | | | | |
| | ***KCSO*** | | | |
| | | | | |

**Worksheet 3**
**Contract Services**

| |
|---|
| **Intent**: Identify Vendors and determine any conflict with State, County and Municipal Contracts. |
| **Action**: Pre-scrip Statements of Work **(SOW)** for materials and service support. |
| **Scope:** Municipal shelterting may support 100 persons per/location. |
| **Activate =** Inform vendor to standby for possible emergency purchase order. |

| **Standby Contractor Services** | Contract | Equipment | Maintainer | Operators | Delivery / Pick-up | | |
|---|---|---|---|---|---|---|---|
| Port-A-Potty | 1 | Yes | Yes | | Yes | | |
| Hand Washing Stations | 1 | Yes | Yes | | Yes | | |
| Moblie Showers | 1 | Yes | Yes | | Yes | | |
| Fork Lift & Pallet Jack | 1 | Yes | Yes | | Yes | | |
| Fuel Services | 1 | Yes | Yes | | Yes | | |
| Catering Services | 1 | Yes | | Yes | Yes | | |
| Staffing Support | 1 | Yes | | Yes | | | |
| First Aid | 1 | Yes | | Yes | | | |
| Transportation Services | 1 | Yes | | Yes | Yes | | |
| Security | 1 | Yes | | Yes | | | |
| Janitorial Services | 1 | Yes | | Yes | | | |
| Solid Waste Disposal | 1 | Yes | | | Yes | | |

| Feeding Taskforce Supply Contracts | | | See procurment SOPs for details | | | |
|---|---|---|---|---|---|---|
| | | | | | | |
| ARC | 1 | | | | | |
| Southern Baptists | 1 | | | | | |
| Salvation Army | 1 | | | | | |
| Soup Ladies | 1 | | | | | |
| KC Jail | 1 | | | | | |
| | 1 | | | | | |
| Others | 1 | | | | | |

| **General Items** |
|---|
| Cots |
| Blankets |
| Pillows |
| Pillow Cases |
| Tables |
| Chairs |
| MRE **(3 day supply)** |
| Water 1ltr. **(3 day supply)** |

**Worksheet 4**
**American Red Cross**

| phase begins | Not in Flood Season | in Flood Season but no flooding predicted | Alert Population, Volunteers & Staff @ Flood-120 to -96hr | Standby Status Actions Required @Flood-96 to -72hr | Proclamation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr | Actions Required @Flood-48 to -24hr | *EVAC Order -24* | Mandatory Evacuation Action Required E -24 to Flood | Flood + 48 | Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes. |
|---|---|---|---|---|---|---|---|---|---|---|
| phase ends | Flood Season Begins | Level 1 warning or county needs to shelter | | | | | | | | All Emergency shelter operations have ceased |
| ARC | Conduct internal planning/MOA review | Conduct internal planning | | | | | | | | |
| Feeding Team | Plan jointly with jurisdictions & bulk distributors | Validate resource status | Activate | | Deploy | Employ | | | | |
| | | | estimate initial meal count and prepare 1st order | if Jail meals required, place order | deliver local food stocks, set up feeding sites | Begin feeding operations | | | | |
| | | | identify feeding sites and plan site layouts | | Establish site security as required | | | | | |
| | | | coordinate with partners | | Process volunteers, participate in Feeding Group conferences | | | | | |
| | | | check status of kitchens and equipment, request additional equipment | stage kitchens and equipment | | | | | | |
| shelter Team | Train volunteers | Brief regional shelters including near Livestock area | Activate | | Deploy | Employ | | | | |
| ICS Team | Train volunteers | Train volunteers | Activate | | Deploy | Employ | | | | |
| Shelter planning | Review potential shelter list | Prepare feeding solutions | | | | | | | | |
| | Inspect new shelter options | | | | | | | | | |
| Mass Feeding planning | | | | | | | | | | |

**Worksheet 5**
**King County Department of Transportation**

| **phase begins** | **Not in Flood Season** | **In Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclamation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets.** | | | | | | | | **All Emergency shelter operations have ceased** |
| **Key Info** | Are required MOUs/MOAs/ Contracts in place? | What is the current & predicted trigger criteria next 72 hours? | Where will shelters be located and when can clients be accepted? | What is the status of all shelters? | Livestock shelter OPEN (incl pets & people) | ACF is OPEN & 1 Gen. Pop shelter OPEN | Every Shelter OPEN | | | |
| **KCDOT** | ID and Train DOT EOC staff | develop shelter-specific transport plan | | | | | | | | |
| Special Needs | Coord w/PHSKC & DCHS to ID requirements & gaps | Call DH or 206-615-1854 to ID Aged & Disabled population & notify them of movement. | Activate | | Deploy | Employ | | | | |
| Coordination | Develop detailed plans for emergency operations | Obtain checklist for drivers to assist A&D residents w/move | | | | | | | | |
| Information | Develop and validate information campaign | Connect volunteers with drivers for A&D physical assist | | | | | | | | |
| ICS Team | ID team and train | Verify personnel & consider work schedules | Activate | | Deploy | Employ | | | | |

**Worksheet 5**
**King County Department of Transportation**

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| Evacuation Plans | ID routes, pickup points and jurisdiction support for threats | publish pickup point info, schedules, requirements | Activate | | Deploy | Employ | | | | |

**Worksheet 6**
**Regional Animal Services of King County**

| phase begins | Not in Flood Season | in Flood Season but no flooding predicted | Alert Population, Volunteers & Staff @ Flood-120 to -96hr | Standby Status Actions Required @Flood-96 to -72hr | Proclamation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr | Actions Required @Flood-48 to -24hr | *EVAC Order -24* | Mandatory Evacuation Action Required E -24 to Flood | Flood + 48 | Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes. |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets.** | | | | | | | | **All Emergency shelter operations have ceased** |
| **Key Info** | Are required MOUs/MOAs/ Contracts in place? | What is the current & predicted trigger criteria next 72 hours? | Where will shelters be located and when can clients be accepted? | What is the status of all shelters? | Livestock shelter OPEN (incl pets & people) | ACF is OPEN & 1 Gen. Pop shelter OPEN | Every Shelter OPEN | | | |
| **RASKC** | develop general plans for pets | Validate info plan for locations, requirement, limitations | | | | | | | | |
| | Track & train on Livestock Plans | review livestock plan w/partner | | | | | | | | |
| Pet Shelter Teams | Review and revise detailed procedures | Collect cages & Provide for jurisdictions by request | | | | | | | | |
| Volunteer Mgmt | ID and train volunteers incl. veterinarians | Validate volunteer availability, schedules, limitations and location. | | | | | | | | |
| ICS Team | ID Team members & train | Coordinate volunteers and veterinarians | | | | | | | | |

**Worksheet 7**
**King County Office of Emergency Management**

| phase begins | Not in Flood Season | in Flood Season but no flooding predicted | Alert Population, Volunteers & Staff @ Flood-120 to -96hr | Standby Status Actions Required @ Flood-96 to -72hr | Proclamation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr | Actions Required @ Flood-48 to -24hr | *EVAC Order -24* | Mandatory Evacuation Action Required E -24 to Flood | Flood + 48 | Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes. |
|---|---|---|---|---|---|---|---|---|---|---|
| phase ends | Flood Season Begins | Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets. | | | | | | | | All Emergency shelter operations have ceased |
| **Key Info** | Are required MOUs/MOAs/ Contracts in place? | What is the current & predicted trigger criteria next 72 hours? | Where will shelters be located and when can clients be accepted? | What is the status of all shelters? | Livestock shelter OPEN (incl pets & people) | ACF is OPEN & 1 Gen. Pop shelter OPEN | Every Shelter OPEN | | | |
| **OEM** | Volunteer Training | Establish ECC level II operations as req'd | | | | | | | | |
| | Review plans | review plan and coordinate all supporting agency actions | Coord KC Agency activities | | | | | | | |
| | Conduct CEMP training and exercises | Identify ICS staff limitations | Employ Decision Matrix | | | | | | | |
| | Seek replacement shelter sites | Validate list of potential shelters | Provide info to public | | | | | | | |
| | Validate partner preparations (ARC & WASART) | Consider stock levels of supplies | Coordinate w/Partners | | | | | | | |
| | Validate planning assumptions (population sizes, threat analysis, etc) | Validate funding levels, staffing, changes in Agency plans or duties, population issues | Establish operational baseline | | | | | | | |
| | | | | | | | | | | |
| Regional ICS | | Validate staffing & training | Activate | Deploy | Employ | | | | | |
| ECC | | Level 1 Operation | Activate | Deploy | Employ | | | | | |

**Worksheet 8**
**King County Sheriff's Office**

| phase begins | Not in Flood Season | in Flood Season but no flooding predicted | Alert Population, Volunteers & Staff @ Flood-120 to -96hr | Standby Status Actions Required @Flood-96 to -72hr | Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr | Actions Required @Flood-48 to -24hr | *EVAC Order -24* | Mandatory Evacuation Action Required E -24 to Flood | Flood + 48 | Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes. |
|---|---|---|---|---|---|---|---|---|---|---|
| phase ends | Flood Season Begins | Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets. | | | | | | | | All Emergency shelter operations have ceased |
| **Key Info** | Are required MOUs/MOAs/ Contracts in place? | What is the current & predicted trigger crtieria next 72 hours? | Where will shelters be located and when can clients be accepted? | What is the status of all shelters? | Livestock shelter OPEN (incl pets & people) | ACF is OPEN & 1 Gen. Pop shelter OPEN | Every Shelter OPEN | | | |
| **KCSO** | Conduct disaster Planning | revise work schedules | Assist or Coord local traffic management plan | Deputies placed on standby status | Coordinate w/jurisdictions for priority surveillance by local LE | conduct shelter security missions jointly w/ ARC & local LE | | conduct shelter security missions jointly w/ ARC & local LE | conduct shelter security missions jointly w/ ARC & local LE | |
| | Validate KC plans | ID augmentation requirements | Review Shelter plan and validate assumptions | | | | | | | |
| | Participate in tabletop exercises | Estimate backfill req'd and validate sources | Estimate backfill req'd and validate sources | | | | | | | |
| | Coordinate w/ OEM for unique population types | finalize Offender population definition and sheltering plans | Estimate RSO shelter req'mts and establish shelter. | | | | | | | |
| | ID threats to shelter clients & ID potential responses (e.g., gangs, drugs, etc.) | Conduct door-to-door in high threat areas to collect/distribute information | ID team members for ICS positions & assign | | | | | | | |
| | | | | | | | | | | |
| ICS Staff | | | Activate | | Deploy | Employ | | | | |

**Worksheet 9**
**King County Prosecuting Attorney's Office**

| phase begins | Not in Flood Season | in Flood Season but no flooding predicted | Alert Population, Volunteers & Staff @ Flood-120 to -96hr | Standby Status Actions Required @ Flood-96 to -72hr | Proclamation and Voluntary/'Early ' evacuation Actions @ Flood-72 to -48hr | Actions Required @ Flood-48 to -24hr | *EVAC Order -24* | Mandatory Evacuation Action Required E -24 to Flood | Flood + 48 | Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes. |
|---|---|---|---|---|---|---|---|---|---|---|
| phase ends | Flood Season Begins | Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets. | | | | | | | | All Emergency shelter operations have ceased |
| **Key Info** | Are required MOUs/MOAs/ Contracts in place? | What is the current & predicted trigger criteria next 72 hours? | Where will shelters be located and when can clients be accepted? | What is the status of all shelters? | Livestock shelter OPEN (incl pets & people) | ACF is OPEN & 1 Gen. Pop shelter OPEN | Every Shelter OPEN | | | |
| **Public Info** | Develop overall campaign | ID current planning factors | Finalize info on transport evacuation points, travel routes, shelter sites, availability dates & times, pet guidance, frail population guidance, media limitations, items not allowed in shelters, assistance information and home security tips. | Prepare full-spectrum information campaign | Coordinate messages and media w/ shelter staff | Coordinate messages and media w/ shelter staff | | Coordinate messages and media with multiple shelter staffs | | |
| | Review basic regional sheltering plan and Tabs | Complete ad hoc messages - DOT plans, shelter locations, limitations, etc. | | Participate in ICS as req'd | Report media issues regularly to OEM Dir. | Report media issues regularly to OEM Dir. | | Report media issues regularly to OEM Dir. | | |
| | Conduct low level 'be prepared' campaign | Coordinate with media and provide current information | | identify State or Fed support req'd | Provide situation updates | Provide situation updates | | Provide situation updates | | |
| | Review plans for multicultural communications | Validate multicultural communications methods & implement | | train any new members to PAO staff | Provide staff for Shelter locations | Provide staff for Shelter locations | | Coordinate plan w/ State | | |
| | | Track, formulate and provide just-in-time info | Provide media updates, coordinate interviews | | Modify messages based on feedback | Modify messages based on feedback | | Coordinate plan w/FEMA | | |
| JIS/JIC | ID relationship of JIS/JIC to ICS | Prepare to or establish JIC, level II operations | Establish JIC and staff ICS if requested. | | Prepare to or establish JIC, level III operations | Maintain level III operations | | Maintain level III operations | | |

**Worksheet 10**
**Public Health Seattle-King County**

| phase begins | Not in Flood Season | in Flood Season but no flooding predicted | Alert Population, Volunteers & Staff @ Flood-120 to -96hr | Standby Status Actions Required @ Flood-96 to -72hr | Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr | Evacuation Advisory @ Flood-48 to -24hr | *EVAC Order @-24* | Mandatory Evacuation Action Required E -24 to Flood | Flood + 48 | Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes. |
|---|---|---|---|---|---|---|---|---|---|---|
| phase ends | Flood Season Begins | Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets. | | | | | | | | All Emergency shelter operations have ceased |
| **Key Info** | Are required MOUs/MOAs/ Contracts in place? | What is the current & predicted trigger crtieria next 72 hours? | Where will shelters be located and when can clients be accepted? | What is the status of all shelters? | Livestock shelter OPEN (incl pets & people) | ACF is OPEN & 1 Gen. Pop shelter OPEN | Every Shelter OPEN | | | |
| **PHSKC** | Conduct Alt. Care Facility planning | Review regional sheltering plans and update as required | | | | | | | | |
| | Review logistics support plans | Validate plans for feeding, supply and equipment supportable | | | | | | | | |
| transportation | Coordinate transportation plans | Coordinate evacuation planning with ICS | | | | | | | | |
| Mass Care IC | Coord w/ OEM for ICS planning & training | establish liason with KC ECC | | | | | | | | |
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**Worksheet 11**
**King County Department of Natural Resources and Parks**

| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @ Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Evacuation Advisory @ Flood-48 to -24hr** | ***EVAC Order @-24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets.** | | | | | | | | **All Emergency shelter operations have ceased** |
| **Key Info** | | | | | | | | | | |
| **DNRP** | | | | | It is likely livestock and rural populations will need sheltering and subsistence support | | | | | |
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**Worksheet 12**
**King County Finance and Business Operations Division**

| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets.** | | | | | | | | **All Emergency shelter operations have ceased** |
| **Key Info** | Are required MOUs/MOAs/ Contracts in place? | What is the current & predicted trigger crtieria next 72 hours? | Where will shelters be located and when can clients be accepted? | What is the status of all shelters? | Livestock shelter OPEN (incl pets & people) | ACF is OPEN & 1 Gen. Pop shelter OPEN | Every Shelter OPEN | | | |
| **FBOD** | Develop cost capture procedures | | | | | | | | | |
| | develop & manage shelter contracts as req'd | | | | | | | | | |
| | Assign staff to shelter ICS or ECC (or both?) | | ID team members for ICS positions & assign | | | | | | | |
| | | | | | | | | | | |

**Worksheet 13**
**Washington State Animal Response Team**

| phase begins | Not in Flood Season | in Flood Season but no flooding predicted | Alert Population, Volunteers & Staff @ Flood-120 to -96hr | Standby Status Actions Required @ Flood-96 to -72hr | Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr | Evacuation Advisory @ Flood-48 to -24hr | *EVAC Order @-24* | Mandatory Evacuation Action Required E -24 to Flood | Flood + 48 | Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes. |
|---|---|---|---|---|---|---|---|---|---|---|
| phase ends | Flood Season Begins | Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets. | | | | | | | | All Emergency shelter operations have ceased |
| Key Info | | | | | | | | | | |
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**Worksheet 14**
**Kiing County Department of Community and Health Services**

| **phase begins** | **Not in Flood Season** | **in Flood Season but no flooding predicted** | **Alert Population, Volunteers & Staff @ Flood-120 to -96hr** | **Standby Status Actions Required @Flood-96 to -72hr** | **Proclaimation and Voluntary/'Early' evacuation Actions @ Flood-72 to -48hr** | **Actions Required @Flood-48 to -24hr** | ***EVAC Order -24*** | **Mandatory Evacuation Action Required E -24 to Flood** | **Flood + 48** | **Residents have been relocated into intermediate-term housing (designed for 1-4 months) or have returned to their homes.** |
|---|---|---|---|---|---|---|---|---|---|---|
| **phase ends** | **Flood Season Begins** | **Level 1 warning or county needs to shelter up to 500 people, certain livestock and pets.** | | | | | | | | **All Emergency shelter operations have ceased** |
| **Key Info** | Are required MOUs/MOAs/ Contracts in place? | What is the current & predicted trigger crtieria next 72 hours? | Where will shelters be located and when can clients be accepted? | What is the status of all shelters? | Livestock shelter OPEN (incl pets & people) | ACF is OPEN & 1 Gen. Pop shelter OPEN | Every Shelter OPEN | | | |
| **KCDCHS** | | | | | | | | | | |
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# TAB 11
# MULTI-AGENCY FEEDING PLAN

**PRIMARY AGENCY:** King County Office of Emergency Management

**SUPPORT AGENCIES:** American Red Cross Serving King & Kitsap Counties
Private Sector Volunteer Organizations
Public Health-Seattle & King County
Salvation Army Northwest Division
Southern Baptists Disaster Relief

## I. INTRODUCTION

This tab provides a framework for the development of all-hazards feeding plan for use during major and catastrophic disaster operations. The plan is inclusive of the primary disaster feeding agencies/organizations including King County, American Red Cross, Salvation Army, Southern Baptists, non-governmental organizations (NGOs) and other voluntary organizations involved with feeding operations, FEMA, Other Federal Agencies (OFAs) and the private sector.

In all instances, King County Government and the King County Office of Emergency Management (KCOEM) are responsible for the coordination of regional shelter operations within King County as specified in the King County Comprehensive Emergency Management Plan. Coordination will occur through the King County Emergency Coordination Center (KCECC). Additionally, the American Red Cross, Salvation Army, Southern Baptists and other NGOs traditionally deliver mass care in a disaster and respond with available resources in accordance with the requirements of their internal policies and in cooperation with emergency management officials.

Under a major disaster declaration and when conditions warrant, the King County ECC may request additional support through the Washington State Emergency Operations Center (EOC). This support may include the purchase of food and other feeding supplies when county and voluntary organizations purchasing resources are insufficient to meet demand in disaster-impacted areas.

The processes discussed in this plan can be implemented by the county and state with no federal assistance or when federal assistance is requested and available.

### A. Purpose

The purpose of the multi-agency feeding plan is to define the framework for county, state and/or federal support of a coordinated, timely and efficient feeding response in King County. It also defines the full spectrum of services required from initiation until community services are restored.

### B. Scope

This plan describes the coordination steps and implementation procedures necessary to meet the feeding requirements within King County to respond to the needs of the population affected by a disaster. This plan also:

- Describes the response capacity and strategy of the King County ECC to implement feeding and meet the needs of affected jurisdictions.

- Provides procedures for managing the feeding resources available in and to King County.

- Describes the scaling up and integration of county, regional, state and national agencies/organizations into the response and scaling back down to the local level including the integration of community services such as food banks, food pantries, and the Disaster Supplemental Nutritional Assistance Program (D-SNAP).

## II. POLICIES

Chapter 38.52 Revised Code of Washington (RCW)

Public Law 100-707, The Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act)

## III. SITUATION and ASSUMPTIONS

### A. Situation

Upon notification of a pending or ongoing disaster, the King County OEM and representatives of the supporting agencies will assemble at the King County ECC, in person or via conference call, in order to make an initial assessment. The purpose of this meeting/conference call is to work through the following four steps. (See Attachment 4-Steps in the Feeding Assessment for detail on the four-step process.)

1. Define the scale of the disaster. The outcome of this step is the anticipated number of meals/day required in King County to meet the needs of the incident.

2. Determine resources required to meet the defined need. Estimate the production, distribution and logistical requirements to meet the defined need.

3. Determine resources available from NGOs. The NGOs must be prepared to say, approximately but in sufficient detail, the level of production, distribution and logistical assets they can commit to the disaster, at that time.

4. Identify any shortfalls. The shortfalls must be sufficiently defined so they can be assigned to the logistics, production or distribution partners and action can be taken to resolve the shortfalls.

The following situational considerations will be utilized in order to assist in defining the scale of the disaster and making an assessment as to the magnitude and scope of the feeding requirements for the incident.

| Situational Considerations for Feeding Assessment |
|---|
| Identify the potential/estimated population affected/evacuated/unable to return |
| Duration of feeding support needed based upon the impact of the incident on individuals, dwellings, and/or infrastructure within the affected community |
| Review gap analyses and identify feeding shortfalls |
| Quantify the percentage of the power grid offline and estimate the duration of the outage |
| Establish a matrix for feeding projections based upon nutritional standards and the timeframe needed to place food orders |
| Identify special needs populations affected |
| Determine the status of communication capabilities |
| Determine the status of potable and non-potable water and distribution systems |
| Determine the status of waste water treatment plants |
| Determine the status of commercial fuel services (e.g. gas stations) |
| Determine the impact to commerce (e.g. fast food establishments, grocery stores, convenience stores and others) |
| Determine how the disaster affected the food distribution network |

Proper planning allows for the identification and marshalling of additional resources outside the affected area. The goal of these activities is the creation of a feeding infrastructure, defined as the combination of resources provided by county, state, federal and voluntary organizations designed to deliver emergency feeding to those impacted by a disaster and disaster workers. The focus of the feeding infrastructure is on the preparation and delivery of cooked meals, snacks and beverages from mobile and fixed kitchen sites. Feeding is made available to those affected by a disaster and disaster workers immediately at the kitchen sites or the meals are prepared and transported by mobile feeding units to alternative sites for feeding at those locations.

## B. Planning Assumptions

Community Based Organizations (CBOs), such as local churches and civic clubs, and local businesses, such as restaurants, will respond spontaneously. Their capabilities will be incorporated into the feeding response as deemed appropriate at the time of plan implementation.

Feeding and hydration service will be needed in some capacity on nearly every disaster incident. In small incidents, feeding and hydration needs may be easily met by the deployment of mobile feeding units from local NGOs, such as the American Red Cross, Southern Baptist Disaster Relief or The Salvation Army. Larger or catastrophic incidents, however, will require the mobilization and coordination of multiple government, NGO and private sector resources.
In large-scale disasters, feeding needs will usually exceed the resources and capability of any one agency/organization, requiring a combination of resources provided by county, state, federal, NGOs and private sector to deliver emergency feeding to affected populations.

Feeding and hydration services will be needed and delivered during disasters to both the displaced general public and shelter staff.

Volunteers who perform shelter management activities in direct support of the King County Regional Shelter Operations Incident Annex will receive feeding support in accordance with this plan. Volunteers performing response and recovery activities under their own mandate and

outside official governmental response plans and efforts are not eligible for feeding support under this plan.

Participating agencies/organizations will develop internal procedures and train personnel to perform the duties and responsibilities described in this plan. Agencies' internal procedures and trained personnel will be paramount to the success of the assistance process.

NGO feeding organizations will establish their own relationships with vendors to supply food. However, in large or catastrophic incidents, King County will use existing contracts or establish relationships with vendors to supply food and resources. In addition, the availability of product may quickly be strained in situations where demand is high and commercial resources, such as restaurants and grocery stores, are inoperable due to the disaster.

People who will require sheltering will not arrive at the shelter location with a supply of food and water.

Participating feeding organizations could have different resources they bring to the operation. This could include variances in food supplies, infrastructure support or other necessary items for production.

Shelf-stable meals may be used to supplement initial feeding requirements, augment established feeding operations during disruptions, support short-orders and meet demand at locations where prepared meals are unable to be provided.

Any reference to Points of Distribution (PODs) in this plan pertains solely to the food and water commodities. There are no operational planning and multi-agency coordination agreements for distribution of non-food items in this plan.

Public utilities may be inoperable. In addition to increasing demand for prepared meals, power outages will significantly impact how food is used and stored at feeding preparation sites. Emergency refrigeration and freezer capability may be needed at key feeding preparation and staging sites.

There may be interruptions in the process due to external factors (e.g., multiple disasters occurring, impassable roads, etc.) Transportation and other infrastructure damage may impede delivery or require staging.

Even under disaster conditions, safe and sanitary food practices must be followed. Public health and the state will continue to conduct food safety inspections of food and water supplies, food preparation, serving and distribution facilities and related operations.

The amount of commodities purchased and meals produced will not equal the number of meals served due to loss of production, portion size, etc.

King County and/or the state may initiate procedures to request approval from USDA's Food and Nutrition Service to operate the Disaster-Supplemental Nutrition Assistance Program (D-SNAP) (formerly known as Disaster Food Stamp Program) when the infrastructure has been restored and King County received a Presidential disaster declaration with individual assistance.

### C. Dietary Considerations

The planning and execution of feeding operations will make an effort to care for specific populations in a community. Individuals who may need additional dietary considerations could include the following:

- Persons with disabilities
- Persons with special dietary needs
- Elderly
- Persons from diverse cultures
- Children

Local Emergency Management will determine the requirements for these constituencies. The additional resources required for these populations will be quantified and requested so external resources can be procured and delivered to meet the need whenever possible.

## IV. CONCEPT OF OPERATIONS

### A. General

King County Government has the primary responsibility for ensuring adequate resources (production, distribution and logistics) are available to meet the disaster feeding requirements during an incident. When the combined resources of the non-governmental organizations and local jurisdictions are insufficient to meet the projected demand for feeding, the King County ECC will take those actions required to secure the necessary resources from private and public partners, the county and, if required, the state and federal government.

The American Red Cross, the Salvation Army, Southern Baptists and other non-governmental organizations traditionally deliver feeding in a disaster and respond with available resources in accordance with the requirements of their charter and to coordinate, facilitate and assist with emergency management officials. Local government officials, in consultation with servicing NGOs, provide guidance on the distribution of meals within their jurisdiction to the delivering agencies. The coordination for the local feeding plan is conducted at the local emergency operations center with the relevant agency liaisons. Operational decisions on the employment of the production part of the feeding infrastructure are the responsibility and concern of the non-governmental organizations owning those assets. If county, state and/or federal production or distribution assets are employed, then their deployment is done in coordination and cooperation with the principal non-governmental organizations operating in the area.

This multi-agency feeding plan has been developed as an integrated strategy and process for implementing coordinated feeding operations at the county level when the capabilities of local government are exceeded and assistance from King County is required to meet the need. The feeding plan will help limit duplication of effort and maximize use of available resources.

## B. Regional Shelter Operations IC - Logistics Section

The King County ECC and/or the Regional Shelter Operations IC Logistics Section is responsible for coordinating the procurement of needed assets. The supply of needed assets/resources will include a combination of in-state and federal resources. The trigger for activation of state/federal food purchases for disaster feeding will be a request for such action by the King County ECC or IC to the State EOC. The request will specify the circumstances requiring the state to provide such assistance. If the sum of voluntary organizations' and other stakeholders' resources exceed the estimated feeding need, there are no shortfalls and no action steps are needed. If the feeding need is greater than the collective resources in King County, the county will request the state alleviate the shortfall.

| Logistics Section Tasks |
|---|
| Assess NGO's need, financial ability, and/or capability to contract and/or purchase food commodities through their own resources. |
| Assess the county's need, financial ability, and/or capability to contract and/or purchase food commodities through their own resources. |
| Establish activation procedures, conference call requirements, and on-site participation. |
| NGOs should provide their feeding production, distribution and logistics capabilities to the King County ECC Logistics Section. |
| Address state/federal integration into the multi-agency feeding plan. |
| Identify the triggers for implementing the feeding plan. |
| Define process for ordering food, supplies and equipment; identify where items will be purchased and where items will be delivered; and develop process for picking up items. |
| Define accountability procedures for non-consumable items. |
| Define accounting procedures for reimbursable items. |

## C. Phases of Feeding Operations

The evolution of disaster feeding and methods of operations in the affected area proceeds in distinct but overlapping phases:

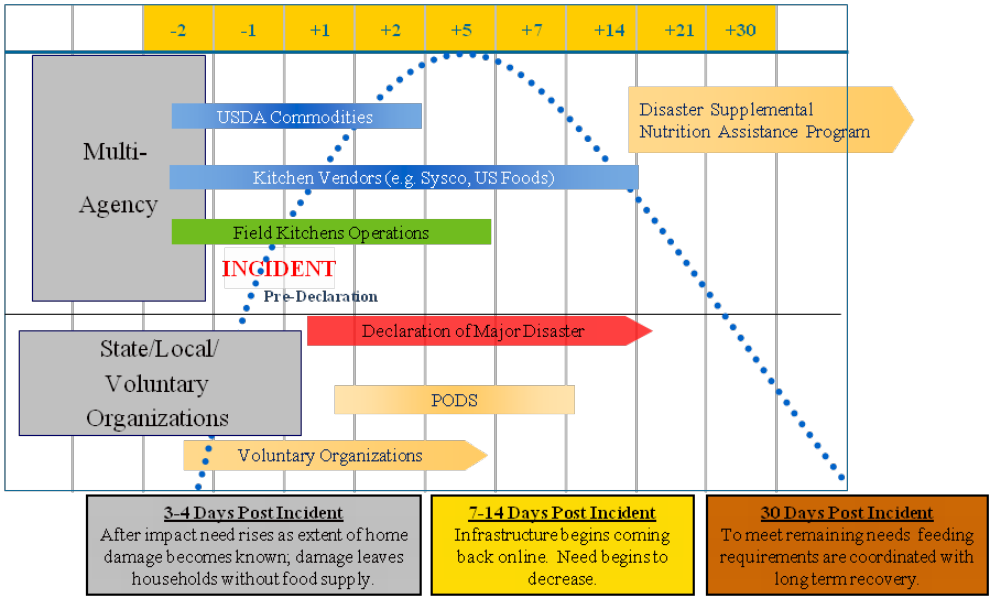
- Immediate. This phase begins with the incident and ends when the regional shelter infrastructure has been established. During this phase disaster feeding activities maybe supported through PODs and other bulk distribution activities of shelf-stable meals. The approximate time frame for this phase is 72-hours.

- Sustained. This phase begins when the field kitchens and supporting logistical infrastructure are in place and producing meals. The phase ends when the field kitchens are demobilized.

- Long term. This phase begins with the restoration of utilities and the evacuees/residents have the ability to cook meals in their homes. During this phase, disaster feeding support may be conducted through food banks and bulk distributions by volunteer agencies and governmental feeding programs. As the emergency feeding response ends, the responsibility for remaining disaster feeding needs transitions to long-term recovery and is not addressed by this plan.

The start and duration of these phases can vary. Below is a snapshot of the feeding operation timeline. For detail on each of the feeding operations phases, refer to Attachment 2-Phases of Feeding Operations.

**Feeding Operation Timeline**




## D. Feeding Resources

| Feeding Resources | Description |
|---|---|
| Local Efforts | Community Based Organizations (CBOs), such as local churches and civic clubs and local businesses are often the first responders and respond spontaneously. |
| USDA Foods | This includes USDA foods for the school lunch program located within the schools as well as foods stored in State designated warehouses. The State Distributing Agency has the authority to release these foods to voluntary organizations for use in feeding. Under limited circumstances and with approval from the Food and Nutrition Service, USDA foods used in other nutrition assistance programs such as the Temporary Emergency Feeding Program can be used to provide a household disaster food distribution program. USDA also purchases infant formula and infant foods to provide appropriate foods for infants in disasters. |
| Food Banks | Food banks or pantries exist throughout jurisdictions to support every day, non-disaster feeding needs. |
| Catered Feeding | Perform through contracts or agreements with commercial facilities and usually do not depend on government commodities. |
| Mobile Delivery Vehicles | Vehicles capable of delivering hot or cold food, but with no or very limited independent food preparation capability. Examples include American Red Cross Emergency Response Vehicles (ERVs) and the Salvation Army Disaster Response Units (DRUs). |
| Mobile Kitchen | Vehicles with self-contained kitchen capability, which can cook and feed independent of other resources. Examples include the American Red Cross Serving King & Kitsap Counties' Mobile Feeding Unit and the Salvation Army Canteen. |

| Feeding Resources | Description |
|---|---|
| Fixed Feeding Sites | Food service delivered from a stationary location. A fixed feeding site may also be a permanent facility, such as a church, school. |
| Field Kitchens | Tractor trailer or tent kitchens capable of mass food production. Must be stationary to operate. Examples include Southern Baptist Disaster Relief Field Kitchens. |
| Disaster Supplemental Nutrition Assistance Program (D-SNAP) | D-SNAP is available once disaster survivors have returned to their homes, their utilities are restored and commercial food supply channels such as grocery stores have reopened. This is a USDA program administered by the state that requires USDA approval for operation in counties/parishes that have received a Presidential disaster declaration with individual assistance. |
| Bulk Distribution | Bulk distribution includes distribution of emergency relief items to meet urgent needs through sites established within the affected area(s). These sites (Points of Distribution) are used to distribute food, water, or other commodities in coordination with local, tribal, state, and federal governmental entities and voluntary agencies and other private-sector organizations. |

## E. Material Resource Management

Feeding will be coordinated by the Logistics Section of the King County ECC prior to an incident (or immediately after the onset of an unanticipated incident) and then continuously thereafter throughout the response and recovery when a Regional Shelter Management (IC) is not established. When established, the Multi-Agency Feeding Branch and Logistics Section of the Regional Shelter Management IC will coordinate resources for feeding operations until the Regional Shelter Management IC is demobilized. At which time, the resource management responsibility will transfer back to the King County ECC Logistics Section. The IC Multi-Agency Feeding Branch/ECC Logistics Section and voluntary agency liaisons will hold a resource meeting and/or conference call daily during the incident to identify, coordinate, prioritize and resource needs for feeding operations in King County.

The results of the initial assessments and incident specific feeding projections are shared during the Resource Meeting to assist with ongoing planning. Shortfalls in production, distribution or logistics for the defined feeding requirement are surfaced at this meeting in order to determine what county assets are available. If shortfalls exist, Action Request Forms will be forwarded to the State EOC by type and quantity for action, reviewed for feasibility and processed through the State EOC Logistics Section.

The following resources are currently available to support mass feeding. This table is current as of November 1, 2009 and will be updated as soon as feasible prior to an incident or immediately after the onset of an unanticipated incident.

| Material Resources | Definition | Local/County Resources | NGO Local Resources |
|---|---|---|---|
| **Commodities & Consumables** | | | |
| *Food* | | | |
| *MREs* | *Shelf-stable, self heating Meals Ready to Eat (MRE) designed for the military* | | |
| *Heater Meals* | *Self-Heating meals designed for evacuees and emergency responders* | | *150 (ARC)* |

| Material Resources | Definition | Local/County Resources | NGO Local Resources |
|---|---|---|---|
| *Snacks* | *Combinations of fruits, candy, nuts, energy bars and other items* | | *400 (ARC)* |
| *Commodities for Prepared Meals* | *Canned and frozen commodities for hot and cold meals* | | *300 Meals (ARC)* |
| *Water* | *Individual serving size* | | |
| **Non-Expendable Items** | | | |
| *Pre-identified POD sites and Staff* | | | |
| *Fixed Kitchen Sites and Staff* | | | *Mama Passarelli's (responders only, SL)* |
| *Mobile Kitchens and Staff* | | | *1 – Mobile Kitchen + staff (ARC)*<br>*1 – Mobile Kitchen/306 staff (SB)*<br>*1 – Mobile Kitchen + staff (SL)* |
| *Disaster Catering Contracts* | | | *2 (ARC)* |
| *Storage and Transportation for Distribution* | *Box Trucks, ERVs, Refrigerated and dry food storage trailers* | | *1 – ERV (ARC)* |
| *Warehouses* | *Dry and Cold Storage Facilities* | | *1 – Dry Storage Facility (ARC)* |
| *Insulated food and beverage containers (e.g., Cambro)* | | | *40 - Food Cambros (ARC)*<br>*10 – Drink Cambros (ARC)* |
| *Hand Truck, Forklift, Pallet Jack service contracts* | | | *1 – Pallet Jack (ARC)*<br>*3 – Hand Trucks (ARC)* |
| *Gray water tanks and serving contracts* | | | |
| *Trash collection and disposal contracts /capability* | | | |
| *Recycle considerations* | | | |
| *Potable water tanks and service contracts* | | | |
| *Sanitation facilities and service contracts* | | | *4 – Large (SL)* |
| *Generators* | | | *2 – 3KW Generators (SL)*<br>*1 - 6KW Propane Generator (SB)* |

American Red Cross Serving King & Kitsap Counties (ARC)
Southern Baptists Disaster Relief (SB)
Soup Ladies (SL)

At the beginning of an incident, each feeding partner agency will identify to the King County ECC or Regional Shelter Management IC Logistics Section their resupply points or PODs. Bottled water and shelf stable meals (if available) are delivered by vendors under contract with the county and/or state to designated locations. Once field kitchens are established, each feeding partner must inform the ICS Logistics Section of these sites and clearly differentiate the feeding commodities to be delivered to each site and expected operational time.

The Regional Shelter Management IC will compile and maintain a list of operating field kitchens and their locations. Upon receipt of a confirmed kitchen site, the county has up to 48-hours to coordinate the delivery of the prescribed logistic support package to each site. It is the responsibility of each feeding partner to annually update the logistic support package information. The logistic package may consist of port-a-lets, a dumpster, a forklift, a pallet jack, a dry trailer and a refrigerated trailer. The county also contracts with a vendor to refuel these sites, if needed, on a periodic basis. Upon request, the county will contract, or request from the state, additional food commodities needed for meal preparation and delivery. Any additional resources beyond those specifically addressed in this plan may be presented to King County OEM for approval and inclusion in an operational Attachment in this plan.

## F. Consolidation and Closing of Feeding Operations

Consider the following essential elements of information (EEI) prior to consolidation and/or closing of feeding operations.

| Elements of Information | |
|---|---|
| *Status of the infrastructure* | *Are the utilities restored? Are the roads accessible?* |
| *Grocery stores, restaurants and food banks* | *Are they open, supplied and is public transportation available?* |
| *Dwellings* | *Do a majority of the homes have operational cooking capability, potable water and sanitation systems?* |
| *D-SNAP* | *Have distribution sites been identified and approved by local officials?* |

Take the following steps to consolidate of routes and sites.

| Consolidation Checklist |
|---|
| *Inform the Long Term Recovery Unit of the disaster feeding activity status and the impending transition of disaster feeding responsibility.* |
| *Collaborate with state and local emergency management and NGOs to verify the emergency feeding needs of the community served have been met.* |
| *Coordinte with Public Information at the end of emergency feeding operations and post notices regarding the end of emergency feeding on mobile feeding vehicles and at feeding sites at least one full day before closing so clients and the general public are informed of the service delivery change. Notices to include infromation for locally available (open) stores, restaurants and food banks and referal information for food long term recovery support.* |
| *Request Public Information distribute public notifications through media and other resources at least 48-hours in advance of site consolidation and/or closing.* |
| *Continually notify the food suppliers and support vendors of reductions in commodities and servcies as the disaster needs decrease and pending closure to prepare for pick-up of equipment and termination of services (e.g. trash, sanitation services).* |

Take the following steps when closing a kitchen and/or feeding site.

| Closing Kitchen/Feeding Site Checklist |
|---|
| *Ensure all remaining products (USDA and non-USDA foods, non-comestibles, etc.) are sorted, inventoried, properly arranged on pallets and shrink-wrapped for shipment to King County Food Banks, Homeless Shelter,s and USDA designated sites, as necessary.* |

| Closing Kitchen/Feeding Site Checklist |
|---|
| *Ensure all equipment, materials and supplies are accounted for and returned, and the site and equipment are returned to a ready-state for future deployment or use.* |
| *Ensure all remaining supplies and equipment are loaded onto appropriate transport with an inventory list included. These items should include pallets, bread trays and milk crates.* |
| *Ensure all mobile feeding vehicles are cleaned and properly restocked with the required/standard items.* |
| *Ensure the kitchen (mobile or fixed) and all the equipment in it is clean and ready to be returned to the owner.* |
| *Ensure the grounds and any buildings that were used have been properly checked and all trash has been removed and discarded in the appropriate manner.* |
| *Schedule a time and date for a walk-through to release facility(ies).* |
| *Ensure arrangements are made to pick-up and return of trailers and leased equipment (forklifts, pallet trucks, dumpsters, etc.). Make sure this is not done until all trailers are loaded and ready for pick-up.* |
| *Obtain an inventory of necessary items for re-stocking and note any items still needed.* |

Designated feeding providers should follow these steps in closing down feeding operations and sharing their operational information with the Regional Shelter Management IC.

| Closing Feeding Operations Checklist |
|---|
| *Gather and compile all service delivery documents, data and records.* |
| *Collect and compile all daily feeding reports and any impact information, maps or other data used to design the service delivery plan.* |
| *Collect and forward any invoices, bills of lading, or other account information for payment to theRegional Shelter Management IC Finance and Administration Section. (King County must provide details needed for reimursement on Project Work sheet.)* |
| *Discuss with emergency management the transition of feeding to local entity or long-term recovery as needed.* |
| *Ensure any requests for acknowledgment for community agencies, businesses or partners are shared with NGOs and emergency management.* |
| *Provide a narrative of the feeding operation. Include high-level details of actions (e.g., total meals and snacks served, number of kitchens) and address any challenges or concerns for future improvements. Share with all partners for debrief and modification of feeding plan for future disaster responses.* |

## G. Reporting

In order to provide relevant and valuable information on a daily basis, field kitchens will communicate core information to the Regional Shelter Management IC. There are two types of information that kitchen sites may be asked to provide:

- Kitchen site information including support requirements. This report is submitted when a field kitchen is first established; follow-up may be required. Detailed information about the location of the kitchen, site requirements, and confirmation that ordered support equipment is in place are key elements of this report.

- Daily Feeding Report, including inventory summary and additional needs. This report is submitted on a daily basis and includes critical operational information important for planning and decision making. The report will include meals prepared and meals served, estimated inventory, outstanding support needs and projected feeding demand.

The Multi-Agency Feeding Report is a consolidated report listing each field kitchen and tracking the daily feeding information prepared from the Daily Feeding Reports by the Multi-Agency Feeding Branch of the Regional Shetlter Management IC. This report will serve as the primary communication mechanism between the Regional Shelter Management IC and Logistics Sections.

### H. Administration and Finance

Lead and support agencies will operate in accordance with the Regional Shelter Operations Incident Annex and agency standard operating guidelines.

Each agency, organization and local government is responsible for developing procedures, providing training and implementing procedures for continuously documenting disaster related response and damage costs.

## V. RESPONSIBILITIES

### A. General

The following table outlines the general responsibilities of the agencies involved in disaster feeding in King County.

| Agency/Organization | Action |
|---|---|
| Non-Governmental Organizations (NGOs) | Coordinate with the Regional Shelter Management IC Logistics Section any requests for government resource support. Report daily feeding numbers to Regional Shelter Management IC Multi-Agency Feeding Branch and/or Logistics Section, as appropriate. |
| Regional Shelter Management IC - Multi-Agency Feeding Branch | Receives and validates feeding partner requests to ensure each request is not a duplicate of one already submitted and/or ordered by an individual or other partner organization. Submit resource requirements to IC Logistics Section. Communicates to NGOs and partners regarding order status and delivery. |
| Regional Shelter Management IC - Logistics Section | Receives/processes requests for assistance from Multi-Agency Feeding Branch. Continually coordinates/collaborates with Logistics Section on the status of requests for assistance forwarded to the Regional Shelter Management IC. |
| King County ECC Logistics Section | Receive/process requests for assistance from IC Logistics Section. Continually coordinate/collaborate with State EOC Logistics Section on the status of requests for assistance forwarded to the State EOC. Inform PHSKC of all food and water preparation and distribution sites that are planned and established. |
| Regional Shelter Management IC - Planning Section | Monitors feeding activities, trends and disaster developments and anticipates potential gaps in feeding activities. Prepare and submit daily statistical reports. |
| King County ECC Logistics Section (Volunteers & Donations) | Utilizes the King County process for donated and unsolicited goods to address shortfalls and seek offers of food and related goods and services. |

**B. Primary Agency**

**King County Office of Emergency Management will**:

- Coordinate regional shelter operations

**C. Support Agencies**

**American Red Cross Serving King & Kitsap Counties will**:

- Provide and/or coordinate staffing to the Regional Shelter Management IC - Multi-Agency Feeding Branch. Coordinate shelter feeding requests and multi-agency feeding operations through their Disaster Relief HQ. As the lead for the Regional Shelter Management IC - Multi-Agency Feeding Branch, ensure the Branch:
  - Produces the Multi-Agency Feeding Report each day for the duration of feeding operations by collating the Daily Feeding Reports from designated kitchens and provide said report to Regional Shelter Management IC - Planning and Logistics Sections.
  - Records, collates and processes daily kitchen requests for resources with the Regional Shelter Management IC - Logistics Section.
- Coordinate feeding operations for and in collaboration with King County during incidents requiring regional shelter operations.
- Provide staff, supplies, and food service as disaster conditions dictate and resources allow.

**Public Health-Seattle & King County will**:

- Conduct food safety inspection of food and water supplies, food preparation, serving and distribution sites and related operations.
- Provide personnel to ensure that all health aspects of storing and distribution of food and water resources are complied with.
- Coordinate and provide environmental health services. as deemed appropriate.

**Salvation Army will**:

- Provide staff, supplies, and food service as disaster conditions dictate and resources allow.
- If working in cooperation with the ARC they will coordinate kitchen and resource needs through the ARC Disaster Relief HQ to the ARC. Liaison in the Regional Shelter Management ICS.

**Southern Baptist Disaster Relief will**:

- Provide staff, supplies, and food service as disaster conditions dictate and resources allow.

- If working in coordination with the ARC kitchen and resource needs will be through the ARC Disaster Relief HQ.

## VI. REFERENCES

ESF-8 Public Health & Medical Services, King County Comprehensive Emergency Management Plan

ESF-11 Agriculture & Natural Resources, King County Comprehensive Emergency Management Plan

## ATTACHMENTS

**1 – U.S. Department of Agriculture Programs**
**2 – Phases of Feeding Operations**
**3 – Capability and Capacity Worksheets**
**4 – Steps in the Feeding Assessment**
**5 – ARC Sample Kitchen Set-up**
**6 - Reports**
**7 – Stafford Act, Section 403B**
**8 – Point of Distribution (POD)**
**9 – Feeding Resources Typing**
**10 – Glossary of Feeding Terms**

**Attachment 1**
**Draft per USDA at time of publishing**
**U.S. Department of Agriculture Programs**

***USDA Foods***

U.S. Department of Agriculture (USDA) can provide foods for incorporation into menus for feeding as well as infant formula and infant foods. The American Red Cross, Salvation Army and other disaster relief organizations equipped to prepare or serve meals to people displaced by disasters are eligible to receive USDA-donated foods free of charge.

The Food and Nutrition Service (FNS), formerly the Food and Consumer Service, administers the 15 nutrition assistance programs of the USDA. FNS provides children and impoverished Americans better access to food and a more healthful diet through its programs and nutrition education. FNS may legally respond to:

- **Presidentially Declared Disasters:** FNS is designated to provide food assistance under Emergency Support Function 11 (ESF-11) as outlined in the National Response Framework. Disaster relief organizations may be eligible to receive commodities for congregate meal service or household distribution in accordance with food distribution program regulations 7 CFR 250.43 and 250.44 respectively. As outlined in federal regulations, State Distributing Agency (Washington State Office of Superintendent of Public Instruction) has the authority to release commodities for congregate feeding for as long as they are needed and FNS guarantees replacement of commodities used. Release of household size commodities for direct distribution to families requires FNS approval.

- **Situations of Distress:** FNS uses the term "situation of distress" when a natural catastrophe or other incident has not been declared by the President to be a disaster but which, in the judgment of the State Distributing Agency or FNS, warrants the use of USDA donated foods for congregate feeding or household distribution. The situation may be due to acts of nature or intentional acts, in the judgment of FNS may warrant the use of donated foods. FNS has the authority to release donated foods for both congregate feeding and household distribution. FNS will replace commodities from State Distributing Agency and local recipient agency inventories used to assist in situations of distress, to the extent funds for replacement are available.

The specific FNS program from which commodities are taken will depend on the needs of the disaster organization, the scale of the disaster, accessible inventories, and available funding. If available, State Distributing Agencies should try to use commodities provided through the National School Lunch Program whenever possible. These are easier for disaster feeding organizations to use in preparing congregate meals, and they are easier for FNS to replace or reimburse.

Local inventories are usually the first sources disaster organizations turn to when they want donations of USDA foods. Inventories from school kitchens and school district warehouses located close to the emergency are most often used for congregate feeding. State Inventories can be utilized when sufficient food is not available locally. If the State Distributing Agency does not have adequate inventories, it may request USDA foods from other States' inventories. When two states in the same FNS Region are engaged in the disaster, the Regional Office acts as the liaison between the states. If food must be transported between states in different FNS Regions, then the FNS Regional Office in which the emergency occurred, or FNS Headquarters, may act as liaison.

Federal (USDA) inventories of foods placed in Federal storage for later distribution may be immediately available for disaster feeding depending on inventory levels and program needs. The federal government may also make emergency procurements of product when existing commodity inventories at the local, state, or federal level are inadequate.

Emergency purchases are most often made when infant formula or infant foods are needed. FNS authorizes the Agricultural Marketing Service or the Farm Service Agency (the two agencies responsible for procuring all of FNS' commodities on an ongoing basis) to make disaster food purchases.

The initial application by a disaster relief organization for the receipt and use of USDA foods for congregate feeding is submitted to the State Distributing Agency in writing if circumstances permit or, if not, confirmed in writing in a timely manner. Applications must, to the extent possible, include the following:

- A description of the disaster or situation of distress.
- The number of people requiring meals.
- The period of time for which meals are being requested.
- The quantity and types of food needed.

Additional guidance on use of USDA foods in disasters can be found at http://www.fns.usda.gov/fdd/programs/fd-disasters/CommodityDisasterManual.pdf.

***Disaster Supplemental Nutrition Program***

Supplemental Nutrition Assistance Program (SNAP) is the new name of the Federal Food Stamp Program as of October 1, 2008. The new name, mandated by Congress, reflects changes the U.S. Department of Agriculture made to meet the needs of its clients, including a focus on nutrition and improvements in accessibility. SNAP is the federal name for the program. Washington State uses a different name called the Basic Food Program.

***Disaster Food Stamp Program (D-SNAP)***

Federal D-SNAP policy *did not* change because of the name change.

- D-SNAP is still the primary nutrition assistance response in the disaster recovery phase. D-SNAP is available once disaster survivors return to their homes, their utilities are restored and commercial food supply channels such as grocery stores have reopened. States operate D-SNAP as the final disaster nutrition intervention, typically after the immediate post-disaster nutrition assistance from shelter feeding, mobile kitchens or distribution of meals-ready-to-eat.
- State Social or Human Services Agencies deliver the D-SNAP. Some States may use a name other than D-SNAP for their program. States write their own D-SNAP plans, in accordance with D-SNAP Guidance.

- D-SNAP requires federal partnership for effective delivery. FNS requires states receive a Presidential Major Disaster Declaration with Individual Assistance in order to authorize deployment of D-SNAP for affected areas.

States may continue to coordinate services by setting up D-SNAP application sites at FEMA Disaster Recovery Centers. For more information about SNAP and D-SNAP, please visit: http://www.fns.usda.gov/snap/.

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**Attachment 2**
**Phases of Feeding Operations**

## Immediate Feeding Activities

Local non-governmental organizations respond to the incident with local resources available and contract catering. Initial priority of feeding resources is to shelters, if open. Normally the State Distributing Agency for USDA foods releases USDA foods available locally to NGOs for use in disaster feeding upon completion of an agreement. During this immediate phase there is generally only limited mobile feeding, principally of snacks and shelf stable meals (if available). It is King County's goal in an anticipated incident (like flooding) is to establish Points of Distribution (POD) within 24 hours. In an unanticipated incident, the establishment of PODs may take 48 – 96 hours. The initial priority for PODs is bottled water followed by shelf stable meals (if available).

## Sustained Feeding Activities

The initial priority for this phase is to establish a feeding infrastructure using non-governmental resources arriving from outside the county, region or state. The production backbone of this infrastructure consists of field kitchens provided by the American Red Cross (ARC), and Southern Baptist Disaster Relief, The Salvation Army field kitchens and others such as the Soup Ladies. During the immediate care phase, projected kitchen sites are inspected to verify they have not been affected by the disaster and are suitable for use. Once the kitchen sites are confirmed, the locations and contact information are communicated to the Regional Shelter Management IC - Multi-Agency Feeding Branch, King County ECC and State EOC ESF-6.

Field kitchens may or may not arrive with foodstuffs. In those cases when they do not arrive with foodstuffs, they may not be able to begin preparing meals immediately. Prepared meals may be fed directly at the kitchen site or distributed through vehicles as part of a plan coordinated at the local level. Mobile kitchens like the Salvation Army canteens and ARC Mobile Feeding Unit (MFU) may be deployed to fixed sites to cook and serve meals. Additionally, these mobile kitchens can be used to distribute meals prepared at field kitchen sites, or to distribute shelf stable meals (if available).

## Long-Term Feeding Activities

The King County ECC, Infrastructure Branch coordinates closely with private sector food retail establishments to remove any obstacles to the swift reopening of grocery stores and other private sector food businesses. Once grocery stores are reopened and operational, PODs and those portions of the feeding infrastructure in the vicinity of these businesses generally are either closed down or transition to other areas. This transition of disaster feeding resources is performed after coordination with local emergency management and with proper notice to the affected public. Grocery chains assist the King County ECC in this process by identifying the locations of reopened stores.

To assist survivors in utilizing the capacity of the private sector distribution system, King County will request, through the state, approval to operate the Disaster Supplemental Nutrition Assistance Program (D-SNAP) when the county is notified it is included in a Presidential Declaration with individual assistance. The county and/or state will open D-SNAP sites in targeted communities when the following three criteria have been met:

1. Infrastructure and therefore cooking capacity is available to a significant portion of the individual homes in the community.

2. Grocery stores in the community are open and operational.
.
3. D-SNAP distribution sites in the community have been identified and approved by local officials.

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**Attachment 3**
**Capability and Capacity Worksheets**

| Voluntary Organizations | | | |
|---|---|---|---|
| ***Organization / Agency*** | ***Agreed Commitment*** | | |
| | ***Production*** | ***Distribution*** | ***Logistics*** |
| Adventist Community Service | | | |
| American Red Cross | | | |
| Feeding America | | | |
| Local Food Banks | | | |
| Southern Baptist Disaster Relief | | | |
| Convoy of Hope | | | |
| The Salvation Army | | | |
| Soup Ladies | | | |

| Private Sector | | | |
|---|---|---|---|
| ***Organization / Agency*** | ***Agreed Commitment*** | | |
| | ***Production*** | ***Distribution*** | ***Logistics*** |
| SYSCO | | | |
| US Foods | | | |
| United Groceries | | | |
| Food Service America | | | |
| General Food Service | | | |

| Totals | | | |
|---|---|---|---|
| ***Totals*** | ***Agreed Commitment*** | | |
| | ***Production*** | ***Distribution*** | ***Logistics*** |
| Total Capacity | | | |
| Total Requirement | | | |
| Total GAP | | | |

| Government Agencies / Elements | | | |
|---|---|---|---|
| ***Organization / Agency*** | ***Agreed Commitment*** | | |
| | ***Production*** | ***Distribution*** | ***Logistics*** |
| Reg Shelter Mgmt IC-Logistics | | | |
| State Logistics | | | |
| State ESF-6 | | | |
| State ESF-11 | | | |

| Federal Support Based on GAP | | | |
|---|---|---|---|
| ***Organization / Agency*** | ***Agreed Commitment*** | | |
| | ***Production*** | ***Distribution*** | ***Logistics*** |
| EMAC | | | |
| FEMA Region X ESF-6 | | | |
| FEMA Region X Logistics | | | |
| FEMA Acquisitions | | | |

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**Attachment 4**
**Steps in the Feeding Assessment**

1. Define the scale of the disaster. The outcome of this step is the anticipated number of meals/day and anticipated number of days required in the affected areas of King County to meet the needs of those affected by the incident.

   The scale of the disaster is a function of the geographical extent of the disaster, the population within the defined area, and the percentage of that population without power as well as individuals who are isolated as a result of the disaster. These three factors are either readily available or can be easily estimated by the time the King County ECC or Regional Shelter Management Logistics Section and voluntary agency liaisons meet. The American Red Cross has its own method of estimating meal requirements for a given disaster based on experience and historical information. This and other methods are very basic but are the best available. Participants in the initial resource meeting/conference call must make a best guess estimate of their daily feeding requirement that is agreeable to everyone. On subsequent conference calls, as the scope of the disaster changes or reports from the field are validated this estimate may change. But based on information available at the time, the agreed upon meal count number will be the basis for deployment of resources for the incident.

2. Determine resources required to meet the defined need. Estimate the production, distribution and logistical requirements to meet the defined need. The outcome of this step will determine if the disaster feeding needs are beyond the locally available recourses.

   Support for disaster feeding can be equated to a three legged stool: production, distribution and logistics. If any one of the legs is not adequately constructed then the plan will fail. Production will be some combination of shelf stable meals, field kitchens, mobile kitchens and catered meals. Distribution will be some combination of vehicles, fixed feeding sites, points of distribution or direct feeding at the kitchens. Logistics is the sum of the forklifts, fuel and trailers required to support this feeding infrastructure.

3. Determine resources available from NGOs. The NGOs must be prepared to say with approximately but sufficient detail, the level of production, distribution and logistical resources they can commit to the disaster, at the time. The outcome of this step will identify the available resources and quantify the shortfalls in feeding needs.

   The NGOs know how many kitchens, canteens, ERVs and trailers they have available to commit to the operation. They also have the subject matter expertise to say they are ability to produce X number of meals and distribute Y number of meals with the resources then available. They can also specify what logistical assistance will be required to support their operation. The sum of these inputs provides the available production, distribution and logistical capacities of the NGOs.

4. Identify any shortfalls. The shortfalls must be specific and quantifiable so action can be taken to meet the shortfalls. The outcome of this step will be the production of request for additional resources needed to fulfill the identified shortfalls.

   Depending on the scope of the disaster, the capacity of the NGOs could exceed the defined requirements for production and distribution. However, if the NGOs cannot meet the identified need,



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then the Regional Shelter Management IC/King County ECC should ask a series of questions to identify the shortfalls:

1. How many meals are they short on the production side/distribution side?

2. What are the necessary materials or infrastructure resources needed to fill the gaps?

Once the shortfalls are identified by type and quantity, the Regional Shelter Management IC/King County ECC is responsible for coordinating the procurement of these assets.

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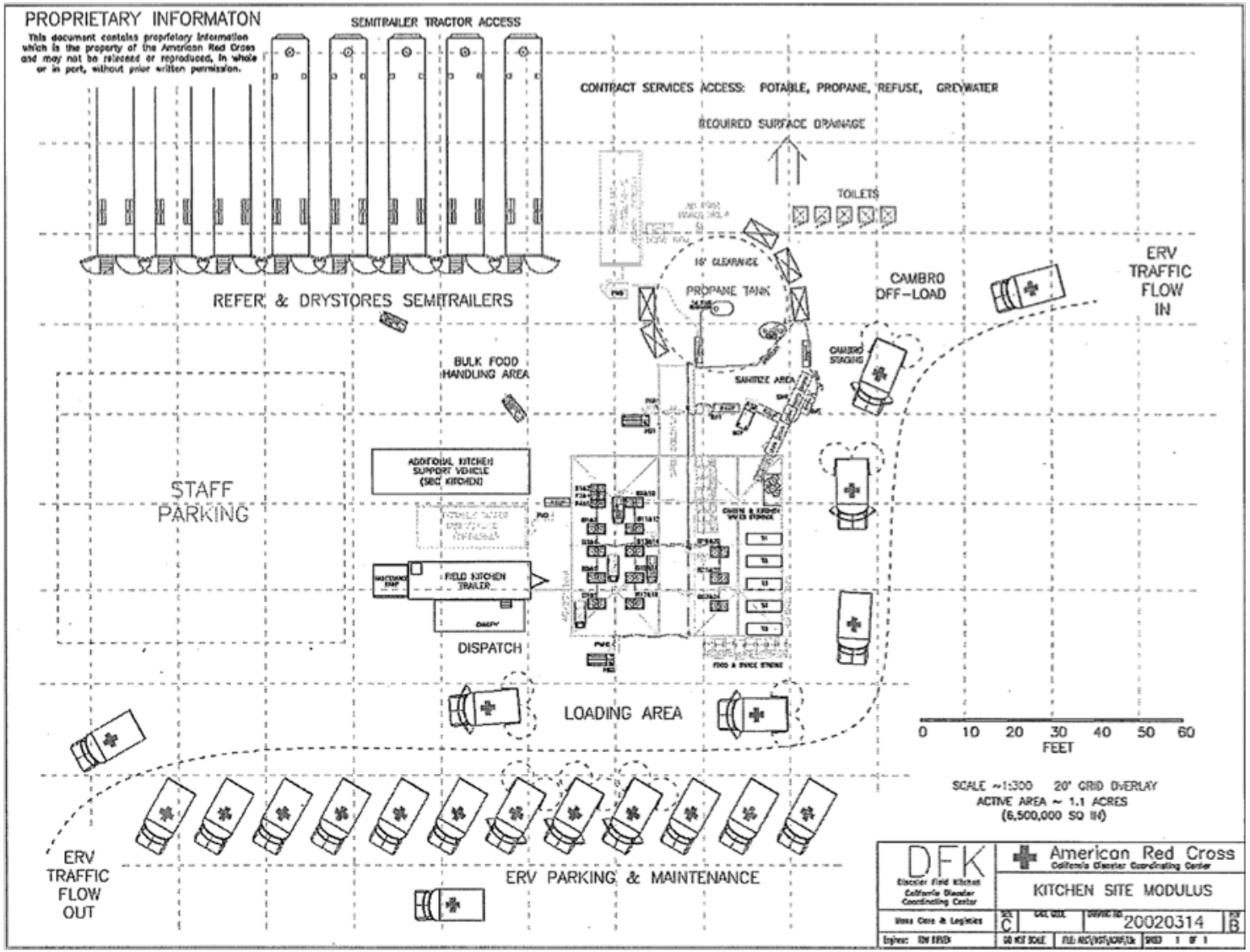
**Attachment 5**
**ARC Sample Kitchen Set-Up**



**Attachment 6**
**Reports**

| **Initial Field Kitchen Stand-up Report** | | |
|---|---|---|
| Kitchen: | Status: | Date: |
| Address: | | |
| Contact Name: | Contact Phone Number: | |
| NIMS Kitchen Type: | Kitchen Capacity (# of Meals/Day): | |
| ***Logistics Information*** | | |
| Kitchen Site: | | |
| How much space is available to store supplies at the kitchen site? Describe the ability to fit drop trailers and reefers, etc. | | |
| Support Order: | | |
| Has a Kitchen Support Trailer been requested? Date: | | |
| Are additional Support Supplies needed? Describe below: | | |
| Does the Field Kitchen need regular deliveries of Water, Ice and/or Fuel? If so, please describe in detail. | | |

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| Daily Field Kitchen Report | | | |
|---|---|---|---|
| Kitchen: | Status: | | Date: |
| Meals Served (# Meals): | | Meals In Stock (# Meals): | |
| Food In Stock (#Shelf Stable Meals): | | Projected Daily Usage: | |
| Food In Stock (#Snacks): | | Projected Daily Usage: | |
| Food In Stock (#Prepared Meals): | | Projected Daily Usage: | |
| Food In Stock (#Water): | | Projected Daily Usage: | |
| Has a Food Order been Placed? | Y/N: | | Date/Time: |
| Were Supplies Ordered? | Y/N: | | Date/Time: |
| Have you received your complete supply order? | | Y/N: | |
| If No, Which additional support supplies are needed? | | | |
| ***Planning Information***<br>*(To be completed as the situation on the ground changes)* | | | |
| Describe in general terms the feeding need (include description of available resources in the community). | | | |
| What is the best projection for feeding needs 5 days out (will feeding need increase or decrease and reason why)? | | | |
| What is the estimated date this kitchen is projected to close? Have there been instructions from the community feeding is no longer needed? | | | |

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**Attachment 7**
**Stafford Act, Section 403B**

**Sec. 403. Essential Assistance (42 U.S.C. 5170b)***
(a) In general - Federal agencies may on the direction of the President, provide assistance essential to meeting immediate threats to life and property resulting from a major disaster, as follows:

(1) Federal resources, generally - Utilizing, lending, or donating to State and local governments Federal equipment, supplies, facilities, personnel, and other resources, other than the extension of credit, for use or distribution by such governments in accordance with the purposes of this Act.

(2) Medicine, durable medical equipment, food, and other consumables - Distributing or rendering through State and local governments, the American National Red Cross, The Salvation Army, the Mennonite Disaster Service, and other relief and disaster assistance organizations medicine, durable medical equipment, food, and other consumable supplies, and other services and assistance to disaster survivors..

(3) Work and services to save lives and protect property - Performing on public or private lands or waters any work or services essential to saving lives and protecting and preserving property or public health and safety, including –

(A) debris removal;

(B) search and rescue, emergency medical care, emergency care, emergency shelter, and provision of food, water, medicine, durable medical equipment, and other essential needs, including movement of supplies or persons;

(C) clearance of roads and construction of temporary bridges necessary to the performance of emergency tasks and essential community services;

(D) provision of temporary facilities for schools and other essential community services;

(E) demolition of unsafe structures which endanger the public;

(F) warning of further risks and hazards;

(G) dissemination of public information and assistance regarding health and safety measures;

(H) provision of technical advice to State and local governments on disaster management and control;

(I) reduction of immediate threats to life, property, and public health and safety; and

(J) provision of rescue, care, shelter, and essential needs –

(i) to individuals with household pets and service animals; and
(ii) to such pets and animals.

(4) Contributions - Making contributions to State or local governments or owners or operators of private nonprofit facilities for the purpose of carrying out the provisions of this subsection.

(b) Federal share - The Federal share of assistance under this section shall be not less than 75 percent of the eligible cost of such assistance.

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**Attachment 8**
**Point of Distribution (POD)**
**(Source: USACE)**

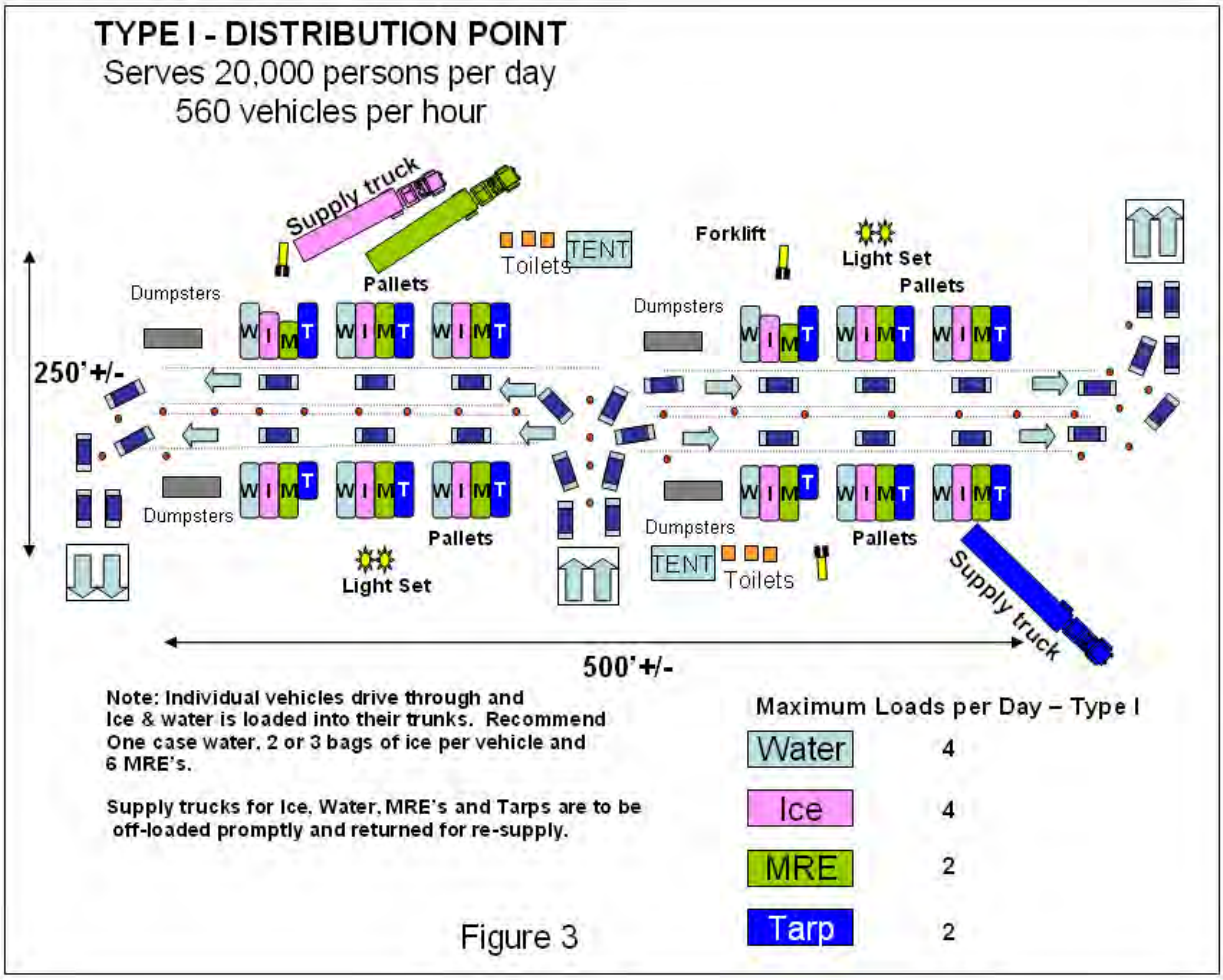


Figure 3

**Type I Distribution Point**
**Resources Required**

| Type I Distribution Point | | | | | |
|---|---|---|---|---|---|
| Manpower | | | | Equipment | |
| | Type | Day | Night | Type | Number |
| Local Responsibility | Manager | 1 | 0 | Forklifts | 3 |
| | Team Leader | 2 | 1 | Pallet Jacks | 3 |
| | Forklift Operator | 2 | 3 | Power Light Sets | 2 |
| | Labor | 57 | 4 | Toilets | 6 |
| | Loading Point 36 | | | Tents | 2 |
| | Back-up Loading PT 18 | | | Dumpsters | 4 |
| | Pallet Jacks Labor 3 | | | Traffic Cones | 30 |
| | Totals | 70 | 9 | Two-way radios | 4 |
| Others | Law Enforcement | 4 | 1 | | |
| | Community Rel. | 4 | 0 | | |
| Grand Total | | 78 | 10 | | |

Figure 4

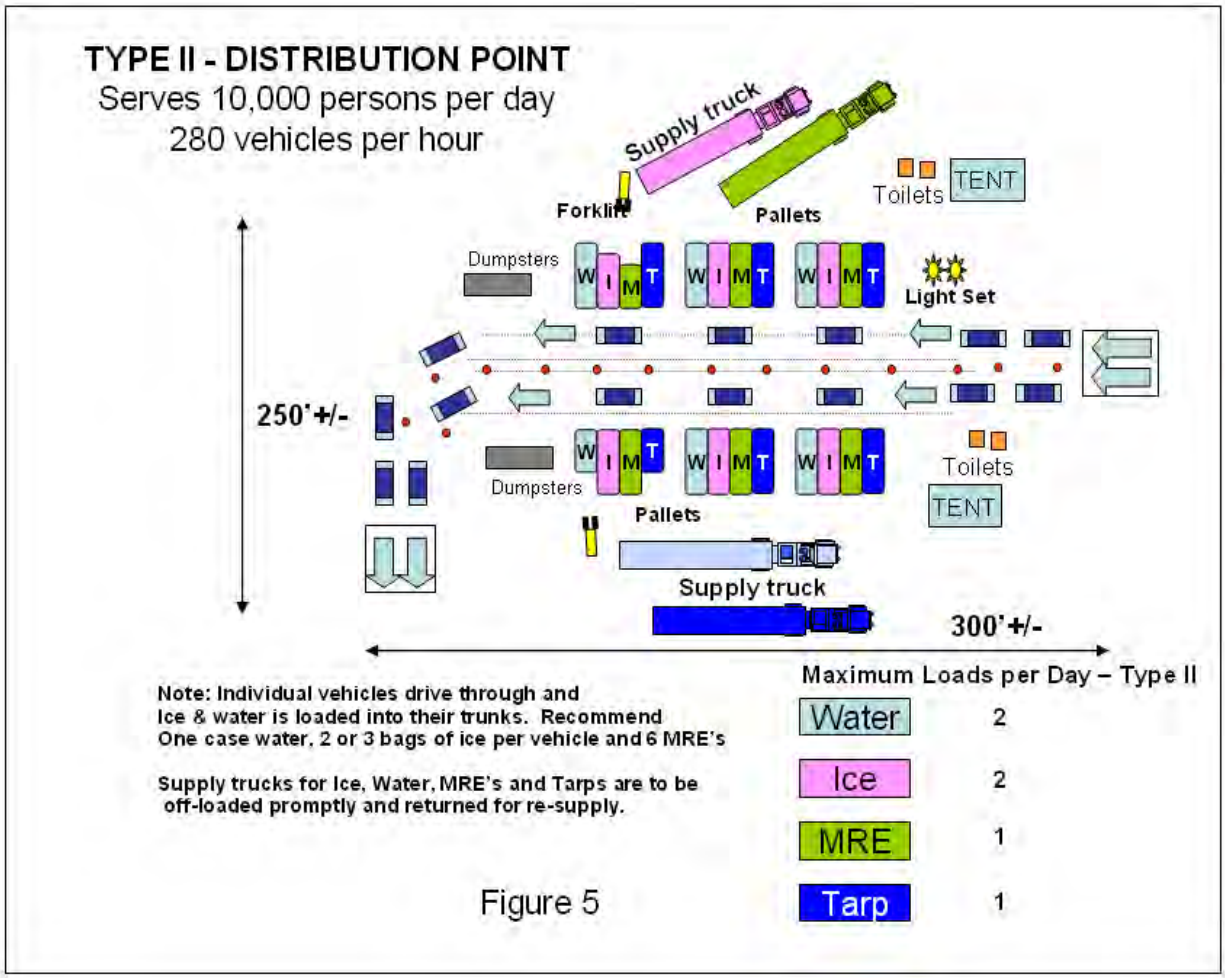


Figure 5

**Type II Distribution Point**
**Resources Required**

| Type II Distribution Point | | | | | |
|---|---|---|---|---|---|
| Manpower | | | | Equipment | |
| | Type | Day | Night | Type | Number |
| Local Responsibility | Team Leader | 1 | 0 | Forklifts | 2 |
| | Forklift Operator | 1 | 2 | Pallet Jacks | 2 |
| | Labor | 28 | 3 | Power Light Sets | 1 |
| | Loading PT 18 | | | Toilets | 4 |
| | Back-up Loading PT 9 | | | Tents | 2 |
| | Pallet Jacks Labor 1 | | | Dumpsters | 2 |
| | Totals | 30 | 5 | Traffic Cones | 15 |
| Others | Law Enforcement | 2 | 1 | Two-way radios | 0 |
| | Community Rel. | 2 | 0 | | |
| Grand Total | | 34 | 6 | | |

Figure 6

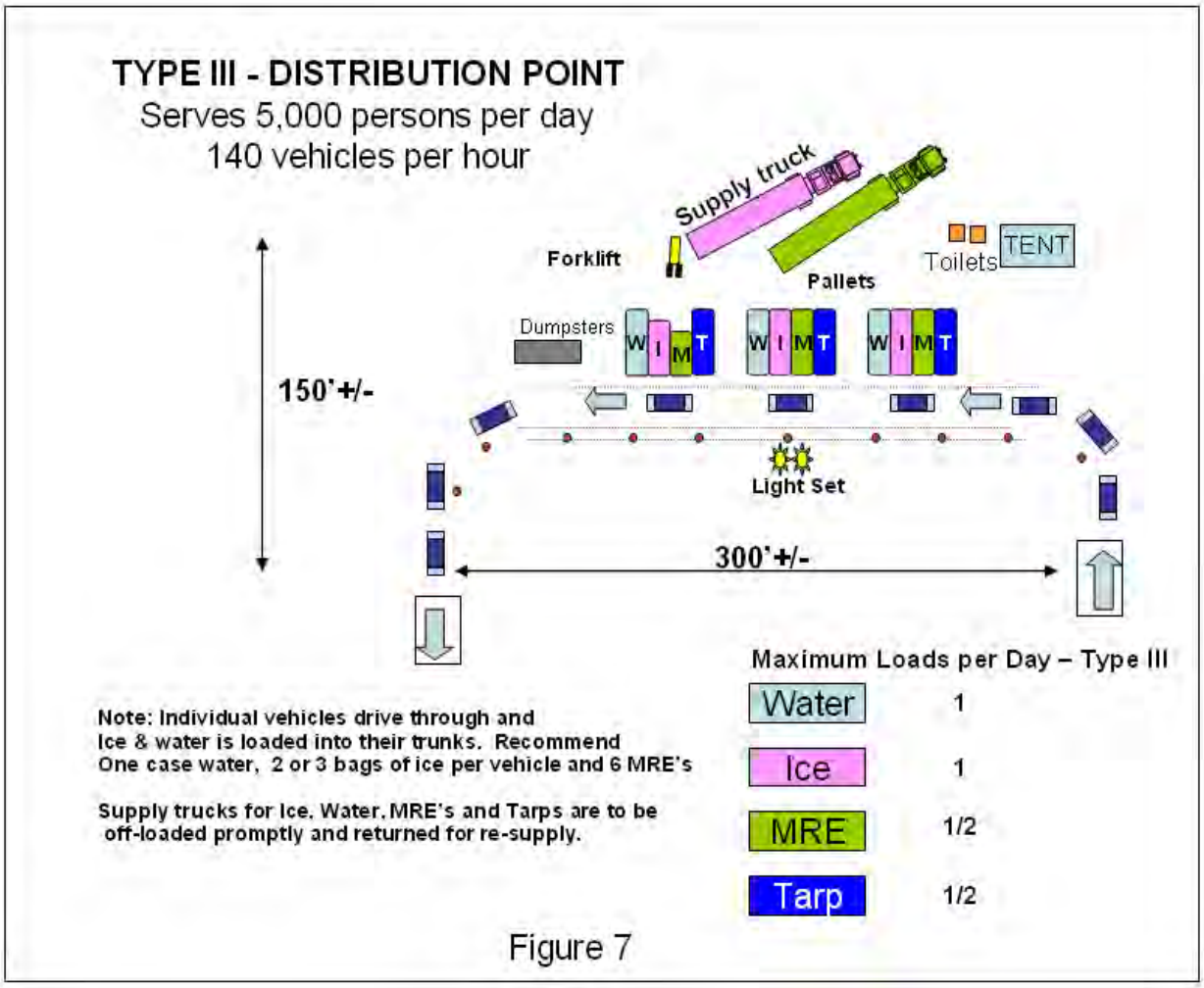


Figure 7

**Type III Distribution Point**
**Resources Required**

| Type III Distribution Point | | | | | | |
|---|---|---|---|---|---|---|
| Manpower | | | | | Equipment | |
| | Type | | Day | Night | Type | Number |
| Local Responsibility | Team Leader | | 1 | 0 | Forklifts | 1 |
| | Forklift Operator | | 1 | 1 | Pallet Jacks | 1 |
| | Labor | | 14 | 2 | Power Light Sets | 1 |
| | Loading PT | 9 | | | Toilets | 2 |
| | Back-up Loading PT | 4 | | | Tents | 1 |
| | Pallet Jacks Labor | 1 | | | Dumpsters | 1 |
| | Totals | | 16 | 3 | Traffic Cones | 10 |
| Others | Law Enforcement | | 2 | 1 | Two-way radios | 0 |
| | Community Rel. | | 1 | 0 | | |
| Grand Total | | | 19 | 4 | | |

Figure 8

# Attachment 9
## Feeding Resources Typing

(NOTE: NIMS Resource Typing not yet vetted, once vetted there may be some modifications to these typing charts.)

| **RESOURCE:** | ***Field Kitchen*** | | | | | |
|---|---|---|---|---|---|---|
| **CATEGORY:** | Feeding | | | **KIND:** | Team | |
| **MINIMUM CAPABILITIES:** | | **TYPE I** | **TYPE II** | **TYPE III** | **TYPE IV** | **OTHER** |
| **COMPONENT** | **METRIC** | | | | | |
| Personnel | Composition | 1 Manager<br>40 Workers | 1 Manager<br>30 Workers | 1 Manager<br>20 Workers | 1 Manager<br>15 Workers | |
| Personnel | Minimum Certification | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Unit Leader Food Safety Certified | |
| Team | Daily Meal Capability<br>See Note 1 | 30,000 | 20,000 | 10,000 | 5,000 | |
| Equipment | Fixed Support Equipment | 3 - 48 foot Dry Box Trailers<br>3 - 28 foot Refrigerated Trailers<br>1 – 28 foot Freezer Trailer<br>2 Outdoor Forklift | Same as TYPE III | 2 - 48 foot Dry Box Trailers<br>2 28 foot Refrigerated Trailers<br>2 Type Outdoor Forklift | 1 48 foot Dry Box Trailer<br>1 28 foot Refrigerated Trailer<br>1 Type Outdoor Forklift | |
| Supply | Electrical Power | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Land line or generated | |
| Supply | Potable Water Access | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Public water source<br>Or<br>Minimum 5000 gallon tanker with appropriate fittings and pump | |
| Supply | Bagged, potable ice | Minimum 8 pallets daily | Same as TYPE IV | Same as TYPE IV | Minimum 4 pallets daily | |

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| **RESOURCE:** | ***Field Kitchen*** | | | | | |
|---|---|---|---|---|---|---|
| **CATEGORY:** | Feeding | | | **KIND:** | Team | |
| **MINIMUM CAPABILITIES:** | | **TYPE I** | **TYPE II** | **TYPE III** | **TYPE IV** | **OTHER** |
| **COMPONENT** | **METRIC** | | | | | |
| Supply | Fuel | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Gas and/ or Diesel Delivery<br>Ability to fill on site / drop tank. | |
| Supply | Propane | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Delivery, ability to fill on site/drop 250 Gallon Tank | |
| Supply | Service Resource | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Waste Water catch and Removal (Grey/Black) | |
| Equipment | Dumpster, 40 cubic yard<br>See Note 2 | 2 | Same as TYPE IV | Same as TYPE IV | 1 | |
| Equipment | Insulated Food Containers (Cambro) | 800 | 600 | 400 | 200 | |
| Supply | Daily Quantity<br>See Note 3 | 30,000 | 20,000 | 10,000 | 5,000 | |
| **COMMENTS:** | Establishment of a Field Kitchen is based upon assumption that unit will be needed for approximately two weeks. Resource is not recommended for short term service delivery.<br><br>**Note 1:** Unit prepares food for direct service delivery and/or can serve as hub and spoke distribution with food service delivery units. Food service capabilities are based upon serving sizes of 8oz entrée, 6 oz vegetable, and 6oz fruit. Prepare minimum of two meals a day, Lunch/Dinner<br>**Note 2:** Drop Dumpster and service established.<br>**Note 3:** Daily quantity of each item, consisting of cups picnic packs, and 3-compartment clamshells. | | | | | |

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| **RESOURCE:** ***Mobile Kitchen*** | | | | | | |
|---|---|---|---|---|---|---|
| **CATEGORY:** | Feeding | | | **KIND:** | Team | |
| **MINIMUM CAPABILITIES:** | | **TYPE I** | **TYPE II** | **TYPE III** | **TYPE IV** | **OTHER** |
| **COMPONENT** | **METRIC** | | | | | |
| Personnel | Composition | 1 Driver / 2 workers | 1 Driver / 1 worker | 1 Driver / 1 worker | 1 Driver / 1 worker | |
| Personnel | Minimum Certification | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Unit Leader Food Safety Certified | |
| Team | Capability | Up to 1,500 Meals/Day | Up to 1,000 Meals/Day | Up to 750 Meals/Day | Up to 500 Meals/Day | |
| Team | Capability | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Unit has function to prepare food or deliver pre-prepared food in a mobile or temporary fixed-site capacity. | |
| Team | Operational Hours | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Prepare minimum of two meals a day Lunch/Dinner Can operate for 1 day in the field without re-supply. | |
| Logistics | Fixed Support Equipment | 14 – 16 ft Cargo Trailer | 1 14ft Cargo Trailer | Same as TYPE IV | 1 12ft Cargo Trailer | |

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| **RESOURCE:** ***Mobile Kitchen*** | | | | | | |
|---|---|---|---|---|---|---|
| **CATEGORY:** | Feeding | | | **KIND:** | Team | |
| **MINIMUM CAPABILITIES:** | | **TYPE I** | **TYPE II** | **TYPE III** | **TYPE IV** | **OTHER** |
| **COMPONENT** | **METRIC** | | | | | |
| Logistics | Service Resource | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Potable Water Accessibility to public water source at staging area. | |
| Logistics | Service Resource | Same as TYPE II | Ice (bagged, potable, in coolers) minimum ½ pallet daily at staging area. | Same as TYPE IV | Ice (bagged, potable, in coolers) minimum ¼ pallet daily at staging area. | |
| Logistics | Service Resource | Gas and/ or Diesel available at a service station or staging area. | Gas available at a service station or staging area. | Gas available at a service station or staging area. | Gas available at a service station or staging area. | |
| Logistics | Service Resource | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Propane available at a service station or staging | |
| Logistics | Service Resource | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Waste Water Removal (Grey/Black) at a station or staging area. | |
| Logistics | Service Resource | Same as TYPE IV | Same as TYPE IV | Same as TYPE IV | Dumpster at a staging area | |
| Logistics | Equipment | 30 Insulated Food Containers (Cambro) | 20 Insulated Food Containers (Cambro) | 15 Insulated Food Containers (Cambro) | 10 Insulated Food Containers (Cambro) | |

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| **RESOURCE:** ***Mobile Kitchen*** | | | | | | |
|---|---|---|---|---|---|---|
| **CATEGORY:** | Feeding | | | **KIND:** | Team | |
| **MINIMUM CAPABILITIES:** | | **TYPE I** | **TYPE II** | **TYPE III** | **TYPE IV** | **OTHER** |
| **COMPONENT** | **METRIC** | | | | | |
| Logistics | Equipment | 3000 qty daily cups<br>2000 qty daily Picnic Packs<br>2000 qty daily 3-Compart-ment Clamshells | 2000 qty daily cups<br>1500 qty daily Picnic Packs<br>1500 qty daily 3-Com-partment Clamshells | 1500 qty daily cups<br>1000 qty daily Picnic Pack<br>1000 qty daily 3-Compartment Clamshells | 1000 qty daily cups<br>750 qty daily Picnic Packs<br>750 qty daily 3-Compartment Clamshells | |
| Comments | Food service capabilities are based upon serving sizes of 8oz entrée, 6 oz vegetable, and 6oz fruit. | | | | | |

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**Attachment 10**
**Glossary of Feeding Terms**

**Mobile Feeding:** Mobile Feeding is provided through the use of specialized delivery vehicles, such as Red Cross Emergency Response Vehicles (ERVs) or the Salvation Army canteens, although vans, trucks, and other vehicles may also be used. In mobile feeding, vehicles are assigned routes through disaster impacted areas and, as they drive through these areas, food is distributed. There are several advantages to mobile feeding, including:

- Provides a quick response.
- Enables high saturation of affected areas.
- Enables disaster workers to respond to otherwise isolated or sparsely populated areas.
- Allows feeding responders to service multiple locations with limited resources.

**Fixed Feeding:** Fixed feeding describes food service delivered from a stationary location. A fixed feeding site may also be a permanent facility, such as a church, school, which has been designated for disaster work. Mobile feeding units may also be used as fixed feeding sites; for example a Salvation Army canteen or ARC ERV may be parked in a stationary location and other services, such as a first aid station, portable toilets, or a distribution point for bulk goods, such as water and ice, may be established around the feeding unit. Fixed Feeding sites may be used when:

- A central location is desirable.
- Greater service capacity is needed than a single unit can provide.
- Those impacted by a disaster are congregated in an area, or need to be congregated.
- Measures are required to control movement of people and/or vehicles.

**Hydration Service:** Hydration Service is a specialized form of food service established to help keep people healthy who are within a disaster area. Hydration Service follows strict guidelines about what can be served and focuses primarily on providing beverages which replenish electrolytes (minerals such as potassium), enhance energy and re-hydrate the body. Hydration services may also provide limited food items, such as energy bars and candy, which are pre-packaged and provide a quick energy boost. Hydration Service may be provided when:

- Heat stress is a danger.
- Consumption of prepared meals is not safe, such as when airborne contaminants are present.
- A local health department has restricted food service.
- Site security prohibits food service.

**Hub and Spoke:** Hub and Spoke system is used to prepare large quantities of food. The hub is typically a Field Kitchen, such as those provided by Southern Baptist Disaster Relief and ARC capable of cooking thousands of meals at a time. Infrastructure to support the kitchen, such as dry and refrigerated storage

trailers and a potable supply of water, is necessary. The spokes of the system are a fleet of Mobile Delivery Vehicles, such as Red Cross ERVs, that pick-up the prepared food and delivery to those impacted by the disaster and rescue workers. In order for a hub and spoke system to operate at maximum efficiency, sufficient mobile delivery vehicles must be available and a supply of insulated food containers readily available to transport the food.

**Point of Distribution (POD):** A POD is a location designed to provide essential resources to assist individuals and families impacted by disaster. PODs can be supported or operated by National VOAD member organizations, NGOs, Fixed Base Operators (FBOs), county and/or the state. A POD may be utilized to distribute shelf stable meals non-perishable foods, ice, blankets, baby supplies, water and other emergency needs. POD supplies and resources may be distributed in one of two models or a combination of both. In a fixed model, distribution takes place from one location. In a mobile model, supplies are transported into severally impacted neighborhoods.

The lifespan and daily operation of a POD is dependent upon numerous factors including but not limited to the availability of the resources, reestablishment of infrastructure (e.g. utilities, commerce, return of general population), safety in securing site and protection of volunteers and imposed curfews. While National VOAD organizations operate PODs with their own mission statement as a guiding priority, they strive to coordinate, cooperate, communicate and collaborate with local and/or state PODs.

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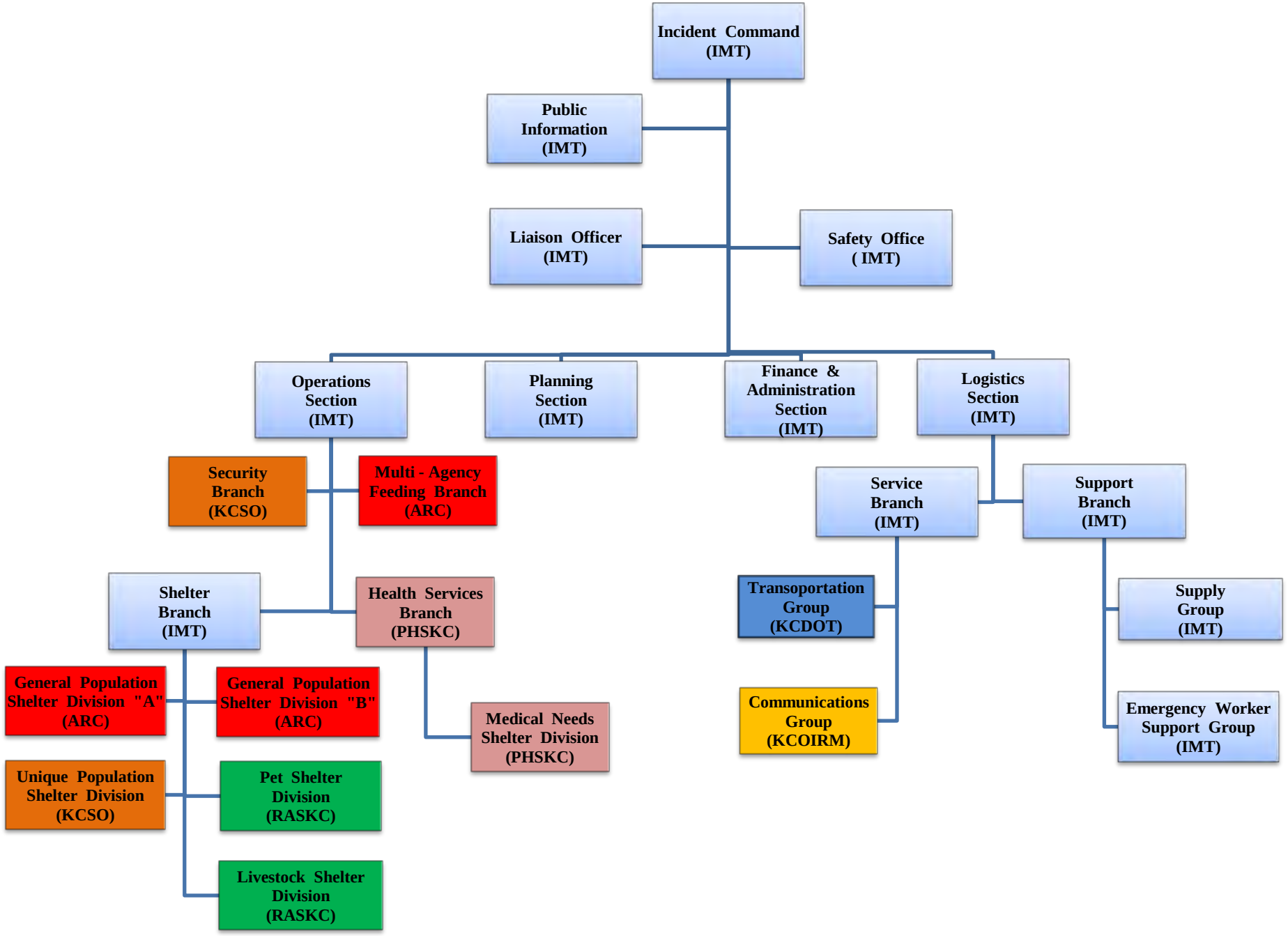
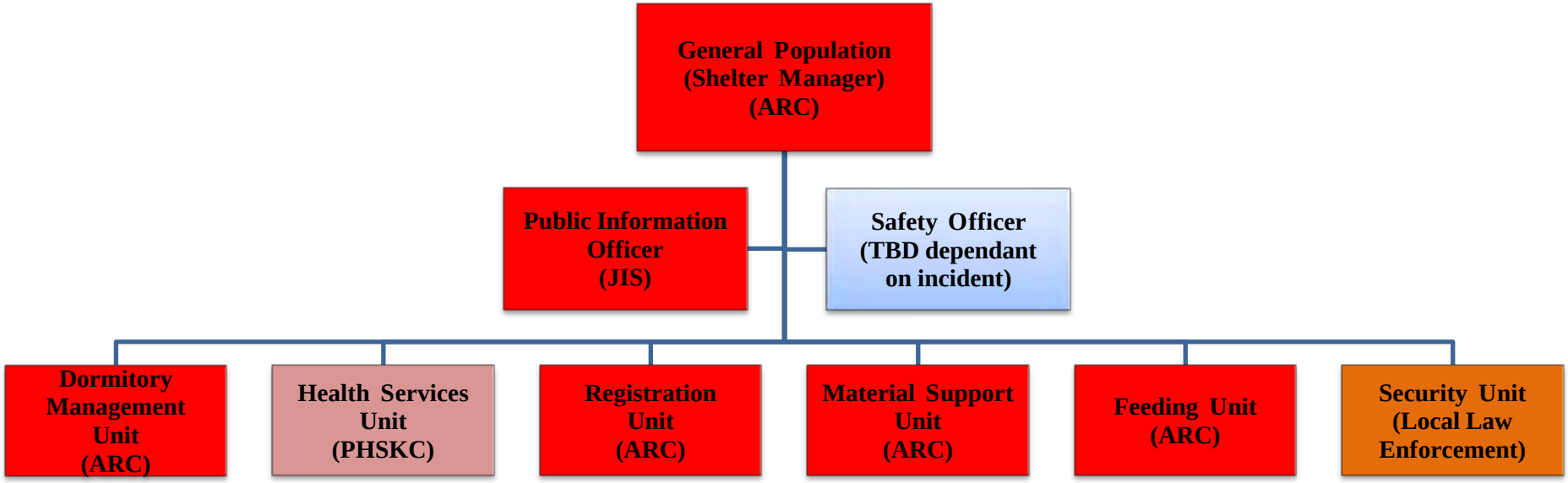
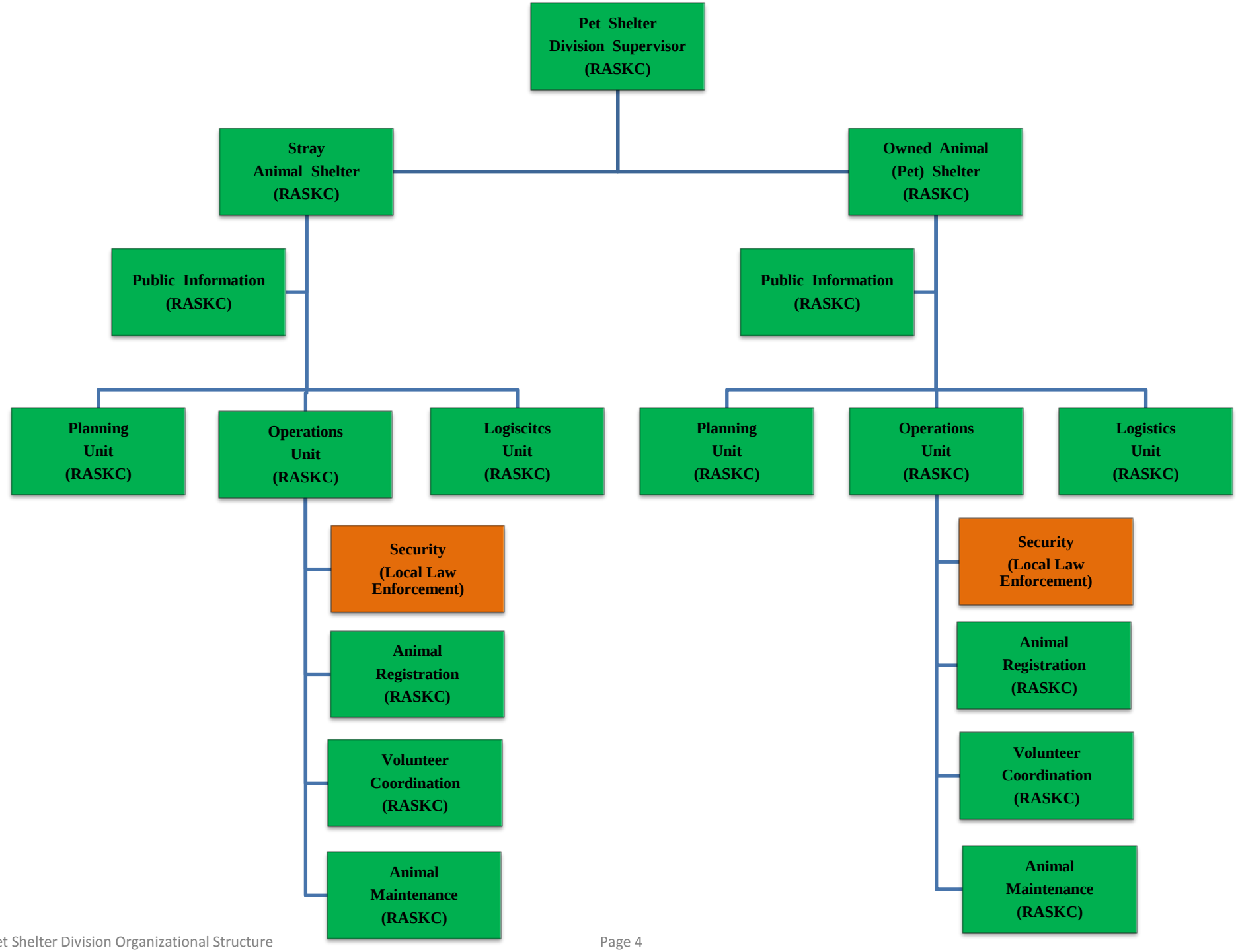
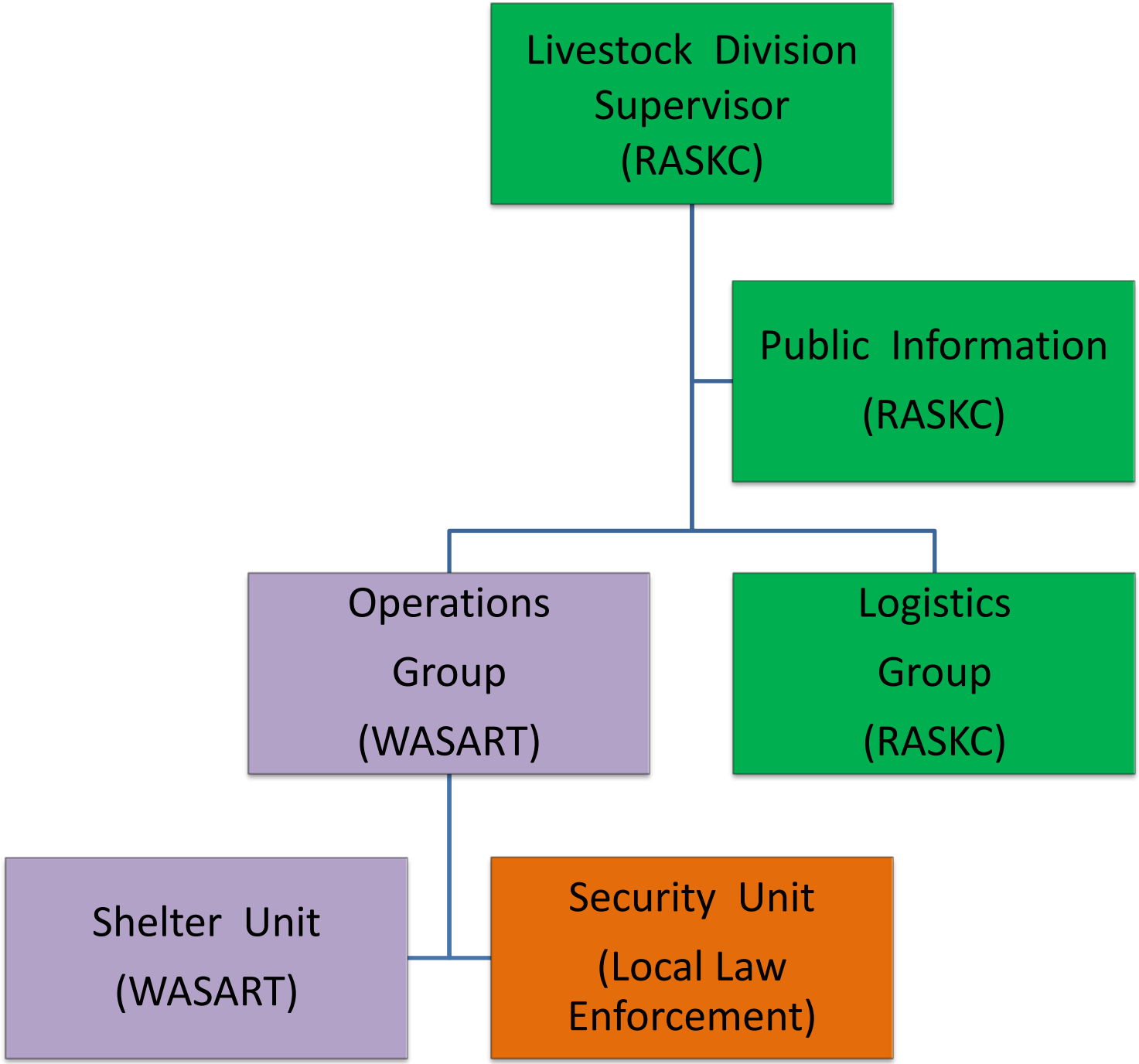

Incident Command (IMT)
Public Information (IMT)
Liaison Officer (IMT)
Safety Office ( IMT)
Operations Section (IMT)
Planning Section (IMT)
Finance & Administration Section (IMT)
Logistics Section (IMT)
Security Branch (KCSO)
Multi - Agency Feeding Branch (ARC)
Service Branch (IMT)
Support Branch (IMT)
Shelter Branch (IMT)
Health Services Branch (PHSKC)
Transoportation Group (KCDOT)
Supply Group (IMT)
General Population Shelter Division "A" (ARC)
General Population Shelter Division "B" (ARC)
Medical Needs Shelter Division (PHSKC)
Communications Group (KCOIRM)
Emergency Worker Support Group (IMT)
Unique Population Shelter Division (KCSO)
Pet Shelter Division (RASKC)
Livestock Shelter Division (RASKC)


General Population (Shelter Manager) (ARC)
Public Information Officer (JIS)
Safety Officer (TBD dependant on incident)
Dormitory Management Unit (ARC)
Health Services Unit (PHSKC)
Registration Unit (ARC)
Material Support Unit (ARC)
Feeding Unit (ARC)
Security Unit (Local Law Enforcement)

Unique Population (Shelter Manager) (KCSO)
Public Information Officer (KCSO)
Safety Officer (KCSO)
Dormitory Management Unit (KCSO)
Health Services Unit (PHSKC)
Registration Unit (KCSO)
Material Support Unit (KCSO)
Feeding Unit (KCSO)
Security Unit (KCSO)


Pet Shelter Division Supervisor (RASKC)
Stray Animal Shelter (RASKC)
Owned Animal (Pet) Shelter (RASKC)
Public Information (RASKC)
Public Information (RASKC)
Planning Unit (RASKC)
Operations Unit (RASKC)
Logiscitcs Unit (RASKC)
Planning Unit (RASKC)
Operations Unit (RASKC)
Logistics Unit (RASKC)
Security (Local Law Enforcement)
Animal Registration (RASKC)
Volunteer Coordination (RASKC)
Animal Maintenance (RASKC)
Security (Local Law Enforcement)
Animal Registration (RASKC)
Volunteer Coordination (RASKC)
Animal Maintenance (RASKC)


Livestock Division Supervisor (RASKC)
Public Information (RASKC)
Operations Group (WASART)
Logistics Group (RASKC)
Shelter Unit (WASART)
Security Unit (Local Law Enforcement)

# City of Shoreline

# Comprehensive Emergency Management Plan (CEMP)

# Essential Support Function (ESF) 6

# Appendix C

# Puget Sound Region Evacuation and Sheltering Plan

## Created by Puget Sound Regional Catastrophic Preparedness Grant Plan (RCPGP) Group

## Pages: 67

Note:

This document was created by RCPGP and maintained by RCPGP. The City of Shoreline incorporates this document into its CEMP in order to improve regional collaboration and coordination. This document may have a different header, footer, page numbers, and references than the rest of the ESF. For more information, please contact RCPGP.

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# Puget Sound REGION

# Evacuation and Sheltering

## Regional Catastrophic Disaster Coordination Plan

April 2011

# ANNEX

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Puget Sound Regional Catastrophic Preparedness Program

# EVACUATION AND SHELTERING ANNEX

TABLE OF CONTENTS


I. RECORD OF CHANGES ..... I-2

II. INTRODUCTION ..... II-3

A. Purpose ..... II-3

B. Scope ..... II-3

C. Situation ..... II-4

D. Planning Assumptions ..... II-5

E. Definitions ..... II-6

III. CONCEPT OF COORDINATION ..... III-9

A. Overview ..... III-9

B. Decision to Evacuate ..... III-11

C. Legal Considerations ..... III-12

D. Command and Control ..... III-13

E. Communications ..... III-13

F. Transportation Requirements ..... III-13

G. Evacuation Points ..... III-14

H. Sheltering ..... III-14

I. Access and Functional Needs Populations ..... III-15

J. Care and Protection of Animals ..... III-16

IV. ROLES AND RESPONSIBILITIES ..... IV-17

A. Federal ..... IV-17

B. State of Washington ..... IV-18

C. Local Jurisdictions ..... IV-21

D. Tribal Jurisdictions ..... IV-21

E. Nonprofits and Volunteer Organizations ..... IV-21

F. Private Sector ..... IV-25

G. Infrastructure ..... IV-25

V. COMMUNICATIONS ..... V-26

A. Public Notification and Communications ..... V-26

B. Hazard Specific Considerations for Communications ..... V-28

C. Inter Jurisdictional and Interagency Communications ..... V-29

D. Communication Contingency Plans ..... V-29
VI. TRANSPORTATION ..... VI-30
A. Modes of Transportation ..... VI-30
B. Transportation Points ..... VI-30
C. Transportation Coordination ..... VI-30
D. National Mass Evacuation Tracking System ..... VI-31
E. Evacuation Routes ..... VI-32
F. Transportation Strategies ..... VI-32
G. Communication Considerations ..... VI-32
H. Evacuation of Access and Functional Needs Populations ..... VI-33
I. Evacuation of Animals ..... VI-33
J. Hazard Specific Considerations for Evacuations ..... VI-34
VII. SHELTERING ..... VII-35
A. FEMA National Sheltering System (NSS) ..... VII-36
B. Access and Functional Needs Populations ..... VII-37
C. Pet Sheltering ..... VII-37
D. Regional Shelter Capacities ..... VII-37
E. Transportation Needs ..... VII-38
F. Spontaneous Shelters ..... VII-38
G. FEMA Long Term Housing Assistance ..... VII-39
H. Communications Considerations ..... VII-39
I. Hazard Specific Considerations for Sheltering ..... VII-40
VIII. HOST COMMUNITIES ..... VIII-41
IX. FAMILY REUNIFICATION ..... IX-42
X. RE-ENTRY ..... X-44
XI. RESOURCES ..... XI-46
A. Personnel ..... XI-46
B. Transportation ..... XI-46
C. Additional Resource Requirements ..... XI-46
XII. PLAN DEVELOPMENT AND MAINTENANCE ..... XII-49
XIII. AUTHORITIES AND REFERENCES ..... XIII-50
A. Authorities ..... XIII-50
B. References ..... XIII-50
XIV. Training, Exercise, and Evaluation ..... XIV-52
XV. APPENDICES ..... XV-54

A. Level III Evacuation Considerations ..... XV-54

B. Catastrophic evacuation and/or sheltering Incident Management Team (IMT) checklist ..... XV-57

C. List of Mass Notification Systems in Puget Sound ..... XV-60

D. Regional Transportation Resources and Contacts (Overview) ..... XV-1

E. King County UASI Evacuation Template (Best Practice) ..... XV-1

F. DAP-9523.18 Disaster Assistance Policy – Host-State Evacuation and Sheltering Reimbursement ..... XV-2

G. DAP 9523.19 Disaster Assistance Policy – Eligible Costs Related to Pet Evacuations and Sheltering ..... XV-3

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# I. RECORD OF CHANGES

| Date | Page Number | Brief Description of Change | Changed By |
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# II. INTRODUCTION

## A. Purpose

The purpose of this annex is to provide a scalable framework and guidance for coordinating evacuation and sheltering efforts within the Puget Sound Regional Catastrophic Preparedness Grant Plan (RCPGP) Region in the event of a catastrophic earthquake, flood, or CBRNE event.

The Annex describes the coordination of regional efforts for evacuation and for the provision of emergency temporary shelter, mass feeding, and other basic human needs to residents and visitors of the Puget Sound area who require such assistance following a regional emergency or catastrophic disaster. More specifically, this Annex:

- Describes how the Evacuation and Sheltering Incident Management Team (IMT) coordinates mass care resource requests and maintains situational awareness from the local EOCs
- Identifies the circumstances in which regional evacuation, mass care and shelter decision-making is required and defines the roles, responsibilities and authority for regional decision-making.
- Reinforces the use of the FEMA National Shelter System (NSS) as the mechanism by which EOCs are informed of shelter status
- Identifies the considerations of access and functional needs populations.
- Achieves agreement regarding appropriate evacuation and shelter-in-place strategies and triggers
- Through the FEMA NSS, identifies care and shelter providers to include non-governmental organizations (NGOs) and local, state and federal agencies.
- Develops the procedures by which evacuation and sheltering providers coordinate communication processes and response efforts regionally.
- Facilitates interjurisdictional coordination regarding evacuation issues.

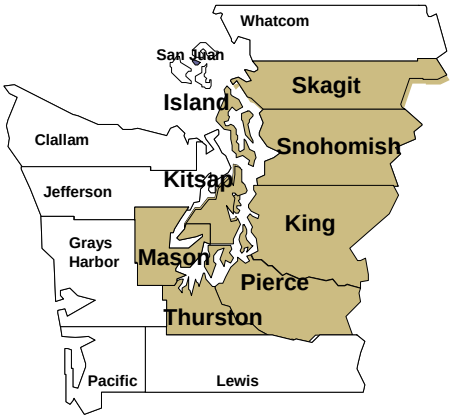
The challenge of a regional plan is to assess and coordinate the evacuation and sheltering requests and resources amongst the regional jurisdictions. The aim is to pre-plan and pre-identify resource needs ahead of time to minimize the need to second guess area plans. It is the responsibility of each jurisdiction to work at the local level to ensure capability at the regional level. It is also important to coordinate evacuation activities when crossing jurisdictional lines, and when planning for re-entry.

## B. Scope

The Regional Evacuation and Sheltering Annex covers the eight counties included in the Puget Sound Regional Preparedness Grant Program (RCPGP): Island, King, Kitsap, Mason, Pierce, Skagit, Snohomish, and Thurston, tribal governments, and local jurisdictions within these counties (towns and cities). This eight-county region was established by the RCPGP. These counties, because of their geographical proximity to each other, face many of the same threats

and hazards and will most likely, during a disaster, need to coordinate and communicate with each other.

This Annex was developed based on the concepts and methods of existing local and state emergency plans (Comprehensive Emergency Management Plans - CEMPs), and the National Incident Management System. The Annex does not supersede or exclude any existing local or state plans but instead supports the RCPGP Regional Coordination Plan to coordinate and support evacuation and mass care needs in response to a catastrophic incident within the region.



Northwest Washington

The Annex does not address, or supersede, local policies, procedures or plans regarding to:

- Tactical operations and incident command
- Local evacuation and sheltering response activities
- Local established mutual aid and/or interlocal agreements, relationships and procedures

This Annex also provides hazard specific considerations, regional shelter capacities and resources available locally and through mutual aid, as well as functional needs considerations for evacuation and sheltering.

The current terminology for the group 'special needs, vulnerable populations, or high risk populations' is 'access and functional needs' which describes this population as members who may have additional needs before, during, and after an incident in functional areas, including but not limited to:

- Maintaining independence
- Communication
- Transportation
- Supervision
- Medical Care

Individuals in need of additional response assistance may include those who have disabilities; who live in institutionalized settings; who are elderly; who are children; who are from diverse cultures; who have limited English proficiency (LEP) or are non-English speaking; or who are transportation disadvantaged.

# C. Situation

It is anticipated that tens of thousands of people could be stranded, need to be evacuated, and/or need to be sheltered following a catastrophic event. Regional information sharing and coordination of regional assets will be the basis of the regional response. It is the build-up of local capacity for evacuation and sheltering that will enable the region to successfully shelter most displaced people.

Based on the combined hazard analysis of the eight included counties (Island, King, Kitsap, Mason, Pierce, Skagit, Snohomish, and Thurston) in the Regional Catastrophic Planning Grant Program area, there are no hazards that require the evacuation of the entire population or the majority of the population outside of the Region's boundaries. There are two types of evacuations and sheltering scenarios – 'no-notice' and 'notice' events.

In most cases, 'no-notice' events (such as earthquakes, some tsunamis, hazardous material release, and attacks using CBRNEs) may affect infrastructure to the point that travel or movement anywhere within the affected region is difficult. The primary response will be sheltering in place, and activation of community/neighborhood shelters, which each need to be self sufficient for up to seven days, until supplies and volunteers can access the locations to provide relief. In 'notice' events, there is the ability to pre-plan and pre-position resources and coordination.

# D. Planning Assumptions

- Mass evacuation and sheltering plans in the Puget Sound area follow the principles of NIMS.
- An emergency or disaster in the Puget Sound area that affects multiple jurisdictions may exceed the response capabilities of individual jurisdictions and may require evacuation and sheltering support from both within and outside the region.
- Mass evacuation will be different depending on notice or no-notice events. Sheltering will be impacted based on infrastructure stability.
- Establishing fully operational shelter systems could take three to seven days or more, depending on the situation.
- Current public education efforts urge residents to be self-sufficient during the first three to seven days after a major disaster. Many people, however, will not be prepared or may lose access to their supplies because of structural damage to their residences.
- Facilities used for sheltering will eventually need to return to regular use.
- Federal transportation and/or mass care resources may be 'pushed' or automatically sent to the region following a catastrophic incident.
- Jurisdictional Emergency Operation Centers (EOCs) or Emergency Coordination Centers (ECCs) will provide support to city, county and non-governmental shelter operations within their capability and capacity.
- Law enforcement agencies will be the primary agency for conducting evacuation activities with other agencies playing their support role, such as public works departments assisting with road closures and redirections.
- A decision to evacuate will be made at the local jurisdictional level.

- The evacuation and sheltering of large numbers of people beyond the capability of a single county will need to be coordinated at the regional level.
- In most emergency situations, the majority of evacuees (80 percent) will seek shelter with relatives or friends or in motels/hotels rather than in public shelter facilities. Approximately 20 percent of evacuees will require public shelter assistance.
- Most evacuees will use their personal vehicles to evacuate: transportation will need to be available to evacuees without access to personal vehicles.
- A number of the access and functional needs population will require transportation assistance.
- The restoration of housing and basic infrastructure, such as communications, roads, transportation services, and utilities, must be taken into account when transitioning people out of shelters.

# E. Definitions

- Access and Functional Needs (also special needs, high risk populations, vulnerable populations) - Members who may have additional needs before, during, and after an incident in functional areas, including but not limited to:
  - Maintaining independence
  - Communication
  - Transportation
  - Supervision
  - Medical Care
- Individuals in need of additional assistance may include those who have disabilities; who live in institutionalized settings; who are elderly; who are children; who are from diverse cultures; that have limited English proficiency (LEP) or are non-English speaking; or who are transportation disadvantaged.
- Community Pick-up Point – Location where government transportation dependent evacuees congregate in their local or neighborhood areas to access short haul transportation to convey them to the embarkation site.
- Debarkation site – Site designated to receive government transportation dependent evacuees. A debarkation site may be designated as air, rail, bus or maritime, as required. Evacuee's arrival at the debarkation site may be noted in the tracking system being uses for the evacuation.
- Embarkation site – Evacuation support location providing reception, mass care (nourishment and hydration), sanitation (including accessible restrooms), first aid, processing, and vehicle staging and boarding areas. In addition, there must be a pet processing area, outdoor pet recreation and sanitation areas, and separate areas within the facility for household pets and their owners.

- Evacuation Coordination Team – The mission of the Evacuation Coordination Team is to provide for the protection of life or property by removing endangered persons and property from potential or actual disaster areas of less danger through the successful execution of evacuation procedures. (NIMS)
- Evacuation Liaison Team – Provides support in State and local emergency response efforts by compiling, analyzing, and disseminating traffic-related information that can be used to facilitate the rapid, efficient, and safe evacuation of threatened populations. Primarily operates in the State or local EOC as an extension of ESF #1 – Transportation. (NIMS)
- Evacuee – A member of a region or area that has been advised to leave a threatened or affected area.
- Functional Needs Support Services (FNSS) – Defined as services that enable individuals to maintain their independence in a general population shelter. FNSS includes:
  - Reasonable modification to policies, practices, and procedures
  - Durable medical equipment (DME)
  - Consumable medical supplies (CMS)
  - Personal assistance services (PAS)
  - Other goods and services as needed
  - Children and adults requiring FNSS may have physical, sensory, mental health, and cognitive and/or intellectual disabilities affecting their ability to function independently without assistance. Others that may benefit from FNSS include women in late stages of pregnancy, elders, and people needing bariatric equipment.
- Government Transportation Dependent Evacuee – A member of a region or area who has been advised to leave a threatened or affected area and who, by choice or other reasons, is not able to provide their own transportation for evacuation and must rely upon government provided transportation to exit the danger zone.
- Host Duration – Short term – up to two weeks; intermediate – two to 12 weeks; indefinite – 12 weeks to a year or more.
- Host State – A state that, by agreement with an impact-State or FEMA, is providing evacuation and sheltering support to individuals from another State that has received a Presidential emergency or major disaster declaration due to an incident.
- Household Pet – A domesticated animal, such as a dog, cat, bird, rabbit, rodent, or turtle that is typically kept in the home for companionship rather than commercial purposes, can travel in commercial carriers, and be sheltered in temporary facilities.

- Impact State – A state that has received a Presidential emergency or major disaster declaration.
- Medical Needs Sheltering - These are shelters or components of shelters for individuals who require sustained assistance (or supervision) for medical needs, but do not have an acute condition requiring hospitalization. This is a subset of access and functional needs populations.
- Pop-up Shelter – A spontaneous shelter with no pre-established resources or trained volunteers.
- Reception Processing Site – Site established to track and process government transportation dependent evacuees; provide mass care services; assign evacuees to congregate care facilities; provide for health screening; provide for the general support of other needs. Reception Processing Sites may or may not be co-located with a Point of Debarkation.
- Regional – For this plan, 'regional' refers to the eight county region whose footprint this plan covers - Island, King, Kitsap, Mason, Pierce, Skagit, Snohomish, and Thurston counties, and the tribal jurisdictions and cities and towns within those counties.
- Self-Evacuee – A member of a region or area who has been directed to leave a threatened or affected area and is able to provide their own transportation for evacuation without requesting government transportation assistance.
- Transfer Point – A location used to change vehicle operators and/or transfer evacuees and luggage from one vehicle or mode of transportation to another. A transfer point incorporates all necessary logistical support.

# III. CONCEPT OF COORDINATION

## A. Overview

A regional coordinated approach will be essential to resource management, situational awareness and public messaging on how the public should respond to the disaster, including how, when and where to evacuate, and what shelter options are available.

The three major concepts in this plan cover the multi-jurisdictional coordination team, the system for gathering situational awareness on shelters close to real-time as possible, and recommendations for capacity building at the local level.

### (1) Incident Management Team

The concept for the multi-jurisdictional coordination team is a Type III Incident Management Team. According to FEMA, an Incident Management Team (IMT) is a comprehensive resource (a team) to either augment ongoing operations through provision of infrastructure support, or when requested, transition to an incident management function to include all components/functions of a Command and General Staff. An IMT:

- Includes command and general staff members and support personnel
- Has statutory authority and/or formal response requirements and responsibilities
- Has pre-designated roles and responsibilities for members (Rostered and on-call: Identified and able to be contacted for deployment)
- Is available 24/7/365

There are specific tasks that have been included in this plan (Appendix B) for IMT positions pertaining to sheltering and evacuation coordination.

The Sheltering and Evacuation Incident Management Team (IMT) could be located at an EOC or other amenable site inside or outside the affected areas, or could be utilized virtually. The tasks of the IMT would be the same as any IMT activation, but would include sheltering and evacuation-specific tasks. The purpose of the team is to coordinate resources, situational awareness, information, and requests on a Regional level, and would be coordinating information with each of the activated EOCs.

An issue that will need to be resolved using any IMT is the delegation of authority. IMTs operate with a signed delegation of authority from the hosting jurisdiction. In the case of a catastrophic event over multiple jurisdictions, there are several options:

- One jurisdiction can step up and delegate authority for the IMT to work in that jurisdiction, with an understanding that they will be assisting the other affected jurisdictions through mutual aid.

- An attempt can be made to get signatures of all affected jurisdictions on a delegation of authority; or
- The shelter and evacuation coordination group can act 'like an IMT' but with no delegation of authority (funding reimbursement may prohibit this as an option)
- 
- Activation of the IMT
- The triggering mechanism to activate this IMT during a catastrophic incident should occur during one of the initial Regional conference calls (see the Puget Sound Regional Catastrophic Disaster Coordination Plan). A resource request would go to WA EOC for a IMT Type 3 team, and the normal activation procedures would follow.

### (2) FEMA National Shelter System (NSS)

Situational awareness is a crucial element in any response activity, including in the planning of resource allocation. One tool that is now available is the FEMA National Shelter System (NSS). The FEMA NSS is a comprehensive, web-based database created to support Federal, State and local government agencies and voluntary organizations responsible for mass care and emergency assistance. The FEMA NSS allows users to identify, track, analyze, and report on data for virtually any facility associated with the congregate care of people and/or household pets following a disaster. The American Red Cross NSS is a sister system which only Red Cross personnel and local governments can access and input. The FEMA NSS has an agreement with ARC NSS to pull information on the Red Cross shelter sites on a routine basis, so there is a compilation of all shelters available as a report on the FEMA NSS.

Washington State signed an agreement in 2010 to utilize the FEMA system and an integral part of the successful use of the NSS is the accuracy and completeness of the information entered. Local EOCs will be the designees for the input of this information in their area, and it will be up to everyone to assist in making the FEMA NSS a viable tool for sheltering situational awareness.

### (3) Planning templates for local capacity building for evacuation and sheltering

As was evident in the initial RCPGP Shelter and Evacuation gap analysis of the eight counties and several cities in the Region, the need for evacuation plans and for more comprehensive sheltering plans was considered necessary. It is recommended that jurisdictions follow up with evacuation planning by utilizing either the Seattle UASI Evacuation Planning Template or the FEMA Evacuation Planning Template. For sheltering, the addition of access and functional needs supports in general shelters and planning for the inclusion of pets at shelters needs to be addressed at all shelters, reception processing sites, and transfer points.

The decision-making and coordination between the affected and non-affected jurisdictions will be crucial in how successful the evacuation and sheltering of residents will be.

## B. Decision to Evacuate

Local jurisdictions will generally make the determination on whether to evacuate communities prior to, during, or following an incident on a case-by-case basis. The decision to evacuate will depend entirely upon the nature, scope, and severity of the emergency; the number of people affected; and what actions are necessary to protect the public. In certain circumstances, the county EOC may make a recommendation on whether a jurisdiction should evacuate and will help coordinate the evacuation effort. The use of an alert and warning system should be considered. (See Appendix C for a list of warning systems in the Region.)

The local governing body, or whomever the local governing body has authorized to issue the evacuation order, is primarily responsible for ordering an evacuation. This authorization can be in the form or an ordinance, resolution, or order that the local governing body has enacted.

In most jurisdictions there are three levels of evacuations (per the state 2010 Fire Mobilization Plan):

(1) Level 1 - A protection warning has been issued for this area.

Persons are warned that current or projected threats from hazards associated with the approaching (fire, HAZMAT, tsunami, etc) are severe.

- This is time for preparation, precautionary movement of persons with access and functional needs, mobile property and pets or livestock.
- Residents will be kept advised as conditions change. Area TV and radio stations have been asked to broadcast periodic updates.
- If conditions worsen, every attempt will be made to locate individuals personally. If someone is absent from their home for more than a short time, it is advised to leave a note with the name and a contact telephone number in a door or window where it can be easily seen.

(2) Level 2 - An evacuation request has been issued for this area.

Events dictate a good probability that hazards associated with the approaching (fire, HAZMAT, tsunami, etc) will severely limit our ability to provide emergency services protection. Dangerous conditions exist that may threaten residents or businesses.

- Residents must prepare to leave at a moment's notice. Fire and law enforcement personnel are working in this area to provide specific information about when to leave and the route(s) to take.
    - This may be the only notice which is received.
- Residents will be kept advised as conditions change. Area TV and radio stations have been asked to broadcast periodic updates.

(3) Level 3 - An evacuation order has been issued for this area.

- Current conditions present specific and immediate threat(s) to the life and safety of persons within this area.

- Residents are ordered to immediately evacuate. Fire and law enforcement personnel are working in this area to provide specific information about when to leave and the route(s) to take.
- If people choose to ignore this order, they must understand that emergency services will not be available and there is a good chance they would be unable to rescue anyone. Volunteers will not be allowed to enter the area to provide assistance.
- Residents will be kept advised as conditions change. Area TV and radio stations have been asked to broadcast periodic updates.
- The decision on whether to evacuate or shelter-in-place must be carefully considered with the timing and nature of the incident. An evacuation effort involves an organized and supervised effort to relocate people from an area of danger to a safe location. Although evacuation is an effective means of moving people out of a dangerous area, due to its complexity and the stress it puts upon the population, it is considered a last resort option. Sheltering-in-place is the practice of going or remaining indoors during or following an emergency event. This procedure is recommended if there is little time for the public to react to an incident and it is safer for the public to stay indoors for a short time period rather than travel outdoors. Sheltering-in-place may be a more effective protection measure than an evacuation, especially following a chemical, radiological, or biological incident. Sheltering-in-place also has many advantages because it can be implemented immediately, allows people to remain in their familiar surroundings, and provides individuals with everyday necessities such as telephone, radio, television, food, and clothing. However, the amount of time people can stay sheltered-in-place is dependent upon availability of food, water, medical care, utilities, and access to accurate and reliable information.
- Sheltering-in-place is the preferred method of protection for people that are not directly impacted or in the direct path of a hazard. This will reduce congestion and transportation demand on the major transportation routes for those that have been directed to evacuate by police or fire personnel.

## C. Legal Considerations

Evacuation orders should be issued when there is a clear and immediate threat to the health and safety of the population and it is determined that evacuation is the best option for protection. Evacuation orders should be described as mandatory to promote public cooperation. However, law enforcement will not use force to remove any person who remains within the affected area when directed to evacuate. Under Washington law, there is no mandatory evacuation, except in some circumstances by the governor.

Emergency responders should clearly inform people that failure to evacuate may result in serious physical injury or death and future opportunities to evacuate may not exist. Law enforcement should document the location of people that refuse to evacuate. Once a local

jurisdiction orders a mandatory evacuation, it is critical that public information dissemination, transportation, sheltering resources, and security and protection of private property are provided to a level where the public feels that evacuation is more desirable than staying behind.

## D. Command and Control

Response to an emergency or disaster is managed at the lowest level possible. Accordingly, local governments have the primary responsibility for sheltering and evacuation preparedness and response activities and should develop individual sheltering and evacuation plans or annexes in coordination with their respective Comprehensive Emergency Management Plans (CEMPs). NIMS and ICS dictate that response to any incident is initiated by local resources. If the event escalates beyond the capability of the local jurisdiction or expands to affect multiple jurisdictions, then regional and/or State, and then supplemental Federal resources will be requested.

Any large-scale response to an incident should be coordinated. Evacuation in the field will be directed by law enforcement agencies, highway/road/street departments, and public and private transportation providers.

## E. Communications

Inter-jurisdictional and interagency coordination should be conducted through the Incident Command Posts, the county and local EOC, and the State EOC and the IMT utilizing available communications equipment and infrastructure. Situational awareness will be supported through data-sharing systems such as WebEOC, and the FEMA National Sheltering System (NSS) to expedite the transfer of information regarding the status of the incident and subsequent response.

Activation, coordination and use of a Joint Information System (JIS) will be initiated as soon as possible following an incident. A JIS will function to coordinate information to the media. All information released to the public regarding the incident should be cleared by the PIOs that participate in the JIS. Real-time informational updates regarding evacuation routes, evacuation points, shelter capacities, and other essential information will be provided to evacuees en route through emergency radio stations, mass notification systems and changeable message signs.

## F. Transportation Requirements

The primary modes of transportation that will be used during jurisdictional evacuation efforts will be privately owned vehicles. Each jurisdiction will determine how to link up with the needed resources. The Region will use available resources, Memoranda of Understanding and Agreement (MOU/MOA) with public and private transportation agencies, and mutual aid to procure, coordinate and attempt to provide adequate means of transportation for those people that have transportation access and functional needs. (See Appendix D for list of public

transportation providers in the Region.) Even during normal times, transportation is difficult due to congestion, and must be considered during disaster planning.

Evacuation routes, depending on the nature of the incident (notice or no-notice event), may or may not be available for evacuation. For notice-events, such as flooding, routes will consist of the major interstates, highways and prime arterials, rail lines and ferry routes within the Region. Local jurisdictions will work with law enforcement officials, WSDOT, WSP, public works and other applicable agencies/departments to identify evacuation points and transportation routes.

# G. Evacuation Points

Local jurisdictions will work with law enforcement agencies to identify and establish evacuation points. These evacuation points will serve as temporary safe zones for evacuees and should provide basic needs such as food, water, information and accessible restrooms. Some evacuation points may be converted into shelter locations if necessary.

Transportation points will also be identified to collect and transport people without transportation resources to evacuation points. These points should be large, well known sites such as shopping centers, libraries and schools and may include information, food, water, and accessible .

# H. Sheltering

There are two types of sheltering 'sponsors/managers' – either the community or the Red Cross, and in some cases, there is a combination of the two.

(1) American Red Cross

The role of the Red Cross is to offer a safe place to stay and rest before, during and after a disaster. The facilities address basic human needs for food and shelter and may be located in public and private facilities such as schools, churches and commercial buildings. To meet this need the Red Cross works closely with partner agencies to help with sheltering and mass care activities.

For more information on the American Red Cross, visit www.redcross.org, or follow them on Twitter at www.twitter/redcross or on Facebook at www.facebook.com/redcross

The American Red Cross identifies four sheltering relationships or "models: including traditional shelters that form the framework of the Red Cross response. These include: a) Red Cross Shelters b) Red Cross Partner Shelters, c) Red Cross Supported Shelters and d) Independently Managed Shelters. Both c) and d) could be considered Community Shelters, the differences in the definition depend on various factors including who maintains administrative control, covers operating expenses, branding, and liability.

(2) Community Shelters

Community shelters are usually those shelters that are 'owned' by the community – and run or organized through churches, non-profit groups, and more recently, cities and towns and their employees, and volunteers.

In many cases, there is very little difference between a community shelter and a Red Cross shelter. The community shelters are borrowing from the management and training of shelters from the Red Cross, so both types should have similar standards.

# I. Access and Functional Needs Populations

The evacuation and sheltering of people with access and functional needs pose many unique challenges with respect to notification, evacuation, emergency transportation, sheltering requirements, and information dissemination.

For the purposes of this annex, access and functional needs populations are defined as individuals who may have additional needs before, during, and after an incident in functional areas, including but not limited to: maintaining independence, communication, transportation, supervision, and medical care. Individuals in need of additional assistance may include those who have disabilities; who live in institutionalized settings; who are elderly; who are children; who are from diverse cultures; that have limited English proficiency (LEP) or are non-English speaking; or who are transportation disadvantaged.

The traditional types of notification methods may not meet the requirements of individuals who are blind or have poor vision or who are deaf or hard of hearing. Notification procedures must include multiple types of methodologies to ensure all segments of the population are provided with the required information. Specific forms of notification can include telephone, television messages with open captioning or sign language, language outlets, auto-dialed teletypewriter messages, text messages or email.

It is critical that modes of transportation are identified that can accommodate people with access and functional needs during an evacuation. Transportation that can accommodate people in wheelchairs, scooters, or other mobility aids is an integral part of any evacuation process. This also includes the transport of other durable medical equipment (DME). Some potential options can be the use of lift-equipped school buses or vans, transit, paratransit services or ambulances.

All shelters should be Americans with Disabilities Act (ADA) compliant throughout the facility to ensure persons with access and functional needs can access all amenities. This includes parking, facility accessibility, and restroom accommodations. Additional tools should be a part of the sheltering plan to facilitate the integration of people with access and functional needs into a general population shelter.

(See the US Dept. of Justice '*ADA Checklist for Emergency Shelters*' 2007 and FEMA's '*Guidance on Planning for Integration of Functional Needs Support Services in General Populations Shelters*' 2010)

# J. Care and Protection of Animals

The Pets Evacuation and Transportation Standards (PETS) Act of 2006 amends the Stafford Act, and requires evacuation and sheltering plans to take into account the needs of individuals with household pets and service animals prior to, during and following a major disaster or emergency. As such, there is a reimbursement process for eligible costs related to pet evacuation and sheltering (see Appendix G - DAP-9523.19 Disaster Assistance Policy – Eligible Costs Related to Pet Evacuations and Sheltering).

Washington State Animal Response Team (WASART), local animal emergency response and rescue agencies (such as the Pierce County Animal Response Team), private animal care shelters, veterinarians and animal control officers have begun to develop plans for the rescue, transportation and sheltering of small and large animals/pets. MOUs need to be formalized with other agencies/organizations, especially for the transportation of livestock, including horses. In addition, potential volunteer resources, veterinarians with boarding capabilities and private groups should be identified and tracked in a system such as WebEOC. Only non-emergency resources and personnel should be used to rescue and transport animals during an evacuation effort.

It is the jurisdictional responsibility to include pets in the evacuation and sheltering plans. Most local community shelters either have pet shelter availability, are working out agreements with shelters that do, or are beginning to develop plans to include a pet shelter.

# IV. ROLES AND RESPONSIBILITIES

## A. Federal

The overall responsibility for evacuation and sheltering rests with local government. However, when local capabilities are no longer sufficient to deal with the incident response, local government, through the regional coordination body, will request assistance from the State. If State resources are insufficient, the Governor will request assistance from the Federal Government. The President may declare a major disaster and the National Response Framework, including the Catastrophic Incident Annex and/or Mass Evacuation Incident Annex, may be activated.

Emergency Support Functions (ESFs) provide the structure for coordinating Federal interagency support for Catastrophic Incidents. The ESF structure includes mechanisms used to provide Federal support to local, state, tribal governments, or to Federal departments and agencies, both for declared disasters and emergencies under the Stafford Act and for non-Stafford Act incidents. ESFs are groupings of government and certain private-sector capabilities into an organizational structure to provide the support, resources, program implementation, and services that are required to save lives, protect property and the environment, restore essential services and critical infrastructure, and help victims and communities return to normal, when feasible, following domestic incidents. Per the National Response Framework, each ESF has an identified ESF Coordinator as well as primary and secondary support agencies.

Evacuation and sheltering efforts by local and state governments would be supported federally with the cooperation of many different national ESFs. For example:

- ESF #1 – Transportation provides transportation technical assistance and analysis for evacuation operations and evacuation route conditions.
- ESF #3 – Public Works and Engineering ensures debris removal and clearance of evacuation routes.
- ESF #5 – Emergency Management provides situational awareness of and coordination of mass evacuation efforts.
- ESF #6 – Mass Care and Sheltering provides information and coordination in the nonmedical mass care aspects required for mass evacuations, including housing and human services.
- ESF #7 – Logistics Management and Resource Support provides goods and services to support evacuation efforts and transportation services.
- ESF #8 - Health and Medical provides supplemental assistance to State, tribal, and local governments in identifying the public health and medical needs of victims, to include patient evacuation and child reunification with appropriate adult.
- ESF #11 – Agriculture and Natural Resources provides information and coordination for the evacuation of household pets.

- ESF #13 – Public Safety and Security provides support of State, tribal, and local public safety and security measures (e.g., crowd control, traffic direction, and control of contra flow lanes used in evacuations).
- ESF #15 ensures that sufficient Federal assets are deployed to the field to provide accurate, coordinated, and timely information to affected audiences. Mass evacuation efforts must also be coordinated with other ESFs.

# B. State of Washington

## a) Emergency Management Division

The state's response to emergencies and disasters is coordinated from the Washington State EOC. The State EOC serves as a multi-agency coordination center (MACC) designed to support response and recovery operations for local jurisdictions, state agencies, and tribal nations, including incident, area or unified command sites.

The primary role of the State EOC is to communicate alert and warnings, to maintain situational awareness, to collect, analyze and disseminate information, and to coordinate, dispatch and track resources.

- Coordinate state and federal resources to aid in disaster recovery for individuals, families, certain private non-profit organizations, local and state government.
- Coordinate requests for state and federal emergency declarations.
- Participate in damage assessments.
- Provide environmental/historical, engineering and technical assistance.
- Administer state and federal Public Assistance and hazard mitigation grants, including payments and processing.
- Provide program oversight of other state-administered disaster recovery.
- Lead community relations elements in time of disaster.
- Administers the National Shelter System under agreement with FEMA
- Coordinate the establishment of Joint Field Offices, Disaster Recovery Centers, and Local Assistance Centers.

## b) Department of Transportation

- Provide status reports and closure estimates on state routes and ferries infrastructure.
- Establish and implement long-term closures for detouring and alternate routes.
- Operate and manage changeable message signs to inform motorists of changes in road conditions.

## c) Washington State Patrol

- Provide initial reports on damage to roads, highways and freeways.

- Coordinate with Dept. of Transportation and local jurisdictions as applicable to barricade or secure unsafe sections of roadway.
- Assist emergency vehicles and equipment in entering or leaving hazardous areas.
- Monitor truck traffic to ensure safe transport of debris during debris removal and demolition operations.
- Coordinate interstate traffic during the evacuation.
- Coordinate re-entry of displaced populations per the Re-entry Protocol.

d) Department of Social and Health Services

- The Department of Social and Health Services (DSHS) will support disaster impacted jurisdictions through continued delivery of its vital services to its clients and persons qualifying for assistance as a result of the disaster. As its resources permit or as additional resources are authorized, DSHS will deploy teams to sheltering operations to process applications for cash, food, medical assistance and other services that will support persons in the recovery from a disaster. DSHS may also deploy Mobile Community Service Office vehicles to disaster reception or other locations to facilitate a rapid response and delivery of its services.
- Additionally, DSHS is the lead state agency for coordinating ESF 6 support to disaster impacted jurisdictions when their resources are overwhelmed by the disaster response. DSHS partners with the Emergency Management Division, the Department of General Administration, the Department of Commerce, the American Red Cross and other state agencies and non-governmental organizations to coordinate resources and services needed to respond to jurisdictions' request for disaster response and recovery support. DSHS also seeks to assist jurisdictions prepare for disasters by promoting best practices developed by other states and jurisdictions within Washington, particularly as they pertain to persons with access or functional needs.

e) Department of General Administration

- The Department of General Administration is the lead state agency for ESF 3, Public Works and Engineering and ESF 7, Logistics Management and Resource Support. GA plays an essential role in supporting ESF 6 state level coordination through its purchasing and contracting functions and the identification, leasing, stand-up, and ongoing supply of reception, sheltering, and other facility operations.

f) Department of Health

- Washington State Department of Health is the lead state agency for ESF 8
- Provides and coordinates comprehensive assessments of the public health impact of emergencies and disasters to include describing the distribution levels

and types of health impacts and effects on the continued ability to provide essential public health services.

- Provides liaison with the federal Centers for Disease Control and Prevention, and other states and provincial health agencies, as potential sources of consultation and/or direct assistance.
- Provides coordination and assistance to local health jurisdictions to determine the need for additional health care providers, medical equipment, and medical supplies during an emergency or disaster.
- Assists local health authorities with the inventory and supply of medical equipment and facilities
- Provides assistance to local health departments, public and private health care institutions, and other local government agencies with identification, treatment, and control of communicable diseases and non-communicable disease risk, which threaten public health.
- Provides consultation to local health agencies in the regulation and inspection of consumable foods and food production at their point of consumption in areas affected by the emergency or disaster.
- Provides consultation to support local health agencies in the maintenance of required potability and quality of domestic water supplies affected by the emergency or disaster.
- Provides technical assistance and advice to local health agencies in dealing with public health issues concerning the sanitary control, handling, and disposal of solid waste and other refuse during an emergency or disaster.
- Serves as lead agency in the state EOC for coordinating medical and public health services during emergency or disaster activities.
- In support of local authorities, provides technological assessment, toxicological analysis, and radiological support services in emergencies or disasters.
- Inspects and supervises the establishment of emergency pharmacies and other places in which drugs or devices are stored, held, compounded, dispensed, sold, or administered.
- Provides graphics and editorial support to the Office of the Governor, the state EMD, the state EOC, or the lead state response agency during response and recovery activities.
- Provides public information officer support to the Office of the Governor, the state EMD, the state EOC, or the lead state response agency during response and recovery activities.

### g) Washington National Guard

The Washington National Guard has two primary missions. Members of the Washington Air and Army National Guard are prepared to support civil authorities in the event of natural, manmade

or terrorist incidents and disaster. The second mission that the members of the Washington National Guard support is in a Title 10 mobilization status to support deployments throughout the world.

Under the command and control of the Governor of the State of Washington, members of the Guard may be activated in a State Active Duty or Title 32 to respond to natural disasters such as fires, floods, earthquakes, pandemic influenza, winter freezes and other disasters that cannot be fully supported by civil authorities. Additionally, members of the Guard may support the enforcement of civil law in support of law enforcement agencies within the state and are not bound by section 1835, Title 18 U.S.C. (Posse Comitatus Act). The Guard is also prepared to respond to terrorist acts within the State of Washington and the regional area in either a Title 32 or Title 10 status.

### h) Other Military Resources

The commander of military units (active or reserve) may respond to civil requests for assistance if it is an imminent threat to save lives and property solely at the discretion of the commanding officer and for a limited time. Once a federal disaster is declared, all federal military resources (active and reserve in all branches, less the National Guard) are requested through an ARF to FEMA and mission tasked to the Department of Defense.

## C. Local Jurisdictions

Each jurisdiction is responsible for developing an evacuation and sheltering plan or annex as part of their CEMP. (See Appendix F and G for evacuation planning templates.) The decision to order an evacuation will be made by the Incident Commander at the local level based on situational reports. Impacted jurisdictions will be responsible for activating their EOCs during an incident and for communicating and coordinating with the county(s) and state EOCs. If two or more communities are impacted by an evacuation effort, then incident response will be coordinated under a Unified Command.

## D. Tribal Jurisdictions

Each tribal jurisdiction should develop an evacuation and sheltering plan or annex as part of their CEMP. (See Appendix F and G for evacuation planning templates.) The decision to order an evacuation will be made by the Incident Commander at the local level based on situational reports. Impacted jurisdictions will be responsible for activating their EOCs during an incident and for communicating and coordinating with the county(s) and/or the State EOCs.

## E. Nonprofits and Volunteer Organizations

### a) American Red Cross

The American Red Cross is the leading non-governmental disaster relief organization in the United States and provides food, shelter, emergency first aid, disaster welfare information, and

bulk distribution of emergency relief items. The organization also serves as a support agency for public health and medical services, providing blood, mental health service and disaster health services, among other support functions. In the Puget Sound area, the American Red Cross is responsible for:

- Setting up shelters or assisting with support of spontaneous shelters
- Integrating community resources (such as food, water, clothing, first aid, and mental health support) into the response
- Supporting and facilitating the response with all of the local and national responses available

Five local American Red Cross chapters serve the Regional Area:

- Mount Rainier Chapter, which serves Pierce, Lewis (outside the CSA), Mason, Thurston, Grays Harbor (outside CSA) counties
- American Red Cross Serving King and Kitsap Counties
- Mt. Baker Chapter, which serves Skagit Valley (and Whatcom County, outside the CSA)
- Snohomish County Chapter
- The Islands Red Cross Chapter, which serves Oak Harbor and Anacortes (Island and Skagit counties)

Following an incident, local chapters will self-activate to:

- Establish liaisons at each local or county EOC, as necessary
- Open shelters at pre-established sites staffed with locally trained volunteers
- Collect and transmit information about shelter locations, residents and estimated community needs to the National Headquarters of the American Red Cross to effectively coordinate local response and facilitate establishment of a regional operational center as quickly as possible
- Provide information on the Safe and Well family communications system

Upon notification from local chapters, the National Headquarters of the American Red Cross:

- Sends liaisons to the state EOC (WAEMD), the FEMA Regional Response Coordination Center, and the Federal/State Joint Field Office, once it is operational.
- Organizes a disaster relief organization in the Puget Sound Area to consolidate information from the affected areas, and develops a response strategy
- Implements the national response structure and move supplies, food, water, mobile kitchens, and personnel into the Puget Sound Area
- Works with the Disaster Relief Operation and local jurisdictional EOCs to support shelters and other mass care and health services.
- At the national level, coordinates with Federal Government and national non-governmental organizations

- At the state level, in coordination with the state EOC, sets up a staging area for resources sent from outside the region, and assembles volunteers, vehicles, and supplies in Olympia or other appropriate locations
- If necessary, begins distributing emergency supplies from the American Red Cross' National Disaster Services Field Centers in neighboring states
-

b) Public and Private Animal Care Agencies

The Washington State Animal Response Team, local animal response teams, veterinarians, public animal control agencies and private animal care shelters can provide assistance in animal control operations during an evacuation effort which include:

- Assist in the transportation, recovery and rescue of animals
- Provide temporary corrals or trailers for large animals
- Coordinate with general shelter operations on areas for pets
- Feeding pets

c) The Salvation Army

The Salvation Army may provide, within its means, assistance in donations management, mobile and shelter feeding, casework specialists, cleanup and restoration, counseling and language interpretation. All TSA assistance is predicated on resources available at the time of event.

d) 2-1-1 Information Line

The 2-1-1 information line is the national dialing code for free, 24-hour community, health and disaster information. Like 9-1-1 for emergency service, 2-1-1 has been set aside by the Federal Communications Commission for the public to easily access community information. Callers receive personalized information from a live phone specialist who can answer questions about a variety of non-profit services and agencies. In times of disaster, 2-1-1 can be mobilized as a central point for disseminating public information. After the danger has passed, 2-1-1 helps victims secure recovery assistance.

e) Washington Voluntary Organizations Active in Disaster (WAVOAD)

WAVOAD offers an excellent communication medium to Governmental agencies whereby they can contact WAVOAD with needed personnel, activities and materiel in a disaster, and these needs, through WAVOAD can be disseminated to all its members, saving said agency from having to know all of the many organizations, and their contacts, which they would wish to contact. WAVOAD helps member groups learn of these needs and contact an agency directly if they are able to assist them. These member groups and agencies can then coordinate between each other to best serve the needs of disaster survivors. Member groups also collaborate with each other increasingly as they get to know their fellow member groups and COADs, and how those groups operate. WAVOAD is essentially an information conduit. It

further has the ability to educate its member groups and create relationships amongst them and Governmental agencies and COADs to foster increased cooperation. WAVOAD maintains a nominal budget and its member liaisons and leadership team are comprised mainly of volunteers who are usually are involved in many volunteer activities in addition to WAVOAD. With these stipulations, WAVOAD specifies its SOPs and Leadership Team duties in an effective, but concise fashion to allow for follow through with its objectives in a realistic and attainable manner so as to maintain member interest.

### f) Washington State Citizen Corps (and local affiliations)

Coordinates persons trained and certified as Community Emergency Response Team responders to support local disaster response efforts.

### g) Washington Medical Reserve Corps

The Medical Reserve Corps (MRC) Program is a federal program sponsored by the Health and Human Services Office of the US Surgeon General. MRC units are community-based and function as a way to locally organize and utilize both medical and non medical support professionals who want to donate their time and expertise to promote healthy living throughout the year and to prepare for and respond to emergencies. MRC volunteers supplement existing local emergency and public health resources. Volunteers include medical and public health professionals such as physicians, nurses, pharmacists, dentists, mental health, veterinarians, and epidemiologists. Other community members, such as interpreters, computer specialists, radio operators, chaplains, office workers and legal advisors fill support positions. All eight participating counties in the RCPGP program which includes Island, King, Kitsap, Pierce, Skagit, Snohomish and Thurston have an active MRC unit sponsored by their county based Emergency Management / Public Health Office. Contact information for each of these units is located on the MRC web site and can be found at http://www.medicalreservecorps.gov/FindMRC.php

### h) Washington Search and Rescue

The Rescue Coordination Center (RCC) is an extension of the state Emergency Operations Center (EOC) activated in an emergency or disaster to support local search and rescue missions by coordinating the state, out-of-state, federal, and international search and rescue operations conducted in support of the incident. Following a catastrophic earthquake, volcanic eruption, tsunami, or other natural or human caused disaster, the Emergency Management Division may activate the RCC in support of local government to coordinate the extensive Search and Rescue (SAR) resources required by the scope of the disaster. As an extension of the state EOC, the RCC may be co-located or deployed to a location in proximity to the incident site. Requests for assistance from the jurisdiction(s) affected by the disaster will be received, processed, and prioritized. The RCC will coordinate the reception, staging, preparation for employment, and deployment to the scene of all state, out-of-state, and federal search and rescue resources responding to the disaster.

# F. Private Sector

Following an incident, a number of businesses are likely to donate large, uniform quantities of products, facilities and supplies. These products and supplies will be managed and distributed through a combination of Aid Matrix donations management program and voluntary organizations. In addition, businesses will be instrumental in restoring infrastructure and facilitating economic recovery in the Puget Sound Region.

# G. Infrastructure

## Utility Agencies

Puget Sound Energy, Tacoma Public Utilities, Seattle Public Utilities, Seattle City Light, AT&T, and other utility agencies will play vital roles following an incident by assessing utility damage, setting guidelines and priorities for utility restoration, coordinating with local and state governments, and assessing the need for mutual aid assistance.

# V. COMMUNICATIONS

Effective, interoperable, reliable, timely, and redundant communications and information management are essential to a successful evacuation and sheltering effort. Communications considerations include the initial evacuation notification to the public, interjurisdictional and intra-agency communication, situational report updates, real-time communication updates to evacuees, and communications with access and functional needs populations.

## A. Public Notification and Communications

Effective and informative notification to the public will be vital to convincing them that they should evacuate or shelter-in-place. The public must understand why they need to evacuate or shelter-in-place, how long they will need to do so, the location of transportation and evacuation points, the time required for evacuations, the availability of shelters, what they should take with them, how their pets will be accommodated, how they should secure their homes, and the security that will be provided when they are away from their homes. If the event happens during the weekday and school children are being evacuated, parents will need timely information on where to pick up their children. Notification methods will include the Emergency Alert System, use of local media through television, radio and the internet, and reverse-9-1-1 type systems. The majority of evacuation advisories will be based on no-notice or short notice incidents. Without proper information, people may evacuate towards a hazard, putting them in greater danger, or may evacuate unnecessarily and create additional congestion on identified evacuation routes.

In the event of a no-notice incident that will require an evacuation and/or sheltering effort, the media will most likely be the first to notify the public. Many Joint Information Centers (JICs) will not be functional and will not be able to provide information to the media or the public until the various EOCs are activated.

It is also important to note that certain methods of communicating with the public may not be available following an incident, including television and the internet. In the event of a total loss of television or internet connectivity, local radio stations will be the preferred method of use.

### (1) Initial Notification

Effective initial communication to the public will enhance the efficiency of the overall evacuation and reduce the associated mental and physical strains. The public is often confused by evacuation information and unable to make informed decisions on evacuations or where to shelter. Some people will not know if they are in a hazardous area, will evacuate unnecessarily, or may not know when to respond to an order of evacuation. The initial public notification should provide basic information to residents including:

- Whether residents should evacuate or shelter-in-place
- The areas that need to be evacuated, with reference to known geographic features

- Why and when residents should evacuate
- The time required for evacuation efforts.
- Available shelters
- The designated transportation and evacuation points and evacuations routes
- Available transportation options
- What residents should take from their homes
- How long the evacuation is expected to last
- How pets will be accommodated
- Security plans that are in place to protect residential property
- When informational updates will be made available
- Other information deemed appropriate and required before residents evacuate
- For people that will be relying on transportation points, it is important that these people are informed about when transportation services will begin and end, transportation point locations, frequency of pick-ups, travel destinations (evacuation points) and what to bring with them.
- Available communication tools/capabilities which may be used to notify the general public about the need to evacuate or shelter-in-place include:
  - Emergency Alert System
  - Mass notification systems
    - 2-1-1
    - 5-1-1
  - Emergency websites
  - Television
  - Radio
  - Public Address Systems
  - Police vehicles equipped with bullhorns
  - Door to door notification
  - Changeable message signs

(2) Communicating with Access and Functional Needs Populations

The traditional types of notification methods may not meet the requirements of those with access and functional needs, such as those who are blind, have poor vision, are deaf or are hard of hearing. Notification procedures will be tailored to each group, employing multiple methodologies to ensure that all segments of the population are provided with the necessary information. Generally, mass notification systems will be the primary means of contacting access and functional needs populations. Other forms of notification that are effective can

include telephone, television messages with open captioning or sign language, auto-dialed teletypewriter messages, text messages, email, or direct door-to-door notification. Local jurisdictions should also establish relationships with public and private agencies that provide home-based care provision services or work with high risk populations.

### (3) Evacuation Informational Updates

The public must be provided coordinated, frequent, and accurate information during an evacuation effort. Real-time updates must be communicated to evacuees that include the location of transportation and evacuation points; evacuation routes; road and area closures; the availability of hotels, food, fuel, medical and other essential services; traffic conditions; and shelter capacities. Other essential information to be conveyed to the public includes the security measures that are being implemented, weather conditions, and any changes to evacuation plans.

Real-time informational updates will be provided to evacuees en route through emergency radio stations, televisions, websites, 2-1-1, 5-1-1, and highway changeable message signs. It is also recommended that local jurisdictions consider posting signs along major evacuation transportation corridors that provide information about emergency numbers or radio stations that can be used during an emergency.

The Joint Information Centers/Systems are responsible for providing information updates to the public and to the media. Depending on the duration of the evacuation, communication methods may vary from the onset of the evacuation to the conclusion of the evacuation. Therefore, it is important that the public understands how the can continue to access informational updates for the duration of the incident.

## B. Hazard Specific Considerations for Communications

### Earthquake

- An earthquake incident would occur without any notice and may cause power outages or damage to certain communication resources. In these circumstances, back-up communication resources may need to be used.
- Additional information on earthquake faults can be found in the Regional Coordination Plan section, or from the United States Geological Survey website at www.usgs.gov.

### Winter Storm/Flooding

- Communication of approaching storms and associated precipitation could allow some initial pre-incident preparation and planning (i.e. purchase of sandbags, etc.)
- The public must be informed that they should not attempt to drive through water on a road. Most vehicles can be swept away by less than two feet of moving water.

- The public should also be informed to avoid walking through floodwaters. People can be swept away by as little as two inches of moving water.

Terrorism (Anthrax Attack)

- An act of terrorism is intended to disrupt a community's way of life through violence and physiological fear. Effective, relevant, and timely information will be critical in easing the public's fear following a terrorist incident.
- At times, the best response to protect public safety from certain biological or chemical terrorist attacks will be to shelter-in-place. Information and directions on whether the public should evacuate or shelter-in-place must be adequately conveyed during the initial public notification.
- Advanced notice may be available for certain terrorist attacks. These types of incidents will be handled on a case-by-case basis and the decision to communicate an evacuation order will be made at the local level through the Incident Commander.

# C. Inter Jurisdictional and Interagency Communications

Interjurisdictional and interagency coordination will be conducted through the federal, State and local EOCs and the Incident Command Posts utilizing available communication equipment and infrastructure and using established procedures. Agency liaisons will also be present in the State EOC and the impacted jurisdictional EOCs to facilitate communication between systems such as WebEOC to expedite the transfer of information regarding the status of the incident. Emergency managers must be able to make informed decisions based on changing risks, resources and capabilities throughout the execution of the evacuation and sheltering effort. The identification of operational adjustments and alternative evacuation routes and sheltering locations based on traffic monitoring, infrastructure damage, and other information sharing must effectively be communicated to all affected jurisdictions, agencies and the public. Effective and efficient communications is essential for information sharing and status updates to all affected jurisdictions. In addition, it is critical that local EOCs coordinate evacuation efforts with the State EOC to ensure potential conflicts are conciliated. This may involve phasing community evacuation efforts or the allocation of critical resources.

# D. Communication Contingency Plans

In the event of total devastation to all electronic communications, the Joint Information Centers/Systems will contact area radio stations to broadcast emergency information to the general public in the affected areas.

Radio Amateur Civil Emergency Services (RACES) has the ability to obtain a great deal of information for local governments even when other communications systems are unavailable. The RACES will be heavily relied upon to relay information from the incident site(s) to the EOCs.

# VI. TRANSPORTATION

## A. Modes of Transportation

The primary mode of transportation that will be used during jurisdictional evacuation efforts will be privately owned automobiles. However, it is critical that evacuation plans identify and provide other safe modes of transportation for those people that cannot evacuate by private vehicle and for access and functional needs populations. The Region is developing MOUs/MOAs with various regional transit systems for the use of buses, light rail, and ferry systems and the provision of bus drivers, light rail transit operators, and paratransit operators. Agreements with private schools and charter bus companies will also be pursued. In addition, the Region will work on establishing and maintaining working relationships with partner organizations including advocacy organizations, agencies that serve the transportation-dependent populations, and faith and community based organizations. All available public transportation resources will be included in a resource based list to be shared throughout the Region. (See Appendix D for public transportation resources.)

The Region will use available resources, MOUs/MOAs with public and private transportation agencies, and mutual aid to procure, coordinate, and provide adequate means of transportation for those people that do not own or have access to automobiles or who have other mobility challenges.

## B. Transportation Points

Local jurisdictions will work with law enforcement agencies to identify and establish transportation points. Transportation points will function to collect and transport people without transportation resources to evacuation points.

These points should be large, well known sites, such as shopping centers, libraries, and schools. The overall number and location of evacuation points should be based on the population that needs to be accommodated and with the understanding the evacuees will reach these points by foot. Law enforcement personnel should ensure these points are well marked through the use of signs or other forms of identification. It is critical that people are informed of their destinations prior to using provided public transportation.

## C. Transportation Coordination

Staging areas will be established to first stage and then obtain control over transportation resources in support of transportation point operations. Strike Teams/Task Forces can be used to coordinate these resources effectively. The assigned leader of the Strike Team/Task Force will be responsible for coordinating these resources and will have the ability to communicate with command and control of the evacuation and each of the drivers. It is critical that control over transportation resource is maintained, especially after evacuees are dropped off at evacuation points, and drivers must be re-routed to other transportation points.

Law enforcement escorts can also be used to provide force protection and maintain control over transportation resources. Law enforcement vehicles can maintain communications with authorities via radio. These escorts can therefore be used to coordinate real-time information on road conditions, evacuation and transportation points and other critical information.

Overall evacuation routes need to be coordinated across jurisdictional boundaries. There may be a need for sustained interjurisdictional coordination between evacuated communities and host communities along or near the evacuation routes.

# D. National Mass Evacuation Tracking System

### Overview

The National Mass Evacuation Tracking System (NMETS) is composed of both manual and computer-based systems that are designed to assist States in tracking the movement of transportation-assisted evacuees, their household pets, luggage and medical equipment during evacuations.

The System includes three distinct evacuation support tools that can operate independently or be used in combination to support multi-State, state-managed or local-level evacuation operations:

1. Paper Based and Low Tech (PBEST)
2. Handheld System (HH)
3. Advanced Technology (AT)

### Major Functionality (Advanced Technology)

During enrollment, RFID (radio frequency identification)/barcode wristbands are given to evacuees and their possessions. The wristband numbers are used to link all household members and their possessions electronically in the system. The wristbands, which contain a unique identifying number that is associated to an evacuee's information, are scanned at each site to record the evacuee's location and departure/arrival times. This information may be used to create transportation manifests, determine sheltering requirements and inform operational decision-making regarding the allocation of emergency resources.

### Future Functionality

2.1 Release

- Aggregate export functionality to NSS System
- Creation of mNMETS module
- Additional functional enhancements
- Implementation of EDXL-TEP standards

2.2 Release

- Additional functional and mobile enhancements
- Implementation of data exchanges with various external entities

# E. Evacuation Routes

Primary evacuation routes consist of the major interstates, highways and prime arterials within the Region. Local jurisdictions will work with the State EOC, law enforcement officials, WSDOT, WSP, public works departments, and other applicable agencies/departments to identify evacuation points and transportation routes, particularly for use in 'notice' events, where infrastructure in many areas may remain intact. In addition, transportation points will be identified to collect and transport those people without transportation resources to evacuation points.

### Evacuation Route Determination

It will be necessary to identify evacuation points before evacuation routes are announced to the public. Evacuation routes will be determined based on the location and extent of the incident and will include as many pre-designated transportation routes as possible. Important roadway characteristics and factors that should be considered when selecting an evacuation route include:

- Shortest route to the designated destination area
- Maximum capacity
- Ability to increase capacity and traffic flow using traffic control strategies
- Maximum number of lanes that provide continuous flow through the evacuation area
- Availability of infrastructure to disseminate real-time conditions and messages to evacuees en route, such as changeable message signs
- Minimal number of potentially hazardous points and bottlenecks, such as bridges, tunnels, lane reductions, etc.

Traffic conditions must be monitored along evacuation routes and operational adjustments should be made as necessary to maximize throughput. These adjustments may include the identification of alternative evacuation routes.

# F. Transportation Strategies

There are many transportation strategies that are available that can be implemented during an evacuation effort to enhance traffic flow and reduce the overall evacuation time. These strategies include traffic signal coordination, closure of off and on-ramps, Intelligent Transportation System, segregation of pedestrian and vehicle traffic, exclusive bus routes, phased evacuation, phased release of parking facilities, use of designated markings, road barriers and use of law enforcement.

# G. Communication Considerations

It is essential that accurate and timely information is provided to evacuees en route during an evacuation effort. Evacuees must be provided real-time information updates regarding road

conditions, evacuation routes, availability of shelters, evacuation times, and other vital information. Travel and evacuation information can be provided through 2-1-1 telephone systems, 5-1-1; emergency broadcast radio, mass notification systems, the internet, and dynamic messaging signs, such as Changeable Message Signs. It is also recommended that local jurisdictions consider posting signs along major evacuation transportation corridors that provide information about emergency numbers or radio stations that can be used during emergencies.

If evacuation of public schools is required, students will normally be transported on school buses to other schools or facilities outside the risk area. It is essential that the public is provided timely information on where parents can pick up their children and the security procedures that are in place to ensure their protection. In addition, it is assumed that transportation arrangements can be made with hotels/motels for the evacuation of tourists.

# H. Evacuation of Access and Functional Needs Populations

It is critical that modes of available transportation are identified that can help evacuate people who have access and functional needs during an emergency. Transportation that can accommodate people in wheelchairs, scooters, or other mobility aids needs to be made available. Some potential options can be the use of lift-equipped school buses or vans. People that are blind or have poor vision will also need additional assistance because they can no longer rely on their traditional orientation and navigation methods. Buses will most likely be the primary resources used to evacuate access and functional needs populations. Most buses can accommodate two wheelchairs. It is also essential that local jurisdictions establish and maintain working relationships with public and private agencies that serve the transportation-dependent populations.

Specialized facilities such as hospitals, nursing homes, and correctional facilities are required to have their own respective evacuation plans and procedures that will be followed during an incident. Jurisdictions in the Region must ensure that the MOUs/MOAs and private transportation contracts established by jurisdictions are not duplicated and don't rely on the same exact transportation resources as other jurisdictions and organizations.

In addition, people that are rescued following an incident will also have to be transported to evacuation points.

# I. Evacuation of Animals

Ensuring for the transportation, care, and sheltering of animals is an important factor in evacuation planning. Many people will refuse to evacuate their homes if they cannot take their pets with them. It is estimated that up to 25 percent of pet owners will completely fail to evacuate because of their animals. Furthermore, about 30-50 percent of pet owners will leave pets behind, and will then attempt to re-enter an evacuated site to rescue their animals.

Therefore, it is imperative that evacuation plans address pet evacuation and sheltering procedures to protect both human and animal health and safety.

Due to the lessons learned from Hurricane Katrina, the Pets Evacuation and Transportation Standards Act of 2006 was established, which amends the Stafford Act, and requires evacuation plans take into account the needs of individuals with household pets and service animals prior to, during, and following a major disaster or emergency.

Regional animal response organizations have some plans in place to transport and shelter pets in a disaster. Only non-emergency resources and personnel, such as public and private animal service agencies, will be used to rescue and transport animals during an evacuation effort. It is assumed that residents that have their own means of transportation will evacuate with their small household pets. Residents that do not have access to vehicles will need to secure their pets in cages or carriers as they arrive to transportation points. Regional animal response organizations will work with animal service agencies and volunteers to develop an animal tracking methodology. If these residents do not have the required cages or carriers, they will be asked to secure their animals in their homes. This strategy places responsibility upon individual owners and will require a public education component that informs the public that carriers, cages and trailers will be required for pet evacuations and recommends that pet owners microchip their animals for identification purposes. It is recognized that owners may refuse to evacuate their homes if they are required to leave their pets behind. Individual jurisdictions will need to identify strategies to address pet evacuations.

Jurisdictions must not assume that owners will have their own means of transporting large animals, such as trailers. The Washington State Animal Response Team (WASART) can provide support with the transportation of large animals. MOUs need to be formalized with other agencies/organizations for the transportation of large animals, such as horses. In addition, potential volunteer resources and private groups should be identified and tracked in systems such as WebEOC. Jurisdictions can also:

- Provide pet owners information of nearby kennels, animal shelters, and veterinary clinics that may be able to be temporary shelter pets.
- Set up temporary pet shelters at fairgrounds, parks and other similar facilities.

# J. Hazard Specific Considerations for Evacuations

## Earthquake

- An earthquake incident has the potential to cause considerable damage to transportation infrastructure. Emergency response personnel, in coordination with public works, will need to assess damage to bridges, overpasses, elevated roadways, utility lines, and roadways before safe evacuation routes can be identified and relayed to the public.
- An earthquake incident has the potential to significantly impair Puget Sound's regional transportation systems, requiring major evacuation route diversions, and implementation of numerous transportation management and operational strategies and technologies.

Winter Storm/Flooding

- The public must be informed that they should not attempt to drive through moving flood water on roadways. Most vehicles can be swept away by less than two feet of moving water.
- The public should also be informed to avoid walking through floodwaters. People can be swept away by as little as two inches of moving water.
- Due to the different geographic locations of flood hazards in Puget Sound, as well as the nature of flooding to exacerbate quickly, based on a fast rising flood hazard, the public may be advised to evacuate to higher ground by foot, if it is more efficient than by vehicle.
- Sections of the identified primary evacuation routes may become inundated with water and washed out. Emergency personnel will need to assess the feasibility of these roads to determine if alternative evacuation routes need to be identified.
- There is a possibility that flooding may trap people within the danger zones. Emergency personnel will need to rescue these people using boats or helicopters. Zodiacs and flat-bottom boats are the best resources for flood rescue. A limited number of jurisdictions have swift water rescue team.

Terrorism (Anthrax Attack)

- Based on the type of terrorist event, emergency responders may need to conduct a damage assessment of transportation infrastructure.

# VII. SHELTERING

Shelter may initially be provided to evacuees through the establishment of evacuation points. These evacuation points can serve as temporary safe zones for evacuees and will provide basic needs such as food, water and accessible restrooms.

In the event that it is determined that mass care is required, local jurisdictions will activate their local community mass care plans, which includes the local American Red Cross response as well. Some evacuation points may also be converted into shelter locations if necessary.

Shelters must be able to meet the basic need for their designated maximum capacity. This includes but is not limited to: accessible restrooms and showers, beds/cots, food/water, blankets, toiletries, first aid, and tools to facilitate integration of access and functional needs into the general population shelter.

Evacuees will not be permitted to enter shelters if they are carrying weapons, illegal drugs, or alcohol.

Jurisdictions should also consider establishing specific shelters for Disaster Service Workers and their families so these responders can concentrate on their work and not have to worry about family members.

# A. FEMA National Sheltering System (NSS)

### Overview

The National Shelter System (NSS) is a web-based data system that contains profiles of emergency shelters and facilities nationwide. It allows users to identify, track, analyze, and report on disaster preparedness and operations data. Shelters can be associated with FEMA Disaster numbers or American Red Cross Disaster Relief Operation numbers. It also can be used to support day-to-day shelter management in response to a disaster of any size.

### Major Functionality

(1) Identify Shelters: NSS captures shelter information to create profiles for shelters around the United States. Following is a short list of the data collected: Shelter address, Evacuation capacity, Availability dates, and ADA compliance.

(2) Track Shelter Operations: NSS allows shelter operators to collect and track information on the day-to-day operations of an active shelter. Information collected includes the number of meals or snacks served, and population statistics by age and need evaluation.

(3) Analyze Shelters: NSS information can be analyzed during planning, preparedness, response to and recovery from a disaster. Some information that is collected in NSS that are valuable during their processes include: Population history, Accessibility information, Meals served, and Household pet accommodations.

(4) Report on Shelters: NSS provides reports to assist users in analyzing information. Reports include: Shelter population, Ad Hoc Reporting based on data required, Shelter Mapping and Operations.

### Future Functionality

2.0 Release

- American Red Cross (ARC) Automatic Data Exchange
- Shelter Locator System (SLS)
- Revamped User Interface
- Field updates to include additional congregate facilities and other mass care operational sites

2.1 Release

- Import of Data in EDXL-DE Standard from WebEOC
- Resource Requests (EDXL-RM Standard)
- Resource Assessment
- ADA Compliance Tabs

2.2 Release

- Creation of the mNSS module of NSS
- First enhancements to create a dashboard and analytics component of NSS
- Configuration of multiple WebEOC to connect with NSS
- Two-way communication between NSS and WebEOC

3.0 Release

- Full roll-out of a dashboard and analytics component of NSS to receive information from NMETS, S-NSS instances, and possibly NEFRLS

In mid 2010, Washington State signed an MOU to utilize the FEMA NSS System. The login page is at https://portal.fema.gov, but log-in permission comes from the local Emergency Management office/department POC, who then sends application for approval to WA Emergency Management Division, and then to the FEMA Regional POC.

## B. Access and Functional Needs Populations

There are no shelters in the Region that are specifically designated for access and functional needs populations. Specialized services should be provided as required to individuals with access and functional needs. Shelters will need to accommodate people that require medications, especially certain types of insulin that require refrigeration, and for people who rely on life-support systems or other devices that require power to operate. Communication tools, such as white boards, should be available to assist in disseminating information. These shelters must be equipped with back-up generators for power supply and have refrigeration capabilities.

## C. Pet Sheltering

Many local jurisdictions, as well as the American Red Cross, have been developing plans and protocols to provide pet shelters at general population shelters. The protocols may include referrals to other shelters that do provide pet sheltering resources.

## D. Regional Shelter Capacities

Regional shelter capacities will be captured in the information provided by the FEMA National Sheltering System, as well as the American Red Cross National Sheltering System. However, these tools are only as good as the information entered into them, including locations of shelters and current populations. This will be an on-going training process and effort to educate local jurisdictions on how to input and update appropriate information, as well as how to utilize the NSS tools.

# E. Transportation Needs

As well as transportation needs for those that are evacuating, there will be ongoing transportation needs during and after the incidents, such as transportation for evacuees between assistance centers, medical needs shelters, pet shelters, and livestock shelters. There will also be transportation needs for staff/volunteers between staff/volunteer housing, shelters, and the various ICP and EOCs. Contracted transportation may be a solution, and MOUs/MOAs set up ahead of time will facilitate this process.

# F. Spontaneous Shelters

In a large incident, spontaneous or nontraditional shelters likely will appear throughout a local jurisdiction. Spontaneous shelters are sites that are not requested or physically supported by government; often jurisdictions are not aware that these shelters are in operation. The spontaneous shelters may be operated by volunteer organizations unfamiliar to response agencies, or may be informally established by affected residents. The primary advantage of spontaneous shelters is that they meet an immediate need with resources (such as location and staff) that are familiar to the residents. In a regional incident, local government must decide whether to integrate spontaneous shelter sites into the care and shelter system.

With regard to these shelters, the local government may take the following actions:

- Take over management of the spontaneous shelter (with or without the American Red Cross – based on their capabilities at the time). Local government may choose to manage a spontaneous shelter if it meets a critical need. When a spontaneous shelter becomes a government or American Red Cross-sanctioned shelter, it is expected to follow the guidance and information needs of the local jurisdiction, including adherence to operating policies and procedures, providing standardized services and submitting daily status reports. Before supporting spontaneous shelter sites, the local jurisdiction should inspect the facility for structural integrity and the ability to meet basic local and county health requirements.
- Keep the shelter's management in place and support the shelter with the resources it needs. If government resources are limited, if the shelter meets neighborhood needs with unique resources, or if residents are more comfortable with the organization that opened the shelter, the local government may choose to keep the initial shelter management in place, and support the shelter with equipment, trained staff, food, and supplies as they become available.
- Close the spontaneous shelter and absorb the residents into shelters run by the American Red Cross or the local jurisdiction. If the shelter does not meet American Red Cross standards, poses a health risk, or is an area already serviced by a jurisdiction or American Red Cross shelters, the local jurisdiction may decide to close the shelter.

# G. FEMA Long Term Housing Assistance

In declared disasters and emergencies, short and long-term housing assistance from FEMA may be available.

### Temporary Housing Assistance

Temporary Housing Assistance is provided when a FEMA assistance applicant's home is destroyed or damaged so badly that it cannot be lived in and there is insufficient insurance to meet the need for housing. Temporary rental assistance, grants to replace destroyed homes and repair grants are included in this type of assistance.

### Rental Assistance

Rental assistance grants are provided by FEMA to homeowners and renters to temporarily rent another place while repairs are made to their home or while they are looking for another place to live. Applicants' damaged homes must be inspected to determine if they are eligible for rental assistance grants. Rental assistance grants may be used to pay for renting an apartment or house, or for staying in a hotel or motel. In areas where no housing is available to rent, alternative forms of housing, such as travel trailers or mobile homes, may be provided.

### Repair Grants

Underinsured disaster victims may be eligible for grants to cover labor and material costs for home repairs to make the home safe to live in. Typical types of repairs covered include: roof, electrical system, and windows and doors. FEMA assistance covers minimal repairs. Low-interest disaster loans from the U.S. Small Business Administration are the source of funding for repairs to restore survivors' houses to pre-disaster condition.

# H. Communications Considerations

The Region and impacted EOCs must be constantly aware of shelter requirements and capacities throughout the region. The American Red Cross and FEMA's National Shelter System is a new way to keep track of open shelters, shelter capacities, and to help coordinate shelter needs at a regional level. Information from this system will then be relayed to the regional EOCs and the Joint Information Centers/System.

Evacuees will be provided updated shelter information en route through mobile devices/internet outlets, emergency radio broadcasts, messaging boards along the evacuation routes, and 2-1-1 and 5-1-1 informational lines.

Shelter personnel must ensure they are able to communicate with functional needs populations including people who are deaf, deaf-blind or hard of hearing, blind or have low vision, or have cognitive disabilities. Translation services (language or sign language) should also be provided at shelters and evacuation points. Jurisdictions in the Region must work with local educational

and ethnic organizations to identify individuals who speak foreign languages and who will be available to assist in the evacuation.

# I. Hazard Specific Considerations for Sheltering

### Earthquake

- Shelters will need to be assessed for structural damage prior to being opened up for public use.
- Residents may refuse to evacuate from their homes following an earthquake and will choose to camp in their yards and protect their property as an alternative of going to a shelter.
- Shelter residents need to be educated on earthquake emergencies and other safety issues, including what to do in the case of aftershocks.
- There may be a need, due to aftershocks, to relocate as shelter.

### Winter Storm/Flooding

- Shelter sites will be located outside the areas impacted by these hazards.

### Terrorism (Anthrax Attack)

- Sheltering-in-place may provide greater protection to the public during acts of terrorism involving chemical, biological, or radiological agents.

# VIII. HOST COMMUNITIES

Phase 2 Work

# IX. FAMILY REUNIFICATION

There are several systems that have been used in past disasters, and as social media networks mature, the different ways of reunifying families multiplies. Below are some examples.

a) National Emergency Family Registry and Locator System (NEFRLS)

- System, hosted by FEMA, which may be activated following a disaster declaration and operates on a 24/7 basis
- Displaced individuals, including medical patients, voluntarily register by telephone or Internet
- Registrants can provide current contact information, list travel companions, and create a personal message.
- Registrants and the 7 individuals they designate are required to accept a Privacy Act Statement and complete an identity verification process
- Individuals registering as or searching for a displaced child under the age of 21 will be directed to the National Emergency Child Locator Center (NECLC)

b) National Emergency Child Locator Center (NECLC)

- Established to assist governments and law enforcement agencies track and locate children separated from their parents or guardians as a result of a major incidents
- Managed by the National Center for Missing & Exploited Children (NCMEC), with support from FEMA
  - Assists in locating separated children by:
    - Operating a telephone bank
    - Coordinating efforts with law enforcement and human service agencies
    - Deploying Team Adam to the field to assist with investigations
    - Helps shelters ensure the safety of dislocated children

c) The American Red Cross Safe and Well Program

- Helps people communicate from inside the disaster affected areas to loved ones outside
- People within a disaster area can register themselves as “Safe and Well” and leave brief messages, which if desired will update their Facebook or Twitter status

- Concerned family members can search for messages posted by those who register
- Publically accessible on the internet 24/7/365,
- The site can be reached directly at https://safeandwell.communityos.org. or at www.redcross.org click on Safe and Well link
- Those without internet, in need of translation service may call 1-866-GET-INFO ( 866-438—4636) for help with registration and the hearing impaired may call 1-800-526-1417

### d) Next of Kin Registry (NOKR)

The Emergency Contact Registry (NOKR) is a non-partisan; non-profit 501(c)(3) humanitarian organization dedicated to bridging rapid emergency contact information. NOKR was established in January 2004 as a public service for daily emergency situations. NOKR is the central depository for Emergency Contact information in the United States plus 87 other countries.

The NOKR is a FREE tool for daily emergencies and national disasters. NOKR is an emergency contact system to help if an individual or family member is missing, injured or deceased. NOKR provides the public a free proactive service to store emergency contacts, next of kin and vital medical information that would be critical to emergency response agencies. Stored information is only accessible via a secure area that is only accessible by emergency public trust agencies that have registered with NOKR. For more information on this system, visit www.pleasenotifyme.org.

### e) Person Finder by Google

Created after Hurricane Katrina, Google Crisis Response team assesses the severity and scope of a disaster to determine whether or not Google is able to uniquely contribute tools or content to the response efforts. As an example, after the Christchurch, NZ earthquake and Japanese earthquakes in early 2011, Google activated its 'person finder' which enabled people to either 'look for someone' or 'provide information about someone.' During the response to the Japanese earthquake, many news stations were reporting that people were using the person finder to locate their loved ones. For more information, visit www.google.com/crisisresponse.

# X. RE-ENTRY

Re-entry will be initiated by the local jurisdiction's EOC Director, based on clearance from the Incident Commander or the Liaison Offer of the Incident Management Team, in consultation with the Operations Section Chief.

The Operations Section Chief or the Incident Commander will designate a Re-Entry Coordinator. The Re-Entry Coordinator is responsible for coordinating the re-entry procedures with all involved agencies and ensuring effective communication. Priorities for re-entry should be:

- Safety
- Security
- Damage Assessment
- Restoration of Services
- Communication of Information

The impacted areas must be thoroughly investigated to ensure it is safe for residents to return and normal operations have been restored. This assessment should include verification that:

- Structures and trees are deemed safe
- Damage and safety assessment has been completed
- There are no leaking or ruptured gas lines or downed power lines
- Water and sewer lines have been repaired
- Search and rescue operations have been completed
- There are no hazardous materials that can threaten public safety or appropriate warnings have been issued
- Water has been deemed safe or appropriate warnings have been issued
- Major transportation routes are passable and debris has been removed from public right-of-way
- There is no threat to public safety and other significant hazards have been eliminated

The public will be notified of the re-entry status through emergency broadcast radio, television, press releases, internet, information phone lines, community briefings and informational updates at shelters.

Once evacuees are permitted to return, it is important that procedures are established to properly identify residents and critical support personnel as well as ensure the legitimacy of the contractors, insurance adjustors, and other personnel. Re-entry points should be staffed by law enforcement personnel.

Transportation resources will have to be coordinated to return evacuees that require transportation assistance from evacuation points or shelters back to their communities. Traffic management plans will need to be established for the return of evacuees which include the

identification of preferred travel routes. Relief agencies such as the American Red Cross, and other community and faith based organizations will also need to work closely with residents to provide information material and assistance.

When people are permitted to leave the shelters and return back to their homes, there is a potential that people with access and functional needs may not be able to enter their homes, especially if required ramps or other means of access have been destroyed. Due to these considerations, short-term housing must be identified that can accommodate the needs of people with disabilities. Potential sites could be hotels or motels, apartment buildings, or portable trailers with ramps. It is also important that these temporary housing sites are located in proximity to necessary support networks.

Each local EOC will be responsible for making the determination that re-entry has been completed for its jurisdiction, and promptly information the State EOC. Following confirmation from all affected jurisdictions that the re-entry process is complete, the State will notify every local EOC in the affected area of the date and time of the completion.

# XI. RESOURCES

## A. Personnel

The Region and its jurisdictions will go through established channels for mutual aid. Individual jurisdictions are responsible for maintaining their respective lists of critical personnel and volunteers during an emergency. It is recommended that each jurisdiction pre-identify skilled laborer resources that may be needed during an emergency such as bus drivers and interpreters.

## B. Transportation

The Region will be developing MOUs/MOAs with the various transit systems (see Appendix C for transit inventories) for the use of buses, trolleys and rail resources and for the provision of bus drivers, light rail transit operators, and paratransit operators. Agreements with private school and charter bus companies and other private transportation companies will also be pursued. In addition, the Region will work on establishing and maintaining working relationships with partner organizations including advocacy organizations, agencies that serve the transportation-dependent populations, and faith and community based organizations. All available transportations should be included in a region-wide tracking system database.

Buses are the Puget Sound's greatest resource in terms of alternative transportation modes. The combined transit system totals are well in excess of 3,600 buses, vans, trains, and ferries.

Additional potential transportation resources include, but are not limited to the following:

- Charter or school buses
- Seattle trolley
- Sound Transit light rail
- Amtrak
- Shuttles
- Taxis
- Hotel vans
- Rental cars
- Limousines
- Casino vans

## C. Additional Resource Requirements

It is essential that jurisdictions have a good understanding of what resources will or will not be available to them from other agencies in an evacuation effort. Jurisdictions should ensure that mutual aid agreements exist for critical resources such as traffic barricades, heavy equipment, and personnel resources. It is also essential that local jurisdictions establish and maintain working relationships with public and private agencies that work with access and functional

needs populations, including those with transportation needs. These agencies can provide assistance in the identification and transportation of these populations. MOUs need to be formalized with other agencies and organizations for the provision of animal food, water and supplies as well as assistance in the transportation of large animals. In addition, potential volunteer resources and private groups that can provide animal services should be identified and tracked.

### Mutual Aid

Under the Inter-County Mutual Aid Agreement which establishes an Omnibus Agreement, three of the counties in the Region (King, Pierce, and Thurston) may provide emergency response mutual aid on a voluntary basis from one jurisdiction to another. All counties in Washington State could be signatories, so it may be beneficial for the remaining five counties to sign this emergency management agreement. It is administered by Pierce County on behalf of the Washington State Emergency Management Association (WSEMA).

When a resource is requested, the following information should be included on the mission request tracking form:

- A description of the current situation
- A description of the requested staff, equipment, facility and supply needed
- Specification of the type or nature of the service to be provided
- Delivery location with a common map reference
- Local contact at delivery location with primary and secondary means of contact
- Name of the requesting agency and contact person
- Indication of when the resource is needed and an estimated duration of use
- For requested resource that include personnel and/or equipment with operators, a description of logistical support is suggested (e.g. food, shelter, fuel, and reasonable maintenance)

### American Red Cross

- The American Red Cross maintains disaster field supply storage facilities in the Puget Sound area. The warehouse contains materials for shelters, such as cots, blankets and comfort kits, and equipment need for such American Red Cross operations as mobile feeding.
- ARC maintains contracts with private vendors for foods to be distributed through mobile feeding operations. Disaster field supplies and supply contacts support American Red Cross operations.
- Resources are transported via American Red Cross vehicles, private contractors of the American Red Cross, or if needed, through local government or state support.
- American Red Cross chapters maintain their own caches of supplies for smaller scale shelters.

- American Red Cross chapters use their own resources and activate existing agreements with local vendors as much as possible to meet local needs.

# XII. PLAN DEVELOPMENT AND MAINTENANCE

Puget Sound RCPGP will be responsible for maintaining the Evacuation and Sheltering Annex. The Annex will be reviewed biannually and updated as necessary based on lessons learned and After Action Reports following drills, exercises, or actual incidents. The Annex will be revised every four years, at a minimum, to integrate new hazard information, established MOU/MOAs, changes in communities, and incorporate lessons learned from exercises or real incidents.

- Revisions and updates should include:
- Review of existing evacuation and sheltering procedures for all identified hazards to ensure continued accuracy and validity;
- Review of potential evacuation routes and noted shelter sites;
- Incorporation of new MOUs/MOAs and resources;
- Determination of additional evacuation and sheltering procedures;
- Assurance that necessary training has been made available to all relevant departments/agencies.

Departments and agencies assigned responsibilities in this Annex are accountable for developing and maintaining SOPs which cover these responsibilities.

Changes to this Annex shall be recorded in the Record of Changes table at the beginning of this document.

# XIII. AUTHORITIES AND REFERENCES

## A. Authorities

### Federal

- Homeland Security Presidential Directive 5 – Establishes NIMS
- United States Public Law 93-288 – The Robert T. Stafford Disaster Relief Act
- Homeland Security Presidential Directive 9 – Defense of US Agriculture and Food
- United States Public Law 109-308 – Pets Evacuation and Transportation Standards (PETS) Act of 2006 (Amends the Stafford Act)
- Post Katrina Emergency Reform Act of 2006 (Amends Homeland Security Act of 2002 and the Stafford Act)
- National Response Framework

### State

- RCW 38.08 – Powers and Duties of Governor
- RCW 43.06 – Governor's Emergency Powers
- RCW 38.52 - Emergency Management – Authorizes the State creation of local emergency management organizations in the political subdivisions
- WAC 118-04 – Emergency Worker Program
- WAC 118-30 – Local emergency management/services organizations plans and programs
- Washington State CEMP

## B. References


- Unified San Diego County Emergency Services Organization Operational Area Emergency Plan: Annex Q Evacuation; April 2007
- FEMA Evacuee Support Concept of Operations Template; July 2009
- Alliance: Los Angeles Operational Area Mass Evacuation Guide; January 2009
- Commonwealth of Virginia Emergency Operations Plan, Mass Evacuation and Sheltering Annex 6 Volume II; September 2007
- International Association of Assembly Managers, Inc. Mega-Shelter Planning Guide; 2010
- FEMA Evacuation Plan Template (NPD); September 2009
- American Red Cross Mass Sheltering Training Curriculum – Shelter Operations Management Toolkit; May 2008

- National Shelter System (FEMA)
- Comprehensive Planning Guide 101 (FEMA)

# XIV. Training, Exercise, and Evaluation

(This is a Phase 3 deliverable)

Summary paragraph

The Regional Evacuation and Sheltering Annex covers the eight counties included in the Puget Sound Regional Preparedness Grant Program (RCPGP): Island, King, Kitsap, Mason, Pierce, Skagit, Snohomish, and Thurston, tribal governments, and local jurisdictions within these counties (towns and cities). This eight-county region was established by the RCPGP. These counties, because of their geographical proximity to each other, face many of the same threats and hazards and will most likely, during a disaster, need to coordinate and communicate with each other.

Key Elements

The Shelter and Evacuation Annex describes the coordination of regional efforts for evacuation and for the provision of emergency temporary shelter, mass feeding, and other basic human needs to residents and visitors of the Puget Sound area who require such assistance following a regional emergency or catastrophic disaster. More specifically, this Annex:

- Describes how the regional coordination body coordinates mass care resource requests and maintains situations awareness from the local EOCs
- Identifies the circumstances in which regional evacuation, mass care and shelter decision-making is required and defines the roles, responsibilities and authority for regional decision-making.
- Reinforces the use of the FEMA National Shelter System (NSS) as the mechanism by which EOCs are informed of shelter status
- Identifies the considerations of access and functional needs populations.
- Achieves agreement regarding appropriate evacuation and shelter-in-place strategies and triggers
- Through the FEMA NSS, identifies care and shelter providers to include non-governmental organizations (NGOs) and local, state and federal agencies.
- Develops the procedures by which evacuation and sheltering providers coordinate communication processes and response efforts regionally.
- Facilitates interjurisdictional coordination regarding evacuation issues.

Associated Target Capabilities

Citizen Evacuation and Shelter in Place
Mass Care (Sheltering, Feeding, and Related Services)

Training

- FEMA NSS system training
- Pet Sheltering Training/Technical Assistance
- Mass Feeding Template training

Exercises and Evaluation

- Workshops for MOU development for mass feeding, mega sheltering, host communities, and pet sheltering.
- Workshops utilizing “Special Needs Considerations” document.
- Workshops for plan development using the UASI Evacuation Template.
- Various exercises around mass feeding, pet sheltering, vulnerable populations sheltering, and medical needs sheltering.
- Various exercises around evacuation including embarkation and debarkation sites, transportation considerations, staging areas, and host communities.

Target Audiences

- ESF6 Representative/etc. from local, county, State, and Federal Emergency Management Organizations
- Non-profit, community-based, non-governmental organizations
- Private Sector

# XV. APPENDICES

## A. Level III Evacuation Considerations

This appendix is intended to provide additional considerations that would be applicable during a Level III (catastrophic) evacuation effort. The National Response Plan defines a catastrophic event as any natural or manmade incident, including terrorism, which results in extraordinary levels of mass casualties, damage, or disruption severely affecting the population, infrastructure, environment, economy, national morale, and/or government functions. A catastrophic event could result in sustained national impacts over a prolonged period of time, immediately exceed local and state resources, and significantly interrupt government operations and emergency services to such an extent that national security could be threatened.

The following concepts, circumstances, and strategies should be considered during a Level III evacuation effort:

- Food, water, restrooms, fuel and shelter opportunities need to be available along evacuation routes.
- Rest areas, truck weigh stations, welcome centers, and service plazas should be staffed with emergency personnel to provide information to evacuees en-route.
- Tow trucks will need to be deployed along the evacuation routes to remove stalled or broken-down vehicles.
- Refueling resources will need to be provided for vehicles that operate on gas, diesel, and compressed natural gas.
- Mega shelter sites may need to be identified and staffed.
- The MACC should coordinate with shelter sites outside of the Region.
- A large scale evacuation effort over a long distance may be very challenging given the transportation network in Puget Sound.
- Under the National Response Framework, a catastrophic incident engenders a comprehensive and integrated Federal, State and local response. When the Secretary of Defense authorizes Defense Support of Civil Authorities for domestic incidents, the Department of Defense retains command of military forces under it and coordinates its activities under a Unified Area Command.
- FEMA maintains pre-positioned caches of disaster supplies throughout the western United States.
- In the event of a catastrophic incident in the Puget Sound region, FEMA will assign representatives with the authority to commit federal resources to the area and arrange the logistics of federal shipments.
- During the first 48 hours following an incident, FEMA transports ‘push items’ – federal assets that include Emergency Response Teams, equipment and other supplies – to an incident Mobilization Center.

- FEMA shops resources from mobilization centers to Federal Operational Staging Areas and to state staging areas, and relies on state and local agencies to distribute the resources.
- In a catastrophic incident, FEMA will deliver resources and transfer them to state control at any of the following locations:
  - Directly where the resources are needed;
  - Incident Command Post in a local jurisdiction;
  - Point of Distribution;
  - State staging area;
  - Federal Operational Staging Area; or
  - Mobilization Center.
- Federal personnel provide warehousing, transportation, and other labor whenever resources remain under the management of the Federal Government.
- FEMA resources include federal support until the point where supplies are handed off to the state and local authorities for distribution to the public. When supplies and commodities are handed off to the state and local government, labor and logistics support becomes the responsibility of those parties, unless the disaster requires further federal support from the Federal Government.
- FEMA is responsible for re-stocking Mobilization Centers and Federal Operational Staging Areas to a one to three-day supply level.
- FEMA validates the eligibility of and prioritizes requests from the State Government.
- FEMA mission tasks the Department of Transportation to activate the National Transportation Contract as part of the Emergency Support Function 1 – Transportation.
- FEMA mission tasks the U.S. Army Corps of Engineers to support requests for ice, water, and emergency power under Emergency Support Function 3 – Public Works and Engineering.
- Under the National Response Framework and at FEMA's direction, the U.S. Army Corps of Engineers may provide local and State Government with the following direct federal assistance:
  - Supplies of bottled or bulk potable water;
  - Supplies of packaged ice;
  - Transportation of purchased commodities to one or more staging and/or distribution sites, including moving from staging sites to Points of Distribution;
  - Loading and unloading of trailers and reefers;

- Storing of purchased or government-furnished commodities at staging sites outside of affected areas or Points of Distribution in affected area;
- Managing commodity contracts to execute assigned mission.

- The Department of Homeland Security and Health and Human Services Agency manage the Strategic National Stockpile (SNS) which is a large inventory of medicine and medical supplies used to protect the public if an emergency is severe enough to deplete local medical supplies.
- The SNS, which is strategically located in caches throughout the country, are staged for shipping to a disaster within 12 hours of notification.
- Technical staff travels with the SNS push packages to coordinate with state and local officials, and to ensure prompt and effective use of the materials.
- Health and Human Services transfers authority for the SNS assets to state and local authorities once they arrive at a designated state receiving and storage site.

## B. Catastrophic evacuation and/or sheltering Incident Management Team (IMT) checklist

| Position | Duties |
|---|---|
| Incident Commander | |
| | |
| | |
| Public Information Officer | Provide and/or coordinate Public Information Officer (PIO) staffing and/or support for the IC and all appropriate shelter divisions within the IC. |
| | Maintain awareness of time-sensitive decisions such as where shelters are established, limits and requirements for people seeking public shelter (limits on personal effects, pets, etc.), travel routes and the type of assistance available at each shelter. |
| | Coordinate closely with the Transportation Group to maintain awareness of pickup points, route changes and related information. |
| | Provide JIS information to facilitate media access including address, driving directions, points of entry, parking instructions/limitations, points of contact and hours of operation. Coordinate any special media requirements (e.g., space, power, etc.) |
| | Coordinate media visits with Shelter Supervisor and key staff. Develop internal messaging and act as spokesperson for the shelter staff. Help staff members prepare for interviews by media representatives. Help identify appropriate messages for shelter staff who may speak to media. |
| Safety Officer | |
| | |
| | |
| Operations Section Chief | Coordinates all shelter operations. |
| | Will assist in training of other staff to ensure successful execution and continuity of operations for regional care and sheltering. |
| | Supervision of branches and performance of branch duties. |
| A) Security Branch | Provides oversight of all security operations and services at shelter sites, feeding locations, and operating and support locations as designated by the Shelter Management Team. |
| | Is responsible for the coordination of the security function and the resourcing of staff and equipment to provide the necessary security services, which may include resourcing from outside agencies law enforcement agencies and private security. |
| B) Multi-Agency Feeding Branch | Provides management and oversight of care functions for mass feeding activities at shelter sites and for active workers supporting shelter operations. |
| | Will identify and coordinate the appropriate branch staffing as well as staffing and resources needed to support fixed and mobile kitchen operations. |

| Position | Duties |
|---|---|
| C) Shelter Branch | Provides management oversight of the core functions in the General Populations Shelter. |
| D) Health Services Branch | Provides management and oversight of the core functions for health services and medical needs during regional care and sheltering operations. |
| | Will oversee Basic Life Support (BLS) and health care functions at shelter locations and alternate care facilities. ESF 4, Fire and EMS will coordinate support in conjunction with the Health Services Branch. |
| Logistics Section Chief | Supervises all service and support functions related to shelter operations. |
| | Supervision of branches and performance of branch duties. |
| *A) Service Branch* | *Provides management and oversight for transportation and communications that support evacuation, regional sheltering operations. The following groups report directly to the Service Branch Supervisor.* |
| | 1) Transportation Group: Coordinates and arranges for ground transportation from affected areas to shelter sites, and transportation between shelter sites, assistance centers, and major transit centers or distribution points. |
| | 2) Communications Group: Works with agencies to satisfy radio, telephone and information system required for the entire shelter operations to include the Incident Command Post (ICP) all shelter sites, multi-agency feeding kitchens (fixed and mobile) and other support activities. |
| *B) Support Branch* | *Provides management and oversight for acquisition of supplies and the coordinating emergency workers. The following groups report directly to the Support Branch Supervisor.* |
| | 1) Supply Group: Coordinates resources and provides all materials and equipment required to support regional shelter operations to include shelter supplies and consumables, food products and equipment for multi-agency feeding kitchens and ICP equipment. The Supply Group will work closely with the American Red Cross and Regional Shelter Management IC Logistics Section to accomplish its mission. |
| | 2) Emergency Worker Support Group: If a large incident requires emergency worker support, this group would help to coordinates and provide housing, transportation and meals for emergency workers supporting regional shelter operations requiring these services. |
| Plans Section Chief | Oversees the collection, analysis and dissemination of information relevant to on-going regional shelter operations and planning. |
| | Writes situation reports, incident action plans, and responds to information requests in coordination with the Joint Information Center (JIC). |
| | Gather information from various sources, distributes reports, track |

| Position | Duties |
|---|---|
| | information about shelter census, response operations, and related events and plan future actions and operations. |
| Finance/Administration Section Chief | |
| | |
| | |
| Liaison Officer | Supervision of branches and performance of branch duties. |
| | |
| | |
| *A) American Red Cross Liaison/Subject Matter Expert* | Support and staff general population shelters and coordinate/manage multi-agency feeding operations as delineated |
| | Provide shelter client services such as crisis counseling, emergency supplies and disaster assistance. |
| | Provide staffing and representation to the IC when and as requested. |
| | Provide information on location of shelters, feeding kitchens and operations, assistance centers and the assistance being provided to people affected by the emergency, disaster or incident. |
| *B) Community Shelters Liaison/Subject Matter Expert* | |
| | |
| | |
| *C) WSDOT Liaison/Subject Matter Expert* | Provide and/or coordinate staff for the IC Transportation Group and provide management oversight of resources supporting regional shelter operations. |
| | Support evacuations from the affected areas to designated shelter sites, safe areas and/or rally points located in a variety of jurisdictions. |
| | Provide transportation service from designated shelter sites to established transportation routes and/or transit centers. |
| | Provide special assistance with Access vans at the request of the IC on an as needed basis. |

## C. List of Mass Notification Systems in Puget Sound

| System | Communities Served | Description | Capabilities | Owner and Contact Info |
|---|---|---|---|---|
| MyStateUSA | Statewide | State duty officer notifications | Only Opt-In | WA EMD – State Duty Officer 800-258-5990 |
| | King County | | Only Opt-In | King County OEM Duty Officer |
| | Snohomish County | | Only Opt-In | Snohomish County Duty Officer |
| | Island County (Whidbey and Camano islands and City of Oak Harbor) | Emergency and community alerts | Only Opt-In | Island County DEM |
| Everbridge (Pierce County ALERT) | Pierce County | Emergency and community alerts | 911-database (landlines) and Opt-in | Pierce County DEM Duty Officer 253-798-7470 |
| Everbridge (PCWARN) | Pierce County groups | Specified groups w/in Pierce County – i.e. Public Safety, health, SAR | Opt-in | Pierce County DEM Duty Officer 253-798-7470 |
| Code Red | City of Puyallup | Emergency and community alerts | 911- database (landlines) and Opt-in | Puyallup DEM Merle Frank |
| | City of University Place | Public safety-focused alerts | 911- database (landlines) and Opt-in | City of UP Public Safety Jennifer Hales |
| | City of Auburn | Emergency and community alerts | 911- database (landlines) and Opt-in | City of Auburn Sarah Miller 253-876-1909 |
| Reverse 911 | Bellevue, Kirkland, Mercer Island, Clyde Hill, Medina, Woodinville, Shoreline, Bothell, Northshore, Snoqualmie, Fall City, Duvall, Redmond, Skykomish, Issaquah | Emergency and community alerts | 911-database (landlines) and Opt-in | NORCOM |
| | Snohomish County | Emergency and community alerts | 911 –database (landlines) and Opt-in | Snohomish County Duty Officer |
| Telecom Recovery (pending) | Nisqually Tribe | | 911-database | Telecomrecovery.com |

| System | Communities Served | Description | Capabilities | Owner and Contact Info |
|---|---|---|---|---|
| Emergency Alert System (EAS) | Region-wide | Emergency alerts over TV and radio | | State and local EOC |
| NOAA Weather Radio | Region-wide | Radio alerts on specific radio channels | Dependent upon radio signal reception; requires purchase and programming by user | NOAA |
| Mapstorm ENS (Emergency Notification System) | Skagit County | Reverse 9-1-1 type system | 9-1-1 database and opt-in for cell phone/wireless device | Skagit 9-1-1 |
| Skagit County Email List-Serve | Skagit County | email/cell phone/wireless device alerting & public information | Only opt-in | Skagit County Information Services |
| Phone Master | Mason County | (through the end of 2010 – reviewing three other systems for future use) | Only opt-in | Mason County Division of Emergency Management |
| All Hazards Alert and Broadcast (AHAB) sirens | City of Oak Harbor | Siren for outdoor alert/warning | Wail, other sounds, and verbal instructions | Dave Hollet, Island County DEM and Emergency Manager, City of Oak Harbor |
| | Pierce County – Lahar inundation zone in Puyallup River Valley | Siren for outdoor alert/warning | Wail, other sounds, and verbal instructions | Pierce County DEM, Washington EMD, and LESA (dispatch center) |
| PIER System | Kitsap County | Voluntary sign up for Alert and Warnings, monthly preparedness messages. Also used as first responder call out | Only opt-in | Kitsap County Department of Emergency Management |
| | Thurston County | | | Thurston County Department of Emergency Management |

## D. Regional Transportation Resources and Contacts (Overview)

| Name of Agency | Contact Person | Position | Phone Number | Email Address | Number of Vehicles | Maximum Seated Passengers | Wheelchair Positions | Total number Passengers |
|---|---|---|---|---|---|---|---|---|
| Community Transit | Dawn Asselin | Risk Management Assistant | 425-438-6170 | Dawn.Asselin@commtrans.org | 199 | 39 | - | 7,761 |
| Everett Transit | Marc Bolland | Operations Supervisor | 425-257-8911 | Mbolland@ci.everett.wa.us | 77 | 202 | - | 2,253 |
| Intercity Transit | Jim Merrill | Operations Director | 360-705-5889 | jmerrill@intercitytransit.com | 96 | 111 | - | 2,588 |
| Island Transit | Phyllis Brett | Specialized Services Administrator | 360-678-9532 | brett@islandtransit.org | 65 | 156 | - | 1,678 |
| King Co Depart of Trans | Edie-Mae Mariano-Rapanan | Vehicle Maintenance | 206-263-3140 | Edie-Mae.Mariano@kingcounty.gov | 1,440 | 66,403 | | 66,403 |
| Kitsap Transit | Hayward Seymore | Maintenance Director | 360-478-6229 | HaywardS@KitsapTransit.com | 539 | 8,443 | 446 | 8,889 |
| Mason County Transportation Authority | Jay Rosapepe | Operations Manager | 360-426-9434 X110 | jrosapepe@masontransit.org | 40 | 51 | - | 1,051 |
| Pierce Transit | Sandy Beyers | Emergency Planning Coordinator | 253-581-8012 | sbyers@piercetransit.org | 272 | 6,348 | 596 | 6,944 |
| Seattle Department of Transportation | Rodney Maxey | Fleet personnel | 206-684-0150 | | | | | |
| Seattle Monorail Services | Thomas Ditty | General Manager | 206-905-2601 | thomd@seattlemonorail.com | 2 | 250 | - | 500 |
| Skagit Transit | Mari Nelson | Maintenance Department | 360-757-8801X227 | mnelson@skagittransit.org | 46 | 1,123 | 113 | 1,236 |
| Sound Transit | Peregrin | Chief Safety | 206-398-5000 | peregrin.spielholz@soundtransit.org | 339 | 26,147 | | 26,147 |

| Name of Agency | Contact Person | Position | Phone Number | Email Address | Number of Vehicles | Maximum Seated Passengers | Wheelchair Positions | Total number Passengers |
|---|---|---|---|---|---|---|---|---|
| | Spielholz | Officer | | | | | | |
| Northwest Regional Council | Judy Shantz | Medicaid Access Program Manager | 360-676-6749 | shantje@dshs.wa.gov | 116 | 811 | 60 | 876 |
| King County: Hopelink | Lynn Moody | Director of Transportation | 425-943-6764 | lmoody@hope-link.org | | | | |
| Buckley Senior Center | Jennifer Bacon | Director | 360-829-0190 | seniorcenter@cityofbuckley.com | 1 | 14 | - | 14 |
| Camano Island Senior Services Assoc | Karla Jacks | Executive Director | 360-387-0222 | karla.jacks@camanocenter.org | 2 | 21 | - | 21 |
| Catholic Community Services/Volunteer Chore Service | Jodie Moody | Program Coordinator | 253-502-2741 | jodiem@ccsww.org | | | | |
| Mt. Si Senior Center | Jonathan Nelson | Transportation Director | 425-888-7001 | | 5 | 38 | - | 62 |
| Neighborhood House | Bill Eby | Transportation Dir. | 206-461-8430x237 | bille@nhwa.org | 10 | 104 | 6 | 110 |
| Northshore Senior Center | Jim Seeks | Transportation Program Manager | 425-286-1026 | jims@seniorservices.org | 18 | 30 | 5 | 245 |
| Northwest Connections | John Sigala | President/CEO | 253-988-3809 | nwconnections@transpro.org | 5 | 31 | - | 76 |
| Pierce County Paratransit Services | Ann Kennedy | Brokerage Gen. Mgr | 360-377-7176X325 | atk@paratransit.net | 208 | 848 | 191 | 1,039 |
| Pierce County Community Action | Sherry Martin | Program Coordinator | 253-798-3835 | smartil@co.pierce.wa.us | | | | |
| Senior Services (King County) | Cindy Zwart | Transportation Program | 206-727-6255 | cindyz@seniorservices.org | | | | |

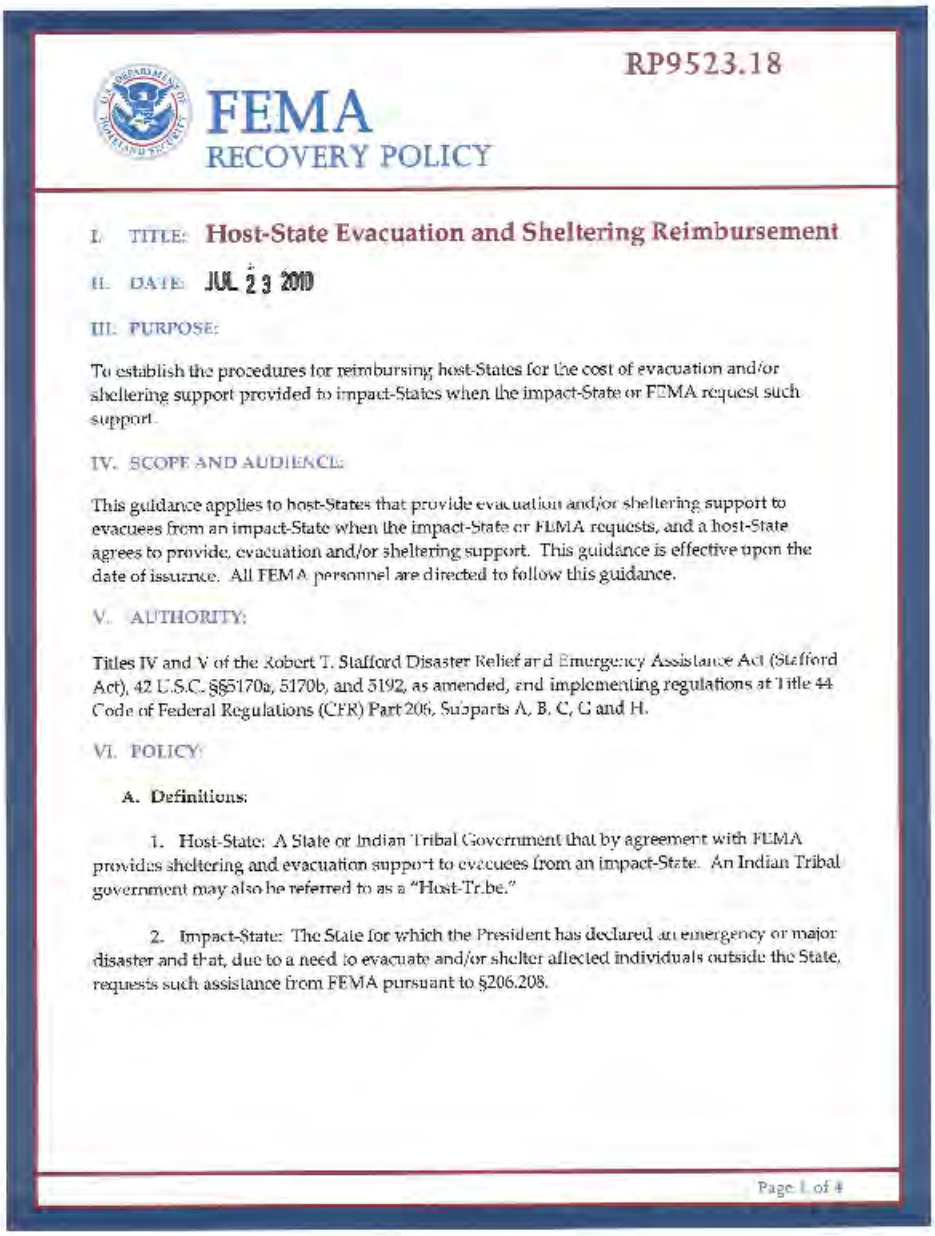
| Name of Agency | Contact Person | Position | Phone Number | Email Address | Number of Vehicles | Maximum Seated Passengers | Wheelchair Positions | Total number Passengers |
|---|---|---|---|---|---|---|---|---|
| | | Director | | | | | | |
| Senior Services of Snohomish Co. | Thomas Dietz | Operations Manager - D.A.R.T. | 425-290-1272 | tdietz@sssc.org | 69 | 994 | | 994 |
| Solid Ground | Mary Benson | Program Manager | 206-694-6700 | maryb@solid-ground.org | | | | |
| Squaxin Island Tribe | John Taylor | Emergency Manager | 360-462-3500 | jtaylor@squaxin.nsn.us | 4 | 58 | - | 116 |
| Stillaguamish Tribe Transit Services | Cynthia Derrick | Transportation Supervisor | 360-629-0503 | www.stillaguamish-transit.com | 8 | 48 | 5 | 56 |
| Together | Karen Parkhurst | Senior Transportation Planner | 360-956-7575x2522 | parkhuk@trpc.org | | | - | |
| Transia | Idris Elhamar | Operations Director | 206-624-3426 | transia@aol.com | 29 | 46 | - | 438 |
| Upper Skagit Indian Tribe | Donna Schopf | Facilities Admin. Manager | 360-854-7040 | donnas@upperskagit.com | 16 | 32 | - | 87 |
| Volunteers of America | Bill Brackin | Program Director | 425-609-2213 | bbrackin@voaww.org | | | | |
| Travel WA Dungeness /Olympic Bus | Jack Heckman | President | 360-417-0700 | jackheckman@olypen.com | 4 | 49 | - | 99 |
| Greyhound Lines | Gary Fessler | Garage Manager | 206-390-4982 | gary.fessler@greyhound.com | 27 | 110 | - | 1,485 |
| Washington State Ferries Division | Helmut Steele | Emergency Manag. & Security Coor. | 206-515-3474 | hsteele@wsdot.wa.gov | 20 | 9,305 | - | 30,881 |
| | | | | Totals (As of May 2010) | 3,657 | 121,812 | 1,422 | 162,049 |

# E. King County UASI Evacuation Template (Best Practice)

The King County UASI Evacuation Template can be found as a Word document at the Washington Military Emergency Management Division website:

- Planning Template Cover
- www.emd.wa.gov/plans/documents/planning_KCEvacuationTemplateCover.doc
- Planning Template Overview
  www.emd.wa.gov/plans/documents/planning_KCTemplateOverviewText.doc
- Planning Template Outline
  www.emd.wa.gov/plans/documents/planning_KCTemplateOutline.doc
- Planning Template Checklists
  www.emd.wa.gov/plans/documents/planning_KCTemplateChecklists.doc
- Planning Template Resources
  www.emd.wa.gov/plans/documents/planning_KCTemplateResources.doc

# F. DAP-9523.18 Disaster Assistance Policy – Host-State Evacuation and Sheltering Reimbursement



RP9523.18

FEMA
RECOVERY POLICY

I. TITLE: **Host-State Evacuation and Sheltering Reimbursement**

II. DATE: JUL 23 2010

III. PURPOSE:

To establish the procedures for reimbursing host-States for the cost of evacuation and/or sheltering support provided to impact-States when the impact-State or FEMA request such support.

IV. SCOPE AND AUDIENCE:

This guidance applies to host-States that provide evacuation and/or sheltering support to evacuees from an impact-State when the impact-State or FEMA requests, and a host-State agrees to provide, evacuation and/or sheltering support. This guidance is effective upon the date of issuance. All FEMA personnel are directed to follow this guidance.

V. AUTHORITY:

Titles IV and V of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act), 42 U.S.C. §§5170a, 5170b, and 5192, as amended, and implementing regulations at Title 44 Code of Federal Regulations (CFR) Part 206, Subparts A, B, C, G and H.

VI. POLICY:

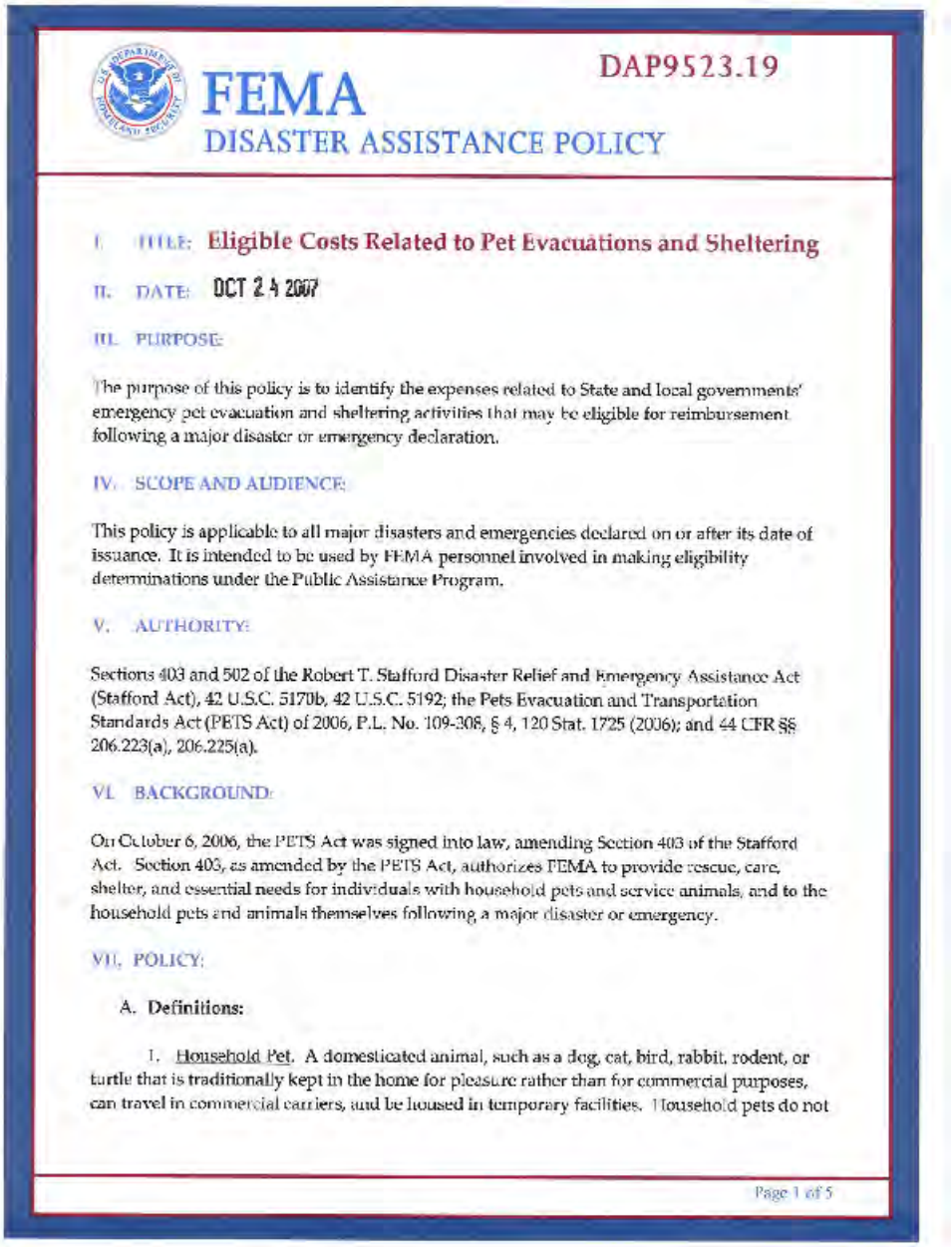
**A. Definitions:**

1. Host-State: A State or Indian Tribal Government that by agreement with FEMA provides sheltering and evacuation support to evacuees from an impact-State. An Indian Tribal government may also be referred to as a "Host-Tribe."

2. Impact-State: The State for which the President has declared an emergency or major disaster and that, due to a need to evacuate and/or shelter affected individuals outside the State, requests such assistance from FEMA pursuant to §206.208.

Page 1 of 4

# G. DAP 9523.19 Disaster Assistance Policy – Eligible Costs Related to Pet Evacuations and Sheltering



FEMA

DAP9523.19

DISASTER ASSISTANCE POLICY

I. TITLE: **Eligible Costs Related to Pet Evacuations and Sheltering**

II. DATE: OCT 2 4 2007

III. PURPOSE:

The purpose of this policy is to identify the expenses related to State and local governments' emergency pet evacuation and sheltering activities that may be eligible for reimbursement following a major disaster or emergency declaration.

IV. SCOPE AND AUDIENCE:

This policy is applicable to all major disasters and emergencies declared on or after its date of issuance. It is intended to be used by FEMA personnel involved in making eligibility determinations under the Public Assistance Program.

V. AUTHORITY:

Sections 403 and 502 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act), 42 U.S.C. 5170b, 42 U.S.C. 5192; the Pets Evacuation and Transportation Standards Act (PETS Act) of 2006, P.L. No. 109-308, § 4, 120 Stat. 1725 (2006); and 44 CFR §§ 206.223(a), 206.225(a).

VI. BACKGROUND:

On October 6, 2006, the PETS Act was signed into law, amending Section 403 of the Stafford Act. Section 403, as amended by the PETS Act, authorizes FEMA to provide rescue, care, shelter, and essential needs for individuals with household pets and service animals, and to the household pets and animals themselves following a major disaster or emergency.

VII. POLICY:

A. **Definitions:**

1. Household Pet. A domesticated animal, such as a dog, cat, bird, rabbit, rodent, or turtle that is traditionally kept in the home for pleasure rather than for commercial purposes, can travel in commercial carriers, and be housed in temporary facilities. Household pets do not

Page 1 of 5

**ESF COORDINATOR:** Administrative Services Department Director

**LEAD AGENCIES:** Administrative Services Division
Human Resources Department
Emergency Management Coordinator
Volunteer Coordinator

**SUPPORT AGENCIES:** Emergency Operations Center
All City Departments
City of Shoreline Registered Volunteers
Washington State Chapter of Volunteers Active in Disasters
Zone 1 Emergency Coordinator
King County Emergency Coordination Center

## Article I. Introduction

### Section 1.01 Purpose

(a) The purpose of ESF 7 – Administrative Resource Support is to assist the City of Shoreline (City), Emergency Operations Center (EOC), City Departments, and other organizations requiring administrative resource support prior to, during and/or after a disaster or emergency situation.

### Section 1.02 Scope

(a) Resource support consists of emergency relief supplies, facility space, office equipment, office supplies, telecommunication, contracting services, transportation services (in accordance with ESF #1 – Transportation), security services, and personnel required to support immediate response activities. ESF #7 provides support for requirements not specifically identified in other ESF's, including excess and surplus property. Resource support may continue until the disposition of excess and surplus property, if any, is completed. Volunteer and Donation Management will also be covered under this ESF.

### Section 1.03 Situation

(a) A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to field efforts to save lives and protect property.

(b) Critical resource shortages may include power, fuel in winter and potable water in times of drought, or water supply interruption or as a secondary effect of flooding. There will be shortages in the local area of a wide variety of supplies necessary for emergency

population survival, such as cots, sheets, blankets, pillows, tents for temporary shelter, and plastic and paper items for mass feeding. This support is generally provided to ESF #6—Mass Care.

**Section 1.04 Assumptions**

(a) The probable shortage of a critical resource may be known to government officials in advance of the actual shortage, allowing measures to be undertaken in order to lessen the impact. In some cases, shortages will occur completely without warning.

(b) Local businesses and organizations are willing, whenever possible, to assist the community and the government during a period of resource shortage, particularly following a large-scale disaster.

(c) Agency and departmental critical resources lists are fundamental to the effective response of the government to public emergency activations. Procurement transactions, pricing, and vendor relationships need to be established prior to events requiring activation of the Emergency Operations Center (EOC). Protracted procurement processes may result from insufficient or nonexistent critical resource lists.

(d) Federal government assistance will be requested to supply unmet needs of response agencies.

(e) Donations management response activities may be necessary before a public emergency declaration, and hence, require rapid coordination to mitigate potential donations problems in the response phase of disaster operations.

(f) In the event of a public emergency causing large-scale loss of life and destruction of property, donors will offer assistance of virtually any kind, including cash, goods, equipment and loan of equipment, and the services of individuals.

(g) Offers of assistance will be made directly to all levels of government (Federal and local) as well as to voluntary organizations.

(h) In less-than-large-scale or “high-visibility” public emergencies, donations management will be handled by voluntary organizations with or without Federal or local jurisdiction involvement.

**Section 1.05 Policies**

(a) All activities within ESF 7 –Resource Support will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) Primary resource support responsibilities will be coordinated by the Administrative Services Department (Admin) and the Human Resources Department (HR).

(c) ESF #7 provides support for requirements not specifically identified in other ESFs, including excess and surplus property. Resource support may continue until the disposition of excess and surplus property, if any, is completed.

(d) Support departments furnish resources to help meet ESF#7 requirements, including procurement personnel necessary to establish operations effectively at the EOC.

(e) In accordance with RCW 38.52.990 (9), in responding to a disaster, the Mayor or designee is directed to utilize the services, equipment, supplies and facilities of existing departments, offices and agencies of the state, political subdivisions and all other municipal corporations thereof including but not limited to districts and quasi municipal corporations organized under the laws of the State of Washington to the maximum extent practicable and the officers and personnel of all such departments, offices and agencies are directed to cooperate with and extend such services and facilities upon request notwithstanding any other provision of law.

(f) As a signatory of the King County Regional Disaster Framework for Public and Private Partners , and through initiation of the Washington State Mutual Aid System (WAMAS)s, the City will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible. In addition, the city will utilize these same systems when requesting resources.

(g) Departments will utilize their personnel to the maximum extent possible; including use of personnel not assigned emergency responsibilities. The Human Resources Department is responsible for human resource activities within the City and as such, may assist other departments to identify and designate employees and emergency workers to assist in disaster response and recovery. It may be necessary to hire temporary employees to meet staffing requirements.

(h) City departments retain the responsibility for the day-to-day supervision of their work force; however, they should coordinate their personnel needs with the Human Resources Department. Since non-essential activities may be canceled during an emergency, City employees may be required to work either overtime or “out of class” and shall be compensated in accordance with existing compensation policies. All requirements of the Fair Labor Standards Act (FLSA) shall apply.

(i) When possible, all procurement will be supported by a written justification. However, the urgency associated with a resource need may necessitate verbal tasking directly from the Command Staff. In such situations, the Resource Unit of the Planning Section

will document who is requesting the procurement and the reason for the request. The Resource Unit will also work with the contract and procurement office, in the Finance Section, to have and maintain a written inventory of resources obtained from the various operational departments within the City that are most likely to be needed in a public emergency. This list will be maintained as a separate document from the EOP in order to keep it current.

## Article II. Concept of Operations

### Section 2.01 General

(a) The City may not have all of the resources, either in type or quantity that may be required to combat the effects of all potential hazards during a disaster.

(b) City departments and support agencies will perform tasks and expend resources under their own authorities in coordination with the EOC, including implementation of mutual aid agreements, as applicable, in addition to tasks received under the authority of this plan.

(c) When an event requires a specific type or response mode, technical and subject matter expertise may be provided by an appropriate person(s) from a supporting agency with skills relevant to the type of event. The individual will advise and/or direct operations within the context of the Incident Command System (ICS) structure.

### Section 2.02 Organization

(a) The primary determination of resource needs is made by operational elements at the field level and coordinated through the EOC. Requests for resources flow upward and are tracked at the EOC. City resources will provide the primary source of personnel, equipment, materials, and supplies. Support that cannot be provided from City resources will be secured through direct procurement, donations, or mutual aid.

(b) Resource requirements beyond the capacity of the City will be coordinated through the Zone 1 Emergency Coordinator and the King County Emergency Coordination Center (KC ECC). Requests will be handled on a case by case basis and allocation will depend on availability of both the resource and a means of delivery.

(c) The EOC will have available, or have immediate access to, resource and vendor lists for the most commonly used or anticipated resources to combat a given hazard.

(d) Each City department shall develop and maintain a list of department resources and local contractors/suppliers from which to obtain resources. Pre-existing inventories of the community's resources and procedures regarding their use contributes significantly

to the successful and efficient response to and recovery from major emergencies.

(e) The HR Director or designee will designate an EOC representative who will, during the activation of the EOC, coordinate personnel needs, maintain liaison with volunteer organizations, and provide information to assist the City's employees with obtaining disaster assistance, if needed.

(f) The City will commit all resources necessary to protect lives and property and to relieve suffering and hardship, whenever possible.

(g) Additional personnel resources may be available through agreements with schools, colleges, private businesses and labor organizations. Requests for additional assistance will be coordinated with the EOC.

(h) To the maximum extent possible, the continued operation of a free market economy using existing distribution systems will be utilized.

(i) Mandatory controls on the allocation, utilization or conservation of resources can be used when necessary for the continued protection of public health, safety and welfare. Whenever possible, voluntary controls are preferred.

(j) A Base may be established to coordinate and administer logistical functions of an incident. Per ICS, there will be only one Base per incident.

(k) A Staging area will be identified by EOC and field personnel to provide a location for the assembly and assignment of resources. There may be more than one staging area based on the needs of the incident.

(l) Prior to a disaster, the Emergency Management Coordinator, will be responsible for registering VEW's utilizing the guidelines provided in WAC 118-04-080. Volunteers will be registered as VEW's and provided identification cards which will include a classification (in accordance with WAC 118.100) appropriate to their qualifications (Appendix A - Emergency Worker Guidelines).

(m) During a disaster, the Logistic Section will assist the Volunteer Coordinator with recruiting and registering temporary VEWs per WAC 118-04-080 if the need is identified. The Emergency Management Coordinator and the Human Resource Department will serve as advisors concerning the coordination of VEW's.

(n) Volunteers will become an important resource in the event of a disaster. All Registered Volunteer Emergency Workers (VEW) must report to a designated staging area for assignments. Any person recruited to volunteer, who is not already registered with the City as a VEW, must report to the staging area for temporary registration, temporary identification card, and assignment. (Appendixes A-D).

(o) During a disaster the Volunteer Coordinator, or designee, will manage the Volunteer Management Program (VMP), arrange for supervision of key volunteer personnel, act as the Volunteer Management Liaison in the Logistics' Section of the EOC and coordinate the efforts of volunteer groups and local government. (See Appendix E of this ESF for the Volunteer Management Plan).

(p) The HR Director or designee will assist the Volunteer Coordinator and/or Logistics' Section in determining the Knowledge, Skills, Abilities, and Certifications that volunteers must have in order to assist with response and recovery.

(q) It may become necessary for the city to distribute large quantities of needed items to their citizens after a disaster. Examples of this may be ice, water, and food. This will be coordinated with the KCECC and the Logistics Section of the Washington State Emergency Operations Center. A Point of Distribution (POD) will need to be identified, staffed, and set up. The City's EMC and available staff will assist with coordination of the establishing and staffing of the POD. If a Point of Distribution (POD) is needed, consult with CEMP - ESF 11 App A for possible locations to set up a POD.

(r) It may also become necessary to deal with the donations of goods or funds. Appendix F will outline the Cities policy on Donation Management. Donation Management will be coordinated between the Logistics Section and Finance/Administrative Section in the EOC.

**Section 2.03 Actions**

(a) **Preparedness**:

(i) Prepare and maintain emergency operating procedures, resource inventories, vender information, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(ii) Maintain a list of City assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources, if applicable, however at this time the City of Shoreline owns no assets that is the NIMS Resource Typing guidelines,

(iii) Assign and schedule sufficient personnel to implement identified tasks for an extended period of time,

(iv) Ensure lead agency personnel are trained in their responsibilities and duties,

(v) Develop and implement emergency response strategies relating to Resource Support

(vi) Develop and present training courses for staff assigned to EOC supporting the Recourse Unit, Logistics and Finance/Administrative Sections, and

(vii) Maintain liaison with other cities/counties support agencies,

(viii) Conduct All Hazards exercises involving the above assigned EOC staff,

(ix) The City will address planning issues on an ongoing basis to identify response zones, potential staging areas, and specific requirements. This includes addressing Volunteer and Donations Management.

**(b) Response:**

(i) Coordinate operations at the Shoreline EOC and/or at other locations as required,

(ii) Develop, prioritize and implement strategies for the initial response to EOC requests.

(iii) Establish communications with appropriate field personnel to ensure readiness for timely response,

(iv) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(v) Coordinate with support agencies, as needed, to support emergency activities,

(vi) Obtain other resources through the Statewide Emergency Management Mutual Aid and Assistance Agreement and/or the Regional Mutual Aid Agreements,

(vii) Coordinate with other Jurisdictions' like function to obtain resources and facilitate an effective emergency response among all participating agencies,

(c) Monitor and direct volunteer and donations resources and response activities to include prepositioning for response/relocation due to the potential impacts of the emergency situation.

(d) Inventory, update, and maintain a database of offers of services, goods, and monetary donations.

(e) Coordinate with other KC ECC to serve as an informational group on the availability and coordination of resources from volunteers and donations.

**(f) Recovery**

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

### (g) Mitigation

(i) Mitigation activities for this ESF are covered in the Multijurisdictional Hazard Mitigation.

## Article III. Responsibilities

### Section 3.01 Lead Agency

### (a) Administrative Services Division

(i) Provide, direct, and coordinate operations within the Finance/Administrative Section at the EOC.

(ii) In coordination with the Logistics Section, locate and procure resources for the EOC and field operations to support emergency response and recovery or to promote public safety; (See Appendix G Finance Handbook).

(iii) Coordinate the transfer of excess personal property and assist in its disposal when requested;

(iv) In coordination with the Logistics' Chief, the Finance Section will locate and coordinate the use of available space for incident management activities;

(v) Coordinate and determine the availability and provision of consumable non-edible supplies stocked in distribution facilities and customer supply centers when available.

(vi) Procure required stock from vendors or suppliers when City resources are unavailable or have been expended

(vii) Coordinate the procurement of communications equipment and services

(viii) Provide support to the EOC for all Resource Support activities

(ix) Provide for the procurement of contractors services when necessary

(x) Estimate the cost of providing resources, record purchases and track expenditures.

(xi) Determine the initial "needs list" for donated goods and to identify operating facilities to be used for donations management, if this function is deemed necessary. Needs assessment is an ongoing process. (See Appendix F Donation Management Plan).

### (b) Human Resources Department

(i) Provide technical personnel to assist in the identification and recruitment of individuals with specialized occupations needed to support incident response and recovery operations.

(ii) Coordinate human resource activities during a disaster including, but not limited to; hiring temporary workers and registering temporary emergency workers, in collaboration with Volunteer Coordinator.

(iii) Develop a pool of personnel resources to be utilized by the EOC and field personnel.

(iv) During a disaster, ensure that the Form EMD-078 Emergency Worker Daily Activity Report (Appendix D) is completed.

(v) Provide a representative to the EOC, as needed, to monitor human resources and volunteer status.

(vi) Develop a process for the completion and tracking of claims for injuries or invoices (for gas, equipment, etc) of volunteers, for submission to King County ECC, WA State EOC, and/or FEMA

(vii) Maintain emergency contact numbers for city employees and their designated contact utilizing the Employee On Line Emergency Information page of the SunGard IFAS system and running reports found in IFAS Reports "HR/PY, report name: EO: Emergency Information Updated Records".

**(c) Volunteer Coordinator**

(i) Pre-disaster, know how to access registered VEW database.

(ii) During a disaster work as part of the Logistics Section of the EOC to assist with the facilitation and use of volunteer workers.

**(d) Emergency Management Coordinator**

(i) Pre-disaster, coordinate the VEW program, within the City, including the registration process and background investigation, in accordance with WAC 118.

(ii) Maintain relationships with Volunteer Organizations' like the American Red Cross, Washington Association of Volunteer Organizations Active in Disasters (WAVOAD), and Salvation Army,

(iii) Develop relationships with Faith-based organizations to access their facilities, vehicles, and volunteer base during an emergency.

(iv) Maintain a database of all registered Volunteer Emergency Workers and their training.

(v) Identify staging areas for donations, given the location, scope, and magnitude of the event.

(vi) Consider appointing a Donations Coordinator to evaluate creating Donations Coordination Team and/or Center, as available staffing and resources allow.

(vii) Prior to a disaster, coordinate the Volunteer Emergency Worker program within the City, including the registration process and background investigation, in accordance with WAC 118.

(viii) Maintain a supply of Volunteer Emergency Worker registration materials, such as registration cards, identification forms and VEW guidelines.

**Section 3.02 Support Agency**

**(a) Emergency Operations Center**

(i) Coordinate requests for resources through the Zone 1 EC and/or KC ECC.

(ii) Coordinate resources with other jurisdictions through mutual aid agreements.

(iii) During a disaster, contract with vendors to improve the response and recovery efforts within the City.

(iv) Coordinate the allocation, utilization and/or conservation of resources.

(v) Ensure that information is recorded and maintained for future use in submitting claims for assistance and processing invoices for payment

(vi) Evaluate situations in which volunteers, that are already trained and registered (i.e. CERT members, RACES/ARES members), can be utilized.

(vii) If additional volunteers are needed, the first choice is to contact established volunteer agencies to identify possible volunteers that have already been vetted. Agencies like the American Red Cross, Washington Association of Volunteer Organizations Active in Disasters (WAVOAD), and some Faith-based organizations are potential organizations with established volunteer populations. If still more are needed, coordinate with the Public Information Officer (PIO) to advertise for volunteers that have the necessary skills and with Human Resources to ensure all application and record check requirements are completed.

(viii) If spontaneous volunteers are needed, utilize CEMP ESF 7 Appendix E for implementation of Volunteer Management Plan.

(ix) Contact the Washington Chapter of Volunteers Active in Disasters to assist with the recruitment of volunteer resources, if additional resources are needed.

(x) Coordinate with the State of Washington Department of Emergency Management if a Point of Distribution (POD) is opened for mass distribution of supplies.

**(b) All Departments**

(i) Develop departmental resource management standard operating procedures.

(ii) Coordinate resources with other agencies and volunteers in order to maintain adequate reserves.

(iii) Identify resource distribution and storage areas.

(iv) Estimate costs of providing resources.

(v) Assess impact of emergency on available resources and identify repair, maintenance and replenishment needs.

(vi) Develop procedures to utilize all City staff for emergency assignments, noting essential and non-essential employee categories, and identify staff that could be released to assist other departments.

**(c) Zone 1 Emergency Coordinator**

(i) Establish protocols and procedures for resource sharing for jurisdictions and organizations within Zone 1

(ii) Provide staff to the Zone 1 ECC when the Regional Disaster Plan has been activated by a jurisdiction within Zone 1

(iii) Establish coordination between and among the jurisdictional EOCs within the Zone

(iv) Receive process and coordinate incoming requests for additional resources from jurisdictions within Zone 1.

(v) Coordinate with King County ECC and all jurisdictions in Zone 1 for the dissemination of incoming resources to insure equitable distribution of resources.

**(d) King County ECC**

(i) Receive, process, and coordinate incoming requests for additional resources from jurisdictions within Zone 1.

(ii) Coordinate the dissemination of incoming resources with all jurisdictions within the County to insure equitable distribution of resources.

(iii) Submit and coordinate requests for additional resources to the State Emergency Operations Center.

**(e) WA State Department of Emergency Management**

(i) Assist with the logistics of establishing a Point of Distribution if needed.

## Article IV. Appendices

(a) Volunteer Emergency Worker Registration Guidelines

(b) Volunteer Emergency Worker Registration Card

(c) Volunteer Emergency Worker Identification Card

(d) Form EMD-078 Emergency Worker Daily Activity Report

(e) Employee Emergency Contact Form

(f) Volunteer Management Plan (VMP)

(i) May utilize the Volunteer Reception Center (VRC) Standard Operating Procedures (SOP) from Regional Catastrophic Disaster Planning (RCDP) Group.

(g) Donation Management Plan (DMP)

(h) Finance Handbook

## Article V. References

(a) RCW 38.52 Emergency Management

(b) WAC 118 Emergency Management

## EMERGENCY WORKER DIRECTOR GUIDELINES

An Emergency Worker Director will be appointed by the Human Resources Director to interview emergency workers and fill out the form as well as:

1. Review Emergency Worker Registration forms and ensure they meet the standards as set forth in the emergency worker guidelines.

2. Authorize emergency worker to begin their assignments.

3. Develop an emergency worker list to maintain track of assignments and hours worked.

## EMERGENCY WORKER REGISTRATION GUIDELINES

Each individual who wishes to be registered to support the City's emergency response and recovery activities must fill out an Emergency Worker Registration Form and meet the following minimum standards:

1. Be in adequate physical condition to carry out their emergency assignment, and not be subject to any medical problems or other ill health of body or mind which might render them unfit to carry out their emergency assignment. The Employee Resource Worker may require applicants to provide medical information from a licensed physician to verify the foregoing.

2. Be able to speak, read, and write the English language at a level of proficiency acceptable to the Employee Resource Worker.

3. Be clean of dress and person and not be under the influence of a substance that could impair his/her assignment.

## EMERGENCY WORKER INFORMATION

Name _____ Social Security Number _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Do you have the physical ability, training, skills and/or experience to carry out this assignment? (Circle one) YES NO

**EMERGENCY CONTACT:**

Name_____ Phone _____ Relation _____
I certify this information is correct to the best of my knowledge.

**Volunteer Signature_____Date Signed _____**

**Personnel Director Signature** _____

INCIDENT INFORMATION: MISSION # _____

_____

**Worker Assignment _____ Time Assigned _____ Time Released ____**

Was this emergency worker injured while assisting? (Circle one) YES NO

Details
_____

Was any of this emergency worker's personal property or equipment damaged during this incident? (Circle one) YES NO

Details:
_____

Incident Commander Signature _____ Date_____

RETURN THIS ORIGINAL FORM ALONG WITH A COPY OF THE INCIDENT REPORT TO DESIGNATED PERSONNEL STAFF

(Front)

# City of Shoreline
# Volunteer Emergency Worker Registration Card

| | | | | | |
|---|---|---|---|---|---|
| **City of Shoreline - Emergency Management** | | | | Issue Date: | Registration Number: |
| Name (Last): | | (First): | (Middle): | Email Address: | |
| Address 1: | | | | PHOTOGRAPH | |
| Address 2: | | | | | |
| City: | | State: | Zip Code: | | |
| Driver's License No.: | Date of Birth: | Blood Type: | Sex (M-F): | | |
| Height: | Weight: | Color Eyes: | Color Hair: | | |
| Physical Disabilities (If any): | | | | | |
| Home Telephone: | | Work Telephone: | | **- In Case of Emergency - Please Notify:** | |
| **I certify that the information on this card is true and correct to my best knowledge and belief.** | | | | | |
| Emergency Worker Signature: | | | Date of Signature: | Name: | |
| Emergency Worker Classification *(WAC-118-04-100)*: | | | | Telephone Number with Area Code: | |
| Authorizing Signature: | | | Date of Signature: | Relation to Emergency Worker: | |

BEM - (2/06) (FRONT)

(Back)

## EMERGENCY WORKER TRAINING RECORD

| COURSE | HOURS | DATE COMPLETED |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| EDUCATION | SCHOOL/UNIVERSITY/COLLEGE | SKILLS *(please be specific)* |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

| ADDITIONAL INFORMATION – REMARKS: |
|---|
| |
| |
| |
| |

BEM - (2/06) (BACK)

(Front)

| | | |
|---|---|---|
| **CITY OF SHORELINE, WA**<br>**VOLUNTEER EMERGENCY WORKER**<br>**IDENTIFICATION CARD** | | |
| Name: | | |
| Is a registered Emergency Worker of: | | |
| Department:<br>**City of Shoreline – Emergency Management** | | |
| Authorizing Signature: | | |
| Date Issued: | Date Expired: | **Card No.:** |
| **COB-EWID (Front)** | | |

(Back)

| | | |
|---|---|---|
| Photograph | Birthdate: | |
| | Weight: | Height: |
| | Color Hair: | Color Eyes: |
| or Right Index Fingerprint | Classification (WAC 118-04): | |
| Area(s) of specialty: | | |
| Bearer's Signature: | | |
| **COB-EWID (Back)** | | |

**CITY OF SHORELINE**
**STATE OF WASHINGTON**
**EMERGENCY WORKER DAILY ACTIVITY REPORT**

| | | | | | |
|---|---|---|---|---|---|
| **County in which mission/incident took place:** | King | **Mission/Incident Number**: | | | |
| **Mission/Incident Name:** | | | **Date From:** | **Date To:** | |
| **Unit Name:** | | | | | |
| **Unit Address:** | | | | | |

| EMERGENCY WORKER NAME | CARD No. | ASSIGNMENT OR TEAM | DATE IN | DATE *OUT | DATE IN | DATE *OUT | DATE IN | DATE *OUT | TOTAL HOURS | ROUND TRIP MILES (DRIVER) |
|---|---|---|---|---|---|---|---|---|---|---|
| 1. | | | | | | | | | | |
| 2. | | | | | | | | | | |
| 3. | | | | | | | | | | |
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| 16. | | | | | | | | | | |
| 17. | | | | | | | | | | |
| 18. | | | | | | | | | | |

*** The time a person could reasonably have expected to reach home without stopping enroute.**

| | | | | | |
|---|---|---|---|---|---|
| **TOTAL PERSONNEL:** | | **TOTAL HOURS:** | | **TOTAL MILEAGE:** | |

**THIS FORM MUST BE SIGNED BY LOCAL EMERGENCY MANAGEMENT DIRECTOR/COORDINATOR OR SHERIFF'S DEPUTY.**

*By my signature below, I certify that these persons did participate in this mission/incident:*

| **Print Name and Title** | **Signature** |
|---|---|

EMD - 078
(02/00)

## I. PURPOSE, SCOPE, SITUATIONS, AND ASSUMPTIONS

### A. Purpose

This Volunteer Management Plan (VMP), located in ESF #7 Support Services Appendix G provides guidance for the departments and agencies within the City of Shoreline, with the purpose of outlining the concept of operations, organizational arrangements, and responsibilities for coordinating the efforts of volunteer groups and governments to manage spontaneous, unaffiliated volunteers in the aftermath of a disaster event.

When a major or catastrophic event occurs and the City of Shoreline may activate the VMP, this plan will activate to prescribe the activities taking place in the City of Shoreline. Activities described in this plan will be coordinated with the Regional Volunteer Reception Center (V RC), as established by the King County Emergency Coordination Center (KCECC) and their Volunteer Management Supervisor (VMS) to ensure proper placement and utilization of spontaneous volunteers across the affected region.

This plan complements the efforts of the Puget Sound Regional Catastrophic Planning.

### B. Scope

This Plan applies to all departments and personnel of the City of Shoreline along with the private sector, volunteer organizations, and community members. This VMP also governs support agencies that respond within the City of Shoreline to a disaster or emergency and that have responsibility involving the recruitment, processing, assignment, and/or management of volunteers.

### C. General Policy

1. **General**

   a. The City of Shoreline is subject to the affects of many disasters, varying widely in type and magnitude. The impact of these disasters can be felt across the local community, regionally, and even across the State.

   b. The City of Shoreline's Hazard Mitigation Plan (HMP) covers in detail the types of hazards that are specific to Shoreline.

   c. Disaster conditions resulting from natural phenomena or from technological threats, or a combination of any of those hazards, could result in the need for volunteers to assist in response and recovery activities.

2. **Volunteers**

a. The City of Shoreline does not wish to operate or change an organization's system to recruit, train, or background check volunteers who are affiliated with a recognized volunteer organization.

b. The City of Shoreline does, however, reserve the right to coordinate these efforts within the City of Shoreline. This includes restricting and/or modifying:

i. The locations in which volunteers may work.

ii. The types of Personal Protective Equipment (PPE) that is necessary to be used.

iii. The types of task that Volunteers may do

iv. The amounts and types of training, knowledge, skills, abilities, and certification that Volunteers are required to have

v. Volunteers to be able to communicate adequately utilizing verbal and written English.

c. All spontaneous volunteers who are not affiliated with a recognized volunteer organization must acquire a Volunteer Emergency Worker Credential to provide volunteer services after a disaster. During an event an assigned Volunteer Management Liaison and/or HR representative will work to credential all new Volunteer Emergency Workers. Emergency Worker Credentials are approved by the City of Shoreline's Office of Emergency Management.

d. All spontaneous volunteers must check in at the designated staging area. If a Volunteer Reception Center (VRC) is opened in King or Snohomish County volunteers can be directed to go to one of those centers. The Reception Center may be identified after the event and after facilities have been assessed and deemed safe to operate from and adequate supplies and resources are available to operating a Volunteer Reception Center.

e. Additional requirements or assessments of volunteers may be necessary to meet jurisdictional or legal requirements or needs. For assistance with this the VMS will consult with the HR department so that knowledge, skills, and abilities are assessed for proper placement with needed tasks to be accomplished, as reasonably possible.

f. Recognized local and national volunteer organizations have been recruiting, training, credentialing, and background checking volunteers for many years. These volunteer organizations are skilled in the volunteer

management process, and they should be the first source for processing and managing volunteers after a major emergency or catastrophic disaster, if possible.

g. Volunteers outside the local area should be encouraged to work through recognized community, State, or national volunteer organizations where they live. These organizations are capable of receiving volunteers in areas across the State or nation and then providing assistance for a particular disaster.

h. The City of Shoreline has the following Registered Volunteer Disaster Workers organizations that have had criminal back ground check, are trained in their assigned tasks, and are familiar with the city and its polices:

- Shoreline Community Emergency Response Team (CERT)
- Auxiliary Communications Service (ACS)
- Shoreline Police Department Volunteers

D. Planning Assumptions

1. This plan is heavily dependent on the City of Shoreline having the resources, personnel, and supplies necessary to coordinate, manage and care for volunteers. Furthermore, it is assumed that the City of Shoreline could become quickly overwhelmed and therefore may not be able to safely and reasonable accommodate spontaneous volunteers due, in part, to the limited personnel available in the City of Shoreline.

2. If the City of Shoreline becomes overwhelmed and therefore may not be able to safely and reasonable accommodate spontaneous volunteers, they will be heavily dependent on King County ECC and recognized volunteer organizations to supply the vast majority of resources to successfully implement the VPM.

3. An overwhelming number of spontaneous, unaffiliated volunteers will arrive in the impacted area in order to assist with the response and recovery efforts.

4. All City of Shoreline Staff involved in the management of volunteers may be expected to perform additional duties and responsibilities during disaster and emergency situations.

5. Assistance to the City of Shoreline by other response organizations is expected to supplement efforts, in an efficient, effective, and coordinated response, when the City of Shoreline determines their own resources to be insufficient.

6. Effective response to a catastrophic incident will occur when local jurisdictions coordinate efforts at the county level. County volunteer liaisons will then coordinate on a regional and state level.

7. Both Federal and State disaster assistance will supplement, not be a substitute for, the response provided by the City of Shoreline. This assistance is provided only when jurisdictional resources are clearly insufficient to cope with the effects of the disaster.

8. During a disaster affecting the City of Shoreline, local government and local volunteer groups and agencies may be adversely affected and may not be able to cope with a sizable influx of unaffiliated volunteers.

9. In a catastrophic event, a Federal declaration will occur which will bring assets from the Federal Government and Non-Governmental Organizations (NGO's). However, we should assume that they will not be able to get here within the first 72 hours of any catastrophic event.

10. The use of volunteers will require transportation, supplies, direction and possibly shelter. Before taking on the task of taking on spontaneous, unaffiliated volunteers, the City of Shoreline will need to ensure they have the capacity and capability to address their needs and can reasonably provide the necessary staffing to coordinate volunteers.

11. Washington State Emergency Management Division will support the region with carrying out volunteer management and coordinate with federal and private agencies.

12. King County Office of Emergency Management will coordinate with federal, state, volunteer and private agencies for the deployment of volunteers within the County.

13. The American Red Cross, and other recognized Volunteer Organizations, will ensure that their volunteers have the proper Knowledge, Skills, and Abilities to perform assigned tasks.

14. The American Red Cross, and other recognized Volunteer Organization will ensure that their volunteers are medically able and of proper body and mind to perform assigned tasks.

15. The American Red Cross, and other recognized Volunteer Organizations are responsible for managing all aspects of volunteer recruitment, training, and deployment for their volunteers.

## II. CONCEPT OF OPERATIONS

A. General

1. The National Incident Management System (NIMS) and the Incident Command System (ICS) will be used in all emergency and disaster situations.

2. As unaffiliated volunteers arrive in the impacted area or surges in volunteers occur and overwhelm the system, resources will be requested to assist with volunteer management. This could include requests to the next level of government or to nongovernmental entities.

3. This VMP defines the actions and roles necessary to provide a coordinated response by departments and partner agencies of the City of Shoreline, in consultation and coordination with the KCECC and recognized volunteer organizations.

4. When the VMP is activated, it will be activated at the City of Shoreline level. This plan describes actions taken in the City of Shoreline and its efforts to coordinate locally on volunteer management.

5. Conference calls with activated entities within the county will occur at least daily to coordinate volunteer management activities and may include agencies in Snohomish County and/or Washington State.

B. Volunteer Management Plan (VMP) Activation

1. Before this VMP is activated, a need or potential need for volunteer management must be identified. Indicators that volunteer management is or may be required include but are not limited to the following:

   a. Citizens who have not previously affiliated with a response organization looking for opportunities to assist with the response and recovery efforts

   b. The arrival of large numbers of out-of-area volunteers

   c. Requests for volunteers from any response agency or organization

   d. Regional entity requesting volunteers and/or volunteer management from the City of Shoreline

   e. KCECC may request the City of Shoreline to assist with the activation of a Regional Volunteer Reception Center (RVRC).

2. Once the need for volunteers and volunteer management has been identified, the Unified Command (UC), Incident Command (IC), or Emergency Management

Coordinator (EMC) will request the activation of the Volunteer Management Unit (VMU) utilizing the VMP. Members of this Unit can be the Neighborhood /Volunteer Management Liaison, Parks and Recreation staff, an HR staff person, assigned VISTA member(s), CERT member(s) and other applicable staff.

a. If possible, each department of the City of Shoreline with responsibilities in this VMP will be contacted upon plan activation.

b. If possible, each department with responsibilities in this VMP will then communicate the activation to its personnel as needed to ensure an effective response.

3. Once activated, the Volunteer Management Unit (VMU), assigned to the Logistics Unit within the EOC, will strive to maintain continuous contact with the Resource Unit of the Planning Section to plan for effective use of the volunteers. As stated prior, the first priority will to be to use volunteers who already are affiliated with the City of Shoreline and affiliated with other recognized volunteer organizations like the American Red Cross, Washington Association of Voluntary Organizations Active in Disasters, and the Salvation Army.

4. The Volunteer Management Liaison (VML) at the EOC will work with representatives from the primary and support agencies for volunteer management to assess what resources are required to meet the growing need for volunteer management. Potential requirements include but are not limited to those listed below.

a. Facilities to serve as:

i. Volunteer Reception Centers

ii. Portable volunteer staging area

iii. Housing, feeding, and sanitation

b. Transportation

c. Water and Food

d. Communications

i. Radios

ii. Phone Bank/Call Center

e. Personnel

i. Volunteer Reception Center staff

ii. Security for the Volunteer Reception Center

iii. Receiving agency liaisons at the Volunteer Reception Center

f. Office equipment and supplies

g. Volunteer Reception Center go-kits

C. Volunteer Management

The scope of volunteer management is to organize and vet City of Shoreline volunteers and unaffiliated volunteers and assign them to a supervising agency, organization, or appropriate support organization and/or volunteer organization.

This VMP is designed to be scalable and will be used for very large or catastrophic disasters as well as disasters on a smaller scale. The design and operation of the volunteer management system are flexible in order to provide appropriate support to these situations. Activation is dependent on the type and level of assistance needed. In many cases, the level of assistance needed will not necessitate activation of the entire volunteer management system, since some donation and volunteer needs during disasters can be handled by the City of Shoreline as part of their normal disaster operations and by recognized volunteer organizations managing their own operations.

D. Volunteer Management Level's

Three levels of volunteer management have been identified to permit flexibility in the system so that it meets the unique needs of the disaster.

Any time this VMP is activated, in whole or part, coordination with the EOC is essential to ensure volunteer needs, information on the availability of volunteers, and pertinent information on the volunteer management program are provided to the media for dissemination to the public.

1. **Volunteer Management–Level A:**

| Level Trigger | Action Resulted | Typical Activates performed by Volunteers |
|---|---|---|
| a) This level will be used in disasters that are small, limited, or localized in nature.<br>b) Spontaneous volunteers will generally come from surrounding neighborhoods<br>c) Incident Commander, first responders will identify the need for volunteer management.<br>d) Typically consistent with a Phase I or II EOC Activation. | a) The City will use its already registered disaster volunteers.<br>b) No need to stand up or activate a Volunteer Reception Center (V RC)<br>c) Recognized volunteer organizations will each appoint a Volunteer Management Liaison who will manage spontaneous volunteers on site. | a) Sandbagging<br>b) Debris clearance |

2. **Volunteer Management–Level B:**

| Level Trigger | Action Resulted | Typical Activates performed by Volunteers |
|---|---|---|
| a) This level will be used in disaster's that are medium to large.<br>b) Local and regional media often results "gawkers" and those who want to help.<br>c) Typically consistent with a Phase II or III EOC Activation. | a) May need to coordinate an activation of a Volunteer Reception Center (VRC)<br>b) Not all components of the VMP or Volunteer Reception Center Standard Operating Procedures (SOP's) will need to be activated.<br>c) Volunteer Reception Center staff may fill multiple roles.<br>d) May need to request that the KCECC establish a Regional Volunteer Reception Center (VRC).<br>e) If the City cannot support this level of activation, they will notify the KCECC and request assistance. | a) Same as above<br>b) Staffing of Reception Centers<br>c) Staffing of Call Centers<br>d) Staffing at Police Neighborhood Centers |

3. **Volunteer Management–Level C:**

| Level Trigger | Action Resulted | Typical Activates performed by Volunteers |
|---|---|---|
| d) This level will be used in a very large or catastrophic disaster<br>e) Generates a large amount of spontaneous volunteers.<br>f) Volunteer activity will overwhelm the City of Shoreline | f) May need to stand up or activate a Volunteer Management Unit at the EOC<br>g) May need to request that the KCECC establish a Regional Volunteer Reception Center (VRC).<br>h) May send staff and/or volunteers to assist with regional Volunteer Reception Center<br>i) May need to establish Phone Bank/ Call Center to support Volunteer Reception Center activities<br>j) If the City cannot support this level of activation, they will notify the KCECC and request assistance. | a) Same as above |

E. Facility Management

1. Phone Bank/Call Center

The Volunteer Management Liaison will discuss with the Section Chiefs at the EOC and the Public Information Officer the need for opening up the Phone Bank/Call Center, in order to take calls inquiring about the status of the current

situation, types of volunteer opportunities that are available, and giving information on donation management.

2. Volunteer Reception Center

The opening of a Volunteer Reception Center will be coordinated on a regional basis with King County ECC and/or Snohomish County EOC. The City doesn't have the resources to staff or equip a center on its own.

F. Public Information and Outreach

One of the keys to keeping volunteers from impeding the response and recovery processes of a catastrophic incident, and essentially becoming a second disaster; is timely, informative, and accurate information distributed to the public. For example, it is important to make it clear what the needs are in the impacted areas, appropriate ways to help, and what is not needed. Messages should be coordinated through the KCECC and JIC when appropriate and able.

1. Pre-disaster messages

a. Coordinated through the KCECC

2. Joint Information System/Joint Information Center (JIC)

3. Media

G. Recovery

1. Volunteers will continue to work for and be managed by their assigned department until their job is completed and there is no longer need for their services or the appropriate the Volunteer Management Unit personnel deactivates them.

H. VMP Demobilization

1. The Volunteer Management Liaison shall coordinate demobilization with the Demobilization Unit of the Planning Section and other appropriate departments and agencies.

## III. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. The departments and staff members of the City of Shoreline have emergency assignments in addition to their normal, day-to-day duties. The duties, roles, responsibilities, and how each of departments and their staff are organized during a

disaster are outlined in the Basic Plan Section of the City of Shoreline Comprehensive Emergency Management Plan (CEMP).

B. The following is the assignment of responsibilities to roles/organizations of the City of Shoreline Volunteer Management Structure. The designated emergency assignment applies to all parts of the VMP when a specific part is not designated. The expected support from external organizations and agencies is also included.

1. Roles/organizations:

| Agency/ Organization | Potential Roles |
|---|---|
| Shoreline - Community Emergency Response Team (CERT) | 1. Provide a ready pool of trained and registered Disaster Volunteer Workers<br>2. Assist with organizing additional spontaneous volunteers.<br>3. Assist in light USAR<br>4. Assist in light First Aid<br>5. Assist in amateur damage assessment. |
| Shoreline - Faith Based Partners | 1. Pool of volunteers<br>2. Facilities to use as a Volunteer Reception Center |
| Shoreline – Auxiliary Communications Services (ACS) (Ham Radio) | 1. Provide a ready pool of trained and registered Disaster Volunteer Workers<br>2. Assist with organizing additional spontaneous volunteers.<br>3. Assist in coordinating Amateur Radio (i.e. Ham Radio) communications. |
| Washington Association of Volunteer Organizations Active in Disaster (WAVOAD) | 1. Provide a ready pool of trained and registered Disaster Volunteer Workers<br>2. Assist with organizing additional spontaneous volunteers. |
| United Way of King County | 1. Provide a ready pool of trained and registered Disaster Volunteer Workers<br>2. Assist with organizing additional spontaneous volunteers. |
| American Red Cross | 1. Provide a ready pool of trained and registered Disaster Volunteer Workers<br>2. Assist with organizing additional spontaneous volunteers. |
| King County Humane Society | 1. May provide a pool of trained volunteers to deal with animal care issues |

| | |
|---|---|
| Volunteer Management Liaison | 1. Identify and Recruit Volunteer Management Partners<br>2. Coordinate the development of Volunteer Management Program for the City of Shoreline and Standard Operating Guidelines (SOP's) for the volunteer management function.<br>3. Determine which volunteer management functions should be activated before and after a disaster occurs.<br>4. Serve in the Logistic Section at the EOC |

a. City of Shoreline HR Dept. will assist the Volunteer Management Liaison with reviewing of volunteer applications to find the best fit for this talents and skills.

b. City of Shoreline Parks Department may serve as a resource for identifying a pool of volunteers and a facility for use as a Volunteer Reception Center.

c. City of Shoreline Police Volunteers - may provide a pool of trained volunteers.

d. Public Health Seattle King County – may provide public education that can be distributed by volunteers out into the community.

e. King County ECC – will help to ensure regional approach and provide logistical support for the use or, training of and deployment of spontaneous volunteers.

f. City of Shoreline Emergency Management Council – as many have signed as mutual aid agreements with the City may be able to provide volunteers and/or logistical support of volunteers following a disaster.

2. Potential Tasks:

The following list of Potential Task's may be assisted by the Volunteer Management Liaison, or designee, to any person or agency that they deem appropriate:

a. Coordinate the development of a volunteer management program for the City of Shoreline and Standard Operating Guidelines (SOP's) for the volunteer management function.

b. Determine which volunteer management functions should be activated before and after a disaster occurs.

c. Identify suitable candidates for managing the various volunteer management functions.

d. Locate volunteers and volunteer agencies to work in the volunteer management functions.

e. Coordinate with the EOC and the Public Information Office to collect information about needed volunteers.

f. Coordinate with the EOC and the Public Information Office to disseminate information to the community about available volunteer opportunities.

g. Determine when to terminate or consolidate volunteer management functions.

h. Ensure that a volunteer management program coordinating the efforts of the volunteer groups and local government is planned and ready for activation.

i. Coordinate with other City of Shoreline partner organizations and agencies as the situation demands.

j. Meet to coordinate, update, and collaborate on the volunteer management system and operational process before, during, and after a disaster.

k. Provide advice on suitable candidates for managing the volunteer management functions.

l. Assist in locating volunteers to work in a Volunteer Reception Center.

m. Assist in maintaining records on volunteer recruitment and management activities.

n. Work with the County to select a site(s) for a Volunteer Reception Center and coordinate equipping and staffing the facility.

o. Select a site for a Call Center and coordinate equipping and staffing the facility.

p. Develop operating guidelines for operation of the Call Center.

q. Coordinate training of volunteers for the operations of the Call Center.

r. Identify needed volunteers.

s. Manage the Call Center.

t. Coordinate field logistics, media releases, emergent organizations, and spontaneous volunteers.

u. Establish the internal volunteer management program.

v. Determine support requirements.

w. Recruit, select, assign, train, and supervise volunteers.

x. Provide knowledge of resources that can be brought to bear in an emergency.

y. Provide own response plans.

z. Provide specialized personnel and equipment resources needed in an emergency.

aa. Provide electronic and print media support for program activities and emergency response and recovery operations.

bb. Maintain law and order.

cc. Establish and secure perimeters.

dd. Control and limit access.

3. Support functions

a. Initial support from local response organizations may be provided without a local or county disaster declaration. If the situation warrants, the Incident Commander or the Emergency Management Coordinator may request that a local disaster be declared to support and supplement ongoing operations. The King County Regional Disaster Plan will be activated to support the coordination of volunteers on a regional level.

b. Initial support from State agencies may be provided without a State disaster declaration. If the situation warrants, State of Washington Military Department Emergency Management Division Officials will request that a State disaster be declared to support and supplement ongoing operations.

## IV. DIRECTION, CONTROL, AND COORDINATION

A. Authority to Initiate Actions

The City of Shoreline's Emergency Management Coordinator, Emergency Management Director/City Manager, or the Incident Commander all have the authority and responsibility to implement this VMP, which is the official operations source for City of Shoreline pertaining to all emergencies and disasters managing volunteers when a coordinated response is required.

The Emergency Management Coordinator, Emergency Management Director, or the Incident Commander may assign any part of the VMP utilizing the UCS/ ICS Systems.

All volunteer management activities will be coordinated with the KCECC, if possible. Regular communication will occur between the KCECC and the City of Shoreline EOC, if possible.

Regional conference calls will occur regularly between volunteer liaisons in each county to enhance coordination and collaboration, if possible.

B. Command Responsibility for Specific Actions

1. The City of Shoreline's Volunteer Management Liaison or designee (currently the City of Shoreline's Neighborhoods Coordinator) will manage the volunteer management program, supervise key volunteer management personnel, act as the Volunteer Management Liaison in the Logistics' Section of the EOC and coordinate the efforts of volunteer groups and local government.

    a. These duties can be assigned to other City staff if needed. Consideration should be given to staff that have experience working with volunteers, i.e. Park and Recreation staff or Human Resources.

2. Volunteers working as an integral part of a recognized volunteer group (e.g., the American Red Cross, Adventist Community Services, and Salvation Army) will respond to direction from those organizations.

3. Each individual supervising a volunteer management function will select an appropriate assistant or designee to run the operation in his or her absence.

4. Each volunteer group assisting in the disaster will designate a specific individual with authority to accept task assignments, and coordinate with the Volunteer Management Liaison.

## V. INFORMATION COLLECTION AND DISSEMINATION

A. Identify the type of information needed.

See applicable forms and SOP's.

B. Determine where the information is expected to come from.

Information updates will come from any agency/ organization that is operating a Phone Banking/ Call Center, Volunteer Reception Center, or utilizing volunteers for assistance with response and recovery activities.

C. Identify who will use the information.

Information will be compiled by the Volunteer Management Liaison, or designee, and then submitted to the Planning Section for including into Situation Reports. Information will also be shared with other Sections/ Units as necessary in order to fill resource requirements and satisfy other documentation requirements. The Volunteer Management Liaison will also provide a Volunteer Management Situation Report to the EM Coordinator, EM Director, Liaison Officer, KCECC and appropriate agencies, partners, and volunteer organizations.

D. Establish how the information will be shared.

All information will flow into and out of the EOC through proper communications systems and methods. The preferred method is Fax/ Emailing of completed forms. However, Phone, Radio and other approved communications methods are appropriate if Fax/ Emailing are not available or appropriate to communicate needs.

E. Select the appropriate format for providing the information.

The Volunteer Management Liaison will use the Volunteer Management Program Situation Report to communicate necessary information out of the Volunteer Management Unit or other appropriate unit. Appropriate departments/ unit will utilize the forms in the VMP to communicate the necessary information to implement the VMP. This includes utilizing forms in the VMP SOP's to communicate information between agencies, units, organizations, departments and the EOC.

F. Determine specific times when the information will be needed.

1. Initial reports

Situation Reports should be submitted every 4 - 8 hours, as appropriate, to the Volunteer Management Liaison. The Volunteer Management Liaison should submit Volunteer Management Program Situation Reports every 8 hours, as appropriate. Times may be altered as needed, utilizing appropriate reporting structure.

2. Periodic unscheduled updates

Situation Reports can be submitted periodically at minimum, or if there is a significant change since the last SitRep that is critical to communicate timely, at least every 24 hours to the Situations Unit and other appropriate personnel.

3. Termination of incident

Incident Termination, including termination of VMP activities, can be made by the EM Director, EM Coordinator, Volunteer Management Liaison or designee. All decisions should be communicated and authorized by the EOC.

## VI. ADMINISTRATION, FINANCE, AND LOGISTICS

A. Agreements and Understandings

Should City of Shoreline resources prove to be inadequate during emergency operations, requests may be made for assistance from local jurisdictions and other agencies in accordance with existing or emergency negotiated mutual aid agreements and understandings. Such assistance may take the form of equipment, supplies, personnel, or other available capabilities. Duly authorized officials enter into all agreements and understandings. Copies of existing agreements are on file in the Emergency Operations Center.

B. Policies

1. The Volunteer Management Liaison will work with the Finance Section of the EOC to establish the needed SOP's for keeping financial records for volunteer management, reporting, tracking resource needs, tracking the source and use of spontaneous volunteers, acquiring ownership of donated resources, and compensating the owners of private property used by the jurisdiction.

C. Reporting

During emergency operations, the Volunteer Management Liaison will compile and provide a daily summary of significant volunteer management activities to the EOC for use in staff briefings and inclusion in periodic Situation Reports. If the EOC has been deactivated, a periodic summary of activities will be provided to local EM officials and the heads of volunteer organizations participating in the recovery process.

Reports will include the following information, if information is available:

1. Phone Bank/Call Center
    a. Number of calls by type (volunteer inquiries, request for volunteers, referrals to agencies for disaster assistance, requests for information, etc.)
    b. Major issues or challenges
2. Volunteer Deployment
    a. Number of volunteers processed
    b. Number of volunteers assigned to tasks
    c. General types of jobs to which volunteers have been dispatched
    d. Number of workers in the facility
    e. Number of volunteer hours worked
    f. Number of available volunteers and types of services offered
    g. Current hours of operation
    h. Expenses incurred
    i. Major operational activities
    j. Support activities (e.g., feeding, lodging)
    k. Major issues or challenges
    l. Unmet volunteer needs

D. Records

1. Expenses incurred in operating the volunteer management system are generally not recoverable. However, in the event that State and/or Federal reimbursement is considered, accurate records would need to be provided. Therefore, all government departments and agencies should maintain records of personnel and equipment used and supplies consumed during volunteer management operations.

E. Post-Incident Review

The Volunteer Management Liaison will be included in the City's review of the emergency operations in the aftermath of a major emergency or disaster. The purpose of this review is to identify needed improvements in its procedures, its facilities, and its equipment.

F. Training

1. The Volunteer Management Liaison should attend training in volunteer management, as needed.

G. Exercises

Local drills, tabletop exercises, functional exercises, and full-scale exercises should periodically include a Volunteer Management

## VII VMP DEVELOPMENT AND MAINTENANCE

A. The City of Shoreline is responsible for developing and maintaining this VMP.

B. Individuals, departments, agencies, and volunteer organizations assigned responsibilities in this VMP and its appendices are responsible for developing and maintaining appropriate SOPs or SOG's to carry out those responsibilities.

C. This plan will be reviewed and updated in accordance with the standards established in the City of Shoreline CEMP.

D. This VMP should be activated whenever possible when an exercise of a simulated emergency is conducted regardless of actual events, in order to provide practical, controlled operations experience to those who have response responsibilities.

E. An After-Action Review (AAR) will be conducted as deemed necessary following exercises and actual events. The effectiveness of this VMP and any recommended changes should be part of the AAR process.

## VII. AUTHORITIES AND REFERENCES

A. Legal Authority

1. Federal
   a. The Robert T. Stafford Disaster Relief and Emergency Assistance Act, Public Law 93-288, as amended
   b. Homeland Security Presidential Directive 5 (HSPD-5)
   c. The National Response Framework (NRF), January 2008
   d. NRF, Volunteer and Donations Management Support Annex. January 2008

2. State
   a. Emergency management personnel immunity
   b. Washington Administrative Code, 2000, Chapter 118-04, Emergency Worker Program, http://apps.leg.wa.gov/WAC/default.aspx?cite=118-04
   c. Volunteer immunity
   d. Good Samaritan law
   e. State employee immunity
   f. State board of health rules and regulations

3. Local
   a. Shoreline Municipal Code 2.50
   b. City of Shoreline Comprehensive Emergency Operations Plan
   c. City of Shoreline Disaster Recovery Plan
   d. City of Shoreline Hazard Mitigation Plan

4. Volunteer, quasi-governmental
   a. Act 58-4-1905 American National American Red Cross Statement of Understanding, Dec. 30, 1985
   b. Mennonite Disaster Services Agreement with Federal Disaster Assistance Administration (FDAA).
   c. Salvation Army Charter, May 12, 1974

**VIII. Forms**

| **Shoreline CEMP ESF 7 Support Services<br>Volunteer Management<br>Volunteer Reception Center - Sit-Rep** | | | |
|---|---|---|---|
| From (Title) : | **To:** Shoreline EOC – Volunteer Management Liaison | Date and Time of Last Sit. Rep. (00/00 00:00 TO 00/00 00:00): | Date and Time of Sit. Rep. (00/00 00:00 TO 00/00 00:00): |
| Phone Bank / Call Center Location Name | | Phone Bank / Call Center Address | |
| Phone Bank / Call Center Phone Number | | Phone Bank / Call Center Fax Number | |
| Agency Name | | Agency Contact | |
| Agency Address | | Agency Phone & Ext. | |
| **Data Breakdown** | | | |
| **Item:** | | **Number** (Since last Sit-Rep.) | |
| Volunteers processed | | | |
| Volunteers assigned to tasks | | | |
| Workers in facility | | | |
| Volunteer hours worked | | | |
| Number of available volunteers | | | |
| **General Information** (Since last Sit-Rep) | | | |
| Types of jobs to which volunteers have been dispatched: | | | |
| Types of types of services extra volunteers can do: | | | |

| **Page 1 of 2** |
| --- |
| **Shoreline CEMP ESF 7 Support Services**<br>**Volunteer Management**<br><br>**Volunteer Reception Center - Sit-Rep** |
| Current hours of operation: |
| Expenses incurred: |
| Major operational activities: |
| Support activities (e.g., feeding, lodging): |
| Major issues or challenges: |
| Unmet volunteer needs: |

**Page 2 of 2**

| **Shoreline CEMP ESF 7 Support Services<br>Volunteer Management<br>Phone Bank/ Call Center - Sit-Rep** | | | |
|---|---|---|---|
| From (Title) : | **To:** Shoreline EOC – Volunteer Management Liaison | Date and Time of Last Sit. Rep. (00/00 00:00 TO 00/00 00:00): | Date and Time of Sit. Rep. (00/00 00:00 TO 00/00 00:00): |

| | |
|---|---|
| Phone Bank / Call Center Location Name | Phone Bank / Call Center Address |
| Phone Bank / Call Center Phone Number | Phone Bank / Call Center Fax Number |
| Agency Name | Agency Contact |
| Agency Address | Agency Phone & Ext. |
| **Number of Calls:** | |

| **Type of Call:** | **Number of Calls (Since last Sit-Rep.)** |
|---|---|
| Volunteer Inquiries | |
| Request for Volunteers | |
| Referrals to Agencies for Disaster Assistance | |
| Requests for Information | |
| Other | |

| Page 1 of 1 | | | |
|---|---|---|---|
| **Shoreline CEMP ESF 7 Support Services<br>Volunteer Management<br>Volunteer Management Program Sit-Rep** | | | |
| From (Title) : | **To:** Shoreline EOC , KCECC, Recognized Volunteer Organizations EOC's | Date and Time of Last Sit. Rep. (00/00 00:00 TO 00/00 00:00): | Date and Time of Sit. Rep. (00/00 00:00 TO 00/00 00:00): |
| Agency Name | | Agency Contact | |
| Agency Address | | Agency Phone & Ext. | |
| **Data Breakdown** | | Volunteer Management Level (A,B or C) | |
| **Item:** | | **Number** (Since last Sit-Rep.) | |
| Volunteers processed | | | |
| Volunteers assigned to tasks | | | |
| Workers in facilities | | | |
| Volunteer hours worked | | | |
| Number of available volunteers | | | |
| **General Information** (Since last Sit-Rep) | | | |
| Types of jobs to which volunteers have been dispatched: | | | |

| **Page 1 of 1** |
| --- |
| **Shoreline CEMP ESF 7 Support Services**<br>**Volunteer Management**<br><br>**Volunteer Management Program Sit-Rep** |
| Major operational activities: |
| Major issues or challenges: |
| Unmet volunteer needs: |
| List of Volunteer Coordination Centers |
| List of Volunteer Phone Bank/ Call Centers |
| List of Volunteer Organizations Partnering with and assigned tasks from VMP: |

## Acronyms and Abbreviations

AAR After-Action Report
CEMP Comprehensive Emergency Management Plan
DEM Department of Emergency Management
EOC Emergency Operations Center
ESF Emergency Support Function
FDAA Federal Disaster Assistance Administration
FEMA Federal Emergency Management Agency
HSPD Homeland Security Presidential Directive
IC Incident Command
ICS Incident Command System
JIC Joint Information Center
LAVAD Local Area Volunteers Active in Disasters
NIMS National Incident Management System
NRF National Response Framework
SOG Standard Operating Guideline
SOP Standard Operating Procedure
UC Unified Command
Volunteer Reception Center VRC
VMP Volunteer Management Plan
VMS Volunteer Management Supervisor
KCECC King County Emergency Coordination Center

# I. PURPOSE, SCOPE, SITUATIONS, AND ASSUMPTIONS

## A. Purpose

This Donations Management Plan (DMP), located in ESF #7 Support Services Appendix H provides guidance for the departments and agencies within the City of Shoreline, with the purpose of outlining the concept of operations, organizational arrangements, and responsibilities for coordinating the efforts of volunteer groups and governments to manage donations of goods, services, and monetary donations in the aftermath of a disaster event.

Any reference to donated goods and services in this annex means unsolicited and non-designated goods. This plan does not affect the established procedures of agencies regarding their respective procedures for solicited goods and services. The procedures outlined are for the coordination, acceptance, control, receipt, storage, distribution, and disposal of donation management responsibilities.

When a major or catastrophic event occurs and the City of Shoreline decides to activate the DMP, this plan will activate to prescribe the activities taking place in the City of Shoreline. Activities described in this plan will be coordinated with regional and state efforts.

This plan complements the efforts of the Puget Sound Regional Catastrophic Planning Group.

## B. Scope

This Plan applies to all departments and personnel of the City of Shoreline along with the private sector, volunteer organizations, and community members. This DMP also governs support agencies that respond within the City of Shoreline to a disaster or emergency and that have responsibility involving the receiving, processing, transporting, and/or distribution of donations.

## C. General Policy

### 1. Donations

a. The City of Shoreline does not wish to operate or change an organization's system to receive, process, transport and/or distribute donated goods and services.

b. The City of Shoreline does, however, reserve the right to coordinate these efforts within the City of Shoreline. This includes restricting and/or modifying:

i. The locations in which donations may be brought

ii. The areas and/or buildings were organizations personnel are allowed to enter.

iii. The types of Personal Protective Equipment (PPE) that is necessary to be used in Donation Reception Centers.

iv. The types, quantity, quality, and condition of goods that enter into the affected areas of the City.

c. The City recognizes that Washington State Emergency Management Division as the overall lead for donations management during a disaster. However, the City has the ultimate responsibility for managing disaster response and recovery and may engage in the donations management process, as required and able, based on available resources and personnel

d. The City recognizes that the Puget Sound RCPGP Region, which King County is a partner in, will utilize the Washington State donations management plan for Regional Coordination efforts, which may be used as a guide for the City's planning efforts.

e. The City will strive to stress to donors the preference for cash donations to recognized charitable organizations working to assist victims of the disaster; however, if the donor wants to donate in-kind goods or services, the City will encourage people to use the National Donations Management Network (NDMN), through the WA State EMD, to connect the donor with the organization needing that particular donation.

f. Donors will be discouraged from sending unsolicited donations directly to the disaster site, unless directed by the City of Shoreline.

g. The City may direct people to the National Donations Management Network (NDMN) portal through WA State EMD. WA State EMD maintains an MOU with NDMN. For more information on the NDMN see: www.aidmatrix.org or see WA State CEMP ESF 7: Appendix 1: Donated Goods

## D. Planning Assumptions

1. In the event of a public emergency causing large-scale loss of life and destruction of property, donors will offer assistance of virtually any kind, including cash, goods, equipment and loan of equipment, and the services of individuals.

2. Offers of assistance will be made directly to all levels of government (Federal and local) as well as to voluntary organizations.

3. In less-than-large-scale or "high-visibility" public emergencies, donations management will be handled by voluntary organizations with or without City involvement.

4. This plan is heavily dependent on the City of Shoreline having the resources, personnel, and supplies necessary to coordinate, manage and distribute donated goods and/or services. Furthermore, it is assumed that the City of Shoreline could become quickly overwhelmed and therefore may not be able to safely and reasonable accommodate donations due, in part, to the limited personnel and resources available in the City of Shoreline.

5. If the City of Shoreline becomes overwhelmed and therefore may not be able to safely and reasonable accommodate donations of goods, they will be heavily dependent on King County ECC and recognized organizations to supply the vast majority of resources to successfully implement the DMP.

6. An overwhelming number of unsolicited and undesignated donations will arrive in the impacted area.

7. All City of Shoreline staff involved in the management of donations of goods and/or services may be expected to perform additional duties and responsibilities during disaster and emergency situations.

8. Assistance to the City of Shoreline by other response organizations is expected to supplement efforts, in an efficient, effective, and coordinated response, when the City of Shoreline determines their own resources to be insufficient.

9. Effective response to a catastrophic incident will occur when local jurisdictions coordinate efforts at the county level. County Donations Coordinator will then coordinate on a regional and state level.

10. During a disaster affecting the City of Shoreline, local government and local volunteer groups and agencies may be adversely affected and may not be able to cope with a sizable influx of donations.

11. Washington State Emergency Management Division is the overall lead for donations management during disaster.

12. The American Red Cross, and other recognized non-governmental organizations (NGO's), will ensure the proper documentation, tracking, and accounting for donations of goods and services.

## II. CONCEPT OF OPERATIONS

### A. General

1. The National Incident Management System (NIMS) and the Incident Command System (ICS) will be used in all emergency and disaster situations.

2. As unsolicited and undesignated donations arrive in the impacted area or surges in donations occur and overwhelm the system, resources will be requested to assist with donations management. This could include requests to the next level of government or to non-governmental entities.

3. This DMP defines the actions and roles necessary to provide a coordinated response by departments and partner agencies of the City of Shoreline, in consultation and coordination with the KCECC and recognized volunteer organizations.

4. When the DMP is activated, it will be activated at the City of Shoreline level. This plan describes actions taken in the City of Shoreline and its efforts to coordinate locally on donations management.

5. Conference calls may be with activated entities within the county will occur at least daily to coordinate donation management activities and may include agencies in King County and/or Washington State.

### B. Donations Management Plan (DMP) Activation

1. Before this DMP is activated, a need or potential need for donations management must be identified. Indicators that donations management is or may be required include but are not limited to the following:

   a. Citizens contact the City and are looking for opportunities to donate goods and/or services

   b. The arrival of large numbers of unsolicited goods from out-of-area donors

   c. Requests for a designed Donations Reception Center from any response agency or organization

   d. Regional entity requesting donations and/or donation management from the City of Shoreline

   e. KCECC may request the City of Shoreline to assist with the activation of a Regional Donations Reception Center (RDRC).

2. Once the need for donations and donations management has been identified, the Unified Command (UC), Incident Command (IC), or Emergency Management Coordinator (EMC) will request the activation of the Donations Management Unit (DMU) utilizing the DMP. Members of this Unit can be the Neighborhood /Volunteer Management Liaison, Parks and Recreation staff, Administrative Services Department Staff, assigned CERT member(s) and other applicable staff.
    a. If possible, each department of the City of Shoreline with responsibilities in this DMP will be contacted upon plan activation.
    b. If possible, each department with responsibilities in this DMP will then communicate the activation to its personnel as needed to ensure an effective response.

3. Once activated, the Donations Management Unit (DMU), assigned to the Logistics Unit within the EOC, will strive to maintain continuous contact with the Resource Unit of the Planning Section to plan for effective use of the donations. As stated prior, the first priority will to be direct donations through the National Donations Management Network (NDMN) and/or affiliated Agencies with the City of Shoreline and affiliated with other recognized donation organizations like the American Red Cross, Salvation Army, and the Good Will.

4. The Donations Management Leader (DML) at the EOC will work with representatives from the primary and support agencies for donations management to assess what resources are required to meet the growing need for donation management. Potential requirements include but are not limited to those listed below.
    a. Facilities to serve as:
        i. Donations Reception Centers
    b. Transportation
    c. Communications
        i. Radios
        ii. Phone Bank/Call Center
    d. Personnel
        i. Donations Reception Center staff
        ii. Security for the Donations Reception Center
        iii. Receiving agency liaisons at the Donation Reception Center
    e. Office equipment and supplies

f. Donation Reception Center go-kits

## C. Donation Management

This DMP is designed to be scalable and will be used for very large or catastrophic disasters as well as disasters on a smaller scale. The design and operation of the donation management system are flexible in order to provide appropriate support to these situations. Activation is dependent on the type and level of assistance needed and the amount of unsolicited goods being received. In many cases, the level of assistance needed will not necessitate activation of the entire donation management system, since some donation needs during disasters can be handled by the City of Shoreline as part of their normal disaster operations and by recognized volunteer organizations managing their own operations.

## D. Donations Management Level's

Three levels of donation management have been identified to permit flexibility in the system so that it meets the unique needs of the disaster.

Any time this DMP is activated, in whole or part, coordination with the EOC is essential to ensure volunteer needs, information on the availability of volunteers, and pertinent information on the volunteer management program are provided to the media for dissemination to the public.

1. **Donation Management–Level A:**

| Level Trigger | Action Resulted | Typical Activates performed by Volunteers |
|---|---|---|
| a) This level will be used in disasters that are small, limited, or localized in nature.<br>b) Unsolicited donations will generally come from surrounding neighborhoods<br>c) Incident Commander, first responders will identify the need for donation management.<br>d) Typically consistent with a Phase I or II EOC Activation. | a) The City will use its already existing relationships with organizations to manage donations.<br>b) No need to stand up or activate a Donation Reception Center (DRC)<br>c) Recognized agencies and/or organization will each appoint a Donation Management Leader who will manage unsolicited and solicited donations on site. | a) Sorting of Goods<br>b) Assisting with Paperwork and documentation<br>c) Assist with distributing goods to individuals. |

2. **Donation Management–Level B:**

| Level Trigger | Action Resulted | Typical Activates performed by Volunteers |
|---|---|---|
| a) This level will be used in disaster's that are medium to large.<br>b) Local and regional media often results in "gawkers" and those who want to donate.<br>c) Typically consistent with a Phase II or III EOC Activation. | a) May need to coordinate an activation of a Donation Reception Center (DRC)<br>b) Not all components of the DMP or Donation Reception Center Standard Operating Procedures (SOP's) will need to be activated.<br>c) Donation Reception Center staff may fill multiple roles.<br>d) May need to request that the KCECC establish a Regional Donation Reception Center (VRC).<br>e) If the City cannot support this level of activation, they will notify the KCECC and request assistance. | a) Same as above<br>b) Staffing of Donation Reception Centers<br>c) Staffing of Call Centers<br>d) Staffing at Police Neighborhood Centers |

3. **Donation Management–Level C:**

| Level Trigger | Action Resulted | Typical Activates performed by Volunteers |
|---|---|---|
| d) This level will be used in a very large or catastrophic disaster<br>e) Generates a large amount of unsolicited donations.<br>f) Donation activity will overwhelm the City of Shoreline | f) May need to stand up or activate a Donation Management Unit at the EOC<br>g) May need to request that the KCECC establish a Regional Donation Reception Center (DRC).<br>h) May send staff and/or volunteers to assist with regional Donation Reception Center<br>i) May need to establish Phone Bank/ Call Center to support Donation Reception Center activities<br>j) If the City cannot support this level of activation, they will notify the KCECC and request assistance. | a) Same as above |

E. **Facility Management**

1. Phone Bank/Call Center

The Donation Management Leader will discuss with the Section Chiefs at the EOC and the Public Information Officer the need for opening up the Phone Bank/Call Center, in order to take calls inquiring about the status of the current situation, types of donation opportunities that are available, and giving information on donation management.

2. Donation Reception Center

The opening of a Donation Reception Center will be coordinated on a regional basis with King County ECC.

F. **Public Information and Outreach**

One of the keys to keeping donations from impeding the response and recovery processes of a catastrophic incident, and essentially becoming a second disaster; is timely, informative, and accurate information distributed to the public. For example, it is important to make it clear what the needs are in the impacted areas, appropriate ways to help, and what is not needed. Messages should be coordinated through the KCECC and JIC when appropriate and able.

1. Pre-disaster messages
    a. Coordinated through the KCECC
2. Joint Information System/Joint Information Center (JIC)
3. Media

G. **Recovery**

1. Donations will continue to arrive and be managed by their assigned department until their job is completed and there is no longer need for their services or the appropriate Donations Management Unit personnel deactivate them.

H. **DMP Demobilization**

1. The Donations Management Leader shall coordinate demobilization with the Demobilization Unit of the Planning Section and other appropriate departments and agencies.

## III. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

A. The departments and staff members of the City of Shoreline have emergency assignments in addition to their normal, day-to-day duties. The duties, roles, responsibilities, and how each of the departments and their staff are organized during a disaster are outlined in the Basic Plan Section of the City of Shoreline Comprehensive Emergency Management Plan (CEMP).

B. The following is the assignment of responsibilities to roles/organizations of the City of Shoreline Donation Management Structure. The designated emergency assignment applies to all parts of the VMP when a specific part is not designated. The expected support from external organizations and agencies is also included.

1. Roles/organizations:

| Agency/ Organization | Potential Roles |
|---|---|
| United Way of King County | 1. Assist with organizing and distributing donations. |
| American Red Cross | 1. Assist with organizing and distributing donations. |
| Good Will | 1. Assist with organizing and distributing donations. |
| Donation Management Leader | 1. Identify Donation Management Partners<br>2. Coordinate the development of Donation Management<br>Program for the City of Shoreline and Standard Operating Guidelines (SOP's) for the volunteer management function.<br>3. Determine which donation management functions should be activated before and after a disaster occurs.<br>4. Serve in the Logistic Section at the EOC |
| King County ECC | 1. Help to ensure regional approach and provide logistical support for the collection, storage and distribution of donations. |
| City of Shoreline Emergency Management Council | 2. Many have signed mutual aid agreements with the City may be able to provide donations and/or logistical support of donations following a disaster. |
| City of Shoreline Police Department | 1. Maintain law and order.<br>2. Establish and secure perimeters.<br>3. Control and limit access to facilities and donation sites. |

2. Potential Tasks:

The following list of Potential Task's may be assigned by the Donation Management Leader, or designee, to any person or agency that they deem appropriate:

a. Coordinate the development of a donation management program for the City of Shoreline and Standard Operating Guidelines (SOP's) for the volunteer management function.

b. Determine which donation management functions should be activated before and after a disaster occurs.

c. Identify suitable candidates for managing the various donation management functions.

d. Locate donation agencies to work in the donation management functions.

e. Coordinate with the EOC and the Public Information Office to collect information about needed donations.

f. Coordinate with the EOC and the Public Information Office to disseminate information to the community about where to direct donations.

g. Determine when to terminate or consolidate donation management functions.

h. Coordinate with other City of Shoreline partner organizations and agencies as the situation demands.

i. Meet to coordinate, update, and collaborate on the donation management system and operational process before, during, and after a disaster.

j. Assist in locating volunteers and staff to work in a Donation Reception Center.

k. Assist in maintaining records on donation management activities.

l. Work with the County to select a site(s) for a Donation Reception Center and coordinate equipping and staffing the facility.

m. Select a site for a Call Center and coordinate equipping and staffing the facility.

n. Develop operating guidelines for operation of the Call Center.

o. Coordinate training of volunteers for the operations of the Call Center.

p. Identify needed volunteers.

q. Manage the Call Center.

r. Coordinate field logistics, media releases, emergent organizations, and unsolicited donations.

s. Establish the internal donation management program.

t. Determine support requirements.

u. Recruit, select, assign, train, and supervise volunteers, as needed.

v. Provide knowledge of resources that can be brought to bear in an emergency.

w. Provide own response plans.

x. Provide specialized personnel and equipment resources needed in an emergency.

y. Provide electronic and print media support for program activities and emergency response and recovery operations.

3. Support functions

a. Initial support from local response organizations may be provided without a local or county disaster declaration. If the situation warrants, the Incident Commander or the Emergency Management Coordinator may request that a local disaster be declared to support and supplement ongoing operations. The King County Regional Disaster Plan will be activated to support the coordination of donations on a regional level.

b. Initial support from State agencies may be provided without a State disaster declaration. If the situation warrants, State of Washington Military Department Emergency Management Division Officials will request that a State disaster be declared to support and supplement ongoing operations.

## IV. DIRECTION, CONTROL, AND COORDINATION

### A. Authority to Initiate Actions

The City of Shoreline's Emergency Management Coordinator, Emergency Management Director/City Manager, or the Incident Commander all have the authority and responsibility to implement this DMP, which is the official operations source for City of Shoreline pertaining to all emergencies and disasters managing volunteers when a coordinated response is required.

The Emergency Management Coordinator, Emergency Management Director, or the Incident Commander may assign any part of the DMP utilizing the UCS/ ICS Systems.

All donation management activities will be coordinated with the KCECC, if possible. Regular communication will occur between the KCECC and the City of Shoreline EOC, if possible.

Regional conference calls will occur regularly between Donation Leaders in each county to enhance coordination and collaboration, if possible.

### B. Command Responsibility for Specific Actions

1. Members of the Logistics and Finance Section of the EOC or designee will manage the donation management program, supervise key donation management personnel, act as the Donation Management Liaison/ Leader in the Logistics' Section of the EOC and coordinate the efforts of volunteer groups and local government.

    a. These duties can be assigned to other City staff if needed. Consideration should be given to staff that have experience working with donation, i.e. Finance Staff.

2. Each individual supervising a donation management function will select an appropriate assistant or designee to run the operation in his or her absence.

3. Each donation group assisting in the disaster will designate a specific individual with authority to accept task assignments, and coordinate with the Donation Management Leader.

## V. INFORMATION COLLECTION AND DISSEMINATION

### A. Identify the type of information needed.

1. See applicable forms and SOP's.

### B. Determine where the information is expected to come from.

1. Information updates will come from any agency/ organization that is operating a Phone Banking/ Call Center, Donation Reception Center, or utilizing volunteers for assistance with response and recovery activities.

### C. Identify who will use the information.

1. Information will be compiled by the Donation Management Leader, or designee, and then submitted to the Planning Section for including into Situation Reports. Information will also be shared with other Sections/ Units as necessary in order to fill resource requirements and satisfy other documentation requirements. The Donation Management Liaison will also provide a Donation Management Situation Report to the EM Coordinator, EM Director, Liaison Officer, KCECC and appropriate agencies, partners, and volunteer organizations.

### D. Establish how the information will be shared.

1. All information will flow into and out of the EOC through proper communications systems and methods. The preferred method is Fax/ Emailing of completed forms. However, Phone, Radio and other approved communications methods

are appropriate if Fax/ Emailing are not available or appropriate to communicate needs.

E. **Select the appropriate format for providing the information.**

1. The Donation Management Leader will use the provided information to include in the Situation Report to communicate necessary information out of the Donation Management Unit or other appropriate unit. Appropriate departments/ unit will utilize the forms in the DMP to communicate the necessary information to implement the DMP. This includes utilizing forms in the DMP SOP's to communicate information between agencies, units, organizations, departments and the EOC.

F. **Determine specific times when the information will be needed.**

1. Initial reports

   Situation Reports should be submitted every 4 - 8 hours, as appropriate, to the Donation Management Leader. The Donation Management Leader should submit information for Situation Reports every 8 hours, as appropriate. Times may be altered as needed, utilizing appropriate reporting structure.

2. Periodic unscheduled updates

   Situation Reports can be submitted periodically at minimum, or if there is a significant change since the last SitRep that is critical to communicate timely, at least every 24 hours to the Situations Unit and other appropriate personnel.

3. Termination of incident

   Incident Termination, including termination of DMP activities, can be made by the EM Director, EM Coordinator, Donation Management Leader or designee. All decisions should be communicated and authorized by the EOC.

## VI. ADMINISTRATION, FINANCE, AND LOGISTICS

A. **Agreements and Understandings**

Should City of Shoreline resources prove to be inadequate during emergency operations, requests may be made for assistance from local jurisdictions and other agencies in accordance with existing or emergency negotiated mutual aid agreements and understandings. Such assistance may take the form of equipment, supplies, personnel, or other available capabilities. Duly authorized officials enter into all

agreements and understandings. Copies of existing agreements are on file in the Emergency Operations Center.

B. **Policies**

1. The Donation Leader will work with the Finance Section of the EOC to establish the needed SOP's for keeping financial records for donation management, reporting, tracking resource needs, tracking the source and use of unsolicited donations, acquiring ownership of donated resources, and compensating the owners of private property used by the jurisdiction.

C. **Reporting**

During emergency operations, the Donation Management Leader will compile and provide a daily summary of significant volunteer management activities to the EOC for use in staff briefings and inclusion in periodic Situation Reports. If the EOC has been deactivated, a periodic summary of activities will be provided to local EM officials and the heads of volunteer organizations participating in the recovery process.

Reports will include the following information, if information is available:

1. Phone Bank/Call Center
    a. Number of calls by type (donation inquiries, request for donations, referrals to agencies for disaster assistance, requests for information, etc.)
    b. Major issues or challenges
2. Donation Reception Center (Staging Area, Distribution Points, and Financial Accounting)
    a. Number and type of bulk donations received (truckloads, pallets, etc.)
    b. Significant donations and disposition
    c. Goods delivered to distribution points (truckload, pallets, boxes).
    d. Unneeded goods delivered to other agencies
    e. Current hours of operation
    f. Number of persons employed (volunteers and paid workers)
    g. Major operational activities
    h. Support activities (feeding, lodging, etc.)
    i. Major issues or challenges

j. Cash Received

k. Cash Distributed

D. **Records**

1. Expenses incurred in operating the volunteer management system are generally not recoverable. However, in the event that State and/or Federal reimbursement is considered, accurate records would need to be provided. Therefore, all government departments and agencies should maintain records of personnel and equipment used and supplies consumed during volunteer management operations.

E. **Post-Incident Review**

The Donation Management Leader will be included in the City's review of the emergency operations in the aftermath of a major emergency or disaster. The purpose of this review is to identify needed improvements in its procedures, its facilities, and its equipment.

F. **Training**

1. The Donation Management Leader should attend training in volunteer management, as needed.

G. **Exercises**

Local drills, tabletop exercises, functional exercises, and full-scale exercises should periodically include a Donation Management component.

## VII DMP DEVELOPMENT AND MAINTENANCE

1. The City of Shoreline is responsible for developing and maintaining this DMP.

2. Individuals, departments, agencies, and volunteer organizations assigned responsibilities in this DMP and its appendices are responsible for developing and maintaining appropriate SOPs or SOG's to carry out those responsibilities.

3. This plan will be reviewed and updated in accordance with the standards established in the City of Shoreline CEMP.

4. This DMP should be activated whenever possible when an exercise of a simulated emergency is conducted regardless of actual events, in order to provide practical, controlled operations experience to those who have response responsibilities.

5. An After-Action Review (AAR) will be conducted as deemed necessary following exercises and actual events. The effectiveness of this DMP and any recommended changes should be part of the AAR process.

## VII. AUTHORITIES AND REFERENCES

### A. Legal Authority

1. Volunteer, quasi-governmental
    a. Act 58-4-1905 American National American Red Cross Statement of Understanding, Dec. 30, 1985
    b. Mennonite Disaster Services Agreement with Federal Disaster Assistance Administration (FDAA).
    c. Salvation Army Charter, May 12, 1974

## VIII. FORMS

### RECORD OF DONATION – CITY OF SHORELINE

Call received by: _____ Date: _____ Time: _____

**Donor Name and Information:** Salutation: _____

First Name: _____ Last Name: _____

Title: _____ Organization: _____

Phone 1: _____ Phone 2:_____

Address 1: _____

Address 2:_____

City: _____ State: _____ Zip: _____

____ Donated (free) ____ Goods ____ Services _____Cash

____ Commercial (vendor) ____ Goods _____ Services

**Type of Resource:** (e.g., people, food, equipment, cash): _____

Category: (e.g., clothing, water, bedding): _____

Sub-category: (e.g., shoes, blankets, chairs):_____

**Description/Notes:**_____

Total Quantity: Units (#): _____ Measure (e.g., box, each):_____

Packaging _____ Amount (#): _____ Size (e.g. can, dozen, gallon): _____

Palletized: Yes_____ No_____ Transportation Required: Yes_____ No_____

Refrigeration required: Yes _____ No_____ Restrictions: Yes_____ No_____

Resource Location: _____

Estimated Value OR Amount of Cash Donated: _____ Available until: _____

Follow-up required: Yes _____ No _____ Action taken: _____

# I. INTRODUCTION

## A. Purpose

To provide guidelines for fiscal and administrative functions in support of the City of Shoreline's emergency services during an emergency or disaster.

## B. Scope

This ESF is applicable to all City of Shoreline departments and agencies with responsibilities in this plan.

# II. RELATED POLICIES

**A.** Political subdivisions have the power to enter into contracts and incur obligations in carrying out the provisions of the Washington Emergency Management Act without regard to time consuming procedures and formalities prescribed by law (except mandatory constitutional requirements), including but not limited to budget law limitations and the appropriation and expenditures of public funds (RCW 38.52.070[2]).

**B.** The emergency/disaster response capabilities of the City of Shoreline will be built upon the capabilities of existing department/agencies of government, augmented, as required, by volunteers and reassignment of personnel to duties that are more urgent during an emergency period.

# III. PLANNING ASSUMPTIONS

**A.** A disaster may require the expenditure of large sums of money by the City of Shoreline departments and agencies.

**B.** Financial operations will be carried out under compressed schedules and intense public pressures, necessitating expedition (non-routine) procedures, but with no lessened requirement for sound financial management and accountability.

**C.** A Presidential major disaster or emergency declaration will permit funding from the Federal Disaster Relief Fund under the provisions of the Stafford Act, through the Public Assistance Program.

**D.** Actions, decisions, conditions, and expenses must be documented in a disaster to recover federal and state funds and to provide for legal documentation.

**E.** Sufficient administrative personnel will be available to perform support tasks.

# IV. CONCEPT OF OPERATIONS

## A. Authorization of Emergency Expenditures

1. Emergency expenditures are not normally integrated into the budgeting process. Nevertheless, disasters occur on periodic basis requiring substantial and necessary unanticipated obligations and expenditures.

2. Local political subdivisions will incur disaster related obligations and expenditures per the provisions of RCW 38.52.070(2) as follows:

   *"……..…..in carrying out the provisions of this Chapter each political subdivision, in which any disaster as described in RCW 38.52.020 occurs, shall have the power to enter into contracts and incur obligations necessary to combat such disaster, protecting health and safety of persons and property, and providing emergency assistance to the victims of such disaster. Each political subdivision is authorized to exercise the powers vested under this section in the light the exigencies of an extreme emergency situation without regard to time-consuming procedures and formalities prescribed by law (excepting mandatory constitutional requirement), including but not limited to, budget law limitations, requirements of competitive bidding and publication of notices, provisions pertaining to the performance of public work, entering into contracts, the incurring of obligations, the employment of temporary workers, the rental of equipment, the purchase of supplies and materials, the levying of taxes and the appropriation and expenditures of public funds."*

## B. Emergency Finance Procedures

1. Departments

   a) Emergency purchases by-pass certain bidding and ordering requirements.

   b) An emergency purchase is a purchase that must be performed immediately to respond to a threat or risk to the City which could not have been anticipated.

   c) The legal definition in RCW 39.04.280(3) is: An unforeseen circumstance beyond the control of the City that either:

      1) Presents a real, immediate threat to the proper performance of essential functions; or

      2) May result in material loss or damage to property, bodily

injury, or loss of life if immediate action is not taken.

d) The City Manager or his/her designated agent may make or authorize others to make emergency purchases of materials, supplies, equipment or services without complying with competitive bid requirement.

e) Staff should follow the designated purchasing authority that the City Manager has granted in non-emergency situations. Those serving in the roles of Emergency Operations Center Finance and Administration coordinators should be considered as equivalent to Department Directors for emergency purchasing purposes.

## C. Record Keeping

Each department expending resources in response to a declared emergency/disaster will maintain detailed records during such disasters to meet the financial and accounting requirements of the federal or state funding agency. (See Section D Federal Disaster Assistance Instruction Sheet for procedures.) Records will be kept in such a manner that disaster related expenditures and obligations of local departments and agencies can be broken out and identified, separate from regular or general programs and activities.

Complete and accurate records are necessary:

1. To document requests for assistance and ensure maximum eligible reimbursement.

2. To facilitate reimbursement under approved applications pertaining to declared emergencies or major disasters.

3. For audit reports and audit records. Detailed records will be kept from the onset of the disaster, including but not limited to:

   a) Appropriate extracts from payrolls, with any cross-references needed to locate original documents.
   b) A schedule of City equipment used or copies of invoices for rented equipment.

   c) Invoices, warrants, and checks issued and paid for materials and supplies used on the job.

   d) Copies of contracts for all work performed by an outside agency.

## D. Federal and State Reimbursement

Disaster related expenditures and obligations of local political subdivisions may be reimbursed under a number of federal or state programs. Reimbursement of approved costs for work performed in the restoration of certain public facilities may be authorized by the federal or state government after a major disaster declaration by the President or under the statutory authority of certain federal agencies. (See Section D Federal Disaster Assistance Instruction Sheet)

Other agencies besides FEMA Public Assistance include:

- Department of Energy – FCAAP Grants
- Department of Transportation
- U.S. Fish and Wildlife
- FEMA Mitigation Program
- U.S. Corps of Engineers

1. Before a Presidential Declaration:
   *After an occurrence that may result in a declared major disaster or emergency, the City will assess the situation and prepare an estimate for labor and damage costs. These estimates will be forwarded to the King County Office of Emergency Management and then to State Emergency Management. If local and state resources have been exceeded, the governor will request either a Presidential "Emergency Disaster Declaration" or a "Major Disaster Declaration." (See Section C Disaster Assistance Overview.)*

2. After a Presidential Declaration:
   *Once an emergency of a major disaster is declared by the President, a Disaster Field Office (DFO) is opened to accommodate a FEMA financial management unit from which extensive federal and state assistance can be provided. Disaster Resource Assistance Centers (DRAC) are opened and private assistance monies are made available. Emergency telephone centers are also opened to assist in applications. Public agency assistance briefings are conducted and monies made available.*

## E. Audits of Disaster Related Expenditures and Obligations

Audits of local disaster related emergency expenditures will be conducted during the normal audit period. Federal disaster assistance projects will be audited after the completion of work.

## F. Fiscal Procedures

1. Each City department shall designate personnel to be responsible for documentation of disaster related expenses.

2. Emergency expenditures will come from currently appropriated local fund in accordance with RCW 38.52.070.

3. The City Manager or designee and the Administrative Services Director or designee will be responsible for identifying sources of funds to meet disaster related expenses which are incurred.

4. Regular "normal" approval procedures for expenditures may be modified to accommodate the circumstances associated with the disaster.

5. Records shall be kept in a manner that distinguishes between day-to day operations and disaster expenses.

6. The Administrative Services Director shall appoint staff to coordinate documentation of City-wide financial records and expenditures resulting from a disaster.

7. Alternate methods of payment and payroll processing will be established in the event of a computer or automation system failure.

**G. Administrative Procedures**

1. Each City department shall designate personnel to be responsible for the documentation of disaster operations within their respective departments.

2. During emergency operations, non-essential administrative activities may be suspended. Personnel not assigned to essential duties may be assigned to other departments in order to provide support services.

3. Records of disaster operational activities shall be kept in a manner that distinguishes them from day-to-day operational reports, service work requests and payroll records.

4. Disaster reports and expenditures shall be coordinated and documentation for state and/or federal reimbursements and/or assistance programs shall be prepared and submitted to the appropriate state and federal agencies. The Administrative Services Department will have the responsibility for providing expenditure reports and documentation.

5. Actions for repair and recovery that are not time critical shall be coordinated through the appropriate agency or department.

6. Actions affecting archaeological or historical sites shall be coordinated with the State Office of Archaeology and Historic Preservations.

7. The Administrative Services Department shall identify and prepare plans for alternate processing methods of essential financially related documents in the event of computer/automation failure.

8. Each department shall be responsible for filling its material/equipment requirements during an emergency first in its department then coordinated through the EOC.

## V. RESPONSIBILITIES

### A. Administrative Services Department

1. Administrative Services Department will coordinate purchasing efforts in response to emergency situations.

2. Provide overall coordination of disaster documentation process, and prepare and submit disaster related reports to appropriate state and federal agencies.

3. The Administrative Services Director shall work with the City Manager to identify sources of funds from current appropriations or elsewhere to meet disaster related expenses.

4. Modify regular approval procedures for expenditures for use during a disaster.

5. Review departmental submittals of disaster related expenses.

6. Develop alternate methods of payroll and vendor payments in the event of computer system failure during an emergency.

7. Coordinate the EOC Message Center.

### B. Human Resources

1. Provide administrative support to the EOC.

2. Coordinate the assignment of Shoreline personnel to support emergency efforts.

### C. City Departments

1. Designate personnel responsible for documenting disaster related expenses at the department level.

2. Keep records of disaster related expenditures and disaster reports. Differentiate between day-to-day operations and disaster related expenses.

3. Determine non-essential administrative activities. Take action to suspend these activities when appropriate. Reassignment of personnel not assigned to essential duties shall be coordinated through the EOC when activated.

4. Coordinate with Administrative Services in preparation and submittal of documentation for reimbursement or assistance from federal or state agencies.

5. Identify all repair and recovery actions that are not time critical and coordinate this action through the appropriate agency for resolution as time allows.

6. Maintain documentation regarding injuries, lost or damaged equipment or City facilities caused by the disaster and provide this information to the Administrative Services Department upon request.

**D. City Manager**

The City Manager or his/her designee will work with the Administrative Services Director or his Designee to identify funding sources to meet disaster related expenses.

**E. King County Office of Emergency Management**

Provide support to City by providing guidance in the preparation of disaster reports and supporting documents.

**F. Washington State Emergency Management**

1. Authorize expenditures necessary to accomplish appropriate emergency response, including the settling of property loss or damage claims and liability resulting from injury or death of registered emergency personnel as defined in the Washington Emergency Management Act (RCW 38.52.020[d]).

2. Other responsibilities as defined in the *Washington State Comprehensive Emergency Management Plan*.

**G. National Response Framework**

Provides aid and assistance to any state that, during an emergency, has exhausted its own resources.

Sections to this handbook:

A. Emergency Purchasing Checklist

B. Disaster Related Expenditures Form

C. Disaster Assistance Overview

D. Federal Disaster Assistance Instruction Sheet

E. List of Forms

## Section A
## EMERGENCY PURCHASING CHECKLIST

☐ 1. Has the designated City leader proclaimed that an emergency exists?

☐ 2. Identify immediately needed goods and services. All other non-critical purchases must follow regular purchasing procedures.

☐ 3. Contact Purchasing for assistance. If Purchasing is not available then proceed with your purchase and document purchase and reasons for selecting vendor (see #6). Ensure that your supervisor, EOC Logistics Coordinator, or EOC Director concurs with the purchases you intend to make.

☐ 4. Attempt the highest level of competition you have time for (e.g. phone quotes).

☐ 5. Vendors generally desire some assurance of payment when you are conducting an emergency purchase. The following are available payment options:

a) Department Emergency Purchase Orders
Departments have delegated authority to issue an instant purchase for emergency situations. In some cases, a handwritten Purchase Order is allowed.

b) Procurement Cards
The EOC Director has been provided a separate procurement card that can be used for emergency purposes and two procurement cards have been provided to the Finance/Administration unit for emergency use. These cards have a $15,000 limit.

Purchasing and other City staff also have Procurement cards and can make purchases for you.

Some departments/individuals have procurement card authority which can be used to make emergency purchases.

c) Blanket Purchase Orders
Refer to existing Blanket Purchase Order.

☐ 6. Document the emergency and your selection decisions. Do this as soon as practical. Per City policy, you must document:

a) Basis for the Emergency
b) List of items/services purchased
c) Vendor/Contractor name(s)
d) Total dollar amount spent on each purchase
e) Type of purchase
f) Competition attempted for each item (including other quotes received)
g) Keep all packing slips, receipts, bills of lading, and other forms of documentation provided by vendors.

☐ 7. Emergency purchases must be reported to the City Council at the next appropriate City Council meeting.

## SECTION B
## DISASTER RELATED EXPEDITURES

**YOU MUST TURN THIS IN DAILY TO YOUR DEPARTMENTAL DISASTER OPERATIONS MANAGER**

**City employee/volunteer:**
**Today's date:**
**Department (circle one)** **CD/PW** **PD** **FD** **CERD** **CMO** **ASD**

**MILAGE:**
**Ending odometer:** ☐ **Private or** ☐ **City vehicle**
**Beginning odometer:** **Type of vehicle:**
**Miles driven:** **Vehicle number:**

**MISCELLANEOUS PURCHASES / RENTALS – ATTACH ALL RECEIPTS**

| Description/Purpose | Paid charged | Date | Quantity | Unit cost | Total cost |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

**DISASTER RELATED HOURS WORKED**

| Time: From – To | Regular hours | OT hours | Total hours |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

**ITEMS BORROWED/DONATED**

| Source | Purpose |
|---|---|
| | |
| | |

**I CERTIFY THE ABOVE RECORD IS TRUE:**

_____

**Employee or Volunteer Signature**

# *DISASTER ASSISTANCE OVERVIEW*

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**#1 IMMEDIATE RESPONSE TO DISASTER**

**Shoreline**
1. Takes measures to save lives and property
2. Activates Emergency Operations Center (EOC) and Emergency Management Plan.
3. Notifies state Emergency Management (EM)
4. Requests mutual aid from nearby communities
5. Starts emergency record keeping

**State Emergency Management**
1. Assigns incident number
2. Notifies Governor
3. Activates state Emergency Op Center (EOC)
4. Notifies state and federal agencies

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**#2 FOLLOW-UP RESPONSE TO DISASTER**

**Shoreline**
1. Mayor or other responsible party proclaims emergency
2. Requests state and/or federal assistance to preserve life and property
3. Administrative office files situation reports with state EOC on a regular basis
4. Restores services as soon as possible

**State EM and Governor**
1. Provides state assistance and resources to protect life and property
2. Requests federal assistance to protect life and property
3. Proclaims emergency, if necessary

**Federal Government**
1. Provides assistance to protect life and property
2. Stages resources on standby

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**#3 DAMAGE ASSESSMENT**

**Shoreline**
1. Conducts initial damage assessments to determine if situation is beyond their capability
2. Does Emergency Proclamation
3. Reports to King County re: Disaster Declaration
4. King County reports to State Emergency Management

**Federal, State and Local Teams**
1. Conduct damage assessments
2. Report to Governor's office

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**#4 REQUEST FOR FEDERAL ASSISTANCE FOR REPAIR AND RECOVERY**

1. Governor requests assistance from federal agencies under their own authorities for repair and recovery
2. Federal agencies respond under their own authorities
3. Governor requests federal assistance under PL 93-288, as amended by PL 100-707, the Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1988
4. FEMA, Region X, adds recommendation to Governor's request and sends recommendations and request to FEMA National Headquarters
5. FEMA National Headquarters discusses request with President

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**#5 PRESIDENTIAL DECLARATION**

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| **President Denies Request**<br>1. Governor requests specific assistance from federal agencies under their own authority, if not done already<br>2. EM continues to work with affected jurisdictions to facilitate repair and recovery<br>***Or***<br><br>**President Makes "Emergency Disaster Declaration"**<br>1. Federal/state agreement is signed<br>2. Limited federal assistance is provided under PL 93-288, as amended | ***Or***<br>**President makes "Major Disaster Declaration"**<br>1. Federal/state agreement is signed<br>2. Extensive federal and state assistance is provided<br>3. A Disaster Field Office is opened<br>4. Disaster Application Centers are opened and private (individual) assistance monies are made available<br>5. Public agency assistance briefings are conducted and public agency assistance monies are made available<br><br>**Shoreline**<br>1. Sends representative to briefings<br>2. Names agent<br>3. Fills out paperwork<br>4. Conducts more detailed damage assessment<br>5. Starts process of recovering funds<br>6. Mitigation team report is done, state mitigation document is reviewed and updated, and mitigation grants are made available |

## SECTION D
## FEDERAL DISASTER ASSISTANCE INSTRUCTION SHEET

**FEMA – 1100- DR-WA**

**EMERGENCY WORK**
**Categories – A. Debris Clearance & B. Protective Measures Work:**

1) Due to the nature of the Emergency Work, a Disaster Survey Report (DSR) cannot be prepared in advance. Work is necessary and is started immediately following the onset of the disaster.

2) Reimbursement for category A. Debris Clearance & B. Protective Measures is done after the work is completed. County departments submit their category A & B costs to the Administrative Services Department, who reviews the information and prepares it for the FEMA inspectors.

3) FEMA inspectors review the documentation for all A & B costs and then prepare the DSR for federal and state reimbursement.

4) When reimbursement is received, the Administrative Services Department will deposit the monies into the appropriate funds and forward copies to the departments of the DSRs and deposit receipts.

**PERMANENT WORK**
**Categories – C. Road System, D. Water Control Facilities, E. Buildings and Equipment, F. Public Utility Systems, and G. Other**

**Small Projects <$120,000**

1) Departments meet with FEMA and state inspectors. A Disaster Survey Report (DSR) is prepared. The department begins work.

2) Approval of the DSR is received by the Administrative Services Department in the form of a Project Application Summary that states: the approved dollar amounts, project completion dates, project title, location, and any conditions of approval. The "approved" computer generated DSR is sent also. Copies of the approval are forwarded to the department.

3) When work is completed, the involved department notifies the Administrative Services Department in writing that the DSR No. ____ is complete and ready for reimbursement, noting the actual amount expended on the project.

4) The Administrative Services Department will prepare the A-19 and Letter of Certification of Completion for billing. The Administrative Services Director or designee will authorize the reimbursement as the county's designated agent, and it will be forwarded to the Washington State Emergency Management Division for payment.

5) When the payment is received, the Administrative Services Department will deposit, code and track all payments.

**Categories – C. Road System, D. Water Control Facilities, E. Buildings and Equipment, F. Public Utility Systems, and G. Other**

**Large Projects > or = $120,000**

1) Same as for Small Projects 1).

2) Same as for Small Projects 2).

3) Monthly the department will notify Administrative Services of the total expenditures to date for a specific DSR. The Administrative Services Department will bill for progress payments (75% of the eligible costs less 10% for retainage).

4) When the monthly payment is received, Administrative Services will make the deposit and forward copies to the respective departments.

5) Quarterly Progress Reports are required on all Large Projects. Administrative Services will notify the departments of the need to submit the quarterly progress information. Administrative Services will combine the information and send in the report.

6) When the project is completed ,the department will notify Administrative Services Department and forward a statement of actual expenses incurred, separated into the same categories as the estimated costs listed in the DSR.

7) Administrative Services will complete the "Statement of Documentation in Support of Amount Claimed for Financial Disaster Assistance", the Administrative Services Director will authorize and forward to the state Emergency Management Division.

8) Reimbursement of all final costs and the administrative allowance will be sent after all DSRs are completed and inspected. This deposit will be made by Administrative Services.

## SECTION E
## LIST OF FORMS

**See EOC File Box for Forms**

**A. Agreement for Services**

**B. Billing Voucher**

**C. Tax Identification Number**

**D. Amendment to Contract for Services**

**E. Second Amendment to Contract for Services**

**F. Check Request Form**

**G. Card Holder Account Maintenance Form**

**H. Procurement Card Transaction Log Summary**

**I. Purchase Requisition Form**

**J. Personal Business Expense Report**

**K. Recommendation of Award Form**

**L. Small Public Works/Maintenance Agreement – Project over $2,500 – Maximum $10,000**

**M. Small Public Works/Maintenance Agreement – Project $2,500 or Less**

**N. Telephone Price Quotations**

**O. Written Quotation Form – Not an Order**

**P. Contract Review/Approval Routing Form**

Contract No. _____
Brief Description: _____

**CITY OF SHORELINE**
**AGREEMENT FOR SERVICES**

This Agreement is entered into by and between the City of Shoreline, Washington, a municipal corporation hereinafter referred to as the "CITY," and _____, hereinafter referred to as the "CONSULTANT."

WHEREAS, the City desires to retain the services of a consultant to _____ and

WHEREAS, the City has selected _____ to perform the above-mentioned services;

NOW, THEREFORE, in consideration of the mutual promises and covenants contained herein, it is mutually agreed as follows:

1. **Scope of Services to be Performed by the Consultant.**
   The Consultant shall perform the services outlined in Exhibit A. In performing these services, the Consultant shall at all times comply with all federal, state and local statutes, rules and ordinances applicable to the performance of such services. In addition, these services and all duties incidental or necessary therefore, shall be performed diligently and completely and in accordance with professional standards of conduct and performance. All services performed under this Agreement will be conducted solely for the benefit of the City and will not be used for any other purpose without written consent of the City.

2. **Compensation.**
   A. Services will be paid at the rate set forth in Exhibit A, not to exceed a maximum of $_____, including all fees and those reimbursable expenses listed in Exhibit A.
   B. The City shall pay the Consultant for services rendered after receipt of a billing voucher in the form set forth on Exhibit B. NO PAYMENT WILL BE ISSUED WITHOUT A BILLING VOUCHER. Payments will be processed within 30 (thirty) days from receipt of billing voucher. The Consultant shall be paid for services rendered but, in no case shall the total amount to be paid exceed the amount(s) noted in the Exhibit(s) and approved by the City. The consultant shall complete and return a W-9 to the City prior to contract execution by the City. No payment will be issued without a Taxpayer Identification Number on file. Mail all billing vouchers to: the attention of the contract manager identified in Section 14, 17500 Midvale Avenue North, Shoreline, Washington 98133-4905.

3. **Term.**
   A. The term of this Agreement shall commence _____and end at midnight on the _____ day of _____, 20_____.

4. **Termination.**
   A. The City reserves the right to terminate this Agreement at any time, with or without cause by giving fourteen (14) days notice to Consultant in writing. In the event of such termination or suspension, all finished or unfinished documents, data, studies, worksheets, models and reports, or other material prepared by the Consultant pursuant to this Agreement shall be submitted to the City.
   B. In the event this Agreement is terminated by the City, the Consultant shall be entitled to payment for all hours worked and reimbursable expenses incurred to the effective date of termination, less all payments previously made. This provision shall not prevent the City from seeking any legal remedies it may have for the violation or nonperformance of any of the provisions of this Agreement and any such charges due the City shall be deducted from the final payment due the Consultant. No

payment shall be made by the City for any expenses incurred or work done following the effective date of termination unless authorized in advance in writing by the City.

C. The Consultant reserves the right to terminate this Agreement with not less than sixty (60) days written notice, or in the event outstanding invoices are not paid within 30 days.

D. If the Consultant is unavailable to perform the scope of services, the City may, at its option, cancel this Agreement immediately.

**5. Ownership of Documents.**

A. All documents, data, drawings, specifications, software applications and other products or materials produced by the Consultant in connection with the services rendered under this Agreement shall be the property of the City whether the project for which they are made is executed or not. All such documents, products and materials shall be forwarded to the City at its request and may be used by the City as it sees fit. The City agrees that if the documents, products and materials prepared by the Consultant are used for purposes other than those intended by the Agreement, the City does so at its sole risk and agrees to hold the Consultant harmless for such use.

B. All or portions of materials, products and documents produced under this Agreement may be used by the Consultant if the City confirms that they are subject to disclosure under the Public Disclosure Act.

C. The Consultant shall preserve the confidentiality of all City documents and data accessed for use in Consultant's work product. Any requests for City documents and data held by Consultant shall be forwarded to the City which shall be solely responsible for responding to the request.

**6. Independent Contractor Relationship.**

A. The consultant is retained by the City only for the purposes and to the extent set forth in this Agreement. The nature of the relationship between the Consultant and the City during the period of the services shall be that of an independent contractor, not employee. The Consultant, not the City, shall have the power to control and direct the details, manner or means of services. Specifically, but not by means of limitation, the Consultant shall have no obligation to work any particular hours or particular schedule, unless otherwise indicated in the Scope of Work where scheduling of attendance or performance is critical to completion, and shall retain the right to designate the means of performing the services covered by this Agreement, and the Consultant shall be entitled to employ other workers at such compensation and on such other conditions as it may deem proper, provided, however, that any contract so made by the Consultant is to be paid by it alone, and that employing such workers, it is acting individually and not as an agent for the City.

B. The City shall not be responsible for withholding or otherwise deducting federal income tax or Social Security or contributing to the State Industrial Insurance Program, or otherwise assuming the duties of an employer with respect to Consultant or any employee of the Consultant.

**7. Hold Harmless.**

The Consultant shall defend, indemnify, and hold the City, its officers, officials, employees and volunteers harmless from any and all claims, injuries, damages, losses or suits including attorney fees resulting from the negligent, gross negligent and/or intentional acts, errors or omissions of the Consultant, its agents or employees arising out of or in connection with the performance of this Agreement, except for injuries and damages caused by the sole negligence of the City.

Should a court of competent jurisdiction determine that this Agreement is subject to RCW 4.24.115, then, in the event of liability for damages arising out of bodily injury to persons or damages to property caused by or resulting from the concurrent negligence of the Consultant and the City, its officers, officials, employees, and volunteers, the Consultant's liability hereunder shall be only to the extent of the Consultant's negligence. It is further specifically and expressly understood that the indemnification provided herein constitutes the Consultant's waiver of immunity under Industrial Insurance, Title 51 RCW, solely for the purpose of this indemnification. This waiver has been mutually negotiated by the parties. The provisions of this section shall survive the expiration or termination of this Agreement.

**8. Gifts.**

The City's Code of Ethics and Washington State law prohibit City employees from soliciting, accepting, or receiving any gift, gratuity or favor from any person, firm or corporation involved in a contract or transaction. To ensure compliance with the City's Code of Ethics and state law, the Consultant shall not give a gift of any kind to City employees or officials.

**9. City of Shoreline Business License.**

As mandated by SMC 5.05.030, the Consultant shall obtain a City of Shoreline Business License prior to performing any services and maintain the business license in good standing throughout the term of its agreement with the City.

**10. Insurance.**

Consultant shall obtain insurance of the types described below during the term of this agreement and extensions or renewals. These policies are to contain, or be endorsed to contain, provisions that 1) Consultant's insurance coverage shall be primary insurance with insurance or insurance pool coverage maintained by the City as excess of the Consultant's insurance (except for professional liability insurance); and 2) Consultant's insurance coverage shall not be cancelled, except after thirty (30) days prior written notice to the City.

A. Professional Liability, Errors or Omissions insurance with limits of liability not less than $1,000,000 per claim and $1,000,000 policy aggregate limit shall be provided if services delivered pursuant to their Contract involve or require professional services provided by a licensed professional including but not limited to engineers, architects, accountants, surveyors, and attorneys.

B. Commercial General Liability insurance covering premises, operations, independent contractors' liability and damages for personal injury and property damage with a limit of no less than $1,000,000 each occurrence and $2,000,000 general aggregate. The City shall be named as an additional insured on this policy. The Consultant shall submit to the City a copy of the insurance certificate and relevant endorsement(s) as evidence of insurance coverage acceptable to the City.

C. Automobile Liability insurance with combined single limits of liability not less than $1,000,000 for bodily injury, including personal injury or death and property damage shall be required if delivery of service directly involves Consultant use of motor vehicles.

**11. Delays.**

Consultant is not responsible for delays caused by factors beyond the Consultant's reasonable control. When such delays beyond the Consultant's reasonable control occur, the City agrees the Consultant is not responsible for damages, nor shall the Consultant be deemed to be in default of the Agreement.

**12. Successors and Assigns.**

Neither the City nor the Consultant shall assign, transfer or encumber any rights, duties or interests accruing from this Agreement without the written consent of the other.

**13. Nondiscrimination.**

In hiring or employment made possible or resulting from this Agreement, there shall be no unlawful discrimination against any employee or applicant for employment because of sex, age, race, color, creed, national origin, marital status or the presence of any sensory, mental, or physical handicap, unless based upon a bona fide occupational qualification. This requirement shall apply to but not be limited to the following: employment, advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. No person shall be denied or subjected to discrimination in receipt or the benefit of any services or activities made possible by or resulting from this Agreement on the grounds of sex, race, color, creed, national origin, age except minimum age and retirement provisions, marital status, or in the presence of any sensory, mental or physical handicap.

**14. Notices.**

Any notice required under this Agreement will be in writing, addressed to the appropriate party at the address which appears below (as modified in writing from time to time by such party), and given personally, by registered or certified mail, return receipt requested, by facsimile or by a nationally recognized overnight courier service. All notices shall be effective upon the date of receipt.

| | |
|---|---|
| City Manager | Consultant Name: _____ |
| City of Shoreline | Name of Firm: _____ |
| 17500 Midvale Avenue N | Address: _____ |
| Shoreline, WA 98133-4905 | Address: _____ |
| (206) 801-2700 | Phone Number: _____ |

**15. Governing Law and Venue.**

This Agreement shall be construed and enforced in accordance with the laws of the State of Washington. Venue of any suit between the parties arising out of this Agreement shall be King County Superior Court.

**16. General Administration and Management.**

The City's contract manager shall be (name and title): _____.

**17. Severability.**

Any provision or part of the Agreement held to be void or unenforceable under any law or regulation shall be deemed stricken and all remaining provisions shall continue to be valid and binding upon the City and the Consultant, who agree that the Agreement shall be reformed to replace such stricken provision or part thereof with a valid and enforceable provision that comes as close as possible to expressing the intention of the stricken provision.

**18. Entire Agreement.**

This agreement contains the entire Agreement between the parties hereto and no other agreements, oral or otherwise, regarding the subject matter of this agreement, shall be deemed to exist or bind any of the parties hereto. Either party may request changes in the agreement. Proposed changes which are mutually agreed upon shall be incorporated by written amendment to this agreement.

This agreement is executed by

| **CITY OF SHORELINE** | **CONSULTANT** |
|---|---|
| By: _____ | By: _____ |
| Name: _____ | Name: _____ |
| Title: _____ | Title: _____ |
| Date: _____ | Date: _____ |

Approved as to form:

By: _____
Julie Ainsworth-Taylor, Assistant City Attorney

Attachments: Exhibit A (Scope and compensation), B (Billing Voucher)

EXHIBIT A
SCOPE OF WORK

***FOR INSTRUCTIONAL PURPOSES ONLY – DO NOT INCLUDE THIS PAGE IN CONTRACT***

This section of the contract is prepared by the department and will be unique for each contract. For information on how to prepare a Scope of Work, see instructions on the portal.

Contract Expenses:

Contract costs, whether billed on an hourly, per project segment or flat amount should be all inclusive. This includes costs such as travel, per diem, copy fees, etc. The City will not make reimbursement on these items outside of the agreed contract fee.

If the City requires the contractor to incur unforeseen travel, then reimbursement is limited to the business expense rates of Shoreline's Business Expense Policy with meals and lodging capped at mandated US General Services Administration rates (see www.gsa.gov/perdiem).

# EXHIBIT B
# CITY OF SHORELINE
# BILLING VOUCHER

17500 Midvale AVE N, Shoreline, WA 98133-4905 ♦ (206) 801-2700 ♦ Fax (206) 546-7870

Contract No. _____

Firm Name: _____
Mailing Address: _____

**Invoice No.:** _____ **Invoice Date:** _____

**Amount of Invoice: $**_____

Contract Expiration Date: _____ Current Invoice Period: _____

Description of services performed this period, attach a separate sheet if necessary (if applicable, submit a separate voucher for each program which is funded by your City of Shoreline contract):

**BUDGET SUMMARY**:

| | |
|---|---|
| Total Contract Amount (including amendments) | $_____ |
| Previously Billed | $_____ |
| Current Invoice Request | $_____ |
| Total Payments Requested to date | $_____ |
| Contract Balance Remaining | $_____ |

Payments will be processed within thirty (30) days from receipt of approved billing voucher.

_____
Consultant Signature

*For Department Use Only*

Approved for Payment:

_____ Date: _____
City of Shoreline

Form **W-9**
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

# Request for Taxpayer Identification Number and Certification

**Give Form to the requester. Do not send to the IRS.**

**Print or type** See **Specific Instructions** on page 2.

**1** Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

**2** Business name/disregarded entity name, if different from above

**3** Check appropriate box for federal tax classification; check only **one** of the following seven boxes:

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____

**Note.** For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

☐ Other (see instructions) ▶

**4** Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

*(Applies to accounts maintained outside the U.S.)*

**5** Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

**6** City, state, and ZIP code

**7** List account number(s) here (optional)

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

**Social security number**

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | – | | | – | | | | |

**or**

**Employer identification number**

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | – | | | | | | | |

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

**Sign Here** **Signature of U.S. person ▶** **Date ▶**

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments**. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at *www.irs.gov/fw9*.

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding.* See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Cat. No. 10231X Form **W-9** (Rev. 12-2014)

Amendment No.

**FIRST AMENDMENT TO CONTRACT FOR SERVICES**
**(ORIGINAL CONTRACT NUMBER: )**

Whereas an agreement was entered into by and between the City of Shoreline, Washington, and on , 20 ; and

Whereas the parties desire to amend said agreement once again in order to reflect a change of circumstances, to wit:

Now, therefore, in consideration of the mutual covenants contained herein, the parties agree as follows:

1. **Existing Agreement Amended:** The City and entered into an agreement on , 20 identified as: . The parties hereby amend that agreement.

2. **Amendment to Existing Agreement:** The agreement is amended in the following respect(s):

3. **Terms and Conditions of Existing Agreement Remain the Same:** The parties agree that, except as specifically provided in this amendment, the terms and conditions of the existing agreement continue in full force and effect.

EXECUTED, this the day of , 20 .

| **CITY OF SHORELINE** | **CONSULTANT** |
|---|---|
| Name: | Name: |
| Title: | Title: |

Amendment No.

**SECOND AMENDMENT TO CONTRACT FOR SERVICES**
**(ORIGINAL CONTRACT NUMBER: )**

Whereas an agreement was entered into by and between the City of Shoreline, Washington, and on , 20 ; and said agreement was later amended on , 20 ;and

Whereas the parties desire to amend said agreement once again in order to reflect a change of circumstances, to wit:

Now, therefore, in consideration of the mutual covenants contained herein, the parties agree as follows:

4. **Existing Agreement Amended:** The City and entered into an agreement on , 20 identified as: . The City and entered into an amendment to said agreement, identified as First Amendment No. , dated , 20 . The parties hereby amend the original agreement as amended.

5. **Amendment to Existing Agreement:** The agreement is amended in the following respect(s):

6. **Terms and Conditions of Existing Agreement Remain the Same:** The parties agree that, except as specifically provided in this amendment, the terms and conditions of the existing agreement continue in full force and effect.

EXECUTED, this the day of , 20 .

| **CITY OF SHORELINE** | **CONSULTANT** |
|---|---|
| Name: | Name: |
| Title: | Title: |

## CHECK REQUEST FORM

***Please note that checks may take up to ten working days to process. Checks are released on Fridays only.***

| Make check payable to: | Date check needed: |
|---|---|
| Mail to: | |

| Expense Description | Org. Key - Object # | JL # - Task # | Amount $ |
|---|---|---|---|
| | | | |
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| | | | |

☐ Mail with Attached Documents*

*Attach completely filled out original to be mailed, plus a copy of the original for back-up.

☐ E-mail me when check is ready. I will pick up the check.

Requested by: Date:

Approved by:*(your supervisor)* Date:

## P-CARD CARDHOLDER ACCOUNTMAINTENANCE FORM

*Direct this form and any questions to Purchasing at ext. 2320.*

**TYPE OF REQUEST:**

☐ NAME CHANGE ☐ CREDIT LINE CHANGE

☐ ADDRESS CHANGE ☐ ACCOUNT CLOSURE

☐ SINGLE TRANSACTION LIMIT CHANGE ☐ OTHER:

ACCOUNT NUMBER:

CARDHOLDER NAME:

EFFECTIVE DATE:

REASON: (TERMINATED, MARRIED, ETC.):

OLD INFORMATION:

NEW INFORMATION:

DEPT. DIRECTOR (OR DESIGNEE) _____

PURCHASING SIGNATURE_____

PURCHASING SIGNATURE_____

# PROCUREMENT CARD

## Transaction Log Summary

*Month Ending* _____

*Visa Card (last 4 digits)* _____

*Name on Card* _____

*Department/Division* _____

| Date | Vendor | Description | Card User (person who signed charge slip) | Acct. Number Org Key # | Object # | J/L Number Project # | Task # | Purchase Amount |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |
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| | | | | **Sub-Total Statement Summary** | | | | **0.00** |

I, the undersigned, do hereby certify under penalty of perjury, that the materials furnished, services rendered, expense incurred, or other item of indebtedness as charged in the foregoing bill is a true and correct charge against the City of Shoreline; that the claim is just and due; that no part of same has been paid; and that I am authorized to sign for the payee.

Only ONE Visa Account Number per summary.
Please send completed summary to Purchasing

**SIGNATURE** **TITLE**

**DATE**

# PURCHASE REQUISITION FORM

For Internal Use Only - Not A Purchase Order

**TO: Purchasing**
Attach Quotes When Required

Supplier/Payee:

Name

Requested by

Address

Department

City/State/Zip

Phone:

Today's Date | Requested Delivery Date

Fax:

Email:

Authorized Signature

(Special Terms/Shipping Instructions)

Information Services (required on all software/hardware purchases)

| For Purchasing & A/P Use Only | | | |
|---|---|---|---|
| P.R. #: | | Ship Via: | |
| P.O. #: | | Dept: | |
| Date: | | Buyer: | |
| Conf. To: | | Use: Y N | |
| Type: B C | | F.A.: Y N | |
| Contr. #: | | Date Faxed/Mailed: | |
| Ship To: | | By: | |
| Est. Del. Date: | | Ref.#: | |
| Comments | | | |

| Line # | QTY | U/M (see below) | Description | Item # | Unit Cost | Total Cost | Purchasing Use | Program # - Object # |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | - |
| 2 | | | | | | | | - |
| 3 | | | | | | | | - |
| 4 | | | | | | | | - |
| 5 | | | | | | | | - |
| 6 | | | | | | | | - |
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| 10 | | | | | | | | - |
| 11 | | | | | | | | - |
| 12 | | | | | | | | - |
| 13 | | | | | | | | - |
| 14 | | | | | | | | - |
| 15 | | | | | | | | - |
| 16 | | | | | | | | - |
| 17 | | | | | | | | - |
| 18 | | | | | | | | - |
| 19 | | | | | | | | - |

**U/M (Unit of Measure)-Please specify:**

| | | | |
|---|---|---|---|
| LT - Lot | DZ - Dozen | LF - Linear Foot | BF - Board Foot |
| EA - Each | HR - Hour | GL - Gallon | RM - Ream |
| CS - Case | ST - Set | LB - Pounds | TN - Ton |
| BX - Box | PK - Package | | |

| | |
|---|---|
| Sub-Total | **0.00** |
| S/H | |
| Sales Tax | 0.00 |
| Total | 0.00 |

Revised November, 2011

**NAME:** _____
**DEPARTMENT:** _____
**Month/Year:** _____

**Instructions:** Submit required receipts for miscellaneous reimbursable expenses and all travel related expenses with this voucher.

# CITY OF SHORELINE
# BUSINESS EXPENSE REPORT FORM - 2015

**TRIP INFORMATION** | **PER DIEM** | **PERSONAL VEHICLE**

| Date | Trip Information: Company Name / Destination / Purpose of Trip | Per Diem Meal Entitlement (includes tip) See GSA or AP for Rate: Breakfast | Lunch | Dinner | Sub-Total | Lodging Costs (receipt required) | TOTAL meals, lodging | Miles Driven: miles driven PT to PT | 2015 | Mileage Allowance | Other Expenses (from box in bottom left corner) | GRAND TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | Do not enter amounts in this column. The total is linked to the total of your detail below. | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | | | | | 0.00 | | 0.00 | | 0.575 | 0.00 | | 0.00 |
| | **TOTALS:** | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.0 | 0.575 | 0.00 | 0.00 | **0.00** |

0.00

**GSA MEAL RATES:** [ ] [ ] [ ] [ ] ← **GSA Lodging Rate--If exceeded, include explanation (or attach copy of Hotel Authorization with explanation). If not previously authorized by Department Director or City Manager, obtain signature below.**

**DETAIL OF OTHER EXPENSES**

| Date | Paid To: | Purpose | Amount |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| TOTAL: | | | 0.00 |

| Budget Number | Reimburse To/Credit Card # | Amount |
|---|---|---|
| | | |
| **Total (must equal Grand Total above)** | | **0.00** |

I hereby certify under penalty of perjury that this is a true and correct claim for necessary expenses incurred by me and that no payment has been received by me on account thereof. If I am requesting mileage reimbursement, I certify that I have a valid drivers license in good standing.

_____ _____
Signature Date

_____ _____
Authorized Approval Date

_____ _____
Department Director or City Manager Approval (if necessary) Date

## RECOMMENDATION OF AWARD FORM

**Bid # _____ Bid Due Date _____**

**Department _____**

**Item(s): _____**

**_____**

**_____**

**Is the recommendation being awarded to the lowest bidder? Yes _____ No _____**

**If no, explain why not: _____**

**_____**

**_____**

**Is the recommendation within your approved budget? Yes _____ No _____**

**If no, how will additional costs be covered?**

**_____**

**_____**

**Recommended by: _____ Date _____**

**Departmental Authorization by: _____ Date _____**

SMALL PUBLIC WORKS AGREEMENT

**Single Craft/Trade $40,000 or less – Multiple Craft/Trade $65,000 or less, including sales tax**

| **Contract #**: | |
|---|---|
| Contractor:<br>Name:<br>Address:<br>Contact:<br>Phone:<br>Fax: | Department:<br>Date:<br>Department Contact:<br>Phone:<br>Fax: |

**Insurance and Indemnification**: The Contractor shall defend, indemnify and hold the City and all of its employees harmless from any and all liabilities, claims, damages, costs or expenses (including reasonable attorneys' fees) arising from or relating to the work performed under this Agreement to the extent of the Contractor's negligence. The Contractor waives, with respect to the City, its immunity under industrial insurance, Title 51 RCW. This waiver has been mutually negotiated by the parties. This indemnification shall survive the expiration or termination of this Agreement. Contractor shall secure and maintain, at its own cost and expense, Comprehensive General Liability and Property Damage insurance in the amount of not less than $1,000,000 for death or injury in any one occurrence and $1,000,000 for property damage in any one occurrence which provides, at a minimum, the following coverage:

Premises and Operation; Explosions, Collapse and Underground Hazards (Where Applicable); Products/Completed Operations; Contractual Liability; Broad Form Property Damage; Independent Contractors; and Personal Injury.

Contractor shall secure and maintain, at its own cost and expense, Comprehensive Auto Liability insurance in the amount of not less than $1,000,000 per occurrence which provides, at a minimum the following coverages:

Owned Vehicles; Non-Owned Vehicles; Hired Vehicles; Property Damage.

This coverage shall be issued from an insurance company authorized to do business in the State of Washington. The City of Shoreline shall be named as additional insured on said insurance in a form acceptable to the City Attorney. The Contractor agrees to repair and replace all property of the City and all property of others damaged by the Contractor, Contractor's employees, subcontractors and agents. It is understood that the whole of the work under this contract is to be done at the Contractor's risk and that the Contractor is familiar with the conditions of materials, climatic conditions, and other contingencies likely to affect the work and has made their bid accordingly and that the Contractor will assume the responsibility and risk of all loss or damage to materials or work which may arise from any cause whatsoever prior to completion.

**Warranties**: If within one year after the completion date of the Work, defective and unauthorized Work is discovered, the Contractor shall promptly, upon written order by the City, return and in accordance with the City's instructions, either correct such work, or if such Work has been rejected by the City, remove it from the site and replace it with non-defective and authorized Work, all without cost to the City.

**Nondiscrimination**: The Contractor shall comply with all applicable federal and state laws, and city ordinances, for equal employment opportunity and nondiscrimination laws.

**Gifts:** The City's Code of Ethics and Washington State law prohibit City employees from soliciting, accepting, or receiving any gift, gratuity or favor from any person, firm or corporation involved in a contract or transaction. To ensure compliance with the City's Code of Ethics and state law, the Consultant shall not give a gift of any kind to City employees or officials.

**Business License**: As mandated by SMC 5.05.030, the Contractor shall obtain a City of Shoreline Business License prior to performing any services and maintain the business license in good standing throughout the term of this agreement with the City.

**Prevailing Wages**: This contract is subject to prevailing wages according to RCW 39.12.020. Contractor shall file an Intent to Pay Prevailing Wage form and Affidavit of Wages Paid form with L&I and pay for all fees associated with filing the forms. Contractor shall submit the Intent and Affidavit forms, approved by L&I, to the City with payment request. No payment will be issued to the Contractor until the City receives both approved forms. If any work is subcontracted on this project, an approved Intent and Affidavit form must be submitted for each sub-contractor. If progress payments are made on this project, an approved Intent form must be received prior to issuing the first payment. An approved Affidavit form must be received prior to issuing final payment.

**Bonds/Retainage**: No Bid Bond is required. Contract Bond is required. For projects with an estimated total cost of less than $35,000, the contractor may elect to a 50% retainage in lieu of a Contract Bond. Retainage is required.

**Industrial Insurance Status**: Contractor is responsible for maintaining a current status of their industrial insurance premiums with the Department of Labor and Industries (L&I). Prior to issuing final payment, the City will

verify with L&I the status of the contractor's premiums. Under RCW 60.28 the City can withhold and pay the contractor's delinquent premiums from the final payment.

**Payment Processing**: The City shall pay the Contractor after final acceptance of each work order within 30 days of submittal of the invoice provided the City has received approved L&I forms.

| | |
|---|---|
| Completion Date: | Total Contract Fixed Price (Including Tax): $ according to proposal attached as Exhibit A. |
| | *OR* |
| | Not to Exceed Total (Including Tax applying schedule of rates and charges attached as Exhibit A: $ |
| Description of Work: according to proposal attached as Exhibit A. | |
| The contractor should send invoices to the following address: | |
| This order is an acceptance of your offer dated (attached) except terms that conflict with this order. | |

The contractor shall not start work until the City orally provides a Notice to Proceed. This agreement shall terminate without cost if a Notice to Proceed is not issued within 60 days. The City will not issue a Notice to Proceed before approved evidence of insurance is received.

Contractor:

_____ _____
(Signature) (Date)

Print Name _____

City of Shoreline Department Approval:

_____ ____
(Signature) (Date)

Print Name _____

Approved as to form:

_____ _____
Julie Ainsworth-Taylor, Assistant City Attorney Date

SMALL PUBLIC WORKS AGREEMENT

**Small Public Works Project $2,500 or less, including sales tax**

| **Contract #** | |
|---|---|
| Contractor:<br>Name:<br>Address:<br><br>Contact:<br>Phone:<br>Fax: | Department:<br>Date:<br>Department Contact:<br>Phone:<br>Fax: |

**Insurance and Indemnification:** The Contractor shall defend, indemnify and hold the City and all of its employees harmless from any and all liabilities, claims, damages, costs or expenses (including reasonable attorneys' fees) arising from or relating to the work performed under this Agreement to the extent of the Contractor's negligence. The Contractor waives, with respect to the City, its immunity under industrial insurance, Title 51 RCW. This waiver has been mutually negotiated by the parties. This indemnification shall survive the expiration or termination of this Agreement. Contractor shall secure and maintain, at its own cost and expense, Comprehensive General Liability and Property Damage insurance in the amount of not less than $1,000,000 for death or injury in any one occurrence and $1,000,000 for property damage in any one occurrence which provides, at a minimum, the following coverage:

Premises and Operation; Explosions, Collapse and Underground Hazards (Where Applicable); Products/Completed Operations; Contractual Liability; Broad Form Property Damage; Independent Contractors; and Personal Injury.

Contractor shall secure and maintain, at its own cost and expense, Comprehensive Auto Liability insurance in the amount of not less than $1,000,000 per occurrence which provides, at a minimum the following coverages:

Owned Vehicles; Non-Owned Vehicles; Hired Vehicles; Property Damage.

This coverage shall be issued from an insurance company authorized to do business in the State of Washington. The City of Shoreline shall be named as additional insured on said insurance in a form acceptable to the City Attorney. The Contractor agrees to repair and replace all property of the City and all property of others damaged by the Contractor, Contractor's employees, subcontractors and agents. It is understood that the whole of the work under this contract is to be done at the Contractor's risk and that the Contractor is familiar with the conditions of materials, climatic conditions, and other contingencies likely to affect the work and has made their bid accordingly and that the Contractor will assume the responsibility and risk of all loss or damage to materials or work which may arise from any cause whatsoever prior to completion.

**Warranties:** If within one year after the completion date of the Work, defective and unauthorized Work is discovered, the Contractor shall promptly, upon written order by the City, return and in accordance with the City's instructions, either correct such work, or if such Work has been rejected by the City, remove it from the site and replace it with non-defective and authorized Work, all without cost to the City.

**Nondiscrimination:** The Contractor shall comply with all applicable federal and state laws, and city ordinances, for equal employment opportunity and nondiscrimination laws.

**Gifts:** The City's Code of Ethics and Washington State law prohibit City employees from soliciting, accepting, or receiving any gift, gratuity or favor from any person, firm or corporation involved in a contract or transaction. To ensure compliance with the City's Code of Ethics and state law, the Consultant shall not give a gift of any kind to City employees or officials.

**Business License:** As mandated by SMC 5.05.030, the Contractor shall obtain a City of Shoreline Business License prior to performing any services and maintain the business license in good standing throughout the term of this agreement with the City.

**Prevailing Wages:** This contract is subject to prevailing wages according to RCW 39.12.020. Contractor shall obtain from the City a combined Statement of Intent to Pay Prevailing Wages & Affidavit of Wages Paid form for small public works contracts $2,500 or less. Contractor shall submit this form to the City with payment request. No payment will be issued to the Contractor until the City receives and approves this form.

**Payment:** The invoice will be reviewed by the City before payment is made. If the City is in disagreement with the invoice, the City shall file a notice of dispute. Contractor shall be paid or a notice of dispute sent within thirty (30) days after the payment is received by the City.

| **Completion Date:** | **Unit Price:** |
|---|---|

| |
|---|
| **Description of Work:** |
| **Total (Including Tax):** |
| The contractor should send invoices to the following address: |
| This order is an acceptance of your offer dated (attached) except terms that conflict with this order. |
| The contractor shall not start work until the City orally provides a Notice to Proceed. This agreement shall terminate without cost if Notice to Proceed is not issued within 60 days. The City will not issue Notice to Proceed before approved evidence of insurance is received.<br>Contractor: City of Shoreline Department Approval:<br>_____ _____ _____ ____<br>(Signature) (Date) (Signature) (Date)<br>Approved as to form:<br>_____ _____<br>Julie Ainsworth-Taylor, Assistant City Attorney (Date) |
| Distribution Account Codes: _____ - _____<br>Program Object |

# TELEPHONE PRICE QUOTATIONS

DATE: DEPARTMENT:
CONTACTED BY: EXTENSION:
DETAILED DESCRIPTION OF ITEM(S) TO BE PURCHASED:

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Vendor: _____
Phone #: _____
Vendor Contact: _____
Date Quote Rec'd: _____
Delivery Date: _____
F.O.B.: _____
Price Good Through: _____
Payment Terms: _____
Discount: _____
Shipping Method: _____

| Quantity | Item Item Part No. | Price | Total |
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| | | **Total** | |

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Vendor: _____
Phone #: _____
Vendor Contact: _____
Date Quote Rec'd: _____
Delivery Date: _____
F.O.B.: _____
Price Good Through: _____
Payment Terms: _____
Discount: _____
Shipping Method: _____

| Quantity | Item Item Part No. | Price | Total |
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| | | **Total** | |

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Vendor: _____
Phone #: _____
Vendor Contact: _____
Date Quote Rec'd: _____
Delivery Date: _____
F.O.B.: _____
Price Good Through: _____
Payment Terms: _____
Discount: _____
Shipping Method: _____

| Quantity | Item Item Part No. | Price | Total |
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| | | **Total** | |

# WRITTEN QUOTATION FORM - NOT AN ORDER

The City of Shoreline is requesting quotations for the following item(s). This quote must be received back by to be considered. Please enter your address and telephone number. If you have any questions regarding this quote, please contact at (206) .

PLEASE FILL IN ALL BLANKS AND SIGN THIS QUOTE FORM IN THE DESIGNATED AREA

| Vendor Name: | | | Vendor Address: | | |
|---|---|---|---|---|---|
| Contact Person: | | | Telephone Number: | | |
| Authorized Vendor Signature: | | | | | |
| Item | Qty. | Unit | Item Description/Item Part No. | Unit Price | Total Amount |
| | | | | | |
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| | | | Sub-Total | | |
| | | | Freight* | | |
| | | | Sales Tax @ % | | |
| | | | TOTAL: | | |
| | | | **Prices quoted are to be freight included or firm freight amount is to be listed.* | | |
| FOB Point: | | | | | |
| Delivery Date: | | | | | |
| Payment Terms: | | | | | |
| Discount: | | | | | |
| Shipping Method: | | | | | |
| Comments: | | | | | |

PRICES QUOTED ARE FIRM FOR DAYS.

THE CITY OF SHORELINE IS NOT RESPONSIBLE FOR QUOTES NOT RETURNED ON TIME.

CITY OF SHORELINE

Receiving # _____
*(obtain from City Clerk)*

# CONTRACT ROUTING FORM

**DESCRIPTION**

| | | | |
|---|---|---|---|
| **Originator:** | | **Routed by:** | |
| **Department/Division:** | | **Date:** | |

**Name of Consultant/Contractor:**

**CONTRACT TITLE:**

**CONTRACT CONTENT**

**Type of Contract:**
☐ (GR) Grants ☐ (I) Intergovernmental Agreement ☐ (L) Lease Agreement
☐ (S) Purchase of Services ☐ (W) Public Works ☐ (O) Other

Bid/RFP Number:

Effective Date: Completion Date:

Has the original contract boilerplate language been modified? ○ Yes ○ No

If yes, specify which sections have been modified:

Description of Services:

**FINANCIAL DETAILS**

**Total Amount of Contract:** *(Amount Verification)*

| | | | |
|---|---|---|---|
| Org Key – Obj # J/L # – Task # | Amount: | Org Key – Obj # J/L # – Task # | Amount: |
| Org Key – Obj # J/L # – Task # | Amount: | Org Key – Obj # J/L # – Task # | Amount: |
| Org Key – Obj # J/L # – Task # | Amount: | Org Key – Obj # J/L # – Task # | Amount: |

Are there sufficient funds in the current budget to cover this contract? ○ Yes ○ No

Remarks:

**FORMS**

**For Public Works/Small Works Contracts:**
☐ Selection Form ☐ Business License
☐ Contractor Responsibility Form ☐ Certificate of Insurance
☐ Contract Bond/In Lieu of Form ☐ W-9 Form

**For Service Contracts:**
☐ Selection Form ☐ Business License
☐ Certificate of Insurance
☐ W-9 Form

**SIGNATURE**

**Authorization Level:** (click here to select)

| | | | |
|---|---|---|---|
| ☐ 1. Project Manager | | ☐ 6. City Council *(if required)* | |
| ☐ 2. Risk Management/Budget | | ☐ 7. City Manager | |
| ☐ 3. City Attorney | | ☐ 8. City Clerk | |
| ☐ 4. Consultant/Contractor | | ☐ 9. Originating Department | |
| ☐ 5. (click to select or overwrite) | | | |

Print Form

Shoreline Comprehensive Emergency Management Plan (CEMP)
Emergency Support Function (ESF) #8
Public Health and Medical Services

**ESF COORDINATOR:** Assistant Chief –Shoreline Fire Department

| | | |
|---|---|---|
| **LEAD AGENCIES:** | Fire Department | Public Health - Seattle & King County |
| **SUPPORT AGENCIES:** | Emergency Operations Center | Police Department |
| | King County Medic Examiner's Office | American Red Cross |
| | Mental Health Organizations | WA State Emergency Management Division |

## Article I. Introduction

### Section 1.01 Purpose

**(a)** To coordinate the organization and mobilization of medical, health and mortuary services for emergency management activities within the City of Shoreline (City) which may include veterinary and/or animal health issues when appropriate.

### Section 1.02 Scope

**(a)** This ESF addresses medical, health, and mortuary concerns for the City including:

(i) Assessment of public health/medical needs

(ii) Communicable disease control including isolation and quarantine

(iii) Public health informational/risk communication on public health issues

(iv) Medical consultation, coordination, and control

(v) EMS provision and coordination

(vi) Mental health care for victims, worried well, response personnel, health and medical personnel and general public

(vii) Patient distribution, tracking, decontamination, and care

(viii) Public health surveillance

(ix) Medical care personnel

(x) Medical/health equipment and supplies

**Section 1.03 Situation**

**(a)** A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to field efforts to save lives and protect property.

**(b)** A significant public emergency may impede or prohibit the delivery of routine health and medical services. Hospitals, nursing homes, ambulatory care centers, pharmacies, and other facilities for medical/health care and special needs populations may be severely damaged or destroyed. Facilities that survive with little or no structural damage may be rendered unusable or only partially usable because of a lack of utilities (power, water, sewer) or because staff are unable to report for duty as a result of personal injuries and/or damage/disruption of communications and transportation systems.

**(c)** Medical and health care facilities that remain in operation and have the necessary utilities and staff will probably become overwhelmed. In the event of a sudden increase in the need for health and medical services, medical supplies and equipment may quickly run out, including pharmaceuticals, blood products, medicines, equipment, and other related consumable supplies.

**(d)** Critical and long-term patients in existing hospital or health care facilities may need immediate relocation from these facilities if they are damaged or inoperable. Uninjured persons who require routine medications, such as insulin, anti-hypertensive drugs, digitalis, and dialysis may have difficulty in obtaining these medications and treatments because of damage/destruction of normal supply locations, general shortages, or lack of access due to damaged transportation infrastructure.

**(e)** If the event's negative impacts last for several days or weeks, there could be health and medical complications and issues involving relocation, shelters, vector control, potable water, wastewater, and solid waste

**(f)** A major medical and environmental emergency resulting from chemical, biological, or nuclear Weapons of Mass Destruction (WMD) could produce a large concentration of specialized injuries, illnesses, fatalities, and other problems that could overwhelm health care facilities within the City.

**Section 1.04 Assumptions**

**(a)** The resources routinely available within the affected emergency area may be inadequate to clear casualties from the scene or treat them in nearby/immediate health care facilities. Mobilization of city resources, and possible neighboring community resources based on established partnering agreements, may be urgently needed for triage, treating casualties in the emergency area, and then transporting them to the closest appropriate hospital or other health care facility.

**(b)** Medical resupply may be needed throughout the emergency area. Fire/ EMS will have the responsibility of identifying, ordering, receiving, and distributing such supplies.

**(c)** In an event that causes large numbers of casualties, Fire/ EMS agencies may be required to set up and staff Field Treatment Sites where patients can be stabilized while they await transportation to appropriate medical care facilities.

**(d)** In a major public health emergency, operational necessity may require the transportation of patients to other medical health facilities by alternative means.

**(e)** A terrorist release of WMD, industrial accident, or other HazMat event may lead to toxic water/air/land environments that threaten surviving populations and response personnel, including exposure to hazardous chemicals, biological agents, radiological substances, and contaminated water supplies and food products.

**(f)** The damage and destruction of a major public emergency may result in numerous deaths, and may require coordination and outside assistance for body location and recovery, extrication, examination, identification, storage, and release, as well as coordination with law enforcement for evidentiary purposes.

**(g)** The damage and destruction of a major public emergency may result in the injury and death of pets and other animals in and around the disaster zone. Veterinary service and animal control capabilities may be stretched, and disease and vector control problems associated with animal fatalities may impact public health in and around the emergency location.

**(h)** The stress, loss, and pain caused as a result of the public emergency may result in the mental health system becoming overwhelmed, producing urgent need for mental health crisis-counseling for emergency victims, response personnel, and their families.

**(i)** Assistance in maintaining the continuity of health and medical services may be required, especially for citizens with long-term and ongoing health care needs, as well as continuity of services for critical or acute care patients.

**(j)** Disruption of sanitation services and facilities, loss of power, and massing of people in shelters may increase the potential for disease and injury. Disruptions may dislocate tourists and visitors who will become disoriented and be unfamiliar with the area and, thus, may have difficulty in identifying and locating health and medical support services in the event of a disaster. Tourists and visitors may have difficulty in obtaining access to needed medicines or treatments and may not be able to access hotels or other locations where they may be keeping their medicine. It may be difficult for medical and health service providers to obtain records and medical histories of tourists and visitors, which may be critical to providing effective treatments and cures to such individuals that may have been impacted by the event.

**(k)** Primary medical treatment facilities may be damaged or inoperable, thus assessment and emergency restoration to necessary operational levels or the establishment of alternate medical care facilities is a basic requirement to stabilize the medical support system.

**(l)** An emergency may require the isolation or quarantine of individuals in their home or in temporary facilities.

**Section 1.05 Policies**

**(a)** The Shoreline Fire Department (FD) will provide Basic Life Support (BLS) and Advanced Life Support (ALS).

**(b)** All activities within ESF 8 – Public Health and Medical Services will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

**(c)** As a signatory of the King County Regional Disaster Framework for Public and Private Agencies, activation of the Washington State Mutual Aid System (WAMAS) and through local mutual aid agreements with community partners, the City and Fire Department will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible. They will also utilize those same systems when needing resources.

**(d)** Requests for assistance will be initiated by the City Emergency Operations Center (EOC) and directed to the Zone 1 Emergency Coordinator (Zone 1 EC), King County Emergency Coordination Center (KC ECC), and Washington State Emergency Operations Center.

**(e)** The King County Fire Chief's Mutual Aid Agreement and the Washington State Fire Services Resource Mobilization Plan is the mutual aid agreement utilized by the Fire Department.

**(f)** All City mutual aid emergency medical responders, assigned to provide emergency medical assistance within the City, should operate under the direction and control of the Shoreline Fire Department or as designated by the Incident Commander.

**(g)** Public Health - Seattle & King County may provide guidance to City agencies and individuals on basic public health principles involving safe drinking water, food sanitation, personal hygiene, and proper disposal of human waste, garbage, and infectious or hazardous waste.

**(h)** In the event of an incident of national significance, requiring federal response at the request of the state, the NRF, Emergency Support Function #8 – Public Health and Medical Services may coordinate assistance and resources. The primary Federal agencies will be the U.S. Department of Health and Human Services.

**(i)** In the event that mental health counseling is necessary for emergency workers, the City will utilize the Employee Assistance Program and/or the services of the King County Critical Incident Stress Debriefing Team. Mental health counseling for citizens and disaster victims may be obtained through the American Red Cross and other local area mental health organizations following the disaster.

**(j)** The City's Public Information Officer (PIO), in coordination with the Shoreline Fire Department's PIO, may be authorized to release general medical and public health response information to the public after consultation with Public Health Seattle & King County and the Washington State Department of Health. To ensure patient confidentiality, the release of medical information will be in accordance with the Health Insurance Portability and Accountability Act (see ESF #15 – Public Affairs).

**(k)** In the event of a zoonotic disease (infectious agents that can be transmitted between animals and humans) outbreak, the release of public health information may be coordinated with the Washington State Department of Agriculture, King County Department of Natural Resources and Parks and the City's Parks, Recreation & Cultural Services Department (see ESF #11 – Agriculture and Natural Resources) as well as the Washington State and Public Health Seattle & King County.

**(l)** City and Fire personnel will not release medical information on individual patients to the general public to ensure patient confidentiality protection, in accordance with the Health Insurance Portability and Accountability Act (H.I.P.A.A). Obtain non-specific information on casualties/patients and provide to the American Red Cross for inclusion in the Disaster Welfare Information System, to Communications Unit for informational releases and to the Situations Unit for development of Situation Report(s) for dissemination to the State EOC.

**(m)** In the event of a public health epidemic, Public Health - Seattle King County will be the lead agency and coordinate all associated activities. The City and Shoreline Fire Dept. will initiate their Continuity of Government and Continuity of Operations Plan to help deliver key services.

## Article II. Concept of Operations

Section 2.01 General

**(a)** The King County ESF 8 Area Command Center, led by Public Health – Seattle & King County, coordinates the following:

(i) Establishment of overall health and medical response and recovery objectives.

(ii) Coordination of incident information with ESF-8 agencies.

(iii) Identification and coordination of medical resources.

(iv) Management of the acquisition and use of medical resources.

(v) Activation of the health and medical Joint Information System (JIS) as needed to coordinate the content and timing for release of accurate and consistent health and medical information to the public, media, and community response partners.

(vi) Coordination of health and medical information

(vii) Investigation into the cause and manner of death resulting from an emergency or disaster.

(viii) Overseeing regional health and medical surge capacity measures associated with added capacity or mobilization of volunteer

(ix) Collaborating with local EOCs to provide logistical support for medical needs shelters, alternate care facilities, medication centers, mortuary operations, family assistance centers, and other field response locations.

(x) Implementing local medication distribution strategies directed by the Local Health Officer.

(xi) Coordinating with the Puget Sound Blood Center to support the blood distribution system.

(xii) Identification of potential sites and support staff for temporary emergency clinics.

(xiii) Emergency care at shelters and congregate care facilities.

(xiv) Coordination of medical transportation resources.

(xv) Support of recovery activities aimed at restoring health and medical services to pre-event status.

**(b)** The provision of basic and advanced life support services shall be provided as per existing standard operating procedures, patient care guidelines and treatment/transfer protocols as promulgated or coordinated by the Emergency Medical Services Division of Public Health – Seattle & King County.

**(c)** The American Red Cross may support the Emergency Medical Services response with additional resources within the scope of their mission and as resources are available.

**(d)** For a Mass Casualty Incident the Shoreline Fire Department follows procedure written in the Seattle-King County Mass Casualty Incident (MCI) Plan (Appendix B). Public Health - Seattle & King County follows procedures written in the King County, Washington, Comprehensive Emergency Management Plan, Emergency Support Function (ESF) 8, Health, Medical, and Mortuary Services. As a region the Puget Sound area follows guidance provided in the Pre-Hospital Emergency Triage and Treatment Annex (Appendix C) and the Long Term Care Mutual Aid Plan (Appendix D).

**(e)** During a local disaster, County and State health and medical resources may be available upon request. Federal health and medical resources may be available upon request for incidents of national significance. The King County, Washington State and U.S. Public Health Departments will work with the FD to determine medical and public health assistance requirements.

**(f)** An employee of the FD will perform or delegate the oversight function of coordinating medical and health resources within the City.

**(g)** Mortuary Services will be coordinated by the Shoreline Police Department until the Medical Examiner can assume control within the City.

**(h)** The Shoreline Fire Department will utilize the King County Mass Fatality Incident Plan, Appendix B, which depicts operations according to the ICS. When activated, the Fire Department will work with the EOC to coordinate expansion of hospital care to field operations when needed.

**(i)** Hospitals will respond according to their established emergency response plans.

**(j)** In the event of structural failure or inaccessibility of medical clinics and hospitals relating to a disaster, any city facility or temporarily established site may act as a remote emergency clinic, temporary hospital or morgue for its local area until coordination of more permanent facilities can be established by the City's EOC.

**(k)** Communications will be through established channels. (See ESF #2 – Communications, Information Sharing and Warning)

**(l)** Department personnel shall operate according to specific directives, department standard operating procedures (SOP) and by exercising reasonable personal judgment when unusual or unanticipated situations arise and command guidance is not available.

**(m)** The City and Fire Department may not have all of the resources, either in type or quantity that may be required to combat the effects of all potential hazards during a disaster.

**(n)** City departments and support agencies will perform tasks and expend resources under their own authorities in coordination with the EOC, including implementation of mutual aid agreements, as applicable, in addition to tasks received under the authority of this plan.

**Section 2.02 Organization**

The Shoreline Fire Department responds to medical emergencies within the City of Shoreline. After a disaster the Fire Department will coordinate medical needs of victims under the King County Emergency Medical Services guidelines. Public Health - Seattle & King County is the lead agency in providing health, medical, and mortuary response within King County.

**(a)** The Fire Chief or his designee shall provide direction and control over the FD resources in coordination with the EOC.

**(b)** On-scene management of emergencies will follow the Incident Command System (ICS) in accordance with the (NIMS).

**(c)** Any site designated by the Incident Commander (IC) may serve as any of the six ICS facilities: incident command post, staging area, base, camp, helibase or helispot, or in any other function capacity appropriate for the situation.

**(d)** The FD will work under the Seattle Area Hospital Plan to establish emergency medical support and provide support to local hospitals and the EOC in the coordination and establishment of expanded hospital facility needs during an emergency.

**(e)** The FD may establish a system to expand emergency medical support and provide support to local hospitals and the EOC in the coordination and establishment of expanded hospital facility needs during an emergency.

**Section 2.03 Actions**

**(a) Preparedness**

*(i) Primary Agencies* - Shoreline Fire Department

1) Provides ongoing medical service training to their personnel.

2) Provides CPR training to the public through periodic classes.

3) Establishes transport procedures to facilitate disaster operations.

4) Works with local health care providers to establish disaster treatment centers within the City of Shoreline.

(ii) Public Health – Seattle & King County

1) Develops operational and tactical plans for health and medical response

2) Coordinates and manages health and medical training and exercise opportunities for healthcare providers throughout the region

3) Assesses the region's vulnerability to the health impacts of emergencies and disasters

4) Provides ongoing health protection activities such as vaccinations, provider education, and food and water safety assurance

**(b)** Response

(i) Primary Agencies - Shoreline Fire Department

1) Establishes Incident Command for on scene emergency operations.

2) Provides basic life support (BLS) to ill or injured persons.

3) Coordinates the transport of ill or injured persons.

4) Requests additional medical services dependent upon the number of injuries.

5) Requests critical incident stress debriefing teams.

6) Requests assistance through King County Office of Emergency Management/Regional Communications and Emergency Coordination Center.

7) Coordinates response efforts with the primary agencies.

(ii) Public Health - Seattle & King County

1) Provides leadership and direction in responding to health and medical emergencies across King County consistent with the authority of the Local Health Officer.

2) Activates the ESF 8 Area Command Center, Joint Information System and the Multi Agency Coordinating (MAC) Group as appropriate.

3) Provides medical advice and treatment protocols regarding communicable diseases and other biological hazards to EMS, hospitals, and healthcare providers

4) Maintains 24/7 Duty Officer Program and serves as the primary point of notification for health and medical emergencies in King County.

5) Coordinates assessment and response to disaster consequences affecting food safety, water quality, and sanitation.

6) Coordinates and collaborates with community response agencies in identifying environmental impact, remediation, and recovery activities.

7) Coordinates the response of regional veterinarian services and animal care groups.

8) Directs response activities to vector-borne public health emergencies.

9) Supports mass care sheltering plans throughout the county in coordination with the American Red Cross and ESF 6 Mass Care agencies. Public Health's role in mass care sheltering will focus on assisting with environmental health assessments at shelters.

10) Provides epidemiological surveillance, case investigation, and follow-up to control infectious disease, including acts of bioterrorism and outbreaks of food borne illness.

11) Assesses the health and medical impacts and potential consequences posed by an emergencies and disasters and determines appropriate courses of action.

12) Directs and manages medical surge capabilities including medical needs shelters, alternate care facilities, medication centers and temporary morgues.

13) Coordinates and manages incident information and medical resources for healthcare agencies across King County

14) Directs and manages regional isolation, quarantine, and other control measures necessary in response to disease outbreaks.

15) Directs and manages mass vaccination and antibiotic dispensing operations.

16) Coordinates requests for medical resources with private vendors, the King County ECC and the State EOC, as needed.

17) Supports the King County Department of Community and Human Services and the American Red Cross in meeting demands for regional mental health services.

18) Directs the development and dissemination of health messages to the public, media, response partners, and community based organizations.

19) Activates the Public Health Information Call Center as needed.

20) Activates the Community Communications Network during emergencies to provide public health and related information to community based organizations (CBO) and healthcare providers serving vulnerable populations and to receive incident information from CBOs.

(iii) Support Agencies - City of Shoreline EOC/ Public Works

1) Monitors and assures safe drinking water supply.

2) Provides liaison with utility providers for emergency repairs to utility systems as necessary.

(iv) American Red Cross

1) Acquaints families with available health resources and services and make appropriate referrals.

2) Provides supportive counseling for the family members of the dead and injured.

3) Provides emergency first aid, supportive counseling, health care for minor illnesses and injuries to individuals in mass care shelters, selected disaster clean-up areas, and other sites deemed necessary by the Department of Health.

(v) King County Emergency Medical Services

1) Provides advanced life support (ALS) services in response to ill or injured persons.

2) Provides limited emergency medical transportation capability.

3) Provides Medical Services Officer, if requested.

4) Coordinates regional critical incident stress management for first responders.

(vi) Shoreline Police Department

1) Provides limited first aid capability.

2) Assists the Medical Examiner with the identification of deceased persons.

3) Secures medical scene.

(vii) King County Medical Examiner

1) Provides notification of emergency morgue locations.

2) Authorizes the release of the deceased.

3) Coordinates transportation of the deceased.

4) Tracks incident related deaths resulting from emergencies and disasters.

5) Manages disaster related human remains.

6) Oversees a family assistance center to provide a private, safe and secure place for survivors of disaster victims to gather, and to facilitate necessary communication with the KCMEO, and to facilitate the coordination of psycho-social support

(viii) Private Ambulance Companies

1) Assists in the transportation of the injured.

**(c) Recovery Activities**

(i) Primary and Support Agencies

1) Participate in a debriefing to evaluate the incident.

2) Continues response and recovery efforts in support of this ESF.

## Article III. Responsibilities

### Section 3.01 Lead Agency

**(a) Shoreline Fire Department**

(i) Provide, direct, and coordinate ESF #8 operations.

(ii) Develop an inventory of medical facilities, clinics, medical personnel, medical transportation, communications and supply sources

(iii) Implement the King County Mass Fatality Incident Plan which specifically deals with handling multiple casualty incidents (Appendix B)

(iv) Refer to the Mass Fatality Management Deaths Occurring Out of a Healthcare Facility for guidance (Appendix E).

(v) If it is a catastrophic event, refer to King County Medical Examiners Catastrophic Fatality Management: Guidelines for Cities (Appendix F) Communications shall be through normal established channels. (See ESF #2 – Information Systems, Communications and Warning)

(vi) The FD officer in charge of the incident shall establish Incident Command and:

1) Provide initial incident evaluation to ensure appropriate coordination of resources and mitigation of the incident.

2) Initiate implementation of a Triage and Treatment system is not delayed pending the arrival of the primary medic units.

3) Assure that all responsibilities of the medical group supervisor position are completed.

4) Responsible for fire suppression, crash rescue, and mitigation of mass casualties.

5) Coordinate all aspects of medical care and transportation of patients at a specific scene including but not limited to triage, treatment, transportation and set-up of an initial morgue area.

6) Contact the appropriate Disaster Medical Control Center (DMCC) (primary: Harborview Medical Center) in King County and activate the Alternative Care Facility Plan (separately published plan) when appropriate.

7) Provide assistance to health care facilities in the implementation of plans to reduce patient populations if evacuation is necessary and with provisions for continuing medical care for patients that cannot be evacuated as resources permit.

8) Provide incident status and requests for resources to the EOC at regular intervals.

9) Evaluate the on-scene situation and determine whether or not there is a need for post-incident critical incident stress de-briefing (CISD). Requests for the CISD Team will be coordinated through the EOC.

10) Coordinate with the EOC regarding requests for County, State and Federal health and medical resources.

**(b) Public Health - Seattle-King County**

(i) Organize and mobilize public health services during an emergency.

(ii) Monitor potential causes of communicable diseases and environmental health hazards.

(iii) Identify and coordinate activation of additional mental health professionals when needed.

(iv) Establish monitoring facilities for problems regarding public health, water supplies, sanitation and food needs when appropriate.

(v) Provide information and instructions to facility managers and the general public to safeguard public health, water supplies, sanitation and food.

(vi) Provide inoculation of individuals if warranted by threat of disease.

(vii) Provide information on health department activities to the EOC.

(viii) Provide information on health department activities to the EOC.

(ix) Serve as the lead agency across the county for the development and release of health messages to response partners, the media, and the public.

(x) Implement and direct public health response actions including the isolation and quarantine of patients, when needed.

(xi) Maintain critical public health functions (continuity of operations).

(xii) Support the response and recovery of health care system partners.

(xiii) Lead mass fatalities planning and response efforts.

**Section 3.02 Support Agency**

**(a) Emergency Operations Center**

(i) Provide initial coordination and notification of mutual aid requests for outside agencies to provide operational support based on requests from field personnel.

*(ii)* Provide coordination with Public Health Seattle-King County with establishing Victim Identification and Family Assistance, if requested Request County, State and Federal resources, as necessary.

*(iii)* Refer to the King County Medical Examiners Catastrophic Fatality Management: Guidelines for Cities. (Appendix E).

**(b) Police Departments**

(i) Coordinate initial mortuary activities

(ii) Provide assistance to the medical examiner to identify the deceased.

(iii) Provide security to field morgue operations and facilities.

(iv) Provide perimeter control at incident scenes when requested.

(v) It the medical examiner's office is unable to come to Shoreline implement procedures found in Appendix A Mass Fatality Plan, Appendix E Mass Fatality Management Deaths Occurring our of healthcare Facility, Appendix F Catastrophic Fatality Management: Guidance for Cities, and Appendix G Decedent Tracking information.

**(c) Local Hospitals**

(i) Coordinate movement of patients from the field to area hospitals through Disaster Medical Control (DMC). Primary DMC is located at Harborview Medical Center. Back up DMC is Overlake Hospital.

(ii) Coordinate the establishment of temporary medical facilities with the EOC and FD personnel.

**(d) Local Morticians**

(i) Assist the medical examiner in establishing temporary morgues and transporting and storing corpses until final dispositions are determined.

(ii) Assist with victim identification as needed.

(iii) Provide liaison at the EOC to assist in coordination activities when requested.

**(e) King County Medical Examiner (See Appendix B – King County Mass Fatality Incident Plan)**

(i) Coordinate with the local morticians to expand mortuary services as appropriate for the situation.

(ii) Establish temporary morgues, determine cause of death, coordinate the disposition of corpses, and notification of relatives.

(iii) Coordinate activities with the EOC, morticians, police, and incident commander.

(iv) Coordinate activities associated with the identification of victims with City, County, State and Federal agencies.

(v) Provide liaison at the EOC to assist in coordination activities when appropriate.

**(f) Puget Sound Blood Center**

(i) Coordinate operations relative to collecting and distributing blood, based on local hospital and clinic facility needs.

(ii) Provide adequate planning for maintaining emergency capabilities under disaster conditions or other episodes of utility services interruption.

(iii) During a disaster situation, assure adequate blood supply to meet demand and coordinate acquisition of additional resources if necessary.

**(g) Washington State Emergency Management Division**

(i) Coordinates supplemental emergency medical and logistics support as requested by local political subdivisions.

**(h) Washington State Department of Public Health**

(i) Coordinates with the FD for all public health and medical assistance efforts within the City.

(ii) Emergency Medical Services are partially funded, licensed, and basically controlled by the State Department of Health, Emergency Medical Services/Trauma Division.

(iii) Requests the activation of the Federal Emergency Support Function #8 – Public Health and Medical Services through the Homeland Security Operations Center (HSOC) as necessary.

(iv) Requests the deployment or pre-deployment of the Strategic National Stockpile (SNS) as deemed appropriate by State requirements.

**(i) Federal Emergency Management Agency (FEMA)**

(i) When local, state, and volunteer agencies' capabilities to provide mass care or essential needs are exceeded, FEMA may assign Federal agencies under mission assignment to supplement state and local emergency medical efforts.

**(j) U.S. Department of Health and Human Services (DHHS)**

(i) The US DHHS has primary responsibility for Federal activities associated with health hazards resulting from a disaster or emergency that is categorized as an incident of national significance.

(ii) Provide leadership in coordinating and integrating overall Federal efforts to provide public health and medical assistance within the City.

(iii) Upon request from the State EOC, the DHHS will request appropriate organizations to activate and deploy health and medical personnel, equipment, and supplies.

(iv) Assist and support the FD in monitoring for internal contamination and administering pharmaceuticals for internal decontamination and deemed necessary.

(v) Assist in the assessment of whether food facilities within the City are able to provide safe and secure food.

(vi) Assist with the creation of a registry of potentially exposed individuals, performing dose reconstruction, and conducting long-term monitoring of Shoreline residents and commuters for potential long-term health effects.

(vii) Monitor blood and blood product shortages and reserves with the coordination with appropriate agencies.

(viii) Evaluate the request for deployment of or pre-deployment of the SNS based upon relevant threat information.

(ix) Assist the City to assess potable water, wastewater, solid waste disposal issues, and other environmental health issues, provide water purification and provide technical assistance on potable water and wastewater/solid waste disposal issues

(x) Assigns professional and technical personnel to augment state and local forces.

**(k) U.S. Department of Agriculture**

(i) Coordinates efforts to control and eradicate the outbreak of highly contagious or economically devastating animal diseases

(ii) Assists to ensure food safety and security

(iii) Coordinates with the City (ESF # 11 Agriculture and Natural Resources) and State Department of Agriculture on efforts to dispose of animal carcasses, protect livestock health and zoonotic diseases associated with livestock.

(iv) Provide support for public health matters for radiological incidents.

## Article IV. Appendices

**(a)** All Hazards Mass Fatality Management Plan

**(b)** King County Mass Causality Incident Plan

**(c)** Puget Sound Region Pre-Hospital Catastrophic Emergency Triage and Treatment Plan

**(d)** King County Long Term Care Facilities Mutual Aid Evacuation Plan

**(e)** Mass Fatality Management Deaths Occurring Out of a Healthcare Facility

**(f)** King County Medical Examiners Catastrophic Fatality Management: Guidelines for Cities.

**(g)** King County Decedent Tracking Information

## Article V. References

**(a)** King County Emergency Operations Plan, ESF # 8 Public Health and Medical Services

**(b)** The National Response Plan, ESF #8 Public Health and Medical Services

**(c)** Washington State Comprehensive Emergency Management Plan

Public Health
Seattle & King County

**ESF 8 HAZARD ANNEX**

# All Hazards Mass Fatality Management Plan

Version 3 2012

## Record of Changes

| Version No. | Change Description | Date Entered | Posted By |
|---|---|---|---|
| 2 | Updated to reflect lessons from Yakima mutual aid. | 2009 | O. Lien |
| 3 | Significant revision to all aspects of the plan. | 2011/2012 | A. Kolberg |

## Table of Contents


Record of Changes ..... ii
Table of Contents ..... iii
Tables iv
Attachments ..... v
Quick Guide to the King County Mass Fatality Plan ..... viii
I. Introduction ..... 1
II. Purpose ..... 3
III. Scope ..... 4
IV. Situation Overview ..... 4
V. Planning Assumptions ..... 6
VI. Decision-Making ..... 8
A. Mass Fatality Incident Threshold ..... 8
B. Notification ..... 9
C. Activation of Plan ..... 10
D. Command and Control ..... 12
E. Policy Decisions ..... 13
VII. Concept of Operations ..... 13
A. Safety ..... 15
B. Security ..... 15
C. Death Investigation ..... 16
D. Morgue and Disposition Operations ..... 22
E. Community Responsibilities and Opportunities to Assist ..... 31
F. Religious and Cultural Considerations ..... 32
G. HMAC Support to KCMEO Mass Fatality Response ..... 33
H. KCMEO Continuity of Operations ..... 35
I. Scenario-Specific Disaster Response Plans ..... 36
J. Response Demobilization ..... 36
VIII. Guidance for Cities ..... 37
IX. Mutual Aid ..... 39
X. Public Communications ..... 39
A. Communicating Directly with Family and Friends ..... 39
B. Public Information Contact Center ..... 39
C. Media Management ..... 40
D. Discussing Number of Decedents ..... 40
XI. Authorities ..... 41
XII. References ..... 43
XIII. Public Health Emergency Preparedness Capabilities ..... 43
XIV. Training & Exercises ..... 43
XV. Mass Fatality Plan Maintenance ..... 43

Tables

Table 1: Disaster Levels ..... 5
Table 2: Basic Activation Tasks ..... 11
Table 3: Additional Activation Tasks - Medium Event ..... 11
Table 4: Additional Activation Tasks - Large or Catastrophic Event ..... 11
Table 5: Local and State Roles ..... 12
Table 6: Federal Roles ..... 13
Table 7: Operations Tasks ..... 14
Table 8: Potential State Resources ..... 33
Table 9: Potential Federal Resources ..... 33
Table 10: Demobilization Tasks ..... 36

## Attachments

**Introduction**
Glossary and Acronyms

**Decision-Making**
Duty Officer Guidelines – King County
Duty Officer Guidelines – Mutual Aid
Internal MEO Notifications – King County
Internal MEO Notifications – Mutual Aid
Lines of Succession and Contact Numbers (under revision)
Medical Examiner Questions

**Command and Control**
Organizational Charts

**Safety**
OSHA Recommendations for Personnel Handling Human Remains
Personal Protective Equipment for MFI Response

**Security**
Physical Security Assessment (under revision)
Security Plan Template (under revision)
Traffic Control Plan Templates (under revision)

**Initial Response**
MFI Kit List
Needs List
Photo Log
Scene Assessment

**Human Remains Recovery and Transport**
Death Investigation Action Plan Template
Human Remains Recovery Equipment and Supplies
Human Remains Recovery Staging (under revision)
Human Remains Recovery Strategy Details
Transportation Guidelines
Vehicle Log

**Morgue Operations**
Autopsy Station Set-Up
Communications and Technology Requirements
DMORT Morgue Protocols
Forms for Examination Group
Mass Fatality Morgue Services Flow Chart
Morgue Cover Sheet
Morgue Operations Action Plan
Morgue Operations Strategy Details

Morgue Services Equipment and Supplies
Morgue Site Assessment
Morgue Site Requirements
Morgue Staffing Guidelines
Surge Capacity (under revision)
Viewing Guidelines

**Decedent Population and Condition of Remains**
Linking MFI to Missing Persons (under revision)
Methods of Identification

**Mass Fatality Information Systems**
MFI Number Tracking

**Community Responsibilities and Opportunities to Assist**
Body Bag Distribution (under revision)
Death Occurring in a Healthcare Facility Flow Chart
Decedent Information Tag
Decedent Information Form
Dry Ice Distribution (under revision)
Healthcare Fatality Management Guidelines
Patient Identification Form
Personal Effects Tracking Form

**Religious and Cultural Considerations**
Religious/Cultural Considerations – UK Document
Spiritual Advisor Contact Information

**Logistics**
Human Remains Recovery Logistics (under revision)
Morgue and Disposition Operations Logistics (under revision)
NTSB Guide to Supporting Aviation
Process for KCMEO to Request Assistance
State and Federal Assets and Locations

**Planning Section**
Conference Call Agenda
Rumored Fatalities Grid

**Finance and Administration Section**
Confidentiality Agreement
Death Investigation Staffing Chart
Job Action Sheets
Morgue Staffing Chart
Overall Staffing Plan
Staff Request Form

**Scenario-Specific Disaster Response Plans**

Managing Increased Numbers of Deaths (under revision)
Managing Contaminated Decedents: Biological, Radiological, Chemical, and Nuclear (under revision)
Managing Incidents in Large Bodies of Water or On Board Ships (under revision)
Managing Incidents with Large Numbers of Missing and Presumed Dead, Bodies Unrecoverable (under revision)

**Guidance for Cities**
911 Guidelines (under revision)
Body Bag Cache procedure (under revision)
Catastrophic Fatality Management Guidelines
Cities Remains Procedure Flow Chart
Deaths Occurring Outside a Healthcare Facility Flow Chart
Decedent Identification Tag
Decedent Information Form
Personal Effects Tracking Form

**Public Communications**
Communications Template and Cheat Sheet
Draft Missing Persons Call Intake Form (under revision)
Initial Press Release Components
JIC Reporting Template and Cheat Sheet
Media FAQ Sheet
Messaging Tips

**Training and Exercises**
KCMEO and Public Health Mass Fatality Training (under revision)
Mandatory Trainings for HMAC Staff (under revision)

## Quick Guide to the King County Mass Fatality Plan

Introduction

Overview of Public Health Seattle & King County and the Plan. Provides list of participating organizations, their roles and their responsibilities.

Purpose

Reason for the Plan.

Scope

Listing of areas covered by the Plan.

Situation Overview

Background on potential Mass Fatality incidents and their predicted impacts on King County.

Planning Assumptions

Concepts that inform the plan, including specific assumptions about death investigation, morgue and disposition operations, and public communications.

Decision-Making

- Mass Fatality Incident Criteria: Circumstances under which the Plan will likely be activated.
- Notification: Process for notifying Public Health and KCMEO of the potential for Plan activation.
- Activation of Plan: Steps involved in activating the Plan.
- Command and Control: Specific roles and responsibilities in implementing the Plan.

Concept of Operations

- Safety: Public and worker safety overview.
- Security: Overview of security at KCMEO and alternate locations.
- Death Investigation: Specifics related to mass fatality scene response and the recovery of human remains.
- Morgue and Disposition Operations: Morgue flow and procedures, decedent remains and identification, and information management.
- Community Responsibilities and Opportunities to Assist: Ways in which various organizations may be called upon to assist. Include: medical and dental offices, funeral homes, owners and operators of incident locations, healthcare facilities, faith and cultural organizations, and law enforcement.
- Religious and Cultural Consideration: Confirmation of commitment to respect the various religious and cultural request to the extent possible.
- HMAC Support to KCMEO Mass Fatality Response: Outline of how Public Health's Health and Medical Area Command will provide direct assistance to KCMEO.
- KCMEO Continuity of Operations: How non-mass-fatality-related operations will continue.
- Scenario-Specific Disaster Response Plans: Overview of additional areas to be addressed by future planning.
- Response Demobilization: How to scale back and cease mass fatality operations.

Guidance for Cities

Information for cities to be better able to assist with mass fatality response at all levels, including catastrophic incidents.

Mutual Aid
Process for responding to mutual aid requests.

Public Communications

- Communicating Directly with Family and Friends: Reiteration of policies related to informing decedent relatives and friends prior to the general public.
- Contact Center: Process for managing requests from family and friends.
- Media Management: Overview of how to work with the media.
- Discussing Number of Decedents: Official fatality number release procedures.

Authorities
Ordinances and administrative codes governing mass fatality response.

References
Documents and plans referred to during the planning process.

Public Health Emergency Preparedness Capabilities
Centers for Disease Control capabilities addressed by the Plan.

Mass Fatality Plan Maintenance
High-level training goals and maintenance for the next three years.

## I. Introduction

As the first priority in any disaster is addressing the needs of the living, the King County Medical Examiner's Office (KCMEO) and Public Health – Seattle & King County (Public Health) have prepared the King County All Hazards Mass Fatality Management Functional Annex ("the plan") with family members and victims' survivors in mind. The plan serves to provide guidance on handling large numbers of fatalities while maintaining respect for the dead, and to the extent possible, the wishes of family and friends of the victims of a disaster. The plan describes a coordinated response among city and county agencies involved with conducting fatality management operations to ensure that both the living and the dead are treated with utmost respect.

Public Health serves as the lead agency in the county for coordination of all Emergency Support Function (ESF) 8 tasks, which includes Health, Medical and Mortuary planning and response activities. KCMEO and Public Health will manage the response with regard to arranging for the investigation, recovery, transport, storage, tracking, processing and identification of decedents and communication with decedents' families. KCMEO is housed within Public Health, the county-wide health department. As such, during emergency and disaster operations, the KCMEO operations are supported or led by Public Health and Medical Area Command (HMAC), which coordinates with the King County Emergency Coordination Center (ECC) and local city emergency operations centers as necessary.

The KCMEO's role is to manage mass fatality operations by certifying the cause and manner of death, establishing the accurate decedent identification, and conducting the notification of next of kin. This response requires extensive coordination between and among many public and private agencies. Additionally, Public Health has a Family Assistance Center Functional Annex ("FAC plan") that is likely to be activated when the Mass Fatality Functional Annex is activated. The FAC plan addresses the needs of the family and friends of the missing and deceased. Throughout the Mass Fatality plan reference will be made to the FAC plan; if for some reason it is not activated due to the small nature of the incident, any references to tasks performed by the FAC will in those instances be performed by staff from the KCMEO.

**Organizational Roles and Responsibilities**

1. Lead Agency:
   - King County Medical Examiner's Office
     - Document the context and coordinate the recovery of human remains.
     - Establish positive identity of all disaster related decedents by scientific means.
     - Determine and certify the cause(s) and manner of disaster related deaths.
     - Collect and preserve all medico-legal evidence, and release said evidence to appropriate law enforcement authorities.
     - Recover and document all personal property associated with the human remains and release to legal next of kin.
     - Responsible for ensuring appropriate notification of next of kin.
     - Coordinate the disposition of fatalities including interim storage of all human remains resulting from a disaster.
     - Maintain the official log of reported and confirmed deaths resulting from a disaster.
     - Serve as the lead agency for the release of all information regarding deaths resulting from emergencies or disasters.

2. Primary Agency:
   - Public Health – Seattle & King County

- Coordinate all mass fatality operations via Health and Medical Area Command (HMAC).
- Activate Family Assistance Center plan.
- Responsible for developing public messaging content such as fatality numbers, names of decedents, and public guidance.

3. Support Agencies:
   - Local:
     - Local Hospitals and Healthcare Organizations – Manage the disposition of casualties that become fatalities while in their custody. Report deaths to KCMEO.
     - Local Offices of Emergency Management – Serve as the primary emergency agencies for events occurring within their jurisdictions. Coordinate the jurisdiction-wide effort to support the Primary and Support Agencies for mass fatality. Respond to resource requests from within their jurisdictions and pass such requests on to the County when not able to fulfill them. Prepare emergency declarations. Upon request, assist with establishing contact with Consuls located within their jurisdiction.
     - Local Law Enforcement – Lead or support investigations into mass fatality incidents (MFIs). Provide or coordinate for security at incident scene and morgue. Provide assistance at the scene as needed, including mapping, photography, search, labeling, packaging and other tasks.
     - Local/District Fire Departments – Serve as the primary emergency medical services for events occurring within their jurisdictions. Serve as Safety Officer.
   - County:
     - King County Office of Emergency Management – Provide emergency support throughout the county. Serve as first point of contact for requests in unincorporated King County and as support for requests originating in incorporated cities.
     - King County Department of Executive Services – Prepare emergency declarations and requests for assistance from the State and federal government.
     - King County Sherriff's Office – Lead or support investigations into MFIs. Assist in the taking and running of fingerprints to facilitate identification through the Ten Print Unit.
   - State:
     - Washington State Patrol – Assist local law enforcement with traffic control, closing / rerouting streets in support of mass fatality operations. Assist in the identification of the deceased through Missing and Unidentified Persons Unit missing persons database using physical and dental information. Assist in the taking of samples for DNA and in the processing of those samples through the Crime Lab. Determine who to outsource to if testing cannot be done within capacity of lab and contract with that organization.
     - Washington State Department of Health – In concert with Emergency Management Division, manage federal resource requests and distribution of federal assets. Manage requests for state-purchased medical examiner resources.
     - Washington State Emergency Management Division – Respond to resource requests.
   - Federal and International
     - Law Enforcement Agencies (FBI, ATF) – Lead or support investigations into MFIs that are confirmed or suspected criminal events.
     - Federal Emergency Management Agency – Provide support in conjunction with federally declared disasters.
     - Department of Defense: Coast Guard – Provide support and expertise related to MFIs taking place in the water.

    - National Disaster Medical System – Provide Disaster Mortuary Operations Response Teams and Disaster Medical Assistance Teams.
    - National Transportation Safety Board – Manage investigations into commercial air and rail incidents. Also serves as the lead for coordinating the Family Assistance Center in such events as outlined by legislation.
    - FEMA Region X National Guard Fatality Search and Recovery Team (FSRT) – Assist in search and recovery, with expertise in recovering contaminated remains.
    - National Guard CBRNE-Enhanced Ready Force Package (CERF-P) – Decontamination of contaminated recovered remains.
    - Department of State – Offer assistance with identification of international decedents and coordination of the repatriation of remains.
- International
    - Interpol – Assist in the identification of the deceased by processing fingerprints through its database.
    - Consulates – Offer assistance with identification of international decedents and coordination of the repatriation of remains.
- Private / Non-Profit
    - American Red Cross: King & Kitsap Counties Chapter – Provide support (e.g. feeding, mental health) to first responders at the scene of the incident.
    - Private EMS providers – Provide support for emergency medical services and others at the direction of local jurisdictional fire and EMS department.
    - Washington Regional Dental Identification Team, upon activation, can assist in the taking of dental radiographs, the charting of antemortem and postmortem records, and in the positive identification of decedents by comparative dental radiography.
    - Regional mortuary service providers – Manage final disposition of human remains.

**Attachments**
Glossary and Acronyms
Full Fatality Management Organizational Chart

## II. Purpose

The purpose of this plan is to guide the County in managing the recovery and identification of human remains while maintaining respect and dignity of the deceased. It outlines how the County will manage the response to a mass fatality incident, including investigation, recovery, transport, storage, tracking, identification and disposition of decedents.

The objectives of this plan are:

- To prepare the county for the management of a mass fatality incident.
- To outline operational areas and provide supporting guidelines and operational documents
- To identify the roles and responsibilities of agencies and organizations likely to be involved
- To specify the command and control structure, including activation of the plan
- To describe the logistics operation and outline how to request resources

A successful mass fatality response will treat the deceased and their loved ones with compassion and respect at all times; will close cases as rapidly and efficiently as possible and without sacrificing quality; and will provide loved ones with ready access to support and information throughout the process.

## III. Scope

This plan provides general guidance in the following areas:

- Decision-Making
  - Roles and Responsibilities
  - Notification
  - Activation
  - Command and Control
- Concept of Operations
  - Death Investigation
  - Morgue and Disposition Operations
  - Staff / Volunteer Processing
  - Religious / Cultural Considerations
  - Scenario-Specific Plans
  - KCMEO Continuity of Operations
  - Administration and Finance
  - Logistics
- Guidance for Cities
- Public Communications
- Authorities

The plan provides detailed operational information, templates, forms, organizational charts and contact lists by means of procedural documents, which are attached to the plan.

It is to be used in conjunction with the Public Health Emergency Support Function 8 Basic Plan, of which it is an annex, and the King County Family Assistance Center Functional Annex. It may also be used in conjunction with the Public Health Pandemic Flu plan, Communicable Disease – Epidemiology Plan, and with state and federal response plans.

## IV. Situation Overview

Many disasters result in at least some fatalities, and several types of hazards have the potential to produce multiple fatalities. Based on the Homeland Security Presidential Directive – 8, the National Preparedness Goals National Planning Scenarios and the Seattle Hazard Identification and Vulnerability Assessment (HIVA) there are more than 20 scenarios that have the potential to result in multiple fatalities for which King County must plan to respond, including:

- Natural Disasters
  - Earthquakes
  - Floods
  - Natural biological disease outbreak (e.g. pandemic influenza)

- Weapons of Mass Destruction Events
  - Chemical Attack: Toxic Industrial Chemicals
  - Chemical Attack: Chlorine Tank Explosion
  - Chemical Attack: Blister Agent

- Chemical Attack: Nerve Agent
- Biological Attack: Aerosolized Anthrax
- Biological Attack: Plague
- Biological Attack: Food Contamination
- Radiological Attack: Radiological Dispersal Device
- Nuclear Detonation: 10 Kiloton Improvised Nuclear Device
- Explosives Attack: Bombing using an improvised explosive device

- Technical or Human-Caused Disasters
  - Fires
  - Ferry crash
  - Airliner jet crash
  - Small plane crash
  - Cruise ship crash
  - Multiple homicide / shooting
  - Building collapse
  - Train crash
  - Bus crash
  - Cyber attack

The size of the disaster will help guide expected resource needs, but it is not necessarily determined by the number of fatalities. When establishing how to classify the disaster from a mass fatality standpoint, the County will consider the estimated number of fatalities as well as multiple other factors, including:

- Magnitude: Overall size
- Type: Earthquake, bombing, pandemic, etc.
- Population (open vs. closed)
- Condition of Remains: Burned, severely traumatized
- Rate of Recovery: Speed at which remains can be brought to the morgue from the scene
- Infrastructure Status: Availability of transportation as well as power and water at morgue site
- Contamination: Special precautions necessary
- Location of Incident: Hill, water, remote terrain, etc.

The disaster level will affect resource needs, including number of staff to fulfill all roles. The "Overall Staffing Plan" attachment provides further detail on staffing needs as they relate to these levels.

**Table 1: Disaster Levels**

| Disaster Levels | |
|---|---|
| Small | <20 fatalities with intact remains |
| Medium | 20-100 fatalities with intact remains OR fewer fatalities that are fragmented and / or highly dispersed |
| Large | 101-500 fatalities with intact remains OR fewer fatalities that are highly fragmented and / or highly dispersed |
| Catastrophic | >500 fatalities |

### Demographics

King County is the most populous county in Washington State with approximately 1.9 million residents[1]. The County has a diverse population including more than 6% black, 8% Hispanic and 14% Asian residents[2]. The County is also home to two Tribal Nations, the Snoqualmie and the Muckleshoot.

King County's ethnic diversity is an important consideration for Mass Fatality operations given the range of cultural beliefs and practices regarding death and diverse language requirements. According to the 2010 U.S. Census more than one in five King County residents speaks a language other than English as the primary language at home. These are comprised of approximately 150 languages spoken in King County.

Per the 2010 census data, the following languages are spoken by at least 1% of the residents of King County aged five or older: Spanish; Chinese; Vietnamese; African Languages (including Amharic, Somali, and Tigrinya); Tagolog; Korean; Russian

## V. Planning Assumptions[3]

The response operations discussed throughout this document were created against the background of certain assumptions and expectations related to disaster response**.**

Overall Key Assumptions

- The King County Medical Examiner's Office has legal authority over all deaths in King County.
- A mass fatality incident may require HMAC to transition immediately to a 24/7 operational cycle for an extended period of time.
- Failure to conduct an effective mass fatality investigation or to adequately provide for the family and friends of the deceased will erode the public's faith and trust in the response and recovery efforts.
- Responding to a mass fatality incident can be overwhelming, leading to traumatic stress. Support for responders is essential to monitoring and minimizing the impact. For guidance in addressing this issue see King County Disaster Behavioral Health Plan.
- The mass fatality investigation may continue for months or even years, depending on the scope of impact and identification process.

Key Assumptions underlying **Death Investigation** include:

- There will be multiple responders at the incident site.
- Law enforcement personnel will be needed to augment KCMEO personnel responsible for processing the scene. This might include mapping, photography, search, labeling, packaging and other tasks.
- The incident site will be treated like a crime scene until it has been formally determined that it is not one.
- Incident Site operations will be performed according to professional protocols to ensure accurate identification of human remains and, under certain circumstances (i.e., commercial airline accident and criminal or terrorist act), to preserve the scene and collect evidence.
- KCMEO staff assigned to an incident site will operate under the ICS and fit within the

[1] U.S. Census Bureau 2009 Estimate - http://quickfacts.census.gov/qfd/states/53/53033.html
[2] Ibid.
[3] Some information for Key Assumptions takes from Santa Clara APC Mass Fatality Toolkit

established command structure on the scene.

- A mass fatality scene that is contaminated or extremely hazardous may prohibit KCMEO responders from evaluating in a timely manner and may require additional local, state or federal assistance and special chemical, biological, radiological detection equipment and personnel with personal protective equipment.
- Select federal agencies will be involved at the incident site under certain circumstances, e.g., a commercial airline accident or terrorist act.
- An accurate and reliable numbering system for all human remains is crucial to an effective response mission and will be implemented by KCMEO responders at the onset of the incident.
- Contaminated deceased victims may require decontamination on-scene prior to admitting to a temporary morgue. Local assistance or Mutual Aid from the fire department, Hazmat unit, DMORT, military, or other non-medical examiner disciplines may be needed.
- The collection, inventory, and return of personal effects to the decedent's family is important, especially in transportation incidents that involve mass fatalities.
- Depending on the natural or manmade disaster that produces the mass fatalities, the infrastructure may be severely impacted causing significant delays and progress in recovering and managing the dead.
- Access to the scene and other fatality management operations will be controlled by law enforcement/security. A credentialing system to monitor access will be employed.
- The bio-waste and other bodily fluids from human remains during phases of recovery may become hazardous, requiring collaboration with the Health Officer.

Key assumptions underlying **Morgue and Disposition Operations** include:

- The expectations of family members, the general public, politicians and the media concerning identification of victims and morgue services are high.
- In a mass fatality, decedents may not immediately be identifiable. As such it may take an extended period of time to identify them.
- Early on in the response a decision will need to be made regarding the disposition of remains that cannot be identified scientifically.
- Morgue services are performed according to legal standards and following KCMEO protocols to ensure accurate identification of human remains and, under certain circumstances (i.e., commercial airline accident and criminal or terrorist act), to preserve the scene and collect evidence. Waiving professional protocols will be a last resort that would only be used in extreme situations.
- Morgue operations will operate under ICS and within the Health and Medical Area Command structure.
- Additional personnel may be needed and obtained by mutual aid agreement or from a pool of prescreened volunteers as dictated by the Preparedness section of Public Health.
- Requests for resources, including refrigerated vehicles, are directed through the local EOC or Public Health HMAC depending on the incident.
- Refrigerated vehicles for the transportation and/or temporary storage of human remains may be in short supply.
- Additional local, regional, State and federal resources may be required to effectively perform morgue services.
- In the event of pandemic influenza or similarly contagious disease, some resources will be

unavailable and some services will need to be delivered via alternative means to reduce the spread of the disease.

Key assumptions underlying **Public Communications** include:

- There will be intense public and media interest in any mass fatality or potential mass fatality incident.
- KCMEO will be inundated with calls from the media, interfering with the ability of those who need to contact KCMEO to do so.
- In a potential mass fatality incident, such as a bus accident, where the number of fatalities is unknown, there will be an immediate need for a call center, regardless of the eventual designation.
- When the MFM plan is activated the HMAC Operations section will begin the process of standing up the call center as soon as possible, with content provided by PHSKC Communications staff.
- A transparent and open process that respects the privacy of those involved is essential if trust is to be established between the authorities and the families of the deceased.

## VI. Decision-Making

A. Mass Fatality Incident Criteria
B. Notification
C. Activation of Plan
D. Command and Control

### A. Mass Fatality Incident Threshold

The KCMEO has determined that any event consistent with the following mass fatality incident criteria warrants activation of the King County All Hazards MFM Plan. Final determination to activate the plan resides with the Chief Medical Examiner, Local Health Officer or their respective designees.

- Any event that yields 7 or more fatalities.
- Any situation in which there are more human remains to be recovered and examined than can be handled routinely by KCMEO resources.
- Any situation in which there are human remains contaminated by chemical, biological, radiological, nuclear or explosive agents or materials.
- Any incident or other special circumstance requiring a multi-agency response to support mass fatality operations**.**
- Any incident involving a protracted or complex human remains recovery operation.

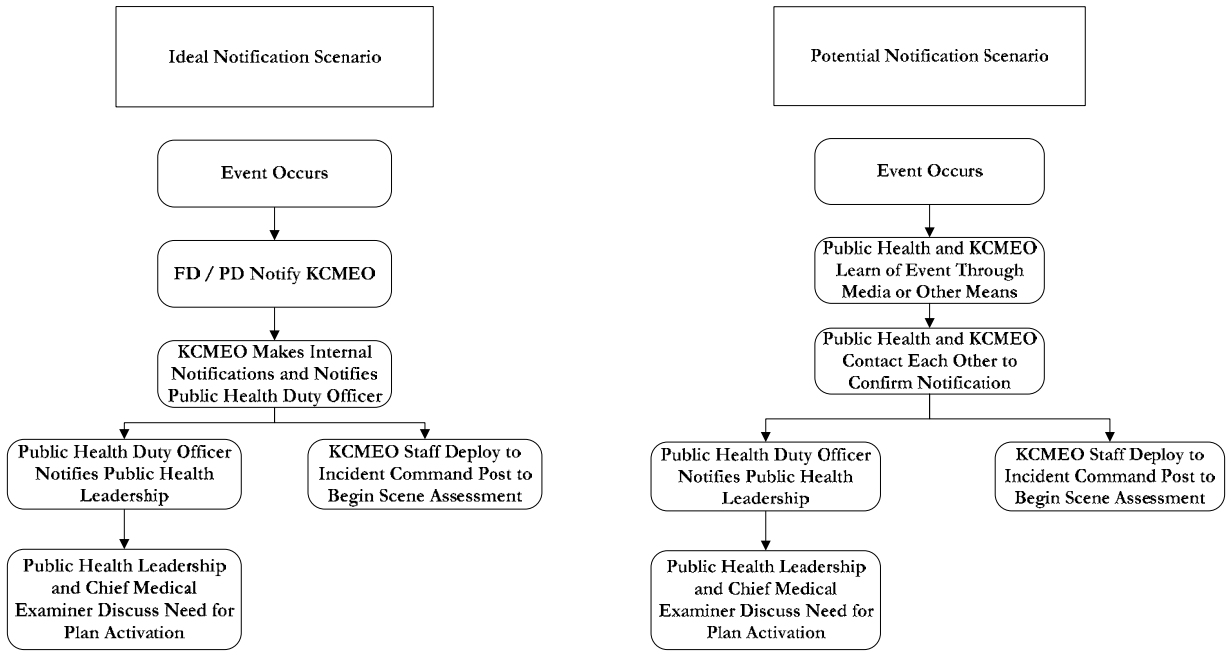
The plan can be activated modularly; activation of one component does not necessitate activation of the whole. Additionally, while the above criteria generally apply, components of the plan, including public information, as well as components of the Family Assistance Center plan, may be needed for as few as five fatalities, depending on the circumstances of the incident.

## B. Notification

When a potential mass fatality incident occurs, it is vital that the KCMEO is notified as early as possible to determine if the event should be characterized as a mass fatality incident and warrants activation of the MFM Plan. The earliest stages of mass fatality response require coordination of public information and activation of the Family Assistance Center plan, which includes activation of the missing persons call center to serve the families and friends of the deceased or the missing. These operations should begin as soon after the mass fatality incident as possible.

When notified, both the KCMEO and Public Health Duty Officer will contact each other to confirm that the other is aware of the situation. The Public Health Duty Officer will then follow the protocol for Public Health notifications found in the Public Health Duty Officer binder. KCMEO will follow its internal notification procedures. The below flow charts outline the ideal notification process as well as steps to take should notification not take place as requested.

*Figure 1: Notification*




When receiving notification, both KCMEO and the Public Health Duty Officer should be prepared to ask questions to gain situational awareness. The entity notifying KCMEO or the Public Health Duty Officer should be prepared to give KCMEO an estimate of expected fatalities, the location of the Incident Command Post, and other pertinent information as outlined in the Duty officer notification.

Additionally, as part of the PHSKC ESF 8 Basic plan, HMAC will notify healthcare, hospitals and other interested partners as needed.

**Attachments**

Duty Officer Guidelines – King County

Duty Officer Guidelines – Mutual Aid
Internal MEO Notifications – King County
Internal MEO Notifications – Mutual Aid
Lines of Succession and Contact Numbers (under revision)
Medical Examiner Questions

### C. Activation of Plan

When notifications have been made, the Chief Medical Examiner (or designee), the Local Health Officer, in consultation with the Area Commander/Preparedness Section Chief and other relevant parties, will determine the need for activation of the plan. The decision to activate all or parts of the plan will be made by the Chief Medical Examiner and Local Health Officer after evaluating the initial information received from the field and will depend on many factors, including the size and type of the incident, as previously discussed.

In any potential mass fatality incident, Public Health staff will begin taking the steps necessary to activate the Family Assistance Center plan, which includes establishing a call center. The leadership will also consider any potential staffing and resource needs likely to arise from the incident, including the need for a temporary off-site morgue or outside resource assistance (such as DMORT).

Activation of the MFM plan requires the concurrent activation of the Public Health HMAC, per the guidelines found in the ESF Basic Plan, and likely the FAC plan. The Basic Plan governs the day-to-day tasks of Public Health emergency response and enables Public Health to support the tasks outlined in the MFM plan. While it is understood that staffing levels may be stretched, especially if the activation of this plan takes place during a major incident affecting other aspects of the healthcare system, the Area Commander is responsible for ensuring that HMAC staff members are assigned to serve as the main point of contact for implementing each piece of this plan.

As the various components of the plan are activated, the leadership must be cognizant of the timing of the implementation of the plan. Scene / field and morgue operations should commence at the direction of the Chief Medical Examiner (or designee), and the Family Assistance Center and call centers should be activated according to the protocols of the FAC plan.

Other issues will require that decisions be made early on in the investigation and recovery process. This includes decisions such as:

- DNA identification (i.e. the minimum size of fragments to be processed, if all fragments are to be processed, if DNA will be used at all)
- From whom antemortem data will be collected to identify missing persons
- Jurisdiction
- Communication with families
- Need for mutual aid

The Chief Medical Examiner or designee will serve as the decision maker for these issues, and may coordinate with the Local Health Officer and Law Enforcement.

**Table 2: Basic Activation Tasks**

| Basic Activation Tasks | |
|---|---|
| Fire Department / Police Department | □ Notify KCMEO and Public Health Duty Officer of potential mass fatality incident.<br>□ Establish Incident Command Post for scene response. |
| KCMEO | □ Confirm that Public Health Duty Officer is informed of incident.<br>□ Coordinate with the Incident Command at the scene<br>□ Respond to scene when requested and assess situation from a mass fatality management perspective.<br>□ Begin to compile potential needs, including staff, supplies, and outside assistance. |
| Public Health Leadership | □ Discuss activation of plan components and activation of FAC plan.<br>□ Activate Health and Medical Area Command.<br>□ Reach out to local or county emergency management to discuss the need for emergency declaration. |
| Public Health Health and Medical Area Command | □ Begin public information and media outreach.<br>□ Ensure local DMCC, hospitals and healthcare facilities are notified.<br>□ Coordinate with local and County EOCs. |
| Local and County Emergency Management Office | □ If event takes place within locality's jurisdiction, prepare for possible activation of EOC to support Public Health and KCMEO in case incident escalates. |

**Table 3: Additional Activation Tasks - Medium Event**

| Additional Activation Tasks – Medium Event | |
|---|---|
| Local Emergency Management Office | □ If event takes place within locality's jurisdiction, activate EOC to support Public Health. |
| KCOEM | □ Activate to provide support to localities and Public Health.<br>□ Stand by for possible resources requests to take place in consultation with Public Health. |

**Table 4: Additional Activation Tasks - Large or Catastrophic Event**

| Additional Activation Tasks – Large or Catastrophic Event | |
|---|---|
| Local Emergency Management Office | □ If event takes place within locality's jurisdiction, activate EOC to support Public Health. |
| KCOEM | □ Activate to provide support to localities and Public Health.<br>□ Prepared to request assistance (e.g. DMORT in consultation with Public Health.<br>□ Work with State Emergency Management to initiate process for requesting additional federal resources. |

Reference
Area Command Operations guide
Family Assistance Center plan

### D. Command and Control

MFM response follows the Incident Command Structure and is focused on two primary groups within the operations section structure: Death Investigation operations (including Initial Response and Human Remains Recovery and Transport) and Morgue and Disposition operations. Unless otherwise specified, response operations will function on a 12-hour operational period, with two shifts per day. For details see the "Fatality Management Org Chart for MFM."

A Fatality Management Branch supervisor will be located at HMAC and provide support to the two primary field groups (incident scene and morgue). While resources will be managed through HMAC, on-scene staff will report directly to supervisors as per ICS. The Human Remains Recovery Group will report to the Operations Chief at the incident scene, and the Morgue Operations and Information Processing Groups will report to the Morgue Incident Commander.

**Table 5: Local and State Roles**

| Local and State Roles | |
|---|---|
| KCMEO | Has jurisdiction over human remains, remains recovery strategy and decedent identification. The Chief Medical Examiner is responsible for requesting the activation of the MFM plan, and KCMEO staff members are responsible for managing the Scene/Field and Morgue operations. |
| Public Health | Responsible for providing support to KCMEO via resource requests and working as a liaison between other divisions of King County government and other local government agencies. |
| Public Health Area Command | Responsible for coordinating Public Health's response efforts. |
| Local Governments | Responsible for activating their own emergency response plans and providing support to KCMEO when incidents occur within their jurisdictions |
| King County OEM | Responsible for coordinating resource and logistical support to KC departments and providing support to cities and special purpose districts when local capabilities have been or are expected to be exceeded. |
| State Department of Emergency Management | Monitor the situation and activate as needed to provide support to King County OEM. |
| State Department of Health | In concert with State DEM, monitor the situation and activate as needed to provide support. |

Coordination of incident site operations is critical and is accomplished through a unified command. If roles and responsibilities of responding agencies have not been predetermined, the on-scene commanders will need to define them at the earliest possible moment.

In some special circumstances other government organizations will assume control over mass fatality response. In such instances KCMEO and Public Health will work directly with the organizations in charge to provide support as needed, and will still activate some or all components of the MFM plan.

**Table 6: Federal Roles**

| Federal Roles | |
|---|---|
| National Transportation Safety Board | Responsible for investigation of overall rail and aviation cases. |
| Department of Justice - FBI | Oversees investigations into cases that might be the result of terrorism, including weapons of mass destruction incidents. |

### E. Policy Decisions

Early on in the mass fatality response, the Chief Medical Examiner, Local Health Officer, Area Commander/Preparedness Section Leader and other subject matter experts will need to consider how to best address some larger policy questions. While these issues will likely require much more information to resolve than is available at the start of an incident, it is crucial that they begin considering them so they can ensure they have the best information available when decisions are needed.

Potential policy issues include:

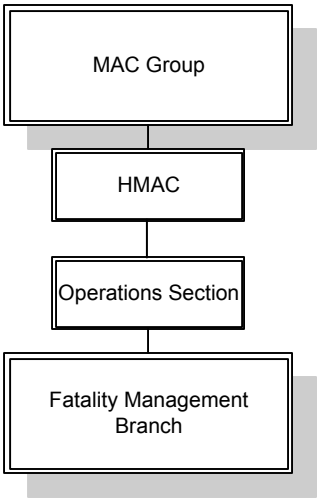
- Activating the Family Assistance Center Functional Annex
- Securing temporary morgue space within or outside of King County
- Coordinating response with other affected counties
- Requesting mutual aid or other assistance
- Size of remains to identify
- Use of DNA for scientific identification
- Disposition of unidentified remains

**Attachments**

Organizational Charts

## VII. Concept of Operations

A. Safety
B. Security
C. Death Investigation
D. Morgue and Disposition Operations
E. Community Responsibilities and Opportunities to Assist
F. Religious and Cultural Considerations
G. HMAC Support to KCMEO Mass Fatality Response
H. KCMEO Continuity of Operations
I. Scenario-Specific Disaster Response Plans
J. Response Demobilization




As part of HMAC response, a Fatality Management Branch will be stood up to provide support to all mass fatality operations, including scene response, morgue operations, public information and family assistance. This includes providing subject matter expertise on the contents of this plan, assisting with procuring supplies and staff, and facilitating discussions with the Chief Medical Examiner, Local Health Officer and other interested parties around important policy discussions. Policy-level decisions will be made by the Chief Medical Examiner and Local Health Officer in consultation with other subject matter experts.

**Table 7: Operations Tasks**

| Operations Tasks | |
|---|---|
| KCMEO | □ Monitor progress of implementation of Death Investigation and Morgue and Disposition Operations components of plan.<br>□ Communicate any concerns to Public Health Area Command.<br>□ Identify and submit resource requests through Public Health Area Command to local OEM or KCOEM. |
| Public Health Area Command | □ Provide resource and information support to KCMEO<br>□ Liaise with local emergency management to provide non-medical support to MEO operations<br>□ Activate and operate call center functions<br>□ Activate and operate FAC<br>□ Coordinate demobilization planning with KCMEO.<br>□ Provide situational awareness updates to partners. |
| Public Health Communications | □ Manage public information and media requests.<br>□ Coordinate public information message development with KCMEO, the Local health Officer, healthcare organizations and other jurisdictions |
| City / County Government | □ Respond to resource requests.<br>□ Coordinate with the JIC and Public Health on messaging. |

## A. Safety

### 1. Public Concerns

The public may have concerns regarding human remains based on misinformation. Public Health will need to counter misinformation with facts about human remains, including direction on the appropriate way to handle remains.

### 2. Worker Concerns and Risks

To ensure the safety of all who respond to a mass fatality incident, a Safety Officer will be present at the scene of all mass fatality operation sites to identify hazards and provide guidance. The Safety Officer will provide direction to recovery workers as to personal protective measures they must take. This will take place via regular briefings on scene.

Responders should undertake standard personal protective measure when handling remains. Further information is outlined in the Safety attachments.

If the remains are contaminated via radiation or biological or chemical agents, and deemed unsafe to be handled by mortuary response personnel, KCMEO death investigators will rely on local HAZMAT or outside resources (e.g. Department of Defense or DMORT-WMD) to decontaminate the human remains, as determined by Incident Command. Only when the remains are considered safe to handle will death investigators and morgue staff members begin the process of identification and determining cause and manner of death. If the bodies cannot be decontaminated, KCMEO will work with family members and the Safety Officer to determine how to proceed with identification.

During a mass fatality incident responders may also find themselves working in physically precarious circumstances, including adverse weather, biohazards, confined spaces, and building debris. These concerns should be addressed ahead of time through training and discussion of expectations and of safety precautions responders should take, and workers should at minimum undertake normal protective measures.

Resources will be made available to address mental health concerns of responders and other fatality management staff members have related to the stress of the tasks they perform. Mental health services for responders will be coordinated through HMAC in partnership with existing services provided by local response organizations such as law enforcement and the fire service.

**<u>Attachments</u>**

OSHA Recommendations for Personnel Handling Human Remains
Personal Protective Equipment for MFI Response

## B. Security

Security will be at the incident scene, holding areas, temporary morgue facilities, KCMEO headquarters and the FAC. KCMEO and Public Health will rely on law enforcement to make necessary arrangements for security, including closing streets, airspace and providing officers or contract officers to various locations.

*KCMEO*
If morgue operations take place at KCMEO facilities, additional security may be needed. Harborview currently provides building security, but additional security resources may be called upon to provide back-up if necessary. If the incident is large enough to stretch beyond initial capabilities, HMAC will work through local emergency managers to coordinate further security resources.

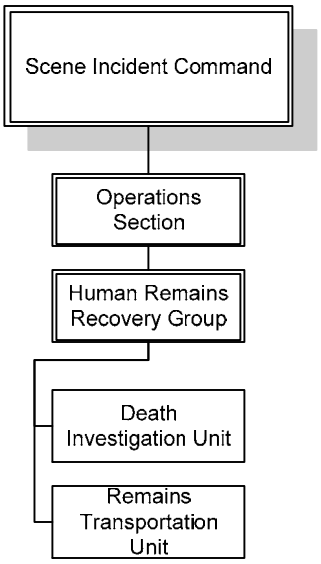
*Other locations*
The agencies responsible for providing law enforcement within jurisdictions will provide security at the incident scene and morgue operations locations. If private security is needed, HMAC will request local law enforcement agency assistance via local EOCs to develop a security plan and select a private contractor.

**Security Objectives**

- Establish and maintain a secure perimeter
- Staff controlled access points
- Provide standby security for bag, body and vehicle searches as needed
- Operate a badge system for access to secure areas
- As needed, provide onsite response capability
- Preserve evidence
- Protect response personnel and volunteers
- Protect the public from potential physical dangers
- Protect the deceased
- Investigate harassment or attempts to defraud victims' families or loved ones
- Escort vehicles transporting human remains or evidence

**Attachments**
Physical Security Assessment
Security Plan Template
Traffic Control Plan Templates

## C. Death Investigation




KCMEO response to the scene will include the same functions it fulfills on a daily basis under normal operating circumstances, but at an expanded level. This will include providing teams to photo-document and map the scene with the assistance of law enforcement and to locate and recover human remains and associated personal effects. Depending on the scale of the event and assessment of resource needs, the response teams may be comprised of additional city, county state, federal and out-of-area groups, such as specialized search and rescue or recovery teams. Requests for resources will be made via HMAC according to standard ICS protocols.

Additionally, in incidents involving chemical, biological, or radiological contamination, local assets including decontamination teams from the local Hazmat units may be used; if resource needs or capabilities exceed local capacity, HMAC may request federal assets through KCOEM, if requested by the scene Incident Commander and law enforcement. These assets may assist with specialized search and recovery and decontamination of remains and personal effects at the incident site.

**The KCMEO responsibilities at the scene include:**

- Investigation (scene evaluation and investigation);
- Search and Recovery (collection and documentation of human remains, property, and evidence at the incident site); and
- Transportation (transportation of human remains, property, and evidence to the incident morgue).

**1. Initial Response**

When KCMEO is notified of a mass fatality incident, staff members work with the Chief Medical Examiner to determine how they will work with Incident Command once they arrive on scene. Part of this initial discussion may involve deploying a senior Death Investigator or pathologist to the scene (or scenes) as soon as possible.

On scene, this representative from KCMEO will report to Incident Command to evaluate the scene from a human remains recovery and identification perspective. This representative will gather information to complete the "Scene Assessment" attachment, which will provide KCMEO and

HMAC with information that will assist in determining possible death investigation resource needs. He or she will also be prepared to advise Incident Command on scene as to what responders should or should not do with fatalities they encounter (e.g. do not remove identification, do not move remains unless necessary, etc.).

Soon after, the Death Investigators will come to the scene to be prepared to begin recovery when law enforcement opens the scene to release the remains. It is the intent of this plan to encourage a KCMEO presence at the incident scene as soon as practical. It is understood that fatality management operations may not commence at the scene for several hours while higher priority life safety or stabilization operations are underway

a. Small and Medium
In all incidents regardless of size the Chief Medical Examiner will assess resource needs via on-scene representatives working with the Incident Command through the scene Operations Section Chief. If necessary, additional death investigation staff may be requested through the Finance and Administration Section of HMAC to assist in scene evaluation and initial response. Staff may include Public Health personnel, PHRC volunteers, or personnel from other county or city agencies to assist with investigation, search and recovery, and transportation of remains.

b. Large and Catastrophic
In large and catastrophic events the Chief Medical Examiner will require significant assistance in managing the initial response to the scene. KCMEO will likely request federal assistance and resources to supplement locally available staff and volunteers. Such requests will be handled by HMAC, which will in turn make requests to King County Emergency Coordination Center (KCECC).

Attachments
MFI Kit List
Needs List
Photo Log
Scene Assessment

**2. Human Remains Recovery & Transport**
After the initial scene assessment is complete and the human remains are released to the care of the KCMEO, death investigators will access the scene and begin field work. They will be assigned to the Operations Section, Human Remains Recovery Group, Death Investigation Unit. Initial steps will include reporting to the incident command, developing a plan ("Death Investigation Action Plan Template"), holding a field safety and procedural briefing, and scene imaging.

It is important to be clear that the Action Plan prepared by the Death Investigation Unit is a tactical plan that can be used to both inform and be informed by the overall scene Incident Action Plan. Its focus is on the work being performed by the Human Remains Recovery Group in the Operations section, and includes locating, documenting, packaging, and recovering all remains and associated property, decontamination of the remains if necessary, setting up a temporary storage facility, and transporting the remains to the morgue for examination.

Detailed and specific information on Human Remains Recovery Strategy Details is discussed in the attachment of the same name.

a. Reporting To Incident Command
   Upon arrival at the scene, the Death Investigation Unit Lead will report to Incident Command to confirm arrival of the medical examiner team and to be briefed on any information relative to field recovery operations, including radio channels available for scene communication.

b. Developing the Death Investigation Action Plan
   The Morgue Incident Commander (discussed below) will work in concert with the Death Investigation Unit Lead to use information from Incident Command and the scene assessment prepared by the initial KCMEO representative on scene to devise a field recovery action plan, per the authority of the Chief Medical Examiner. Items detailed in the action plan include:
   i. Scene Safety
   ii. Search Strategy
   iii. Work Period Duration
   iv. Number and Composition of Recovery Teams
   v. Method and Frequency of Communication Between Teams
   vi. Mapping Technique
   vii. Scene Imaging
   viii. Recovery Procedures
   ix. Location of Holding Area
   x. Transporting Remains to Holding Area and to Temporary Morgue

c. Scene Safety
   The action plan will consider and address accordingly any identified risks to recovery team members' safety during the recovery operation.

d. Search Strategy:
   The search strategy will define the area to be searched, determine the intensity of the search, determine the search pattern, and determine how many search teams to deploy.

e. Work Period Duration
   The work period is defined as the time during which search teams are actively involved in the search and recovery process. Duration of a work period is determined by the working conditions (i.e. in excessively hot weather, work periods would be shorter to allow frequent hydration breaks). There will be multiple work periods in a single operational period.

f. Documentation
   When human remains, items of property, or items of evidence are located they are assigned an MFI number and a flag or stake bearing the number is placed in the ground. At no time will spatially related fragments be considered part of the same individual. Every fragment is assigned its own number. Documentation of each marked item includes photo documentation and written documentation.

g. Field Safety and Procedural Briefing

The Death Investigation Unit Lead will hold a field safety and procedural briefing with all team members to disseminate necessary information.

h. Number and Composition of Recovery Teams

The number of recovery teams is determined by the number of staff available, the size of the area to be searched (specifically the size and number of primary search areas) and any identified time restraints on recovery efforts.

The composition of the recovery teams is dependent on the size of the search area and the staff available to make up the teams. At the very minimum, each team should include: Team Lead; Logger; Photographer;: Bagger; and Transporter. If enough staff is available, additional positions include: Photography logger; Equipment holder and additional Transporters.

i. Method and Frequency of Communication Between Teams

Depending on the number of teams and the size of the search area, teams may be able to communicate easily or may have to rely on radios. If 800 MHz radios are distributed to team leads, each team will need a call designation (i.e. Team 1, Team 2 or Team Alpha, Team Bravo etc) and a designated channel on which to communicate that does not interfere with other components of scene operation. A schedule for status updates with the death investigation unit lead will need to be established.

j. Mapping Technique

Three types of scene mapping are possible, and the method chosen will depend on available resources, size of the scene, and type of terrain. These include Total Station (preferred); triangulation; and grid.

k. Scene Imaging

Scene imaging involves recording overall views of the scene including wide-angle, aerial, 360-degree with a designated photographer to relate items spatially within the scene and relative to the surrounding area. A combination of still photography, videotaping, and other techniques is most effective

l. Locating Human Remains, Property and Evidence

The search strategy, intensity of search, and number of search teams is outlined in the action plan. The Death Investigation Unit Lead will be responsible for maintaining a map of the scene and checking off areas as they are searched.

m. Recovery Procedures

Recovery procedures include determining how MFI numbers will be used if multiple teams are operating simultaneously. Additional considerations for recovery procedures include the order in which documentation will occur, what will be recorded, and whether stakes or flags will be used to mark the field. It also includes the systematic removal of remains, personal effects, and evidence.

If responders are among the deceased, an ad-hoc honor guard may escort their remains when they are moved. A representative of the involved responder agency will be

consulted to plan movements and coordinate honor guard operations. If civilians are among the deceased as well, similar respectful observations should also be undertaken.

i. Decontamination
    - Contaminated remains will not be transported to the incident morgue until they are decontaminated.
    - When remains are contaminated (from a chemical, biological or radiological incident), Hazmat teams and/or other resources will be called in to manage search, recovery, and decontamination of remains at the incident site.
    - Note: If the remains cannot be cleaned after a number of attempts decided by the Human Remains Recovery Group Supervisor in consultation with Hazmat personnel or additional resources brought in to assist, alternative arrangements for disposition of the remains will have to be made. This may include sealing the remains in a container that can be externally decontaminated and which will not be opened again at any time prior to the final disposition in accordance with incident directives.

n. Location of Holding Area
    i. A holding area will be established if necessary to secure remains until transport to the KCMEO (or temporary morgue) can be facilitated. The chosen location should be easily accessible, secure, and not impeding vehicle movement or search efforts. Requirements for a holding area include:
        - A permanent or semi-permanent structure near the incident site. This would include a tent or vehicle(s)/trailer(s).
        - Locked and/or with ongoing security.
        - Ability to screen from public view movement of remains into and out of the holding area.
        - If the holding area is intended to hold remains for a significant period of time, additional considerations include:
            1. Consistent 35-38 F temperature
            2. Shelves (no higher than waist height, unless a lift is available) to store remains. At no time will remains be stacked.
    ii. A holding area at the scene will be used to store remains until they are transported to the morgue. The size of the holding area will depend on the anticipated number of decedents and the duration of storage.
    iii. The Remains Transportation Unit Lead will be responsible for signing remains into the holding area and assigning them to trucks for transport to the morgue.

o. Transporting Remains: General
    i. If remains are to be transported from the secure incident scene to a holding area or temporary morgue, consider requesting assistance in route planning from law enforcement and transportation agencies. A law enforcement escort should be considered to resolve any unexpected traffic delays, provide security and as a gesture of respect for the deceased.
    ii. If contract drivers are used, they will be asked to sign a confidentiality agreement.
    iii. Remains movement will be shared with the Joint Information Center.

p. Transporting Remains to Holding Area
    i. Two possibilities exist for when to transport remains from the recovery site to the temporary morgue/holding area:
        - Bagged items or remains can be transported immediately after documentation provided enough personnel are available to facilitate this
        - Bagged items are left in-situ until the entire search area is covered and then all team members work to transport remains from the scene to the temporary morgue/holding area.

q. Transporting Remains from Holding Area to Temporary morgue
    i. KCMEO scene response vehicles or refrigerated vehicles are parked in a secure area near the site with easy access to load remains.
    ii. Remains that have been bagged and tagged are loaded into the vehicle (never stacked).
    iii. The driver fills in a transportation log at the vehicle is loaded and reviewed for completeness prior to leaving the incident site.
    iv. When not in use, vehicle doors are locked and remains locked while human remains are inside.
    v. The driver transports the remains following an assigned route to the incident morgue with no deviations. A police escort may be arranged.

Attachments
Death Investigation Action Plan Template
Human Remains Recovery Equipment and Supplies
Human Remains Recovery Staging (under revision)
Human Remains Recovery Strategy Details
Transportation Guidelines
Vehicle Log

**D. Morgue and Disposition Operations**

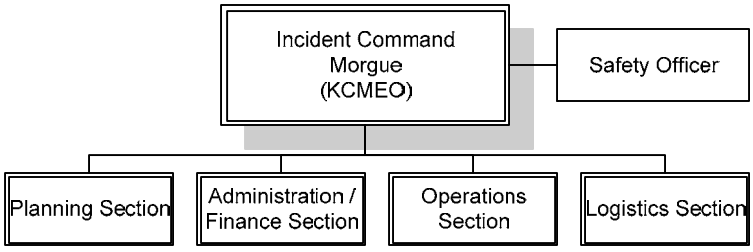
The first location choice for morgue operations for small and medium events is the KCMEO headquarters in Seattle. However, mass fatality morgue operations would only be one piece of what would be taking place at the headquarters, so it is important to use the term "morgue" and not simply "KCMEO" when discussing these operations.

Large and catastrophic events, or small or medium events that render KCMEO headquarters unable to operate, will require the securing of one or more alternate morgue locations. Facilities that can serve this purpose must meet the standards listed in the "Morgue Site Requirements" attachment, especially if DMORT and/or DPMU resources are expected.

Additionally and especially with a catastrophic incident, morgue operations may take place outside of King County while remaining under the Chief Medical Examiner's jurisdiction. The decision to locate a morgue outside of the County will be left to the Chief Medical Examiner, Local Health Officer, and other affected jurisdictions.

**1. Morgue Operations**

The KCMEO establishes morgue operations to ensure the proper collection, labeling, examination, identification, preservation, and transportation of recovered remains. Morgue sites will be established separate from the incident site. Morgue operations will be managed under ICS and will include an Incident Commander, Safety Officer and all General Staff positions (Planning, Operations, Logistics, and Finance & Administration). HMAC will provide resource and information support to Morgue Sites through the Fatality Management Branch within the Operations Section in HMAC.




The Finance Section Chief will coordinate with the Finance Section at HMAC by providing information such as timesheets, costs and inventory information. Additionally, this role will serve to check in morgue staff and answer questions such staff may have regarding the administrative side of the response.

The Planning Section Chief will provide information to HMAC related to Morgue Operations. This includes completing the Situation Status template each operational period and, following approval by the Morgue Site Incident Commander, returning it to the Fatality Management Branch Supervisor in HMAC. This person will also be responsible for reconciling fatality numbers across jurisdictions by working with law enforcement from the respective affected jurisdictions.

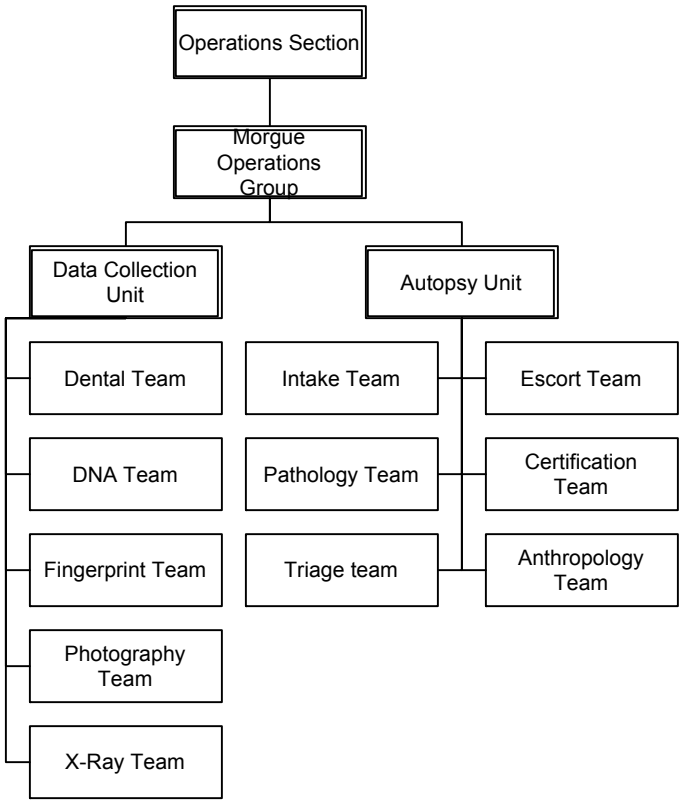
The Logistics Section Chief at the Morgue Site will be responsible for keeping track of and communicating any logistics needs back to the HMAC logistics section. This role will also serve as the on-site contact for support services provided to the morgue by HMAC, such as laundry contracting, feeding and janitorial services.

Prior to the initiation of morgue operations, the Morgue Incident Commander will establish operational objectives for all staff serving in the site, and will make decisions on the following issues in consultation with Operations Section Chief, Morgue Operations Group Supervisor and Morgue Information Processing and Disposition Group Supervisor:

- Staffing of each station (numbers and expertise).
- Shift length and rotation schedule.
- Data base vs. hard copy data entry.
- Number of escorts assigned to autopsy room.
- Tracking method (station log-in vs. record of stations).
- FAC established:
    - How and when updates will be provided to family members.
- FAC not established:
    - Who will speak to next of kin and how is antemortem data collected.

During morgue operations, the Incident Commander for the Morgue Site will address, in consultation with the Chief Medical Examiner for King County, policy issues such as:

- Final disposition of unidentified material (common tissue)
- Final disposition of non-associated property
- Criteria for collecting and analyzing DNA material
- Determining and coordinating with the lead agency for DNA analysis
- Antemortem data collection strategy
- Family coordination
- Family wishes around disposition of body and property




A. Tracking of Mass Fatality Incident (MFI) numbers
When remains are brought in from the field, there are two options for tracking them through the facility:

- Each station maintains a log of MFI numbers processed at that station
- Each MFI number has a log that travels with it and stations are checked off as they are visited.

Remains arriving at the morgue facility can be:

- Whole or nearly whole bodies removed from the scene by KCMEO personnel, tagged with an MFI number, and contained in separate body bags.
- Fragmentary remains removed from the scene by KCMEO personnel, with each fragment bagged separately and tagged with an MFI number, and multiple bags transported in a single body bag.

- Whole or nearly whole bodies arriving from out of county (not KCMEO jurisdiction). The bodies may be individually bagged but may or may not be tagged.
- Fragmentary remains arriving from out of county that may or may not be tagged individually. Remains may be comingled within a single body bag.

In most cases, remains will move through the KCMEO according to the Medical Examiner's Office Facility Flow Chart. (An off-site morgue or use of DMORT services may require a different flow; see DMORT Morgue protocols attachment). Detailed procedures and directions for morgue operations can be found in the Morgue Operations Strategy Details attachments.

Stations include (in order):

B. Intake
Intake occurs when the remains arrive at the KCMEO (or temporary morgue location). The body bag is assigned a body bag number, the body bag or container is opened and initial photographs are taken.

C. Weighing
Each body bag will be weighed in its entirety and the weight recorded on the body bag tag. Body bags will then be moved to the storage area / cooler to await triage.

D. Triage
Triage is the first step in the examination process. The pathologist dictates the body bag number and a description of each MFI number contained within the body bag. Any fragments are separated and receive separate MFI numbers while a scribe records the description of each MFI number. An MFI number could re-enter triage if radiography shows commingled fragments.

Staff at the triage station include two clean (pathologist, scribe) and two gloved (autopsy technician(s) and/or investigator). If staffing allows, an anthropologist will also be assigned to triage to assist in the identification of fragmented material.

E. Radiography
Radiographic examinations are necessary to provide postmortem radiographs for comparison with antemortem clinical radiographs and to detect evidence. The KCMEO operates digital radiography with storage of images in a PACS system. Full body radiographs will be taken when possible, with each image inputted into the computer using MFI number. Films are reviewed and any evidentiary findings or potential identification markers are brought to the attention of relevant staff.

Staff at the radiology station consists of a minimum of one x-ray technician. If staffing permits, a second technician or anthropologist would be preferable.

F. Photography
In addition to the initial photographs taken at intake, each MFI number will be photographed to include an overall photo, close-ups of physical characteristics (e.g. scars, tattoos, dentition, etc.); personal effects and items of evidence. All photos are stored by MFI number.

Staff at the photography station consists of one photographer. Escorts are used to handle the remains and position for photo documentation.

G. Property/Evidence
The KCMEO will safeguard the valuables and property of decedents to ensure proper processing and eventual return to the legal next of kin. All evidence on or associated with remains will be collected, inventoried and released to the appropriate law enforcement agency.

Staff members at the property/evidence station include a minimum of one clean individual to handle logging and one gloved to handle the evidence and property.

H. DNA
The DNA station is where samples are obtained for DNA testing for the purpose of establishing positive identification or matching fragments. A DNA sample will be taken for each MFI number by qualified staff capable of assessing the suitability of the sample. Preferred samples include blood, soft tissue and hard tissue.

Positive identification by DNA analysis is often cost and time prohibitive. All effort should be made to establish identification of bodies and body parts by other means before reliance on DNA.

Staffing of the DNA station includes a minimum of one clean individual for logging specimens and one gloved for doing the extraction.

H. Pathology
The Pathology station is where complete or partial autopsies are performed. The decision to do a complete or partial autopsy resides with the pathologist responsible for death certification.

Staffing of the pathology station is dependent on volume. Each station staffed requires a minimum of one pathologist and one autopsy technician.

I. Anthropology
The Anthropology Station provides comprehensive forensic anthropological documentation of human remains. This includes examination of fragmented, incomplete, charred, and commingled remains.

Staffing of the anthropology station requires a minimum of one anthropologist.

J. Fingerprints
The Print Station is where finger/palm/foot printing of the remains is performed. The KCMEO is trained to take prints with ink. If additional methods are necessary, print technicians from law enforcement agencies will be called upon for assistance. Procedures for taking prints are outlined in the Investigators manual, section 7.

Staffing of the fingerprint station requires a minimum of two fingerprint technicians.

K. Dental
The Dental Section performs the dental autopsy, including dental charting and radiography. Dental remains can be referred to the dental section as fragments of dentition or as full or partial dentition

still contained in the body. The dental section will clean remains to facilitate charting and radiography, visually examine and chart dentition, and examine radiographs.

Staffing of the dental station requires a minimum of one clean person (preferably an odontologist who can chart the dentition, make data entry and handle the NOMAD portable x-ray unit) and one gloved person to manipulate the specimens.

L. Storage

Storage is the refrigerated area where remains that have been processed are held until release. All human remains (identified, unidentified, and common tissue) will be stored with an easily seen label indicating the MFI or case number. Should additional storage be needed outside the KDMEO headquarters in Seattle, HMAC Logistics will be responsible for securing that location according to the requirements detailed in the Guidelines for Cities / Guidelines for Healthcare facilities attachments.

M. Embalming

Use of embalming is likely to occur only with DMORT involvement. Embalming involves disinfection, preparation of the remains, and minor reconstructive surgery procedures for each body or body part when authorized by the NOK or appropriate legal authority.

N. Identification

There are two components to identification in a mass fatality event:

- Establishing positive identification of the decedent
- Matching MFI numbers to a single decedent

To accomplish this, there are three phases of identification:

- Antemortem data collection: Data on presumed decedents is obtained from family members either through the FAC or through the investigative section of the KCMEO. The data is either entered directly into the antemortem database, if available, or recorded on a decedent information form. Antemortem data collection also involves the following:
    - Locating dental and medical records by telephone or fax. Obtaining any and all antemortem dental or medical radiographs and relevant medical/dental charting either through pick-up or Federal Express delivery.
    - Entering dental charting directly into the antemortem database, if available, or transcribing onto the KCMEO Antemortem Dental Data form.
    - Evaluating medical radiography for utility in positive identification. Requesting additional postmortem radiographs, if necessary to match the angle and view of the antemortem films.
    - Scanning non-digital image information (radiographs and photographs).
- Postmortem data collection: Postmortem data including physical description, medical radiographs, dental charting and radiographs, documentation of scars/marks/tattoos, and determination of biological profile is collected during the postmortem examination process.
- Comparison Section: The comparison section is responsible for comparing antemortem and postmortem data to establish positive identification of a decedent and to assign as many MFI numbers to an individual decedent as possible. Determination of positive identification is certified by the Chief Medical Examiner with consultation with representatives from

pathology, anthropology, odontology, radiology, prints and DNA. Positive identification of decedents is achieved through:

- Prints.
- Comparative dental radiography.
- Comparative medical radiography.
- Distinctive physical characteristics or tattoos.
- Serial numbers on permanently installed devices.
- DNA.
- Preponderance of circumstantial evidence (including combinations of photo comparison, associated personal effects etc).

Positive identification of individual body parts or fragments is accomplished by the above methods as well as by exclusionary principles.

Body parts or fragments that cannot be positively identified are labeled "common tissue" and subsequent disposition will be in consultation with victim/family groups and consistent with laws and resources.

Once positive identification is achieved, death notification is initiated either through direct contact with family members or through the FAC.

O. Grouping MFI's into Case Numbers
Once positive identification is established, a KCMEO case number is assigned to the decedent and all MFI numbers identified to that decedent are recorded in the case. Likewise, body bags containing each identified MFI number are combined for release to the funeral home.

**Attachments**
Autopsy Station Set-Up
Communications and Technology Requirements
DMORT Morgue Protocols
Forms for Examination Group
Mass Fatality Morgue Services Flow Chart
Morgue Cover Sheet
Morgue Operations Action Plan
Morgue Operations Strategy Details
Morgue Services Equipment and Supplies
Morgue Site Assessment
Morgue Site Requirements
Morgue Staffing Guidelines
Surge Capacity (under revision)
Viewing Guidelines

**2. Decedent Population and Condition of Remains**
Identifying human remains and returning the deceased to the next of kin is the top priority of the KCMEO, and it strives to do this with the utmost respect and speed. Public Health will communicate this to family members via the Family Assistance Center, while also reiterating why the identification process may take more time than expected.

a. Decedent Population

The list of potential decedents is of great importance to those identifying human remains. There are two types of populations: closed and open.

- A closed population is the result of an incident in which a list of those involved is available. It is most often associated with commercial airline incidents, as tickets are purchased ahead of time and security checks confirm the identities of all who were aboard the aircraft.
- An open population is the result of an incident where the list of victims is unknown, and is the more likely scenario the KCMEO will encounter. It is common in non-aviation transportation incidents, earthquakes, and other large-scale disasters. In these situations the manifest is compiled through missing persons reports and information provided by those familiar with the location where the incident takes place.
- It is likely that an incident may result in a mixed population, where there are some known and some unknown victims.

b. Condition of Remains

The remains may be intact (whole bodies) or not intact (fragmented). Whole bodies are likely in incidents like pandemic flu, while fragmented remains are possible in transportation incidents, building collapses and other sudden or violent incidents.

c. Identification Process

The speed of the identification process is dependent on the size of the event, the resources available, the type of event and the condition of the remains. In an incident with a closed population with whole bodies, staff members focus on matching the remains to the list of victims. In an incident with a closed population with fragmented human remains, staff members are focused on identifying as many of the fragments as possible and matching them to the list of victims.

Open populations are more challenging as some people who are missing and feared dead may be receiving treatment for injuries at hospitals or are otherwise not harmed. In an incident with whole bodies, the number of victims is clear and can be matched to missing persons reports. In an incident with fragmented human remains and an open manifest, KCMEO must focus on missing persons reports to try to determine how many victims there are, and then match fragments to each other and eventually to antemortem data collected through the Family Assistance Center.

d. Family Considerations

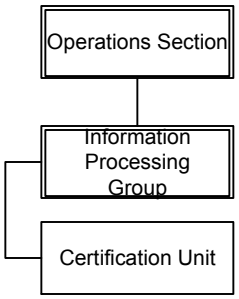
There are two parts to identification that are of strong interest to family members: determining that someone was a victim and identifying that person among the remains. In incidents with highly fragmented human remains the KCMEO will discuss with family members the process for indentifying multiple remains from the same individual and address how family members would like the notification process to be handled after initial confirmation that their loved one was one of the victims.

In instances with highly fragmented human remains, KCMEO will need to make a determination as to the specifications for remains identification. As resources are likely to be limited in such instances, KCMEO may need to set a size limit on identifying extremely small fragmented remains. Additionally, there may be situations where remains are comingled and unidentifiable. KCMEO will work with families to address the concerns that arise in those instances.

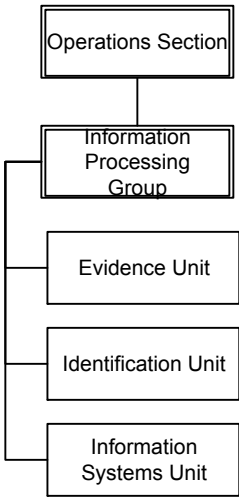
In all circumstances families will be notified of such decisions prior to the information being shared with the media.

**Attachments**
Linking MFI to Missing Persons
Methods of Identification

**3. Death Certificates and Disposition Permits**
During a mass fatality incident, the number of death certificates to be completed and permits for burial or cremation to be issued may be so large that it poses a challenge to normal systems operated by the Office of Vital Statistics within KCMEO. In that instance, KCMEO and Public Health will work with the Washington Department of Health to determine whether temporary permits can be issued while the backlog of certified copies is cleared to allow families to move their loved ones to their final resting places. Vital Statistics staff members will work with the FAC to ensure that the issuing of certificates and permits is coordinated.




**4. Mass Fatality Information Systems**




Via Excel:
This is the system that will be used in an event without DMORT assistance:

- FAC staff:
    - Collect all antemortem information and input into master Excel spreadsheet.

    - Make copies/scan all information (antemortem data forms, dental records, medical records, postmortem information) and keep a paper case file as well as a digital case file for every missing person.
    - Code all case files according to the Family Liaison Team to which the family is assigned.
- Morgue Identification Team
    - Input all postmortem information into a separate tab of the master Excel spreadsheet. Information to be inputted includes:
        - Where remains (whole or fragmented), property and clothing originated at the incident scene
        - Information on remains gathered during examination and autopsy process
        - Where all remains, property and clothing are stored
        - Where all remains, property and clothing are ultimately released
    - Compare antemortem and postmortem data.

Via Database:
When a computer data system beyond Excel is secured, information will be stored through that system, which should serve to reduce the time needed to.

If DMORT is brought in to assist with an MFI of a medium or larger size, their data management system (VIP) will be used to assist in identifying decedents. That system has the ability to search and match 800 different item categories, such as dental x-rays and clothing.

Attachments
MFI Number Tracking

**E. Community Responsibilities and Opportunities to Assist**

There are many different groups who can both provide assistance and information as well as groups that will be requesting information when it may not yet be publically available.

1. Medical and Dental Offices
When a person is missing and suspected to be a victim of an MFI, family members will be asked to provide contact information for the medical and dental offices of the missing person so that FAC or KCMEO staff can contact them to secure items that might be useful, including medical and dental imaging, medical tests, and blood work. Per RCW 70.02.050 the KCMEO has the authority to access medical/dental records for the purpose of investigation of death without family consent, and according to the King County Ordinance #5057, the Chief Medical Examiner has the authority to subpoena all medical and dental records, documents, and/or specimens that are necessary for the full investigation of any case

2. Funeral Homes
Families of victims choose the funeral home that will manage the final disposition of their loved ones, and once that decision is made, funeral homes should follow standard operating procedures to manage the disposition of remains. Funeral homes should contact the KCMEO directly or via the FAC to schedule a time to collect the remains. Depending on the nature of the incident they may

also need to work with KCMEO and the family to determine how future identified remains will be handled.

3. Owners and Operators of Incident Locations
In nearly every possible incident there will be a building owner or a transportation operator who may be able to provide crucial information as to the potential number of victims and their identities. Owners of buildings or transportation vessels where incidents have occurred should be prepared to provide electronic or paper versions of floor plans or schematics and information on building or vehicle occupants.

4. Healthcare Facilities
Depending on the size of the incident, KCMEO may ask that healthcare facilities manage decedents onsite until they can be removed and taken into custody. As such, facilities need to be prepared with their own mass fatality plans. Attached are guidelines and a template to facilitate the creation of these plans.

5. Other Organizations
Requests for information from other government, private industry or non-profit agencies will be managed through HMAC to local emergency operations centers or directly to appropriate agencies. If requests for information will involve coordinating with elected officials, HMAC will activate the External Affairs Liaison to facilitate those requests.

6. Faith and Cultural Organizations
If requested, provide assistance to families and advise the KCMEO on handling remains.

7. Law Enforcement
In addition to the roles of law enforcement listed previously, including providing security at all scenes and managing the missing persons operations, Law Enforcement will also be responsible for confirming fatality numbers with KCMEO. For larger incidents spanning multiple cities, the respective law enforcement agencies will be responsible for working with the Morgue Planning Section Chief to confirm fatality numbers.

**Attachments**
Body Bag Distribution
Death Occurring in a Healthcare Facility Flow Chart
Decedent Information Tag
Decedent Information Form
Dry Ice Distribution
Healthcare Fatality Management Guidelines
Patient Identification Form
Personal Effects Tracking Form

## F. Religious and Cultural Considerations

Family and friends of victims and missing persons may have concerns about the treatment of the decedents, including worries that religious and cultural traditions will not be upheld. While the KCMEO will always treat each victim with respect, it may not be possible to accommodate all

religious and cultural requests. Many factors affect this ability, including the number and condition of human remains.

The FAC plan sets out processes for addressing family member concerns by engaging the assistance of religious representatives from affected communities. Information regarding special requests related to the disposition and treatment of the remains will be communicated by FAC representatives directly to KCMEO morgue operations staff.

**Attachments**
Religious/Cultural Considerations – UK Document
Spiritual Advisor Contact Information

### G. HMAC Support to KCMEO Mass Fatality Response

#### 1. Logistics

The Logistics Section within HMAC will provide logistics support to the human remains recovery teams and morgue operations via the processes outlined in the HMAC ESF 8 Basic Plan and EOC functional annex. The Section will work with any activated EOCs, as well as KCOEM, to secure needed supplies, equipment and services. This includes ensuring the basic needs of staff are met, including providing food and water at the scene and morgue.

**Table 8: Potential State Resources**

| Potential State Resources | |
|---|---|
| Washington State Search and Rescue | □ Teams to search for victims and collect evidence |
| Washington State Patrol | □ Missing and Unidentified Persons Unit |
| National Guard | □ Fatality Search and Rescue Team<br>□ Region X National Guard Fatality Search and Rescue Team<br>□ CBRNE Enhanced Ready Force |
| Various Agencies | □ Cadaver Dogs |

**Table 9: Potential Federal Resources**

| Potential Federal Resources[4][5] | |
|---|---|
| Department of Homeland Security (DHS) | □ Emergency Response Teams<br>□ Catastrophic Incident Coordination<br>□ Stafford Act Funding |
| Department of Health and Human Services | □ DMAT – Disaster Medical Assistance Team<br>□ DMORT – Disaster Mortuary Operational Response Team<br>□ FMS – Federal Medical Stations<br>□ US Public Service Corps<br>□ DPMU – Deployable Portable Morgue Unit |

[4] HHS Fatality Management Concept of Operations
[5] http://www.fas.org/irp/doddir/dod/jp4_06.pdf

| | |
|---|---|
| | □ Federal Family Assistance support team |
| Department of Defense | □ Armed Forces Institute of Pathology (Dover, DE)<br>□ US Army Central Identification Laboratory<br>□ Mortuary Affairs Assistance |
| FBI / DOJ | □ Evidence Response Team Unit<br>□ Disaster Squad<br>□ Critical Incident Response Group<br>□ Laboratory Services<br>□ Hazardous Materials Response Unit<br>□ Office for Victim Assistance |
| NTSB Office of Transportation Disaster Assistance | □ Technical assistance for victim identification<br>□ Family assistance coordination during legislated transportation incidents |
| Department of Veterans Affairs | □ Bury eligible veterans<br>□ Provide advice on interment methods<br>□ Medical record archives |
| U.S. Coast Guard | □ Expertise related to water incidents |
| Various Agencies | □ Incident Management Teams |

In an incident that is medium in size or larger, the County may need to call on outside organizations to provide disaster mortuary assistance. This may include assets from other counties, state agencies, other states, or federal assets. Requests for state or federal assets will follow standard resource ordering protocols through HMAC to KCOEM and then to the State Emergency Operations Center.

One commonly discussed asset is the Disaster Mortuary Operational Response Team. In incidents without a Stafford Act declaration, it is likely that the state will be responsible for the costs associated with bringing in the federal DMORT, or any of the increasingly prevalent state DMORT-type teams.

**Attachments**
Human Remains Recovery Logistics
Morgue and Disposition Operations Logistics
NTSB Guide to Supporting Aviation
Process for KCMEO to Request Assistance
State and Federal Assets and Locations

**2. Planning Section**
The Planning Section within HMAC will provide support as outlined in the HMAC guidelines, serving primarily to manage documentation and maintain situational awareness. The section will also work with the Planning Section Liaison located at the morgue to manage information gathering.

In many circumstances at the start of operations information on the reporting of deaths in the media will not match what has been reported to or confirmed by the KCMEO. In order to ensure that the response to the incident is adequate it is crucial that localities report this information as early in the incident as possible. To assist this process, the Planning Section will hold a conference call early in

the response to address issues in multi-jurisdictional incidents. The call will serve to gain situational awareness as well as push information out to city emergency managers.

Attachments
Conference Call Agenda
Rumored Fatalities Grid

**3. Finance and Administration Section**
The Finance and Administration Section within HMAC will provide support to the KCMEO and Morgue Sites as outlined in the HMAC ESF 8 Basic Plan and EOC functional annex. Specific responsibilities of the Finance and Administration Section include mobilizing staff and volunteers to fill resource requests, time sheet reconciliation, cost accounting, and coordination with Public Health Human Resources Section on labor issues or Public Health employee mental health concerns.

All volunteers directed to respond to a KCMEO facility in support of the response will initially report to a Public Health Assignment Center (PHAC) for check-in and processing. HMAC will activate and operate the PHAC. At the end of the day all volunteers will return to the PHAC and check out before returning home.

KCMEO may request, through HMAC, the assistance of Public Health Reserve Corps surge teams consisting of volunteers who have been trained in specific aspects of mass fatality response, including death investigation, autopsy and administration. Additionally, HMAC has the ability to call upon Medical Reserve Corps members registered in neighboring counties via statewide mutual aid agreements. It is expected that any incident larger than a small one will require additional staff.

Any staff not already assigned to Public Health Preparedness Section or KCMEO must be requested through HMAC. They are not to self-deploy, nor is an entity other than HMAC to request them.

**Attachments**
Confidentiality Agreement
Death Investigation Staffing Chart
Job Action Sheets
Morgue Staffing Chart
Overall Staffing Plan
Staff Request Form

## H. KCMEO Continuity of Operations

An MFI may occur that renders KCMEO headquarters inoperable. The most likely situation in which this would take place is a large earthquake that impacts the structural integrity or utility supply of Harborview Medical Center. In such instances, the MFM plan will be implemented in conjunction with KCMEO's Business Continuity plan, also known as the Medical Examiner's Emergency Operations Plan. This plan is maintained by KCMEO directly.

Additionally, even if KCMEO headquarters are not impacted by the MFI, KCMEO operations will need to continue as normal outside the mass fatality response. Daily operations, including death investigation, must continue to ensure KCMEO fulfills its statutory obligations. Surge teams may be

called upon to fill the regular KCMEO roles, freeing staff to respond to the MFI. This includes not only administrative tasks, but also death investigation. If the MFI morgue is the KCMEO office, a schedule will be established by the KCMEO Planning Section to ensure that non-MFI deaths are examined during the operational period as well. PHRC currently has a fully trained Death Investigation Response team and is in the process of training an Autopsy Response team.

**References**
Medical Examiner's Emergency Operations Plan

## I. Scenario-Specific Disaster Response Plans

While the goal of this plan is to be widely applicable and address the most likely mass fatality incidents, there are types of incidents that will require specific and potentially different response actions. These may include pandemic outbreaks, contaminated decedents, and incidents taking place in locations such as Lake Washington or Elliot Bay. If such an incident occurs, staff should refer to the relevant attachments to ascertain what additional protocols and steps need to be implemented to properly address the issues should such incidents raise.

**Attachments**
Managing Increased Numbers of Deaths
Managing Contaminated Decedents: Biological, Radiological, Chemical, and Nuclear
Managing Incidents in Large Bodies of Water or On Board Ships
Managing Incidents with Large Numbers of Missing and Presumed Dead, Bodies Unrecoverable

## J. Response Demobilization

Deactivation will commence when the Chief Medical Examiner (or designee) has determined that operations are returning to normal and no longer require the daily support of HMAC. This does not preclude the continuation of long-term response aspects, including delayed identification of human remains or case management services for family members of missing persons or decedents.

**Table 10: Demobilization Tasks**

| Demobilization Tasks | |
|---|---|
| KCMEO | □ Determine that outstanding issues can be addressed via normal operations, including regular working hours and staffing levels.<br>□ Work with Public Health Area Command on transition plan.<br>□ Begin After Action Reviews.<br>□ Provide opportunities for staff to debrief with King County mental health providers. |
| Public Health Area Command | □ Identify organization to continue any long-term case management.<br>□ Establish schedule for providing updates on outstanding issues.<br>□ Set transition plan and communicate plan to participating |

| | |
|---|---|
| | agencies.<br>□ Oversee After Action Review process.<br>□ Transition Joint Information Center call center to normal media relations operations.<br>□ Transition family inquiries to KCMEO. |
| Public Health Communications | □ Publicize the closing of Family Assistance Center |

## VIII. Guidance for Cities

Throughout this plan the general assumption is that the incident is taking place in a contained location or locations, such as a building collapse, a transportation incident, or other situation which easily lends itself to traditional on-scene incident command. However, it is important to note that in some situations, such as an earthquake or pandemic, traditional incident and scene control will not be maintained. In those instances Public Health recognizes that members of the community may become actively involved in assisting with the removal of the deceased, either by taking care of the deceased within their homes until the medical examiner is available, or, in locations that may be temporarily cut off from infrastructure, by setting up temporary morgues within the community.

**Assumptions**

- KCMEO and Public Health will first seek resource assistance by contacting local emergency operations centers. If they are not able to assist, the localities will work with KCOEM to secure the resources.
- Localities will not have all resources needed to provide support for Medium, Large and Catastrophic incidents.
- Regardless of where within the County the incident occurs, KCMEO and Public Health retain the duties outlined in this plan, including responsibility for standing up a Public Information Contact Center to support inquiries around missing persons and opening a Family Assistance Center.

**City Government Tasks – Pre-Incident**

The following tasks should be undertaking in anticipation of any mass fatality incident, not just those that might result in limited KCMEO resources.

- Ensure that the local comprehensive emergency management plan includes a section on mass fatality incidents in line with the information provided in this plan.
- Have processes in place to manage resource requests that may come from within the city and from KCMEO and/or Public Health.
- Identify staff members who could serve as liaisons to KCOEM and HMAC.
    - Compile contact list for these staff members and include in comprehensive emergency management plan.
- Ensure staff members are familiar with the King County Mass Fatality Management Plan.
- Consider working with other cities to determine locations for potential regional temporary morgues, using the "Morgue Site Assessment" attachment as guidance. KCMEO staff will be available to provide subject matter expertise on a limited basis as well.
- Identify potential locations for off-site morgues to be opened by Public Health using the "Morgue Site Assessment" attachment as guidance. KCMEO staff will be available to provide subject matter expertise on a limited basis as well.

- Identify community members who could help with reception center and temporary morgue operations, such as spiritual care workers, mental health professionals, interpreters, Community Emergency Response Teams, local security assets, community policing groups, Rotary and other volunteer organizations and encourage them to register with the Public Health Reserve Corps.
- Identify community assets (areas that might be able to serve a mass fatality response purpose) and vulnerabilities (areas where a large number of fatalities might result from a catastrophic incident like an earthquake), including hospitals, nursing homes, adult care homes, schools, community centers, sports facilities and funeral homes.
- Identify and begin to address issues unique to locality (e.g. isolation, islands).
- Plan for use of body bags or other materials that can be used to contain human remains. Know where your body bags are located, how many you have and what condition they are in.

**City Government Tasks – During the Incident**

- Notify KCMEO and Public Health if an incident has taken place within your jurisdiction.
- Activate local comprehensive emergency management plan.
- If requested, provide non-medical resource support to KCMEO operations.
- If requested, provide liaison to KCOEM or HMAC
- Participate in interagency meetings and conference calls to discuss strategy and tactics as needed.
- Have local JIC refer media requests regarding the MFI to Public Health Public Information Officers.
- Refer inquiries about missing or deceased persons to Public Health call center once established.
- Implement local mass fatality plan if directed by KCMEO.
- Ensure that workers have access to and are made aware of services to assist with managing the stress and trauma associated with working in mass fatality incidents.

**City Government Tasks – Public Messaging**

- PHSKC will serve as a main developer of content to be shared publicly for mass fatality incidents in King County. Materials will be made available by the PHSKC Communications Team to cities providing information to residents, including managing bodies at home, KCMEO procedures, and cultural considerations.
- Only KCMEO will establish and report fatality numbers; cities should avoid reporting unconfirmed estimates.
- All media calls should be referred to the King County Joint Information Center (JIC) or, if a JIC has not been opened, to PHSKC PIOs.

**In Extreme Situations**

There may be times when cities will need to care for the deceased until KCMEO is able to respond to the scene. Cities should only undertake fatality management operations when directed by KCMEO or in such catastrophic situations when it is impossible to reach KCMEO directly.

There are three scenarios that could result in KCMEO being unable to respond to a city in a timely manner:

- A mass fatality incident has occurred in one jurisdiction and KCMEO does not have the resources to send staff to respond to recover non-disaster-related deaths in other jurisdictions.
- There is a mass fatality incident within a city but the city is isolated due to the nature of the incident (e.g. infrastructure breakdown after an earthquake).

- There is a catastrophe throughout the region.

Cities should refer to the attachment "Catastrophic Fatality Management: Guidelines for Cities" for detailed information on actions to be taken should cities be instructed to engage directly in fatality management operations.

Attachments
911 Guidelines (under revision)
Body Bag Cache procedure
Catastrophic Fatality Management Guidelines
Cities Remains Procedure Flow Chart
Deaths Occurring Outside a Healthcare Facility Flow Chart
Decedent Identification Tag
Decedent Information Form
Personal Effects Tracking Form

## IX. Mutual Aid

Mass fatality incidents may occur in neighboring jurisdictions that overwhelm local capabilities. Consequently, Public Health and KCMEO may be called upon to provide assistance. The Leadership, as referenced in the "notification" section of this plan, will discuss how to move forward in providing assistance. This may require partial implementation of this plan, including activation of the HMAC and calling upon additional staff to report to the scene outside of King County. HMAC staff will work with staff from the local jurisdiction, as well as representatives from the state, to address questions related to funding of operations and liability concerns.

## X. Public Communications

There will be strong media interest in any mass fatality incident. Members of the public will want to know where to go to get information on missing or deceased family and friends. PHSKC serves as the lead agency in King County for developing public messaging content during a mass fatality incident related to human remains recovery, morgue operations and the Family Assistance Center. All King County jurisdictions will coordinate through a Joint Information Center (JIC) or, in the absence of a JIC, with PHSKC, to ensure consistency of messaging.

### A. Communicating Directly with Family and Friends

All releasable information will first be provided by KCMEO to the relatives and friends of potential victims before being shared with the media. KCMEO will coordinate with PHSKC Public Information Officers to provide information on the specifics of the incident to the friends and family, including expected duration and any unique challenges, as soon as reasonable, and prior to releasing the information to the media. In addition to in-person discussions with family members, PHSKC will utilize existing means (e.g. website, press releases) to share information related to the incident, including the recovery process, the identification process, and the release of decedents to their families, so families can have the information firsthand. PHSKC will also oversee the Call Center. If a FAC is activated, KCMEO will coordinate with the PHSKC PIO assigned to the FAC to communicate this information.

### B. Public Information Contact Center

Following an incident HMAC may activate a Call Center to answer queries from the public. The Call Center will consist of a traditional PICC (Public Information Contact Center) and a Missing Persons Call Center. The PICC will serve to answer questions related to the overall incident, while the latter will provide a critical communications link to families and members of the public who are seeking information about missing or deceased loved ones and FAC operations. The Call Center will be activated as soon as possible following an incident, ideally within two hours, and will operate 24/7 in the initial phases of the response. Information provided will include:

- Description of the FAC, including who should make use of it
- Description of how the FAC process will work
- List of questions that may be asked of family members
- List of items that family members may be asked to provide to FAC staff to assist in identification
- How to access information not related to healthcare

**C. Media Management**

All media will be directed to contact the King County Joint Information Center (JIC). If a JIC is not opened, media will be directed to the PHSKC PIO. KCMEO will not take any media calls regarding the mass fatality incident directly; however the KCMEO media line will be operational as always for non-disaster-related KCMEO operations. All information related to the mass fatality recovery process, including human remains recovery, morgue operations, FAC operations, and total fatality numbers will be provided directly by PHSKC PIOs. PIOs from cities within King County should also refer media requests for information directly to PHSKC.

While mass fatality operations are underway at the incident scene, PHSKC Communications will be in communication with the PIOs from the responding agencies to provide message content and coordinate as needed.

In order to protect the dignity of the decedents and show respect for the families and friends of the victims, PHSKC will provide as much information to the media as possible while reiterating the sensitivity of the situation.

In order to facilitate information management, a press release template has been prepared for use by the Communications Section. Additionally, a JIC template has been created to consolidate information for daily briefings, press releases and JIC and Call Center phone calls.

**D. Discussing Number of Decedents**

Deaths related to the mass fatality will be reported daily at a regular press briefing, and will include estimated and/or confirmed deaths, positive identifications, and the names of those whose next of kin have been notified. Deaths that occur daily and are not associated with the mass fatality incident will be reported using normal systems maintained by the KCMEO. All calls received outside the regular press briefings will be managed by PHSKC PIOs.

**Attachments**

Communications Template and Cheat Sheet
Draft Missing Persons Call Intake Form (under revision)
Initial Press Release Components
JIC Reporting Template and Cheat Sheet
Media FAQ Sheet

Messaging Tips

## XI. Authorities

King County Ordinance #2878 and the Revised Code of Washington RCW 68.50.010 provide the legislative foundation for the office and function of the Medical Examiner. King County Ordinance #2878 authorizes the Medical Examiner to assume jurisdiction over human remains, perform autopsies, and other functions authorized by the RCW 68.50.010. Additionally, the Medical Examiner is authorized to institute procedures and policies to insure investigation into the deaths of persons so specified to assure the public health. Washington State laws delineate which classes of death are to be investigated.

RCW 70.02.050: The KCMEO has the authority to access medical/dental records for the purpose of investigation of death without family consent

King County Ordinance #5057: The Chief Medical Examiner has the authority to subpoena directly all medical and dental records, documents, and/or specimens that are necessary for the full investigation of any case, provided the medical and dental providers are located within the state of Washington.

Per RCW 68.50.010 the following cases must be reported to the KCMEO:

1. Persons who die suddenly when in apparent good health and without medical attendance within thirty-six (36) hours preceding death.
    - This category includes:
        - Sudden death of an individual with no known natural cause for the death;
        - Death during an acute or unexplained rapidly fatal illness, for which a reasonable natural cause has not been established;
        - Deaths of individuals that were not under the care of a physician;
        - Deaths of persons in nursing homes or other institutions where medical treatment is not provided by a licensed physician.

2. Circumstances indicate death caused entirely OR IN PART, by unnatural or unlawful means.
    - This category includes, but is not limited to:
        - Drowning, suffocation, smothering, burns, electrocution, lightning, radiation, chemical or thermal injury, starvation, environmental exposure, or neglect;
        - Unexpected deaths during, associated with, or as a result of, diagnostic or therapeutic procedures;
        - All deaths in the operating room whether due to surgical or anesthetic procedures;
        - Narcotics or other addictions, other drugs including alcohol or toxic agents, or toxic exposure;
        - Death thought to be associated with, or resulting from, the decedent's occupation. This includes chronic occupational disease such as asbestosis and black lung;
        - Death of the mother caused by known or suspected abortion;
        - Deaths occurring from apparent natural causes during the course of a criminal act, e.g., victim collapses during a robbery;
        - Deaths that occur within one year following an accident even if the accident is not thought to have contributed to the cause of death;

        - Death following all injury producing accidents, if recovery was considered incomplete or if the accident is thought to have contributed to the cause of death, (regardless of the interval between accident and death).

3. Suspicious circumstances.
    - This category includes, but is not limited to deaths under the following circumstances:
        - Deaths resulting from apparent homicide or suicide;
        - Hanging, gunshot wounds, stabs, cuts, strangulation, etc.;
        - Alleged rape, carnal knowledge, or sodomy;
        - Death during the course of, or precipitated by, a criminal act;
        - Deaths that occur while in a jail, prison, in custody of law enforcement, or other non-medical public institutions.

4. Unknown or obscure causes.
    - This category includes:
        - Bodies that are found dead. (See criteria #1 above);
        - Deaths during or following an unexplained coma.

5. Deaths caused by any violence whatsoever, whether the primary cause or any contributory factors in the death.
    - This category includes but is not limited to:
        - Injury of any type including falls;
        - Any deaths due to, or contributed to, by any type of physical trauma.

6. Contagious disease.
    - This category includes only those deaths wherein the diagnosis is undetermined, and a contagious disease, which may be a public health hazard, is a suspected cause of death.

7. Bodies that are not claimed.
    - This category is limited to deaths where no next of kin or other legally responsible representatives can be identified for disposition of the body.

8. Premature and stillborn infants.
    - This category includes only those stillborn or premature infants whose birth was precipitated by maternal injury, criminal or medical negligence, or abortion under unlawful circumstances.

In King County all deaths that result from any natural or human caused emergency or disaster are reportable to the King County Medical Examiner.

Per the National Transportation Safety Board (NTSB) Reauthorization Act of 2006 (enacted December 21, 2006[6]) the NTSB has authority over aircraft accidents, railway accidents with fatalities, pipeline accidents with fatalities, and highway accidents (selected in cooperation with the state). § 1134 and § 1136 provides direction to the NTSB to conduct autopsies and provide assistance to families.

[6] http://www.ntsb.gov/alj/NTSB_statute.htm

## XII. References

NYC Mass Fatality Management Plan
Santa Clara APC Toolkit
DMORT SOP

## XIII. Public Health Emergency Preparedness Capabilities

Emergency Operations Coordination
Emergency Public Information and Warning
Fatality Management

## XIV. Training & Exercises

It is crucial to the success of this plan that staff members be regularly trained in its implementation, and that table-top and full-scale exercises that might have a fatality component include the response as outlined in this plan. It is also crucial that the plan or parts of the plan be shared with those organizations that are expected to play a part in mass fatality response and management.

Over the next three years:

- Public Health Preparedness Staff will receive an orientation of the plan each time significant revisions are made.
- Potential mass fatality response staff, including PHRC volunteers, KCMEO staff, and death investigation and autopsy response team members, will receive topical training on different sections of the plan.
- Facilitated discussions or table-top exercises will be scheduled at regular intervals to validate different components of the plan.
- A functional or full-scale exercise will be held as funding allows or as directed by grant requirements. The next functional exercise will be held in 2013.

**Attachments**

KCMEO and Public Health Mass Fatality Training (under revision)
Mandatory Trainings for HMAC Staff (under revision)

## XV. Mass Fatality Plan Maintenance

The MFM plan and its attachments will be maintained by the Preparedness Section of Public Health. Edits to operational documents are ongoing; the plan in its entirety will be reviewed and revised every three years. The next revision is scheduled for 2015.

# Seattle/King County

# Multiple Casualty Incident Plan

March 16, 2011

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# SEATTLE/KING COUNTY MULTIPLE CASUALTY INCIDENT PLAN



*Table of Contents*

ACKNOWLEDGEMENTS ..... I-i
I. EXECUTIVE SUMMARY ..... I-1
II. PLANNING ASSUMPTIONS ..... II-1
III. DEFINITIONS ..... III-1
IV. MCI CONCEPT OF OPERATIONS ..... IV-1
A. Dispatch ..... IV-1
B. Initial Report and Size Up ..... IV-1
1. Progress Reports ..... IV-2
2. Tactical Benchmarks ..... IV-2
C. Initial Actions ..... IV-2
D. Recon ..... IV-3
E. Scene Security ..... IV-4
1. Operational Zones ..... IV-4
2. Crowd Control ..... IV-5
3. Volunteers ..... IV-5
F. Staging ..... IV-5
G. Transportation Corridor ..... IV-5
H. Treatment Area ..... IV-6
1. Field Treatment Site ..... IV-7
I. Triage ..... IV-7
J. Green Patient Area ..... IV-8
K. Communications ..... IV-9
V. PATIENT DISPOSITION ..... V-1
A. Rescue ..... V-1
1. Extraction ..... V-1
B. Extrication ..... V-2

C. Decontamination ..... V-2
D. Patient Sheltering ..... V-3
E. Field Treatment ..... V-4
1. King County Standing Orders for Patient treatment during an MCI ..... V-4
F. Patient Count and Tracking ..... V-4
G. Documentation ..... V-5
1. MIRFS ..... V-5
2. Unique number with transporting agency ..... V-5
H. Transportation ..... V-5
VI. JOB ASSIGNMENTS ..... VI-1
A. Medical ..... VI-1
1. Treatment ..... VI-2
2. Transportation ..... VI-2
B. Rescue ..... VI-3
Appendix A: ZONE MCI RUN CARDS ..... 1
Appendix B: ZONE MCI NOTIFICATIONS ..... 1
Appendix C: Full ICS Chart ..... 1

# I. EXECUTIVE SUMMARY

King County fire, EMS, and police departments define a Multiple Casualty Incident (MCI) as any time the presence of multiple patients at an incident affects the treatment decisions of individual patients. King County strives to always provide the best care possible to any patient. However, when there are more patients than the resources on scene can adequately take care of, the goal must be to provide the best treatment possible for as many patients as possible. This means that operations must be adjusted to maximize the efficient use of available resources.

The 'Golden Hour' of emergency medicine is a well accepted concept which states that victims of trauma need to have surgery within one hour of the insult or injury to maximize survivability. Therefore, rapid transport to definitive care centers is the best way to increase survivability in an MCI.

This plan seeks to reduce chokepoints, unnecessary actions, and streamline efforts to reduce the time it takes to remove all patients from the scene. This includes:

- using the Sick/Not Sick triage standard to reduce time spent triaging;
- having the first arriving company establish a transportation corridor to ensure a smooth flow of transportation resources;
- establishing geographic divisions in larger incidents to speed triage and extraction;
- scaling patient tracking and documentation with the size and complexity of an incident.

MCI's can be as small as a few patients or as large as hundreds. Flexibility is integrated into this plan to accommodate all sizes of incidents. Issues related to a fractured or geographically challenging incident are also addressed. The federal disaster levels were used to help determine MCI incident sizes and the appropriate protocols for each level.

This plan is designed to be shared and integrated with local, state, and federal governmental agencies to ensure coordination and cooperation. During an incident, interagency cooperation will be in accordance with the National Incident Management System (NIMS). This document has been written to be compliant with NIMS, as well as to follow the Incident Command System (ICS). It is understood that based on the size and complexity of any incident, ICS positions may or may not be filled. Throughout this document MCI positions will be named, however ICS designators will not be assigned.

With the emphasis on rapid transport and efficient use of resources, King County Fire, EMS, and police agencies will be ready to handle a Multiple Casualty Incident.

# II. PLANNING ASSUMPTIONS

The traditional definition of an MCI is: any incident in which emergency medical services personnel and equipment at the scene are overwhelmed by the number and severity of casualties at that incident. A more specific working definition is any time the presence of multiple patients at an incident affects the treatment of individual patients.

The priority of an MCI response it to streamline efforts to speed patient transition to definitive care centers.

This plan is scalable to all sizes and complexity levels of MCI responses. Any action that delays the treatment or transport of patients should be modified or eliminated as long as it does not increase the risk to responders.

A transportation corridor needs to be established and secured early in the incident to facilitate rapid patient transport.

King County emergency responders will use the Sick/Not sick model for MCI triage. "Sick" patients will be classified as red. "Not Sick" patients will be classified as yellow or green.

All triage systems produce similar results, resulting in red, yellow, green and striped (black/white) patients. Therefore, when working with other agencies, it does not matter if different triage systems are used.

On scene treatment is dynamic, allowing alteration of treatment protocols to match available resources.

It is generally recognized that similar mechanisms of injury will have corresponding patterns of sick and not sick patients. This allows responders to quickly estimate the patient distribution based on total patient count. Using this assumption allows the first arriving officer to simply state the estimated total number of patients during the initial scene size up, rather than trying to determine the number of red, yellow, and green patients upon arrival. Assuming that 50% of the patients on scene will be red or yellow, this will give a quick guide to the number of resources that should be immediately requested and establish the scope of the incident.

Extraction priorities will be dynamic based on severity, access, and resources. It may be necessary or prudent to remove some yellow patients before red patients. Situations such as extended extraction times, yellow patients blocking the access of red patients, physical barriers, or a shortage of staffing may necessitate altering extraction priorities.

A triage funnel point creates an unnecessary choke point, impeding patient care and will no longer be used.

Deceased patients will not be moved, unless it is necessary to extract a live patient.

The mental stress to the responders during an MCI can cause dramatic adverse effects. Individual agencies are encouraged to develop a program to help care for the emotional and mental health of their staff.

# III. DEFINITIONS

**Alternate Care Facility (ACF):** Location, preexisting or created, that serves to expand the capacity of a hospital in order to accommodate or care for patients when an incident overwhelms local hospital capacity. In an MCI, patients will be triaged and transported to the hospital not the ACF for definitive care.

**Ambulance Staging:** Designated parking area for patient transport vehicles. Operators and attendants will not leave their vehicles.

**Base:** Designated parking area for apparatus that are assigned a task or function during an incident.

**Colored Flagging:** A color coded identification system used to designate medical priority of patients during a Multiple Casualty Incident.

- Red Flagging (immediate)
- Yellow Flagging (delayed)
- Green Flagging (minor)
- Striped (black/white) Flagging (deceased)
- White Flagging (decontaminated/clean patient)

**Disaster Medical Control Center (DMCC):** The DMCC (also known as Hospital Control) is the Hospital responsible for providing Transport with a coordinated distribution of patients to area hospitals based on patient needs and the hospitals capabilities. For the purpose of this plan, Harborview Medical Center will be the primary DMCC for King County with Overlake Hospital as the backup.

**Extraction:** The process of moving patients out of the hot zone to the treatment and transport areas.

**Extrication:** The process of removing a patient from an entrapment.

**Field Treatment Site:** Area designated or created by emergency officials for the congregation, triage, medical treatment, holding, and/or evacuation of casualties following a multiple casualty incident.

Field Triage: The process of rapidly categorizing a large number of patients according to their severity of injury in order to prioritize their extrication and/or extraction to the treatment area.

Various forms of triage used to determine the severity of a patients injuries and condition. Examples are:

- ABC Field Triage: An algorithm which allows for the rapid categorization of patients dependant on the assessment of Awake, Breathing, and Circulation.
- RPM Triage: A form of triage that has the first responders evaluate a patient's status based on Respirations, Pulse, and Mentation.
- Sacco Triage: Triage system which incorporates the Injury Severity Score to define patients according to surgery survivability, not just their basic vital signs.
- Sick/ Not Sick: The Sick/Not Sick approach to triage utilizes the EMT's knowledge and experience to rapidly evaluate a patient's physiological status. The sick patient is categorized as Red. The not sick patient is considered Green if they are able to get up and walk on their own, and Yellow if they have injuries preventing moving themselves. (Seattle/ King County 2010 EMT Patient Care Guidelines) It is understood that the Sick/Not Sick model encompasses the ABC, START, RPM, and other triage systems used to determine the patient's severity and transport priority.
- START Triage: An acronym for Simple Triage and Rapid Treatment, and is defined as being a method that first responders use to effectively and efficiently evaluate all of the victims during a mass casualty incident

Green Patient Area: An area dedicated for congregation, treatment, and care of patients with minor injuries. Designated as a separate area from Treatment due to the large number of potential patients and the special considerations they may need such as shelter, food and restroom facilities. Depending on the type of incident they may also be considered witness/suspects and require police presence.

Medical Control: Physician direction over pre-hospital activities. Also includes written policies, procedures, and protocols for pre-hospital emergency medical care and transportation.

Multiple Casualty Incident (MCI): An incident resulting from man-made or natural causes with associated illness or injury to a large number of people. The effect is that patient care cannot be provided immediately to all and resources must be managed.

MCI Response: Varied level of resources dispatched to an incident dependent upon the nature of the incident, the number of patients, and their severity of injury.

MCI Unit: A mobile unit, which contains large quantities of medical supplies that can be dispatched to a scene of an MCI. MCI units typically treat 50 or more patients.

Medical: Ensures that Triage, Extraction, Treatment, Transportation, Green Patient Area, Medical Staging, and Morgue Team functions are performed; establishing positions as necessary.

Medical Staging: An area established to maintain medical supplies, personnel and equipment. The Medical Staging Area will not be necessary at all incidents. When it is indicated, Medical will assign a Medical Staging Manager

Rescue: In larger or more complex incidents Rescue will oversee the extraction and extrication of patients.

Staging: Location where incident personnel and equipment are assigned on an immediately available status.

Treatment Area: The designated area for the collection and treatment of patients.

- Red: an area where patients require immediate assistance
- Yellow: an area where patient injuries are serious (delayed) but not life-threatening
- Green: an area where patients with minor injuries are kept

**Unique Identifier:** Number preprinted on a band or bracelet to assist in tracking patient throughout the incident from initial entry to final disposition

# IV. MCI CONCEPT OF OPERATIONS

## A. Dispatch

There are four main EMS dispatch centers in King County: Norcom, (Zone 1), Valley Com (Zone 3), the Seattle Fire Alarm Center (Zone 5), and the Port of Seattle, located at SeaTac Airport. Each individual dispatch center has put in place a matrix and/or a run card to activate an MCI and dispatch the proper resources to the scene of the incident. All requests for Mutual Aid are coordinated through the dispatch centers.

## B. Initial Report and Size Up

As with any fire or rescue response, the initial company is responsible to give an initial and size-up report. These reports give dispatch and all incoming units a "picture" of what the initial company is seeing.

Upon arrival the initial company officer will broadcast the initial report over the radio, including the following in the report:

- Unit signature
- The location, or corrected location
- Initial basic impression

As soon as possible, the officer will give a size-up report including:

- Briefly describe an impression of the scene, including known hazards
- Cause of the incident if known
- Estimate total number of patients
- Establish the Command Designator and Command Post location
- Designate the Transportation Corridor (see Transportation Corridor )
- Initial actions and assignments
- Base and Staging locations

- Additional resource requests

### 1. Progress Reports

Progress reports are required any time there is a change of the Incident Commander and every 15 minutes.

The progress reports should include the following:

- Current estimated total patient count
- Update transportation corridor location as needed
- Numbers of red, yellow, green, and striped patients when known
- Number of patients remaining to be extracted
- Number of patients transported
- Progress of hazard mitigation
- Additional Resources needed.

### 2. Tactical Benchmarks

- All patients extracted.
- All red patients transported
- All patients transported/clear of incident
- Any tactical benchmarks appropriate for hazard mitigation

## C. Initial Actions

The initial actions of the first arriving company officer are critical to ensuring a successful outcome. Depending on the size and complexity of the incident, the initial company may be able to fill many roles, or handle only a few assignments.

Critical Initial Company Actions:

- Initial and size-up reports
- Establish and secure the transportation corridor
- Give assignments to incoming units.

Assignments to be handled by initial companies:

- Begin Recon and Triage
- Perform a risk assessment and begin hazard mitigation for the purpose of reducing the immediate danger to patients, rescuers, or the public
- Designate a green patient area and have all green patients move to that location
- Begin extraction and treatment of patients as able.

## D. Recon

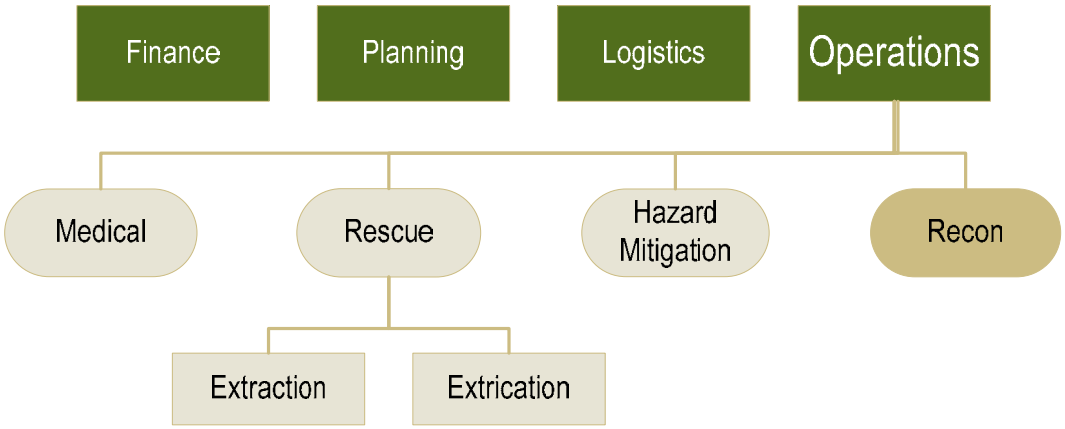
A rapid reconnaissance of the entire MCI site is essential to establish the scope and scale of the incident. Depending on the size and complexity of the incident, this may require a Recon Group consisting of multiple teams. The overriding factor should be speed as opposed to specificity to ensure that the information reaches the IC in a timely manner.

Recon should identify the following:

- Equipment needs
- Levels of PPE that will be required. (Note: Differing levels may be required in different areas.)
- Estimate of the number and condition of patients involved.
- Hazards
- Cause of the incident
- Any physical barriers preventing easy access between areas in the hazard zone. If so, identify areas for multiple treatment and transportation areas.

Recon teams should consider using an elevated platform to help form an overall picture of the incident. This can include nearby buildings, aerial ladders, or geographical highpoints. Helicopters may be considered.

Recon reports directly to Operations.




## E. Scene Security

Scene security will be the responsibility of law enforcement, but Fire and EMS personnel must stay alert to potential security issues including but not limited to:

- Secondary Devices
- Crowd control
- Traffic control

The situation may cause the delay of certain operations while law enforcement clears the hazard area. Clear and consistent communication between Fire, EMS, and law enforcement is critical to maintain security.

### 1. Operational Zones

Initial companies need to clearly establish hot, warm, and cold zones. The zones must be clearly communicated to all on-scene responders, including law enforcement. The operational zone locations should be broadcast over the main tactical channel to inform all incoming units even if coordination with law enforcement is handled face to face. Fire scene tape should be used to clearly mark the exclusion zone (outer perimeter) of an incident when possible. Larger sites may need to be secured by law enforcement.

### 2. Crowd Control

Care must be given to crowd control, but total exclusion of bystanders and volunteers may not be possible or practical. If exclusion is impossible or impractical, attempts should be made to moderate the risk to both bystanders and rescue personnel with the help of law enforcement.

### 3. Volunteers

MCI incidents may draw civilian volunteers with varying levels of skill and expertise. These volunteers can be helpful if utilized in a safe and organized way, but if they are ignored, they can hinder efforts and increase the risk to both themselves and personnel. Volunteers may be assigned appropriate tasks according to their self-claimed knowledge, skills, and abilities as long as the risks associated with these tasks are minimized. It may be difficult or impossible to verify the claims of expertise by volunteers and care should be taken to place them in supervised roles. It is important to remove or replace volunteers as resources become available.

## F. Staging

Two separate staging areas should be considered based on the size and complexity of the MCI. The first staging area should be for personnel or equipment immediately available for use.

There should be a separate Ambulance Staging area that is established for apparatus that will be used to transport patients from the scene to a facility. The Ambulance Staging area may be managed by a private ambulance supervisor with capabilities of communicating to both Transport as well as the staged units. In the Ambulance Staging area, personnel are not to leave their vehicles.

## G. Transportation Corridor

The transportation corridor must be established early and clearly communicated by the first arriving company officer during the initial

size-up. The exact street, entry point, exit point, and direction of flow must all be determined and communicated. Law enforcement will clear and protect the designated corridor; all other apparatus should keep this location clear. Large incidents may require law enforcement to extend the protected corridor all the way to the hospitals.

The first arriving company is responsible for defining and determining a transportation corridor. The corridor must be maintained until law enforcement takes over the security of the corridor. If the initial company cannot commit a member, they will assign the task to another unit from the initial response.

The member controlling the corridor should anticipate requirements for treatment and decontamination areas, and a patient loading area adjacent to the designated corridor.

All apparatus operators must keep the transportation corridor clear.

## H. Treatment Area

The patient treatment area will be established in conjunction with the transportation corridor. It should be adjacent to the transportation corridor to facilitate communication, tracking, and patient transfer. If the treatment area and transportation corridor are unable to be co-located, they should be located as close as possible with a clear path between the two and their locations broadcast over the primary tactical radio channel.

The treatment area will be the responsibility of Treatment, typically, a senior ALS member appointed by Medical.

Extracted patients will be delivered directly to the treatment area unless diverted to the transport corridor by Treatment. A funnel point will not be utilized.

Large incidents may necessitate large treatment areas with separate areas and staff for red and yellow patients. Multiple treatment areas with corresponding transportation corridors may be needed. Treatment

needs to request enough staff to handle care for the expected number of patients.

The level of treatment performed in the treatment area may vary according to the situation, but rapid patient stabilization will be the priority. The level of care will be determined by Treatment in accordance with standing orders and/or direction from DMCC.

### 1. Field Treatment Site

When circumstances dictate that EMS resources must continue to treat patients, Medical should consider establishing a Field Treatment Site (FTS). An FTS may be as simple as extended use of the treatment areas created at the incident or as complex as translocating patients to an Alternate Care Facility that has been opened to EMS. In some cases local agencies and jurisdictions will predetermine where EMS might naturally establish an FTS. Ad-hoc FTSs may be established wherever the IC can rally enough resources to effectively care for patients.

EMS may need to establish an FTS for any of the following reasons:

- Transport resources are inadequate
- Transport cannot keep pace with Extraction
- Number of patients at the incident cannot be handled at hospitals

## I. Triage

Triage will not be the responsibility of a single rescuer, but will be a collective and ongoing effort to constantly evaluate patients at every step in the MCI process. The Sick/Not Sick triage standard will be used to evaluate patients.

It is understood that all patients should be triaged. However, depending on the variables of the scene, triage may be accomplished by: a Triage team, Extraction teams, or after safely leaving the area.

Geographic triage allows a member to triage patients in their assigned area and prioritize those patients for extraction.

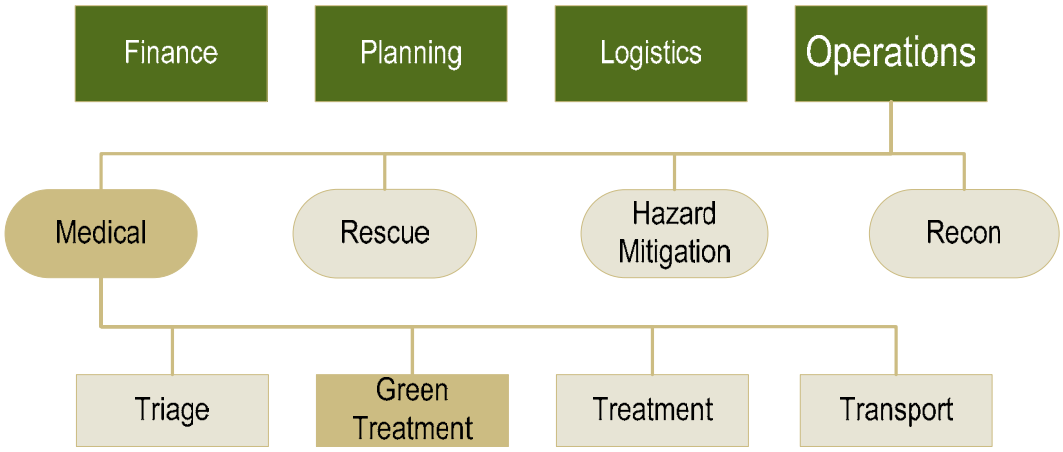
## J. Green Patient Area

The Triage Teams at an MCI will direct those that can walk to a designated area of refuge, or Green Patient Area. These patients will be initially classified as green patients. As soon as possible, a Green Patient Area Manager should be designated.

The Green Patient Area Manager is responsible for the following:

- Find or create a proper Green Patient Screening Area if one does not already exist
- Liaison with law enforcement
- Medically evaluate all patients, upgrading patients to red or yellow as needed, and moving those patients to the treatment area(s)
- Provide basic medical care
- Contain patients as needed (share responsibility with law enforcement).
- Consider comfort needs such as restroom facilities, water, blankets, etc.
- Provide information as it becomes available to the green patients
- Consider the need for emotional support including the chaplains, family members, or outside counseling support. Many of the green patients may have been separated from friends or family members, and will experience even greater anxiety when dealing with the unknown
- Documentation
- Patient Tracking
- Victim Assistance and Family Reunification

Law enforcement is critical in establishing and maintaining the green patient area. Law enforcement will likely want to interview and document green patients for investigation purposes. Security in the green patient area may be necessary.




## K. Communications

A single tactical radio channel may be adequate for a small MCI. Large or complex MCIs may quickly overwhelm a single radio channel, hampering critical communication. The Incident Commander should forecast incidents and with the assistance of dispatch centers, may designate multiple radio channels for the incident. Possible radio channel assignments are:

Operations channel to include:

- Operations
- Recon
- Rescue (May need a separate channel)
- Hazard mitigation groups

Medical channel to include:

- Medical
- Triage
- Treatment
- Transportation

Disaster Medical Control Center channel to include:

- DMCC
- Transportation

Radio communication may be further affected by many factors including:

- Areas of reduced radio signals.
- Damage to radio infrastructure.
- System overload/outages.

# V. PATIENT DISPOSITION

## A. Rescue

Patient extraction from the hazard zone will be prioritized based on the patient's condition and difficulty of extraction. Rescue may direct extraction in smaller incidents. In larger incidents, Rescue will supervise Extraction as well as Extrication if needed.

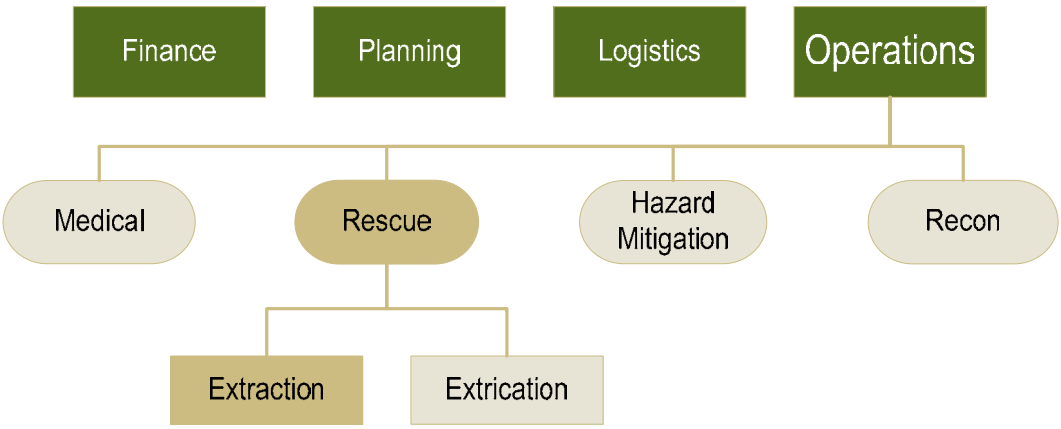
Large or complex incidents may require the hazard zone to be divided into geographical divisions. Supervisors should be alert to recon their assigned area.

Geographical recon includes:

- Number of patients in their area.
- How many of those patients are Red, Yellow, and Striped.
- Extraction needs, including number of patients and complexity.
- Hazards inside their area.

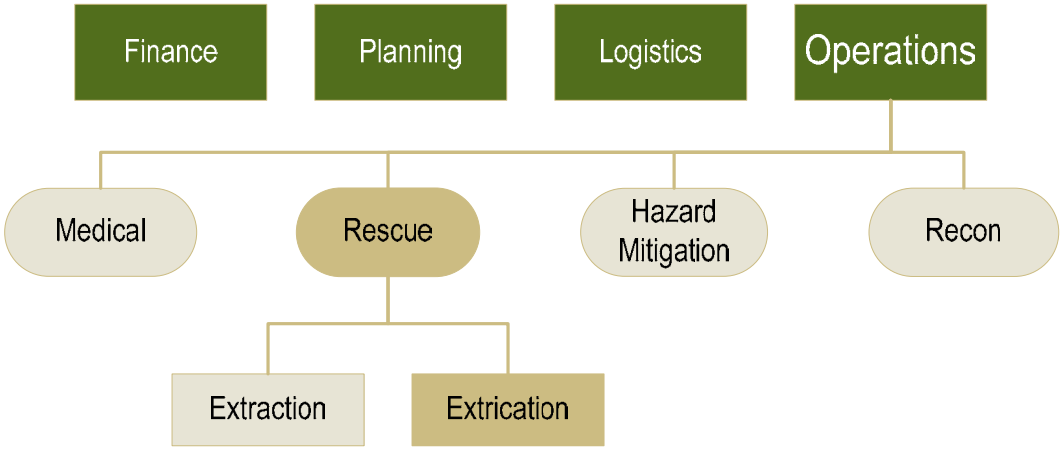
### 1. Extraction

Extraction teams will be composed of one or more pairs of personnel and will report to Medical or Rescue, depending on incident size, for the purpose of patient removal and delivery to the patient treatment area.



## B. Extrication

Disentanglement and technical rescue may be handled by extrication teams under direction of Rescue. When trapped patients are located, the extrication teams will be sent to assist with the technical removal of those patients. Extrication teams must prioritize their operations to remove as many viable patients as possible in the shortest amount of time.




## C. Decontamination

Any MCI, natural or intentional, may include the release of hazardous materials (haz-mat). Rescuers will need to evaluate the potential need for a haz-mat response and decontamination procedures. If a haz-mat release is known or suspected, a haz-mat response should be requested if not already dispatched. Primary tasks of the initial companies include: wear the appropriate level of PPE, consider a larger evacuation zone, and start emergency decontamination procedures.

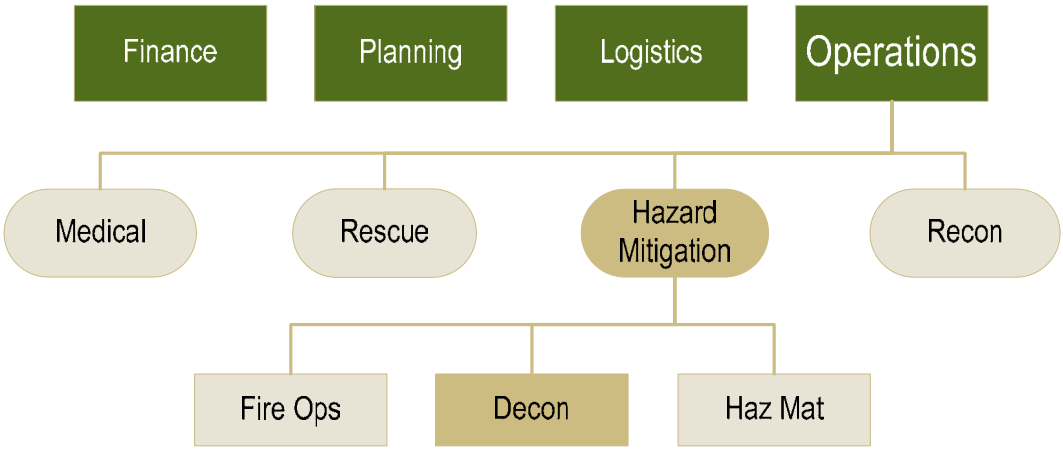
Treatment and/or transport of any patient cannot occur until the patient has gone through emergency decontamination.

It may be difficult to determine in the field if a patient is completely decontaminated, therefore patient contact should be limited to essential procedures in the field and during transport.

Tyvek suits should be used for patients after gross decon when their clothing has been discarded.

Decontamination procedures will occur in the warm zone.

If decontamination procedures are required, the IC must ensure that a large enough footprint has been established for both gross and technical decon.




## D. Patient Sheltering

Every attempt should be made to provide shelter for the patients in the patient treatment and green patient areas. The shelter should provide protection from the hazards, weather, media, and the public.

Shelters of opportunity, or existing buildings, should be considered first. Priority will be given to structures with bathroom facilities, running water, and buildings with access that can be easily controlled. If no existing buildings are easily accessible or adjacent to the transportation corridor, then temporary shelters may be used.

Possible temporary shelters include:

- Tents from Decon Units
- Public transportation buses
- MCI bus

When choosing a shelter, the possibility for an expanding incident needs to be considered, ensuring patients are not placed into an existing or future hazard zone.

## E. Field Treatment

### 1. King County Standing Orders for Patient treatment during an MCI

MCI Standing Orders are to be implemented during an MCI. It is understood that communications may be difficult or impossible and it may not be possible to consult medical control prior to providing patient care. MCI standing orders authorize EMS personnel to act pursuant to these orders while on or off duty.

In general, personnel will treat “Red” patients first, “Yellow” patients only as time allows, and “Striped” patients only after assuring that all patients from the red and yellow categories are stabilized. Depending on acuity and number of patients, it may be necessary to transport ALS patients in BLS units without the oversight of ALS personnel.

Harborview Medical Center shall serve as primary DMCC. Overlake Hospital shall serve as back up DMCC.

Individual Medical Incident Report Forms (MIRFS) are not required during an MCI. In addition, no permission is required to “cease efforts”.

If neither primary nor back up DMCC is able to coordinate patient destination, Transport shall notify the receiving hospital of patient numbers and triage status prior to patient transport if possible. Individual transporting units will not routinely communicate to hospitals unless directed to do so.

## F. Patient Count and Tracking

Patient count and tracking are important aspects of an MCI, especially when the incident is large and complex. Every effort will be made to count and track every patient that is cared for at an incident. The level of tracking may have to be scaled to an individual incident. Factors such as environment, severity of injuries, hazards, and number of patients will dictate the level of tracking. At no time will these activities be priorities above patient care and transport.

Patient count and tracking will be the responsibility of Transportation in coordination with Treatment. An attempt will be made to attach a unique identifier to each individual patient. Transportation will attempt to keep track of the number of red, yellow, and green patients as they are transported.

Any first responder may be assigned to Transportation as an aide to assist in patient count and tracking.

## G. Documentation

### 1. MIRFS

Patient documentation is important; however documentation should never delay patient care or transport. Individual MIRFs should be attempted at every incident, however, as an incident grows in size and complexity MIRFs may not be reasonable to complete. Incidents may have segments when MIRFs may be completed and other segments that circumstances prevent usage of MIRFs.

### 2. Unique number with transporting agency

When a patient is received by a transporting unit, personnel will document the unique identifier that is attached to the patient onto their agency's MIRF. If a unique identifier has not been assigned to the patient, then the transporting unit's personnel will do so. Every effort will be made to give a copy of the unique identifier to Transport.

## H. Transportation

Transportation will assign patients to transporting units as those resources arrive. Constant communication between Transportation and Treatment is important to ensure that patients are ready to be transported.

The preferred method of transport is a BLS ambulance. Larger incidents may require non-traditional assets. If non-traditional assets without emergency signal devices are used, consideration should be

given to using law enforcement escorts to aid during travel. Containing bio-hazardous material in non-traditional assets may be difficult, but tarps, plastic, or other resources should be used to limit the spread of this material.

# VI. JOB ASSIGNMENTS

## A. Medical

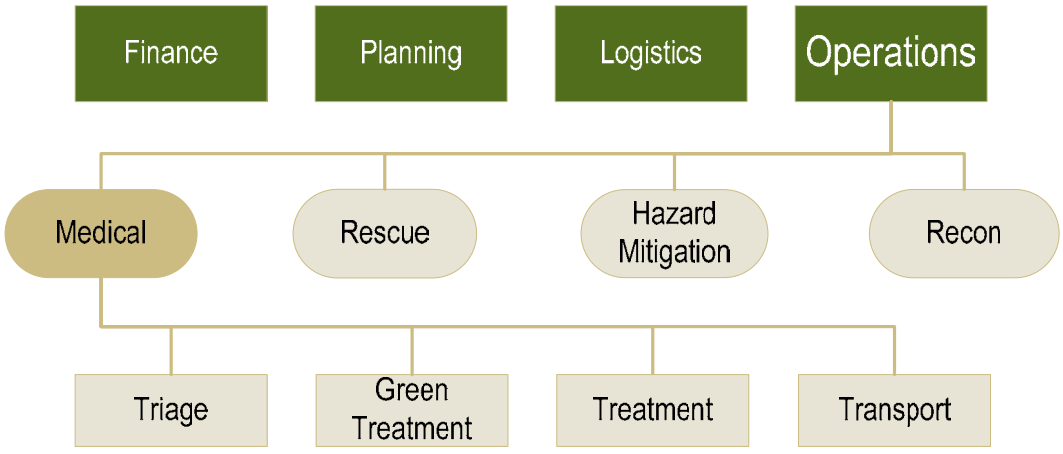
One of the first arriving ALS members should assume the role of Medical. The role of Medical, while initially filled by one of the first arriving ALS members, should be assumed by a senior ALS member, likely a Medical Services Officer (MSO), when possible.

Medical is responsible for the following tasks:

- Transportation
- Treatment
- Triage
- Ensure activation of the DMCC
- Green Patient management

Medical may handle most or all of the responsibilities in smaller incidents. Larger or complex incidents will require Medical to be proactive in forecasting the incident and begin assigning roles as soon as possible. Circumstances may dictate a large number of ALS and BLS personnel where:

- ALS personnel need to be prioritized to treatment due to a high patient count;
- patient removal from the hazard zone will require a large amount of BLS personnel and/or complex coordination.



## 1. Treatment

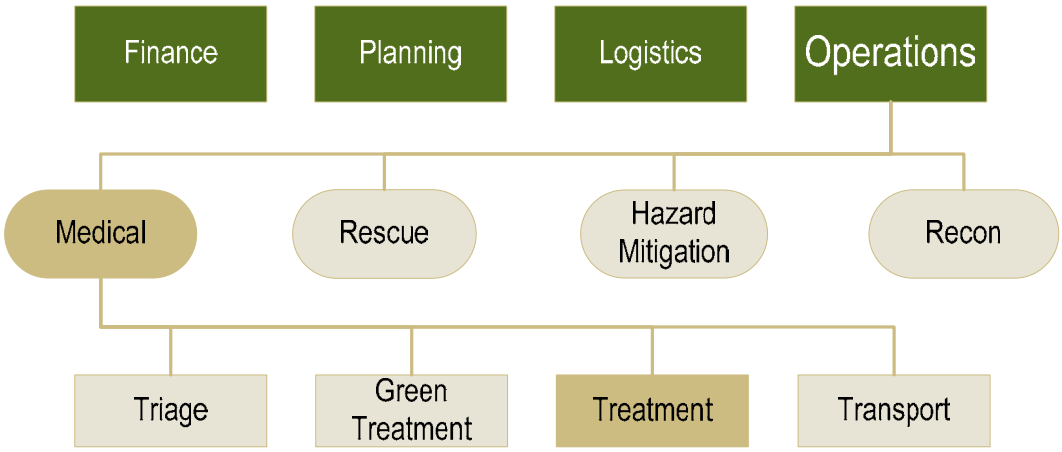
Medical may designate an ALS member to be Treatment. (Note: Smaller incidents may allow Medical to retain this role). Treatment is responsible for the following:

- Receiving patients from Extraction
- Supervising treatment of patients
- Managing Treatment Personnel
- Coordinating with Transportation
- Prioritizing patients for transport

The level of treatment performed in the treatment area may vary according to the situation, but rapid patient stabilization will be the priority. The level of care will be determined by the Treatment Team Leader.

Treatment, with input from Transportation, may elect to have patients delivered directly to the transportation corridor for transport.

Treatment should request adequate personnel and resources to care for the expected number of patients.



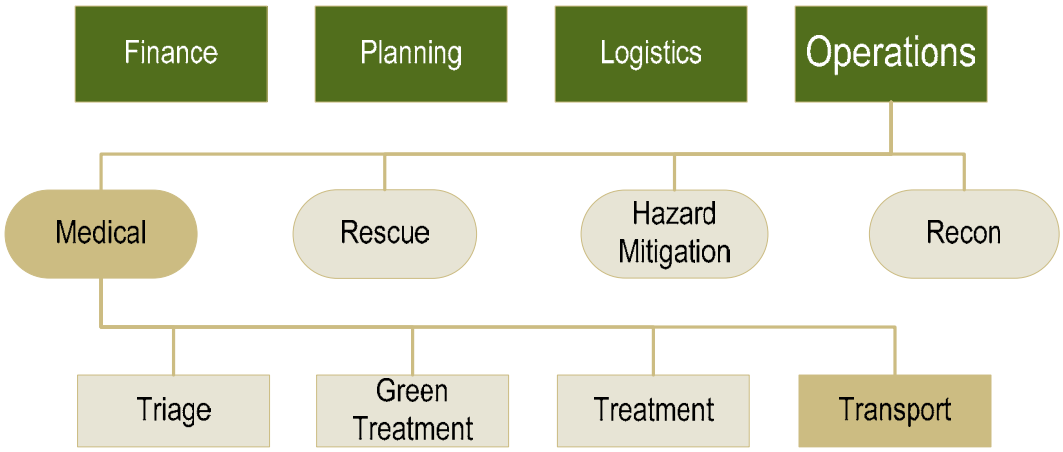

## 2. Transportation

Transportation should be designated early by Medical. Smaller incidents may allow Medical to retain this role. Transportation should be

a senior ALS member capable of performing a wide range of duties including:

- Communication with the DMCC
- Keeping a total patient count of all transported patients (may be delegated to one or more Aides)
- Coordination with Treatment
- Coordination with law enforcement to clear the transportation corridor
- Liaison with transportation resources
- Maintain adequate transportation resources
- Initiate tracking if unique identifier not already assigned

Incidents that require multiple transportation corridors must have multiple personnel assigned to Transport. They may act independently of each other. Transportation may contact the DMCC independently for patient destinations and be responsible for patient count and tracking.




## B. Rescue

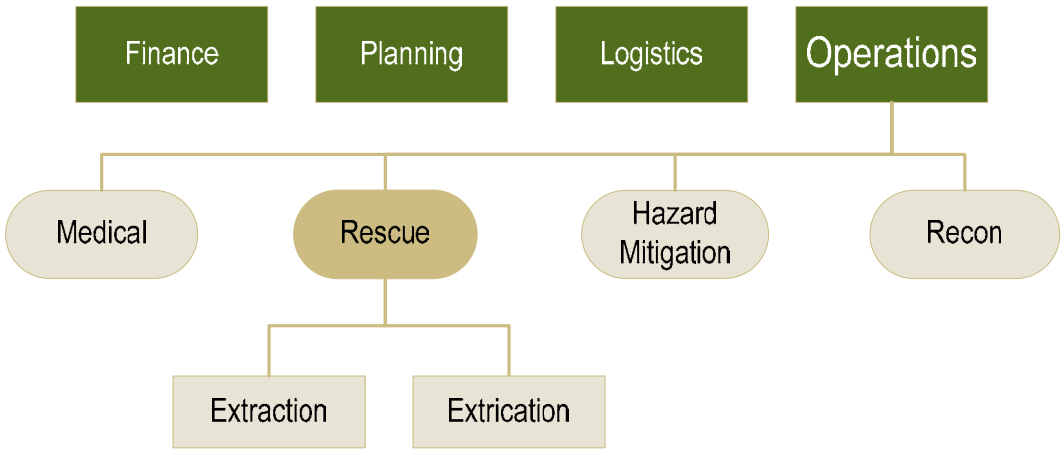
Rescue shall be considered when:

- ALS staffing needs to be prioritized to patient treatment and transport.

- Any part of patient removal from the hazard zone will require a large amount of BLS resources or skills.

Rescue may be in charge of triage and extraction of all patients from the hot zone into the patient treatment areas.

Technical Rescue Teams will report to Rescue to serve as technical advisors, and participate in extrication as needed.



## Zone 5 – Seattle

| Dispatch Type Code | Description | Units Sent |
|---|---|---|
| MCI Reduced | Multiple Casualty Incident Reduced | 2 Engines, 1 Ladder, 1 BC, 1 Aid Car, 2 Medics, DEP1, SAFT2, M44, STAFF10 |
| MCIFUL | Multiple Casualty Incident Full | 5 Engines, 2 Ladders, 2 BCs, 2 Aid Cars, 3 Medic Units, MCI1, DEP1, SAFT2, STAFF10, Air 9, M44 |
| MCIHAZ | Multiple Casualty Incident Hazardous Materials | 5 Engines, 2 Ladders, 2 BCs, 2 Aid Cars, 3 Medic Units, MCI1, DEP1, SAFT2, Air 9, M44, HazMat Group, E10, L1, B2, A5, HAZ1, STAFF10, Decon Group E27, L7, Decon1 |
| MCIEXP | Multiple Casualty Incident Explosion | 5 Engines, 2 Ladders, 2 BCs, 2 Aid Cars, 3 Medic Units, MCI1, DEP1, SAFT2, Air 9, M44, HazMat Group, E10, L1, B2, A5, HAZ1, STAFF10, Decon Group E27, L7, Decon1 |
| MCIWAT | Multiple Casualty Incident Water | 5 Engines, 2 Ladders, 2 BCs, 2 Aid Cars, 3 Medic Units, MCI1, DEP1, SAFT2, Air 9, M44, Rescue Group – A14, L7, RESCUE1 |

| | | |
|---|---|---|
| MCIRES | Multiple Casualty Incident Rescue | 5 Engines, 2 Ladders, 2 BCs, 2 Aid Cars, 3 Medic Units, MCI1, DEP1, SAFT2, Air 9, M44, Rescue Group A14, L7, RESCUE1 |

## Zone 3 – South King County

| Patients | Fire Units | Medics | MSO | Transport | Chiefs |
|---|---|---|---|---|---|
| 1-10 | 5 Total Units<br>Aid/Engine/<br>Ladder | 2 | 1 | 5 AMB | 1 |
| 11-19 | 8 Total Units & MCI Unit | 3 | 2 | 10 AMB | 2 |
| 20-29 | 12 Total Units & MCI Unit | 4 | 3 | 15 AMB | 3 |
| 30-39 | 16 Total Units<br>Zone 5 Task Force<br>MCI Unit | 4 | 3 | 20 AMB<br>1 Metro Bus | 5 |
| 40-49 | 16 Total Units<br>Zone 5 Task Force<br>Engine Strike Team<br>MCI Unit | 4 King<br>1 ALS<br>Strike Team | 3 | 25 AMB<br>1 Metro bus | 5 |
| 50 + | 16 Total Units<br>Zone 5 Task Force, | 4 King<br>1 ALS | 4 | 25 AMB<br>1 Metro bus | 5 |

| | | | | | |
|---|---|---|---|---|---|
| | Zone 1 Engine Strike Team,<br>MCI Unit | Strike Team | | | |
| 100 + | 16 Total Units<br>Zone 5 Task Force,<br>Zone 1 & 6 Engine Strike Team,<br>MCI Unit,<br>Port MCI 777 | 4 King<br>2 ALS<br>Strike Teams | 4 | 25 AMB<br>2 Metro Busses | 5 |

## Zone 1

NorCom utilizes agency specific run cards to dispatch.

# Appendix B: ZONE MCI NOTIFICATIONS

## Zone 5

- Medic/Portable 55 (ECOM)
- Trauma/M1 MD
- Private Ambulance Providers
- PIO
- MSA
- All MSO's
- Staff Officers

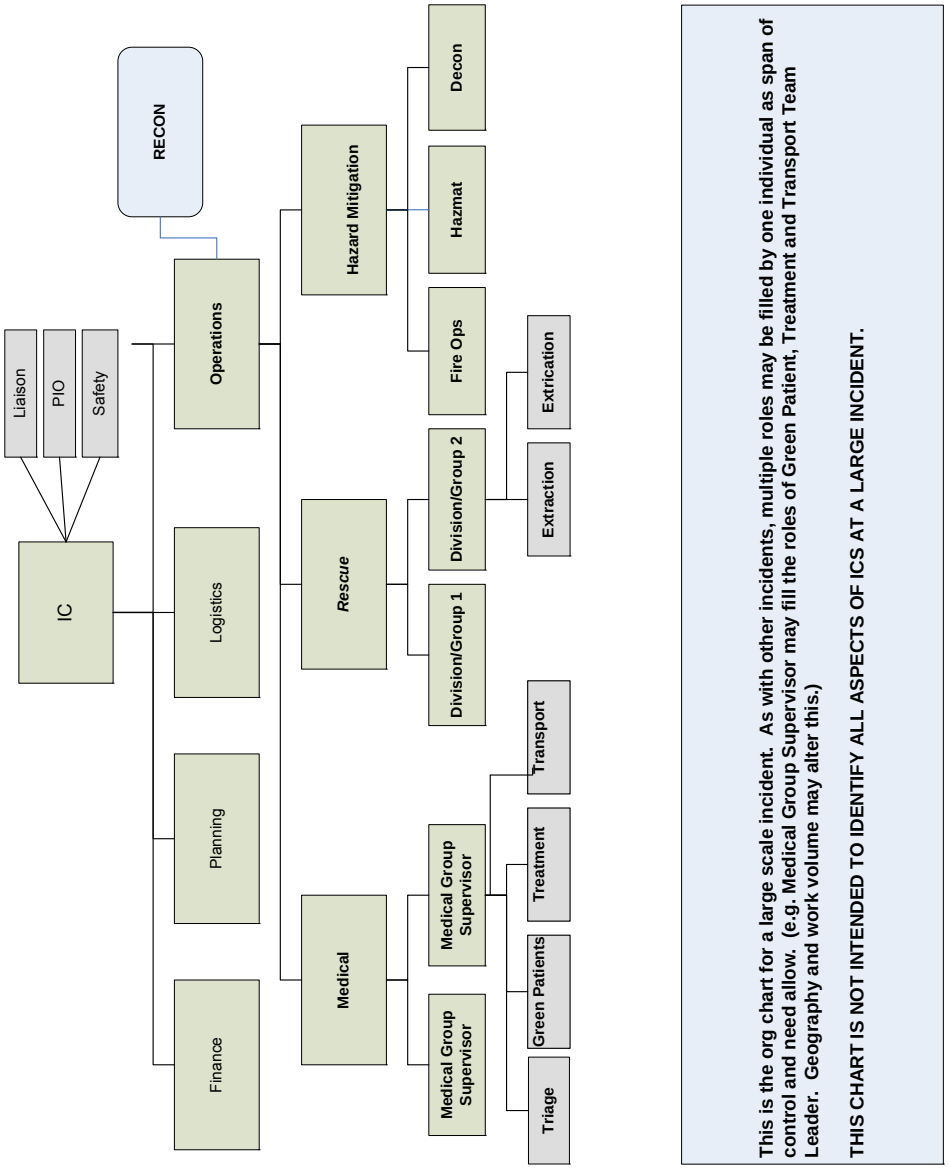
## Zone 3

- King County Medic One Command Staff page
- BC page (at level 2)
- Zone 3 PIO (at level 2)

## Zone 1

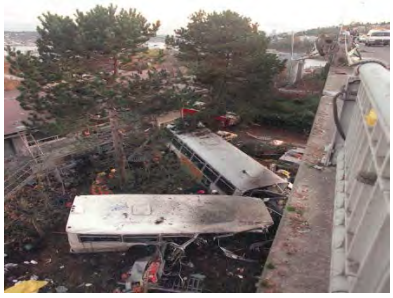
NorCom utilizes agency specific protocols to determine notifications.

# Appendix C: Full ICS Chart



# Puget Sound Region

# Pre-Hospital Emergency Triage and Treatment Annex



## Regional Catastrophic Disaster Coordination Plan

November 30, 2012

# RECORD OF CHANGES

The following table provides a record of major changes made to the Pre-Hospital Emergency Triage and Treatment Annex since the date of publishing the first draft to keep the plan consistent with current policies.

| Date of Change | Part, Annex, or Attachment Changed | Posted by |
|---|---|---|
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Puget Sound Regional Catastrophic Preparedness Program

# PRE-HOSPITAL EMERGENCY TRIAGE AND TREATMENT ANNEX

## TABLE OF CONTENTS

*Table of Contents*


I. OVERVIEW AND ASSUMPTIONS ..... 1

A. Purpose ..... 1

B. Scope ..... 1

C. Situation ..... 2

Demographics ..... 2

Hazards ..... 3

D. Planning Assumptions ..... 4

II. SYSTEM DESCRIPTION FOR PRE-HOSPITAL COORDINATION ..... 6

A. EMS Coordination Group Overview ..... 6

Role of the EMS Coordination Group ..... 6

Composition of the EMS Coordination Group ..... 7

B. EMS Coordination Group Components and Roles ..... 8

Responsibility of EMS Coordination Group Core Membership ..... 8

EMS Coordination Group Chairperson ..... 9

EMS Coordination Group Coordinator ..... 9

Situation Assessment Unit ..... 10

Resource Status Unit ..... 10

Documentation Unit ..... 11

C. Meeting Format and Decision-Making Process ..... 11

EMS Coordination Group Meeting Format ..... 11

Decision-Making Process ..... 12

D. EMS Coordination Group IT/Telecommunications ..... 12

III. CONCEPT OF COORDINATION ..... 13

A. Authority for Annex Implementation ..... 13

B. Implementation Triggers ..... 13

C. Protocol for Requesting EMS Coordination Group Activation ..... 13

D. Tiered Incident Levels for Annex Implementation and EMS Coordination Group Response ..... 14

IV. COORDINATION WITH OTHER INCIDENT MANAGEMENT ENTITIES ..... 17
A. Coordination with County/Tribal Governments ..... 17
B. Coordination with Regional DMCC ..... 18
C. Coordination with State Government ..... 18
D. Coordination with the Federal Government ..... 18
V. INFORMATION COLLECTION AND DISSEMINATION ..... 19
A. Information Reporting Template ..... 19
VI. ANNEX DEVELOPMENT AND MAINTENANCE ..... 20
VII. RECOMMENDATIONS ..... 21
VIII. AUTHORITIES AND REFERENCES ..... 23
Appendix A: Annex Glossary ..... 25
Appendix B: EMS Coordination Group Contact List ..... 29
Appendix C: Regional MCI Resource Inventory ..... 34
Appendix D: Example Strategic or Policy-Level Issues for EMS Coordination Group Discussion ..... 46
Appendix E: Sample Essential Elements of Information (EEI) Template for Regional Situational Awareness ..... 47
Appendix F: EMS Coordination Group Meeting Agenda ..... 50
Appendix G: Guide for Chairperson and Coordinator ..... 51
Appendix H: Training for EMS Coordination Group Members ..... 59
Appendix I: Puget Sound Region Field Treatment Site Planning Guidance ..... 60
Appendix J: Advancing New Concepts for MCI Response ..... 81
Appendix K: Sample Mass Casualty Incident (MCI) Plan ..... 85
A. Initial Incident Actions ..... 89
B. Tactical Benchmarks ..... 90
C. Scene Security ..... 90
D. Operational Zones ..... 90
E. Transportation Corridor ..... 90
F. Transportation Resources ..... 91
G. Treatment Area ..... 91
H. Triage ..... 91
I. Green Patient Area ..... 91
J. Striped (Black/White) Patient Area ..... 92
K. Fractured Incidents ..... 92
L. Decontamination ..... 92
M. Patient Sheltering ..... 92
N. Field Treatment ..... 93

O. Patient Tracking ..... 93
P. Documentation ..... 93
Q. Incident Commander ..... 93
R. Medical Group Supervisor ..... 93
S. Treatment Team Leader ..... 94
T. Transportation Team Leader ..... 94
U. Green Patient Team Leader ..... 94
V. Rescue Group Supervisor ..... 95
W. Extraction/Triage Team Leader ..... 95
X. Extrication Team Leader ..... 95
Y. Fire Department Mutual Aid ..... 96
Z. Law Enforcement ..... 96
AA. Field Treatment Sites ..... 96
BB. Terrorist Attacks ..... 96
Appendix B – Possible Transportation Resources ..... 99

*List of Figures*

Figure 1-1: Designated Region for Catastrophic Coordination ..... 2
Figure 2-1: EMS Coordination Group Organization Chart ..... 8
Figure 4-1: Regional EMS Coordination Group Information Flow Diagram ..... 17

*List of Tables*

Table 1-1 Demographic characteristics for the Puget Sound Region ..... 3
Table 3-1: EMS Coordination Group Action Items ..... 15
Table 3: Regional MCI Resource Inventory ..... 35

# I. OVERVIEW AND ASSUMPTIONS

## A. Purpose

This annex to the *Puget Sound Regional Catastrophic Disaster Coordination Plan* provides a strategic framework for regional coordination to plan for or respond to any naturally occurring or man-made catastrophe. Such incidents may produce medical surge demands that stress or overwhelm Emergency Medical Services (EMS), Public Health, and health care organizations in the Puget Sound Region and require a regionally coordinated response to promote continuity of patient care from the field to the hospital or other definitive care site. This annex provides the necessary coordination structure and processes to facilitate a multi-jurisdictional, multi-disciplinary pre-hospital response to a catastrophe.

The EMS Coordination Group, which is presented in this annex as a regional entity to facilitate pre-hospital coordination during a catastrophe, does not usurp or infringe upon the formal chain of command during incident response. Likewise, the coordination processes used by the EMS Coordination Group do not replace established mechanisms for incident management support, which flow from local jurisdictions to their respective County Emergency Management Agency and then to the Washington Military Department, Emergency Management Division. Rather, this annex provides a mechanism for pre-hospital responders to collect and share information in order to develop regional situational awareness and recommendations on strategic or policy issues affecting the pre-hospital response. These recommendations are intended to help decision makers better understand the region's pre-hospital needs so they can make informed decisions in support of the region's planning for and response to catastrophic incidents (see section IV).

## B. Scope

This annex applies to EMS providers, public health officials, Medical Program Directors, health care organizations, and any other entities responsible for providing or coordinating Pre-Hospital Emergency Triage and Treatment (PETT) in the Puget Sound Region of Washington State. For the purposes of this annex, the Puget Sound Region (Figure 1-1) is defined as the Seattle Urban Area (UA)/Combined Statistical Area (CSA), and includes the counties of: Island, King, Kitsap, Mason, Pierce, Skagit, Snohomish, Thurston; local jurisdictions and Tribal governments located therein; as well as associated public, private, and non-profit businesses. The Puget Sound Region is located in Federal Emergency Management Agency (FEMA) Region X.

This annex addresses the overall coordination of field triage, treatment, transportation and disposition of patients inside the Puget Sound Region, from first alarm through the emergency medical and hospital system response.

| Puget Sound RCP Region | |
|---|---|
| State of Washington | |
| **Counties Included** | **Principal Cities Included[1]** |
| Island County | Oak Harbor |
| King County | Bellevue, Kent, Renton, Seattle |
| Kitsap County | Bremerton, Silverdale |
| Mason County | Shelton |
| Pierce County | Tacoma |
| Skagit County | Mount Vernon |
| Snohomish County | Everett |
| Thurston County | Olympia |

Figure 1-1: Designated Region for Catastrophic Coordination

## C. Situation

### Demographics

According to the U.S. Census Bureau, the estimated population in 2009 of the Seattle-Tacoma-Olympia Combined Statistical Area was nearly 4.2 million people. This represents a 13 percent increase in the population size for the CSA since 2000. The City of Seattle has the largest population of any metropolitan area in the Puget Sound Region with approximately 582,454 people, or a population density of 6,717 persons per square mile. The region's other major cities include Bellevue to the east (population of 118,186 and population density of 3,940/sq mile); Tacoma to the south (population of 196,532 and population density of 3,931 persons/sq mile); Everett to the north (population of 98,514 and population density of 3,079 persons/sq mile); and Bremerton to the west (population of 35,295 and population density of 1,604/sq mile).

Table 1-1 provides basic demographic information relevant to the PETT capability for the eight counties within the Puget Sound Region.

Table 1-1 Demographic characteristics for the Puget Sound Region

| County | Total Population (2011 est) * | Population density (persons per sq mile - 2010) * | Number of hospitals + | Number of licensed beds ± | Trauma services |
|---|---|---|---|---|---|
| Island | 78,971 | 376 | 1 | 51 | 1 (level 3) |
| King | 1,969,722 | 912 | 20 | 5271 (67% located in the City of Seattle | 1 (level 1)<br>1 (ped level 1)<br>3 (level 3)<br>4 (level 4)<br>1 (level 5) |
| Kitsap | 254,633 | 635 | 2 | 297 | 1 (level 3) |
| Mason | 61,019 | 63 | 1 | 68 | 1 (level 4) |
| Pierce | 807,904 | 476 | 5 | 1,244 | 2 (level 2)<br>1 (level 3)<br>1 (level 4)<br>1 (ped level 1) |
| Skagit | 118,109 | 67 | 3 | 68 | 1 (level 3) |
| Snohomish | 722,400 | 341 | 4 | 699 | 1 (level 1)<br>1 (ped level 1)<br>3 (level 3)<br>4 (level 4)<br>1 (level 5) |
| Thurston | 256,591 | 349 | 2 | 509 | 1 (level 3) |

* U.S. Census Bureau. State and County Quickfacts. Available at: http://quickfacts.census.gov/qfd/states/53000.html.
+ Washington State Hospital Directory, Available at: www.doh.wa.gov/portals/1/Documents/5300/HospDirWOther.xls; note that these figures do not include DoD or VA facilities, or specialty hospitals (e.g., psychiatric facilities).
± Washington State Hospital Directory, Available at: www.doh.wa.gov/portals/1/Documents/5300/HospDirWOther.xls

## Hazards

Washington State's Hazard Identification and Vulnerability Assessment (April 2009) and local Comprehensive Emergency Management Plans identify the technological and natural hazards that are present and pose a threat to the people, property, environment, and economy of Washington State and the Puget Sound Region. The Puget Sound Region faces a diverse range of hazards that could develop into catastrophic incidents. Relevant risks to the region include natural disasters (e.g., earthquakes, volcano eruptions, floods, landslides, wildfires, tsunami, and severe storms/weather events); biological incidents (e.g., pandemic influenza, bioterrorism); large-scale accidental or intentional explosions, possibly with chemical or radiological components (e.g., manufacturing/storage/transportation accidents or terrorist related explosive devices); and technological (human-caused) hazards.

## D. Planning Assumptions

General planning assumptions for the coordination of the regional response to a catastrophic incident are outlined in the *Puget Sound Regional Catastrophic Disaster Coordination Plan* and are applicable to this annex as well. The following planning assumptions are specific to the pre-hospital response to a catastrophic incident.

The initial pre-hospital response to a catastrophe will rely almost exclusively on local jurisdictional assets in the affected area. State or Federal resources may not be available during the first 48-72 hours of response.

An EMS Coordination Group will convene, *only as necessary*, to develop regional situational awareness and provide strategic and policy-level coordination for the pre-hospital response, without impacting local protocols or plans for tactical response.

During a catastrophic incident, competing demands may require resource prioritization and rationing. The EMS Coordination Group will develop consensus-based recommendations regarding the prioritization of pre-hospital response requirements in the region. The EMS Coordination Group will use the processes outlined in this annex to develop its recommendations.

Weapons of Mass Destruction (WMD) Field Protocols and/or existing State Medical Program Director Protocols are State protocols that establish the standard for field performance in a Mass Casualty Incident (MCI). WMD Field Protocols are available at: http://www.doh.wa.gov/Portals/1/Documents/Pubs/530142.pdf.

A Field Treatment Site (FTS) may be used for short-term (usually not more than 48 hours) patient collection, triage, and the provision of emergency field treatment until patients can be safely transported to a hospital or other appropriate health care facility, evacuated from the region, transported to a fatality management site, or sent home. An FTS is considered part of the pre-hospital response system and EMS is responsible for its operation. An FTS may be established in strategic locations at or near an incident site(s).

Alternate Care Facilities (ACFs) may be used to augment the medical surge capacity of the region's health care system. An ACF provides for the long-term (usually longer than 48 hours) medical sheltering and provision of urgent (non-acute) care services and select traditional inpatient services in locations where these services are not typically provided. An ACF is typically pre-identified within a jurisdiction and is part of the health care system's strategy to augment surge capacity.

In a catastrophe, the volume of patients requiring medical treatment will likely overwhelm the surge capacity of hospitals and other health care facilities in the Puget Sound Region. Patients will need to be evacuated outside of the Puget Sound Region for care under the *Regional Medical Evacuation and Patient Tracking Mutual Aid Plan (MAP).*

Detailed tracking and patient identification during a catastrophic incident will be initiated at the hospital or point of definitive care. EMS is a partner and stakeholder in effective patient tracking.

During a catastrophic incident, one hospital may be designated to serve as the Disaster Medical Control Center (DMCC) for the Puget Sound Region. This function (also referred to as Hospital Control) provides EMS with a coordinated and planned distribution of patients to area hospitals or other health care facilities based on patient needs (clinical management) and concurrent assessment of hospital capabilities during the distribution. For the purpose of this annex, the terms DMCC and Hospital Control are synonymous.

Harborview Medical Center (HMC), the only Level 1 Trauma Center in Washington State, will assume primary responsibility for the regional DMCC function during a catastrophic incident. In the event HMC is not able to serve as the regional DMCC, a backup facility will be chosen from the following candidates:

  - Providence Regional Medical Center, Everett (North boundary)
  - MultiCare Good Samaritan Hospital, Puyallup (South boundary)

- In a catastrophe, the Governor of Washington State will request Federal assistance under the authority of the Robert T. Stafford Disaster Relief and Emergency Assistance Act. A resulting Presidential declaration of emergency or major disaster may trigger the activation of the National Disaster Medical System (NDMS) subsequent to a State request for medical assistance. Absent a Stafford Act declaration, the Secretary of the U.S. Department of Health and Human Services (HHS) may request activation of the NDMS in a declared Public Health Emergency.
- Under Presidential disaster and Public Health Emergency declarations, the Secretary of HHS may implement temporary waivers of certain Medicare, Medicaid, and Children's Health Insurance Program requirements under section 1135 of the Social Security Act. This includes waiver of Emergency Medical Treatment and Labor Act (EMTALA) sanctions for direction or relocation of an individual to receive a medical screening examination in an alternative location pursuant to an appropriate State emergency preparedness plan, or transfer of an individual who has not been stabilized if the transfer is necessitated by the circumstances of the declared emergency.
- A long-term care facility evacuation plan for King and Pierce Counties, developed under the Regional Catastrophic Preparedness Grant Program, includes mutual aid agreements for resource sharing and does not rely principally on EMS resources to transport individuals to receiving facilities. Similar plans in other counties across the Puget Sound Region are not yet developed (as of October, 2012).

# II. SYSTEM DESCRIPTION FOR PRE-HOSPITAL COORDINATION

This section describes the purpose and composition of the EMS Coordination Group, as well as the roles and responsibilities of this group during the response to catastrophic incidents.

## A. EMS Coordination Group Overview

### Role of the EMS Coordination Group

The EMS Coordination Group provides senior leadership and strategic coordination to the pre-hospital planning and response to actual or potential catastrophic incidents affecting the Puget Sound Region. *It is important to emphasize that the EMS Coordination Group does not become involved in tactical response decisions. These decisions will be made by responsible officials at the jurisdictional level under their existing authorities, policies, plans, and procedures.*

A primary role of the EMS Coordination Group is to gather incident information from jurisdictions in order to develop common situational awareness of the region's pre-hospital status and response needs. Any one or more of the following sources may be used to obtain incident information for the pre-hospital response:

- City, County and State Emergency Operations Centers (EOCs)
- Regional DMCC
- Medical Program Directors
- EMS Coordination Group representatives
- Open-sources (e.g., news media, radio, Internet).

In addition, the EMS Coordination Group may develop recommendations on strategic or policy-level issues related to the region's pre-hospital response. Such issues may include, but are not limited to, the following:

- Prioritization of pre-hospital response requirements when the region's pre-hospital response system is severely strained or overwhelmed. The following criteria will be used as the basis for developing recommendations related to prioritization of pre-hospital response needs for the region:
    - Life Safety
        - Responders
        - Public
    - Incident stabilization
    - Property conservation
    - Environmental impact
- Establishment and operation of Field Treatment Sites
- Distribution of patients within the regional health care system based on patient need(s) and a concurrent assessment of hospital capabilities during incident response
- Implementation of State protocols establishing the standard for field performance in a catastrophic incident.

Because the EMS Coordination Group has no decision-making authority, its recommendations are intended only to provide decision makers with the information they need to understand the region's pre-hospital response needs so they can make informed decisions. Therefore, EMS Coordination Group recommendations are disseminated in print and/or electronic format to the following entities:

- Emergency Support Function (ESF) 4 (Firefighting) and ESF 8 (Public Health and Medical Services) representatives at the respective County Emergency Operations Centers (EOCs) and the Washington State EOC (ESF 8 only). The ESF 4 and 8 representatives are responsible for keeping Emergency Managers apprised of EMS Coordination Group recommendations.
- County/City Fire Chiefs
- Regional DMCCs
- County/City Medical Program Directors
- Public Health Officers
- Other multi-agency coordination groups that either have a role in supporting the pre-hospital response or may be impacted by the pre-hospital response
- Other entities, as deemed appropriate by the EMS Coordination Group.
- The process by which the EMS Coordination Group's recommendations are communicated to external stakeholders is described in the next section of this annex.

## Composition of the EMS Coordination Group

The EMS Coordination Group consists of a core membership that convenes virtually (typically via a conference call) whenever this annex is implemented. Core members are responsible for helping to develop regional situational awareness and consensus-based recommendations, when necessary, on strategic or policy issues related to the pre-hospital response. The core membership consists of:

- County Fire Chiefs' representative (counties may default to County ESF 4)
- Regional DMCC Representative (Harborview Medical Center) and back-up DMCCs (Multicare Good Samaritan Hospital and Providence Everett Medical Center)
- County Public Health Officer (counties may default to County ESF 8)
- Medical Program Directors (eight counties and City of Seattle)
- Washington State ESF 8 representative

EMS Coordination Group representatives should be senior-level administrators or officials who are authorized to represent the interests of, and speak on behalf of, their constituency in EMS Coordination Group deliberations. One representative may represent a group of agencies or organizations on the EMS Coordination Group (e.g., one Medical Program Director may represent multiple counties). In addition, each core member must identify and train two backup representatives to assist the primary representative or represent him/her in EMS Coordination Group deliberations if the primary representative is unavailable.

The EMS Coordination Group has the flexibility to call on a variety of subject matter experts (SMEs) during response to provide guidance, on an as-needed basis, depending on the type of incident and the jurisdictions involved. SME advisors provide advice or guidance only; they do ***not*** have direct input into EMS Coordination Group recommendations. Potential SME advisors include, but are not limited to, the following:

- Washington Ambulance Association representative

- County Coroner(s) or Medical Examiner representatives
- Non-Governmental Organization (NGO) representative(s) (e.g., American Red Cross)
- Healthcare Coalition representative(s)
- Fire and EMS representative(s) from jurisdictions outside the Puget Sound Region
- Washington State Department of Transportation representative or local jurisdiction transportation representatives
- Others, as deemed appropriate by the core members of the EMS Coordination Group

## B. EMS Coordination Group Components and Roles

This section describes the organizational structure (Figure 2-1) and roles of the EMS Coordination Group and its supporting elements, which include the EMS Coordination Group Coordinator, Situation Assessment Unit, Resource Status Unit, and Documentation Unit.

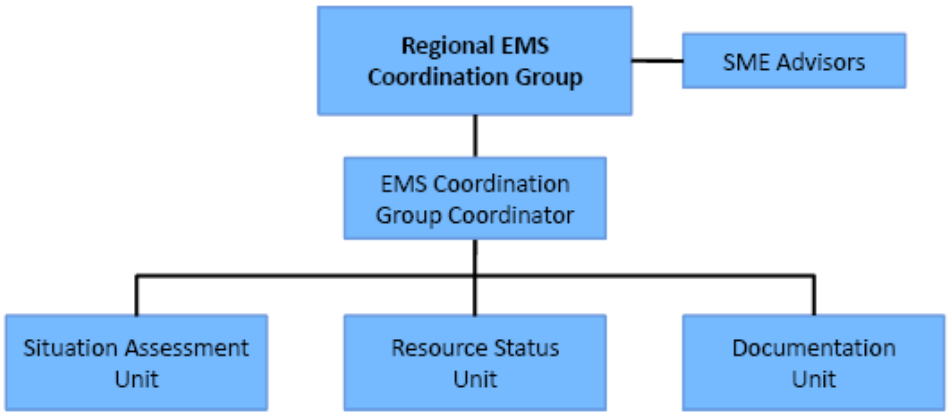


Figure 2-1: EMS Coordination Group Organization Chart

## Responsibility of EMS Coordination Group Core Membership

As stated previously, the core membership of the EMS Coordination Group will participate in virtual meetings during the response to any catastrophic incident that affects the Puget Sound Region. The timing and frequency of these virtual meetings will be incident-specific. The core member who requests activation of the EMS Coordination Group will set the time for the initial call depending on the unique parameters of the incident. A schedule for subsequent meetings (if Group members determine additional meetings are necessary) will be established during the first meeting (default time for subsequent meetings will be 11:00 a.m.). In order to minimize the burden placed on EMS Coordination Group members, the meetings will be held only as necessary, and they typically will occur virtually through a dedicated teleconference and/or web-based system.

Core members of the EMS Coordination Group:

- Provide input on the pre-hospital response needs within their jurisdiction or area of responsibility in order to develop common situational awareness of the region's pre-hospital response.

- Develop consensus-based recommendations to prioritize pre-hospital response needs across the region. Representatives may also collectively develop recommendations on how requests for supplemental pre-hospital assistance should be prioritized through established State procedures.
- Develop consensus-based strategic or policy recommendations for the pre-hospital response, including guidance on how to address or resolve conflicting policies among agencies or jurisdictions.
- Communicate regional situational awareness and the EMS Coordination Group's recommendations back to their respective Agency Administrator.
- Coordinate the implementation of Washington State protocols (alternate standards of care, WMD Field Protocols, etc.) that establish the standard for field performance for EMS providers in consultation with EMS County Medical Program Directors.
- Support the Regional DMCC in promulgating a strategy for the efficient distribution of patients to area hospitals based on patient needs and a concurrent assessment of hospital capabilities during incident response.
- Attend functional meetings annually for trainings/exercises, to review this annex, develop policies and procedures, and maintain up-to-date membership.

## EMS Coordination Group Chairperson

The EMS Coordination Group will elect a Chairperson, who is responsible for encouraging full participation among EMS Coordination Group members by ensuring a fair and transparent process for providing input and developing recommendations. In addition, the Chairperson may represent the interests of the EMS Coordination Group to other functional area leaders within the Puget Sound Region or to other coordination groups (e.g., Regional Multi-Agency Coordination Group) when preparing for, responding to, or recovering from a catastrophic incident.

The Chairperson position shall rotate every two years among the EMS Coordination Group's core membership via open nominations and a majority vote. Nominees must be from a city or county other than the incumbent's. A backup should also be designated in the event the Chairperson is not available to participate in the EMS Coordination Group meeting.

## EMS Coordination Group Coordinator

In order for the EMS Coordination Group to function effectively and efficiently during incident response, an administrative support structure must be in place. This support structure is led by the EMS Coordination Group Coordinator, who has the following responsibilities:

- Maintain the EMS Coordination Group's core membership list, including up-to-date and redundant emergency contact information for representatives and their backups.
- Establish and disseminate EMS Coordination Group meeting schedules and agendas to the core membership.
- Invite SME advisors to participate in EMS Coordination Group meeting at the request of the core membership.
- Moderate EMS Coordination Group meetings to keep discussion on track and ensure that all agenda items are addressed.

- Oversee the Situation Assessment Unit, Resource Status Unit, and Documentation Unit to ensure pertinent information is collected, collated, and disseminated to EMS Coordination Group core members and other relevant parties. Depending on the size and complexity of an incident, and staff availability, the EMS Coordination Group Coordinator may also support/fulfill the functions performed by one or more of these units during incident response.
- Ensure adequate equipment and supplies are available and operational for EMS Coordination Group meetings and functions, including dedicated, redundant telecommunications systems, web-based applications/tools, and accessible information technology (IT) support.
- Assist in planning and developing annual EMS Coordination Group trainings and exercises.

The Coordinator position will be held by the Central Region EMS and Trauma Council – Pre-Hospital Sub-Committee Chairperson or his/her designee.

## Situation Assessment Unit

The Situation Assessment Unit collects and collates pertinent information on the incident (e.g., activation status of County/State EOCs, transportation issues, weather conditions) and the pre-hospital response from affected jurisdictions and agencies to provide regional situational awareness. The intent is to provide the EMS Coordination Group with a high-level snapshot of the incident. This support unit also gathers information from the Resource Status Unit on critical resource needs and the availability of resource caches in the region. The Situation Assessment Unit may use any of the following sources to gather this information:

- County EOC and Washington State EOC Situation Reports (SitReps) or the region's Incident Snapshot (ISNAP) report, which provides a high-level impact assessment during a catastrophic disaster. The Situation Assessment Unit will coordinate with the ESF 4 or ESF 8 representatives in the EOCs to collect this information.
- Regional and local DMCCs
- EMS Coordination Group representatives
- Medical Program Directors
- County Public Health Officers
- News media, radio, Internet, social media, etc. (however, preference should be given to verifiable information reported by emergency management authorities)

Depending on the size and complexity of an incident, the Situation Assessment function may be filled by the EMS Coordination Group Coordinator or another person that can assist the Coordinator in providing this support. This position will be held by the Central Region EMS and Trauma Council – Pre-Hospital Sub-Committee Chairperson.

## Resource Status Unit

The primary role of the Resource Status Unit is to track pre-hospital resource needs (requests) and availabilities of pre-hospital equipment and personnel throughout the incident. Specifically, this function entails:

- Obtaining input from County EOCs on critical pre-hospital resource needs (e.g., mass casualty caches/trailers, Personal Protective Equipment (PPE), and Metropolitan Medical Response System (MMRS) antidote stockpiles)
- Maintaining a database of resource cache availability in the region and assisting the EMS Coordination Group Coordinator in developing displays to facilitate EMS Coordination Group deliberations (*see Appendix C for a summary of existing Pre-Hospital Emergency Triage and Treatment caches in the region)*.
- Providing resource status updates to the Situation Assessment Unit, as requested, to assist in providing situational awareness for the regional pre-hospital response.

### Documentation Unit

The Documentation Unit maintains a written record of all EMS Coordination Group meetings and archives this information so that it is easily accessible and can be used to inform After-Action Reviews or the development of trainings/exercises. The following types of information may be recorded and maintained by the Documentation Unit:

- Attendance and notes taken from all EMS Coordination Group meetings/calls
- Situational awareness for the regional pre-hospital response
- EMS Coordination Group recommendations and the criteria used by the EMS Coordination Group to develop its recommendations

After each EMS Coordination Group meeting/call, the Documentation Unit will disseminate any recommendations the EMS Coordination Group develops to Emergency Managers and County and Washington State EOCs (through the respective ESF 4 and ESF 8 representatives), and other relevant groups in the region via email, print, conference call, Web sites, etc. In addition, the Documentation Unit prints and archives any recommendations, signed and dated by the EMS Coordination Group Chairperson.

## C. Meeting Format and Decision-Making Process

### EMS Coordination Group Meeting Format

The EMS Coordination Group typically meets virtually during a catastrophic incident through the use of secure web-conferencing or teleconferencing capabilities. The EMS Coordination Group Coordinator tightly facilitates the meetings using a pre-established agenda in order to limit time commitments and keep the focus on strategic or policy issues relevant to the pre-hospital response.

The EMS Coordination Group Coordinator will begin each meeting by conducting a roll call and providing situational awareness for the regional pre-hospital response. Potential issues to address include an assessment of the pre-hospital system for incident and non-incident related demands, resource needs, projected reduction of available EMS staff and other pre-hospital response capability (e.g., equipment and supplies). The EMS Coordination Group Coordinator will also brief any new developments since the previous meeting and review previous recommendations from the EMS Coordination Group.

The EMS Coordination Group Chairperson will moderate discussion on strategic or policy-level issues that require EMS Coordination Group input (see Appendix D). The following discussion format is followed during the meeting (see Appendix F for a sample agenda):

- The EMS Coordination Group Chairperson introduces an issue/problem

- Representatives and SME advisors discuss the specific issue/problem and its implications for the regional pre-hospital response, and identify options or potential solutions
- The EMS Coordination Group Chairperson, in collaboration with the representatives, develops a consensus-based recommendation for the issue/problem.

The EMS Coordination Group Coordinator schedules the next meeting before the group adjourns. The EMS Coordination Group Coordinator forwards notes from the meeting, including any recommendations that the group develops, to the Documentation Unit to be archived and disseminated to relevant County/State agencies or other organizations.

## Decision-Making Process

Only core members of the EMS Coordination Group may develop recommendations for the pre-hospital response. All issues brought before the EMS Coordination Group will be acted upon by *consensus* and result in one of the following actions:

- Option 1: Make a collaborative recommendation and assign responsibility and expectation for implementation
- Option 2: Defer the decision for consideration at a later date (e.g., until more information has been collected)
- Option 3: Defer decisions that are beyond the scope of the EMS Coordination Group to the appropriate authorities.

## D. EMS Coordination Group IT/Telecommunications

Communications and information technology (IT) systems, to include teleconferencing or web-based conferencing capability, must be available 24/7 for use by the EMS Coordination Group. The Pierce County Everbridge emergency notification system will be utilized as the primary system to support teleconferencing capability for the EMS Coordination Group during incident response (see Implementation Triggers and Protocols for further information on how regional conference calls will be initiated). In the event the Everbridge system is unavailable, Kitsap or Snohomish County Department of Emergency Management will provide a dedicated teleconference line for use by the EMS Coordination Group.

In the event that primary telephone lines and cell phone communications are unavailable, there are two methods of alternate communication methods: Satellite Phone and Amateur Radio Emergency Services (ARES). The preferred method if our primary and backups are unavailable will be via Satellite Phone. Satellite phones are available in hospitals and EOCs. They are secure. They are not dependent on infrastructure for usage. Another system available for use in a catastrophe when other systems are not available is ARES. ARES systems allow many users at once and can be very conducive to a rapid, wide spread means of communication among decision makers. Regional ARES volunteers exist and function as enabled in Washington Administrative Code (WAC) 118-04. These volunteers are great resources, but it is worth noting that ARES is not secure, which lends some difficulty to the efforts of the EMS Coordination Group.

Protocols for the use of communications technology should be defined during preparedness planning and shared with representatives on the EMS Coordination Group.

# III. CONCEPT OF COORDINATION

This section describes the authorities and triggers for implementing this annex in a catastrophe. It describes the various implementation phases and the role of the EMS Coordination Group during each phase. This section also describes how the EMS Coordination Group coordinates with and disseminates its recommendations to jurisdictional officials that have authority and responsibility for emergency response.

## A. Authority for Annex Implementation

Any core member of the EMS Coordination Group, as well as County Emergency Managers, County or City Fire Chiefs, or a County Executive or City Mayor (or his/her designee) within the Puget Sound Region may request the implementation of this annex.

## B. Implementation Triggers

Triggers that could require implementation of this annex include, but are not limited to, any one or more of the following conditions:

- A potential or imminent threat of a catastrophic incident
- Implementation of more than one County's, City's and/or Tribe's Mass Casualty Incident (MCI) plan
- Declaration of emergency by at least one local jurisdiction or tribal authority
- Governor-declared State of Emergency
- Request/initiation of regional DMCC for patient distribution
- Implementation of local and/or State Public Health and medical emergency response plans
- Determination by EMS officials that regional information sharing is needed to develop common situational awareness and facilitate strategic or policy level coordination
- Determination by a jurisdiction that it can *provide* assistance to affected jurisdictions during a catastrophic incident
- Any incident that has a catastrophic impact on critical infrastructure, including communications and transportation systems within the region.

## C. Protocol for Requesting EMS Coordination Group Activation

If any one or more of the above triggers is met, or in the presence of another indicator of an actual or impending catastrophic incident, any core member of the EMS Coordination Group, or other authority as specified in Section A above, may take the following steps to initiate a regional conference call for the EMS Coordination Group:

- Contact the Pierce County Department of Emergency Management (DEM) by calling 253-798-7470 and ask for the Duty Officer.
- Request that the Duty Officer notifies all EMS Coordination Group core members that a meeting has been requested.

- Provide the Duty Officer with the date and time for the virtual meeting, as well as the desired method of communication (Everbridge emergency notification system will be the default). This information will be provided to core members in the notification message. (Please note: it may be advisable to schedule the initial call within a few hours of the incident so that EMS Coordination Group members have time to gather data and develop a situational assessment for their area of responsibility.)
- Identify the purpose of the meeting and specify any key strategic or policy issues (if known at the time) that will be discussed during the meeting.
- If telephone and internet connections are unavailable, the EMS Coordination Group Coordinator, or any core member of the EMS Coordination Group in the Coordinator's absence, may initiate the regional call on satellite phone or amateur radio through County EOCs.

Participants on the first EMS Coordination Group regional call may include all core members of the EMS Coordination Group, as well as the EMS Coordination Group Coordinator and support staff (Situational Assessment Unit, Resource Status Unit, Documentation Unit), as needed.

## D. Tiered Incident Levels for Annex Implementation and EMS Coordination Group Response

Implementation of this annex is designed to be flexible in response to changes in the size, scope, or complexity of a disaster threat or actual incident. Consequently, the implementation levels of the EMS Coordination Group, and corresponding actions items, are aligned with the five levels of incident complexity, or "incident levels" used in local emergency planning within the Puget Sound Region.

Thus, the incident levels for the EMS Coordination Group build upon one another, such that the EMS Coordination Group activities defined for one level carry over as the EMS Coordination Group transitions to the next highest level. Activities conducted for purposes of routine plan maintenance or responder education, training, and exercising are noted under Incident Levels 5 and 4 in Table 3-1.

The following table provides the scope of EMS Coordination Group response actions, based on the five incident levels.

Table 3-1: EMS Coordination Group Action Items

| Incident Level & Operational Impact | EMS Coordination Group Action Items |
|---|---|
| Levels 5 & 4<br><br>Impact Levels: "Normal" or "Low"<br><br>*Daily Pre-Hospital Operations. Routine emergency situations in which EMS requirements are addressed through local resources* | The EMS Coordination Group Coordinator conducts the following activities to maintain the structure and capabilities of the EMS Coordination Group:<br>• Develops and maintains the EMS Coordination Group membership list and contact information<br>• Documents MCI resource caches that exist in the region and identifies potential gaps<br>• Identifies and conducts annual tests of the primary and backup communications systems used by the EMS Coordination Group<br>• Develops and conducts annual trainings and exercises for the EMS Coordination Group, documents lesson learned, and implements corrective actions as needed. |
| Level 3<br><br>Impact Level: "Moderate"<br><br>*An emergency situation or threat that poses a potential catastrophic risk to the region (e.g., major storm risk or a large, pre-planned event)* | The EMS Coordination Group Coordinator conducts the following activities:<br>• Notifies EMS Coordination Group core members to be on standby in the event the situation changes and requires that the EMS Coordination Group convenes<br>• Notifies relevant planning partners for situational awareness of pre-hospital resources<br>• Notifies Situation Assessment Unit, Resource Status Unit, and Documentation Unit leads to be on standby or to collect and/or disseminate information, as needed<br>• Tests the EMS Coordination Group primary and backup communications systems<br>• Updates status of regional MCI caches<br>• Reviews/updates information reporting templates to ensure relevant situation data can be collected for the specific hazard<br>• Gathers information on the incident or threat (through the Situation Assessment Unit) and disseminates a regional situational assessment to EMS Coordination Group core members, as needed<br>• Verifies that the Regional DMCC is activated. |

| | |
|---|---|
| Level 2<br><br>Impact Level: "High"<br><br>*An emergency situation that poses a probable or imminent catastrophic threat to the region, or an emergency situation that requires regional coordination but may not be catastrophic.* | The EMS Coordination Group is activated (supported by the Situation Assessment Unit, Resource Status Unit, and Documentation Unit, as needed) and conducts the following activities:<br>• Convenes via conference call (or other available communications mechanism) to develop situational awareness of EMS response requirements in the Puget Sound Region<br>• Reviews the status of regional MCI caches, discusses/documents local mutual aid and resource sharing, and identifies potential resource requests for State, inter-State, or Federal assistance, if applicable<br>• Develops and disseminates pre-hospital status summaries for the Puget Sound Region and any consensus-based strategic or policy recommendations, if applicable, to relevant planning partners (e.g., County and State ESF 4 and ESF 8 representatives). |
| Level 1<br><br>Impact Level: "Severe"<br><br>*The scope of the emergency has expanded to the point that limited or no additional EMS resources are available in the Puget Sound region. State, inter-State, and Federal assistance is required.* | All action items listed in Level 2 are completed, if not already done. In addition, the EMS Coordination Group may do the following:<br>• Develop consensus-based recommendations prioritizing requests for State and Federal pre-hospital assistance. The actual requests for assistance are made in accordance with established State procedures<br>• Discuss strategic or policy issues, such as the potential need to establish FTSs or implement MCI standards of field performance in accordance with State protocols<br>• Gathers information (via State ESF 8 representatives) on the activation of NDMS teams and potential forward movement of patients outside of the Puget Sound Region<br>• Identifies pre-hospital resources in the Puget Sound Region needed to move patients to evacuation airheads, if requested by NDMS. |

# IV. COORDINATION WITH OTHER INCIDENT MANAGEMENT ENTITIES

Figure 4-1 shows the formal pathway for incident management coordination and support (designated by solid black lines), which flows from local jurisdictions to their respective County Emergency Operations Center (EOC), then to the State EOC, and finally to the Federal Government. The EMS Coordination Group does not usurp or infringe upon this coordination structure. Instead, the EMS Coordination Group provides a mechanism for pre-hospital responders to collect and share information in order to develop regional situational awareness and recommendations on strategic or policy-level issues related to the pre-hospital response.

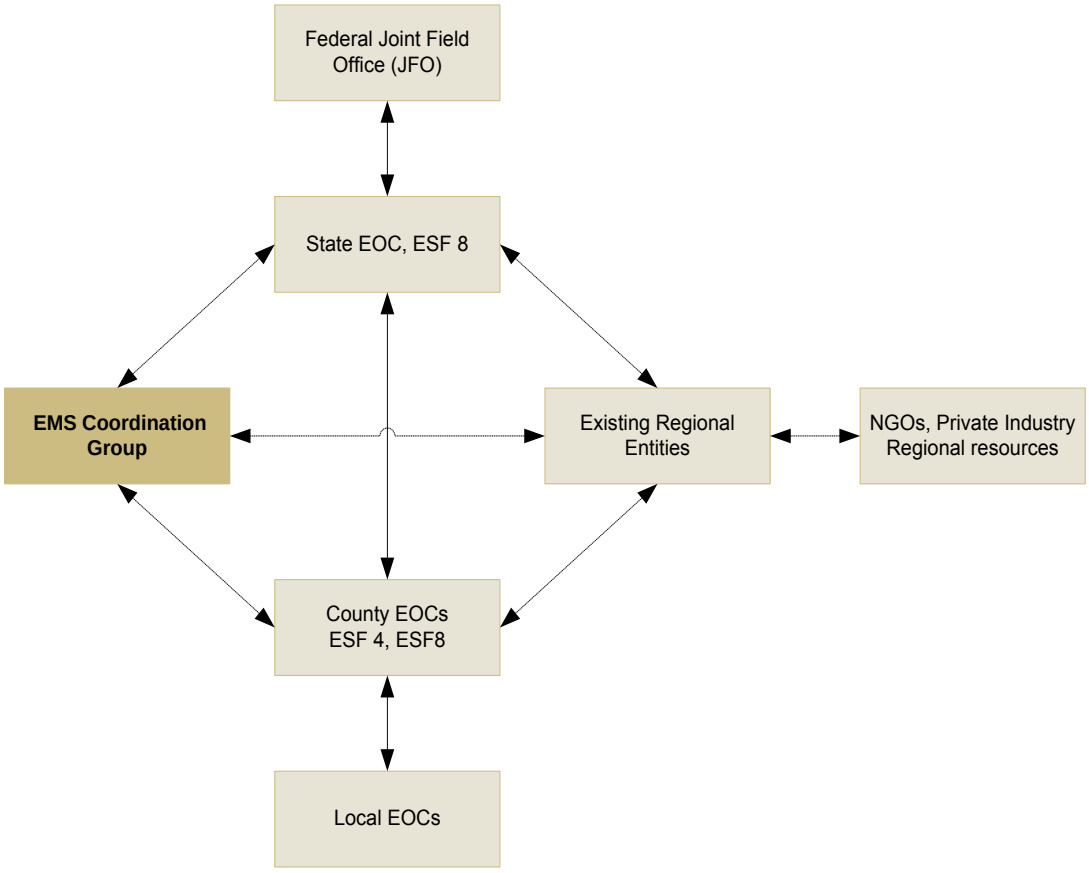


Figure 4-1: Regional EMS Coordination Group Information Flow Diagram

## A. Coordination with County/Tribal Governments

During an emergency, County and Tribal EOCs are activated to support Incident Command and coordinate the response activities of County/Tribal governments, unincorporated areas, and other entities within or adjacent to their jurisdictional boundaries. The EMS Coordination Group facilitates information sharing and multi-jurisdictional pre-hospital response coordination for the Puget Sound Region.

The EMS Coordination Group regularly coordinates with County/Tribal government authorities primarily through the County/City Fire Chiefs or County Medical Program Directors who serve as core members of the EMS Coordination Group. During incident response, EMS Coordination Group recommendations are disseminated to the appropriate ESF 4 and ESF 8 representatives at the County EOCs to keep County Emergency Managers apprised of the region's pre-hospital response needs and to help Emergency Managers make informed decisions about allocating resources.

## B. Coordination with Regional DMCC

The DMCC serves as a conduit for information exchange and common situational awareness between local EMS and hospitals during incident response. The DMCC provides EMS with a planned distribution of patients to hospitals and other health care facilities in their jurisdiction based on patient needs and a concurrent assessment of hospital capabilities.

In a catastrophic incident, the Regional DMCC communicates with the local DMCC, who in turn communicates with local hospitals and health care facilities to obtain status updates. The local DMCC aggregates the data for the Regional DMCC so they can coordinate patient distribution. The Regional DMCC also coordinates with activated NDMS to facilitate patient movement out of the Puget Sound Region, if necessary.

The EMS Coordination Group coordinates with the Regional DMCC via the Regional DMCC representative(s) who serves as a core member of the EMS Coordination Group.

## C. Coordination with State Government

The EMS Coordination Group shares information and maintains communications with the State EOC through the State ESF 8 representative that serves on the EMS Coordination Group. The State ESF 8 representative or Washington State Department of Health EMS SME may provide information on the availability of pre-hospital resources to assist the EMS Coordination Group in its deliberations. It is important to emphasize that the EMS Coordination Group does not make resource requests to the State or to local Emergency Managers; it merely provides consensus-based recommendations that help to establish regional priorities for the pre-hospital response. Participation represents one way that the Washington State Department of Health may "lean forward" to fulfill its mission.

## D. Coordination with the Federal Government

The EMS Coordination Group coordinates with the Federal Government ***indirectly*** through the State ESF 8 representative who serves as a core member of the EMS Coordination Group. All requests for and receipt of Federal assistance for the pre-hospital response are coordinated through the State EOC or the Federal Joint Field Office (if operational) in accordance with established State protocols.

The EMS Coordination Group *may* help coordinate "on the ground" response operations with deployed NDMS teams for patient movement if so requested by County or State Emergency Management. The EMS Coordination Group may provide strategic guidance on the pre-hospital response as it relates to forward patient movement operations. NDMS and other supplemental teams from outside the region may provide liaisons to the EMS Coordination Group.

# V. INFORMATION COLLECTION AND DISSEMINATION

## A. Information Reporting Template

The EMS Coordination Group will develop a standardized template to collect information from County ESF 4 and ESF 8 representatives (see Appendix E for a sample template). The reporting template will assist the EMS Coordination Group in developing and maintaining situational awareness of the Pre-Hospital Emergency Triage and Treatment response.

As needed, the ESF 4 and ESF 8 representatives will supply the appropriate information to their respective Emergency Manager for dissemination via the Public Information Officer or the Joint Information Center.

# VI. ANNEX DEVELOPMENT AND MAINTENANCE

The EMS Coordination Group will annually assess the need for revisions to the Pre-Hospital Emergency Triage and Treatment Annex based on the following considerations:

- Changes to State or Federal regulations, requirements, or organization
- Implementation of tools, procedures or resources (e.g., regional MCI caches) that alter or improve upon annex components
- Lessons learned from EMS Coordination Groups trainings and exercises, or from actual activation
- The need for additional subsidiary appendices to develop response capabilities or eliminate capability gaps, as suggested by EMS Coordination Group members or developed by the Puget Sound Regional Catastrophic Planning Team (RCPT).

The Regional EMS Coordination Group Coordinator is responsible for the maintenance, revision, and distribution of the Pre-Hospital Emergency Triage and Treatment Annex. The EMS Coordination Group Coordinator will maintain a record of amendments and revisions, as well as executable versions of all documents, and will be responsible for distributing the plan to all applicable agencies.

# VII. RECOMMENDATIONS

This section identifies and describes key issues or planning/funding gaps that may affect EMS Coordination Group operations. These issues/gaps require additional work to resolve:

1. Establishment of a training and exercise schedule.
2. Nomination and selection of EMS Coordination Group Chairperson in accordance with processes outlined in this annex.
3. Sustainment of staffing for the EMS Coordination Group Coordinator position, as well as the positions in the Situation Assessment Unit, Resource Status Unit, and Documentation Unit.
4. Provision of dedicated and reliable secondary and tertiary IT/Communications infrastructure needed to support the EMS Coordination Group during incident response.
5. Determining which agency/authority will maintain responsibility for tracking and documenting financial expenditures related to EMS Coordination Group preparedness planning, training/exercising, and response activities.

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# VIII. AUTHORITIES AND REFERENCES

The *Puget Sound Regional Catastrophic Disaster Coordination Plan* provides generally applicable authorities, requirements, references and regulations for the Regional Coordination Plan, including the Pre-Hospital Emergency Triage and Treatment (PETT) Annex. This section highlights relevant legal authorities and Mutual Aid Agreements that apply to eight-county Puget Sound region, as listed below.

Local

- Seattle Disaster Readiness and Response Plan
- King County Fire Resource Plan
- Pierce County MCI Plan

Regional

- Regional Catastrophic Disaster Coordination Plan
- Washington State Region 3 Hospitals Memorandum of Understanding (MOU)
- Washington State Region 7 Healthcare Inter-Jurisdictional Mutual Aid Agreement *(April 2009)*
- Regional Hospital Control Plan
- Regional Medical Evacuation and Patient Tracking Mutual Aid Plan (MAP)
- Pacific Northwest Emergency Management Arrangement (PNEMA)

State

- Washington Administrative Code (WAC)
- Revised Code of Washington (RCW)
- Washington State Emergency Operations Plan (April 2009)
- Washington State Mass Casualty – All-Hazards Field Protocols
- Washington State Fire Services Resource Mobilization Plan
- Cross-Border Ambulance Reciprocity (#05-01), Washington State Department of Health, Office of Emergency Medical Services and Trauma System, Effective November 30, 2003.
- Public Health Mutual Aid Plan Standard Operating Procedures (SOPs) of the Inter-jurisdictional Public Health Mutual Aid Agreement (MAA) *(*January 2009*)*
- Mass Casualty – All Hazards Field Protocol (January 2008)
- Emergency Vaccination Information for EMS Personnel (September 2009, please refer to the active DOH website for the current version and updates)
- Emergency Management Assistance Compact Agreement

Federal

- FEMA National Incident Management System (December 2008)
- Robert T. Stafford Disaster Relief and Emergency Assistance Act (the Stafford Act), 42 U.S.C. §5121-5206

- Homeland Security Presidential Directive 5, Domestic Incident Management (February 28, 2005)
- Presidential Policy Directive 8, National Preparedness (March 30, 2011)
- National Response Framework (March 22, 2008), including the Catastrophic Incident Annex and the Catastrophic Incident Supplement
- DHS National Planning and Execution System (draft March 27, 2007)

# Appendix A: Annex Glossary

All-Hazards: Describing an incident, natural or manmade, that warrants action to protect life, property, environment, and public health or safety, and to minimize disruptions of government, social, or economic activities.

Alternate Care Facility: An area where *long-term* (usually longer than 48 hours) medical needs sheltering, urgent (non-acute) care services, and select traditional inpatient services are not usually provided, but which is deliberately repurposed for provision of such services during disasters that overwhelm the existing healthcare system. Locations of potential ACFs are usually pre-identified, and the ACF is considered part of the healthcare system's strategy to augment surge capacity.

Cache: A predetermined complement of tools, equipment, and/or supplies stored in a designated location, available for incident use.

Catastrophic Incident: Any natural or manmade incident, including terrorism, which results in extraordinary levels of mass casualties, damage, or disruption severely affecting the population, infrastructure, environment, economy, national morale, and/or government functions.

Chain of Command: A series of command, control, executive, or management positions in hierarchical order of authority.

Coordinate: To advance systematically an analysis and exchange of information among principals who have or may have a need to know certain information to carry out specific incident management responsibilities.

Disaster Medical Control Center (DMCC): The hospital responsible for providing EMS with a planned distribution of patients to area hospitals based on patient needs (clinical management) and concurrent assessment of hospital capabilities during the distribution. For the purposes of this plan, Harborview Medical Center is designated as the primary Regional DMCC to coordinate patient distribution across the Puget Sound Region with Providence Regional Medical Center, Everett (North boundary) and MultiCare Good Samaritan, Tacoma (South boundary) designated as backups. *(Synonymous with Hospital Control for the purposes of this annex)*

Emergency Medical Services (EMS): This term refers to medical treatment and care that may be rendered at the scene or any medical emergency or while transporting any patient in an ambulance to an appropriate medical facility, including ambulance transportation between medical facilities. *(RCW 70.168.015)*

Emergency Operations Center (EOC): The physical location at which the coordination of information and resources to support incident management (on-scene operations) activities normally takes place. An EOC may be a temporary facility or may be located in a more central or permanently established facility, perhaps at a higher level of organization within a jurisdiction. EOCs may be organized by major functional disciplines (e.g., fire, law enforcement, and medical services), by jurisdiction (e.g., Federal, State, Regional, Tribal, City, County), or some combination thereof.

Emergency Support Functions (ESFs): Used by the Federal Government and many State governments as the primary mechanism at the operational level to organize and provide assistance. ESFs align categories of resources and provide strategic objectives for their use. ESFs utilize standardized resource management concepts such as typing, inventorying, and tracking to facilitate the dispatch, deployment, and recovery of resources before, during, and after an incident.

Federal: Of or pertaining to the Federal Government of the United States of America.

Field Treatment Sites (FTS): An area that is designated by emergency officials for the *short-term* (usually not more than 48 hours) collection and triaging/sorting of patients and the delivery of emergency

field treatment until patients can be safely transported to a definitive care facility, evacuated from the region, transported to a fatality management site, or sent home. FTSs are part of the pre-hospital response system and are generally not pre-identified but are established at or in proximity to the incident site or in strategic locations near the disaster area for geographically dispersed incidents.

Fire Chief: Includes the chief officer of a statutorily authorized fire agency, or the fire chief's authorized representative. Also included are the Department of Natural Resources fire control chief, and the Department of Natural Resources regional managers. *(Washington State Fire Services Resource Mobilization Plan)*

Hazard: Something that is potentially dangerous or harmful, often the root cause of an unwanted outcome.

Hospital: Refers to a facility licensed under Chapter 70.41 RCW, or comparable health care facility operated by the Federal government or located and licensed in another State. *(RCW 70.168.015*)

Incident: An occurrence or event, natural or manmade, which requires a response to protect life or property. Incidents can, for example, include major disasters, emergencies, terrorist attacks, terrorist threats, civil unrest, wildland and urban fires, floods, hazardous materials spills, nuclear accidents, aircraft accidents, earthquakes, hurricanes, tornadoes, tropical storms, tsunamis, war-related disasters, public health and medical emergencies, and other occurrences requiring an emergency response.

Jurisdiction: A range or sphere of authority. Public agencies have jurisdiction at an incident related to their legal responsibilities and authority. Jurisdictional authority at an incident can be political or geographical (e.g., Federal, State, Tribal, and local boundary lines) or functional (e.g., law enforcement, public health).

Mass Casualty – All-Hazards Field Protocols: Developed by the Washington State Department of Health, Office of Emergency Medical Services and Trauma System, these field protocols are intended to:

- Provide direction for the use of appropriate emergency medical procedures in an all-hazards environment, to be employed by Washington State Certified EMS personnel while working under the direction of the County Program Medical Director;
- Provide for the standardization of pre-hospital care in Washington State;
- Provide base hospital physicians and nurses with an understanding of what aspects of patient care have been stressed to EMS personnel and what their treatment capabilities may be;
- Provide EMS personnel with a framework for pre-hospital care and an anticipation of supportive orders from Medical Control; and
- Provide the basic framework on which Medical Control can conduct quality improvement programs.

Mass Casualty Incident (MCI): Sometimes called a Multiple Casualty Incident, an MCI is an event resulting from man-made or natural causes which results in illness and/or injuries which exceed the Emergency Medical Services (EMS) capabilities of a locality, jurisdiction and/or region.

Medical Control: Will be provided by county pre-hospital patient care protocols. “Pre-hospital patient care protocols” means the written procedures adopted by the County Medical Program Director (MPD) which direct the out-of-hospital emergency care of the emergency patient. These procedures shall be based upon the assessment of the patient’s medical needs and what treatment will be provided for emergency conditions.

National Disaster Medical System (NDMS): A Federally coordinated system that augments the Nation's medical response capability. The overall purpose of the NDMS is to establish a single, integrated national medical response capability for assisting State and local authorities in dealing with the medical impacts of major peacetime disasters. NDMS, under Emergency Support Function #8 – Public Health and Medical Services, supports Federal agencies in the management and coordination of the Federal medical response to major emergencies and federally declared disasters.

National Response Framework (NRF): Guides how the Nation conducts all-hazards response. The Framework documents the key response principles, roles, and structures that organize national response. It describes how communities, States, the Federal Government, and private-sector and nongovernmental partners apply these principles for a coordinated, effective national response. And it describes special circumstances where the Federal Government exercises a larger role, including incidents where Federal interests are involved and catastrophic incidents where a State would require significant support. It allows first responders, decision-makers, and supporting entities to provide a unified national response.

Patient Care Procedures: The written operating guidelines adopted by the regional emergency medical services and trauma care council, in consultation with the local emergency medical services and trauma care councils, emergency communication centers, and the emergency medical services medical program director, in accordance with statewide minimum standards. The patient care procedures shall identify the level of medical care personnel to be dispatched to an emergency scene, procedures for triage of patients, the level of trauma care facility to first receive the patient, and the name and location of other trauma care facilities to receive the patient should an interfacility transfer be necessary. Procedures on interfacility transfer of patients shall be consistent with the transfer procedures in chapter 70.170 RCW.

Pre-Hospital: Means emergency medical care and transportation rendered to patients prior to hospital admission or during interfacility transfer by licensed ambulance or aid service under chapter 18.73 RCW, by personnel certified to provide emergency medical care under chapters 18.71 and 18.73 RCW or by facilities providing Level V trauma care services as provided for in this chapter. *(RCW 70.168.015)*

Pre-Hospital Patient Care Protocols: The written procedures adopted by the emergency medical services medical program director which direct the out-of-hospital emergency care of the emergency patient, which includes the trauma patient. These procedures shall be based upon the assessment of the patient's medical needs and what treatment will be provided for emergency conditions. These protocols shall meet or exceed statewide minimum standards developed by the department in rule as authorized in Chapter 70.168 RCW.

Puget Sound Region: For the purposes of this plan, the Puget Sound region is defined as the Seattle Urban Area (UA)/Combined Statistical Area (CSA), which includes the eight Puget Sound counties (Island, King, Kitsap, Mason, Pierce, Skagit, Snohomish, Thurston) and select major cities located therein.

Situational Assessment (report): Document that contains confirmed or verified information and explicit details (who, what, where, and how) relating to an incident.

Situational Awareness: The ability to identify, process, and comprehend the critical elements of information about an incident.

Stafford Act: The Robert T. Stafford Disaster Relief and Emergency Assistance Act, P.L. 93-288, as amended. This Act describes the programs and processes by which the Federal Government provides disaster and emergency assistance to State and local governments, Tribal Nations, eligible private nonprofit organizations, and individuals affected by a declared major disaster or emergency. The Stafford Act covers all hazards, including natural disasters and terrorist incidents.

Threat: An indication of possible violence, harm, or danger.

Trauma: A major single or multisystem injury requiring immediate medical or surgical intervention or treatment to prevent death or permanent disability. *(RCW 70.168.015)*

Triage: The sorting of patients in terms of disposition, destination, or priority. Triage of pre-hospital trauma victims requires identifying injury severity so that the appropriate care level can be readily assessed according to patient care guidelines. *(RCW 70.168.015)*

Tribal Government (Tribes): Authorized representatives of Federally Recognized Tribes that are sovereign governments within the United States. Within Washington State, Tribes interface with the State during disasters in a very similar manner as other types of local government with respect to seeking supplemental response and recovery support.

## Appendix B: EMS Coordination Group Contact List

This appendix provides contact information for EMS Coordination Group core members, as well as their designated primary and secondary backup representatives. This information should be reviewed, verified, and updated annually, or whenever there is a change in the composition of the core membership.

| County | Medical Program Director | Coordinating Disaster Medical Control Center (DMCC) for the 8-County Region, and Primary Backups[1] | Fire Chiefs' Representative (Default: Emergency Support Function [ESF] 4 ) | County Public Health Officer (Default: ESF 8) | Department of Emergency Management (DEM) Contact |
|---|---|---|---|---|---|
| **Island**<br>Lead | Dr. Paul Zaveruha<br>Island County EMS<br>360-678-7621<br>zaverp@whidbeygen.org | | H.L. "Rusty" Palmer<br>South Whidbey Fire and EMS<br>360-321-1533<br>Chief@icfd3.org | Dr. Roger Case, MD<br>Local Health Officer<br>360-679-7350<br>rogerc@co.island.wa.us | Eric Brooks<br>360.240.6672<br>e.brooks@co.island.wa.us |
| Alternate | Chris Tumblin<br>360-678-7620<br>360-914-0472 cell<br>tumblc@whidbeygen.org | | | Keith Higman<br>Administrator<br>360-679-7350<br>keithh@co.island.wa.us | |
| **King**<br>Lead | Dr. Mickey Eisenberg<br>King County MPD<br>206-295-6170<br>gingy@uw.edu | Anne Newcombe<br>Harborview<br>206-744-6141<br>enewcomb@uw.edu | John Herbert<br>King County Medic One<br>206-707-6560 cell<br>John.herbert@kingcounty.gov | Dr. David Fleming, MD<br>Local Health Officer (info only)<br>Michael Loehr<br>Preparedness Officer<br>206-263-8687<br>Michael.loehr@kingcounty.gov | Bryan Heartsfield<br>Deputy Director<br>206-205-4062<br>Bryan.heartsfield@kingcounty.gov |
| Alternate | None | ED Charge RN 206-744-4025<br>enewcomb@uw.edu | Chris Tubbs<br>Mercer Island Fire<br>206-275-7960<br>206-910-6258 cell<br>Chris.tubbs@mercergov.org | Cynthia Dold<br>206-263-8715<br>206-423-6027 cell<br>Cynthia.Dold@kingcounty.gov<br><br>Carina Elsenboss<br>206-263-8722<br>206-255-7108 cell<br>Carina.Elsenboss@kingcounty.gov<br><br>Duty Officer 206-296-4606 | |

[1]Other DMCC contacts in the eight-county Puget Sound Region are noted in the Additional DMCC Contact table on page B-6.

| County | Medical Program Director | Coordinating Disaster Medical Control Center (DMCC) for the 8-County Region, and Primary Backups[1] | Fire Chiefs' Representative (Default: Emergency Support Function [ESF] 4 ) | County Public Health Officer (Default: ESF 8) | Department of Emergency Management (DEM) Contact |
|---|---|---|---|---|---|
| **Kitsap**<br>Lead | Dr. Scott Davarn<br>360-447-2066<br>drdavarn@kitsapcountyems.org | Mike Wernet<br>360-509-6009 cell | | Dr. Scott Lindquist, MD<br>Health Officer<br>360-337-5235<br>lindqs@health.co.kitsap.wa.us | Phyllis Mann<br>Director<br>360-204-6702 cell<br>360-307-5872<br>pmann@co.kitsap.wa.us |
| Alternate | Barb Lovato<br>EMS Manager<br>360-447-2066<br>barb@kitsapcountyems.org | | | Jessica Guidry<br>Emergency Preparedness Coordinator<br>Ph:360-337-5267<br>Fax:360-475-9267<br>Jessica.guidry@kitsappublichealth.org | |
| **Mason**<br>Lead | Dr. Joe Hoffman<br>Ph:360 427-9595<br>hoffmanjoe@aol.com | | Tim McKern<br>Fire Chief<br>Central Mason Fire and EMS<br>360-426-5533 x500<br>360-507-2279 cell<br>500@mason5.org | Diana Yu, MD<br>Local Health Officer<br>360-427 9670 ext. 582<br>360-239-2745 cell<br>yud@co.thurston.wa.us | Marty Best<br>Manager<br>360-463-5138 cell<br>360-427-9670 ext. 806<br>Martinb@co.mason.wa.us |
| Alternate | Jim Verone | | Michael D. Patti<br>Asst. Fire Chief<br>Central Mason Fire and EMS<br>360-432-5170<br>360-507-2276 cell<br>502@mason5.org | Vicki Kirkpatrick<br>Director of Public Health<br>360-427-9670 ext. 582<br>vickik@co.mason.wa.us | |

| County | Medical Program Director | Coordinating Disaster Medical Control Center (DMCC) for the 8-County Region, and Primary Backups[1] | Fire Chiefs' Representative (Default: Emergency Support Function [ESF] 4 ) | County Public Health Officer (Default: ESF 8) | Department of Emergency Management (DEM) Contact |
|---|---|---|---|---|---|
| **Pierce**<br>Lead | Dr. Clark Waffle<br>253-798-7722<br>cwaffle@co.pierce.wa.us | Chris Rock<br>Multicare Good Samaritan Hospital<br>253-820-0045 cell<br>John.rock@multicare.org | Roger Edington<br>Medical Services Officer,<br>Tacoma Fire Department<br>253-591-5705<br>253-606-9005 cell<br>redingto@cityoftacoma.org | Dr. Anthony Chen, MD<br>253 798-6500<br>253-377-1134 cell<br>achen@tpchd.org | Steve Bailey<br>Director<br>253-377-0493 cell<br>425-413-4007<br>sbailey@co.pierce.wa.us |
| Alternate | Norma Pancake<br>EMS Office Administrator<br>253-798-7722<br>npancak@co.pierce.wa.us | Lucas Hopkins<br>253-376-3683 cell<br>Lucas.hopkins@multicare.org | | Nigel Turner<br>Director Communicable Disease Control<br>253-798-6500<br>niturner@tpchd.org | |
| **Skagit**<br>Lead | Dr. Don Slack<br>Skagit County MPD<br>360-770-8271<br>donslack@mac.com | | Earl Klinefelter<br>Director Skagit County EMS<br>360-428-3230<br>360-661-7415 cell<br>earlk@skagitems.com | Peter Browning<br>Public Health Director<br>360-336-9380<br>health@co.skagit.wa.us | Mark Watkinson<br>Skagit County DEM Coordinator<br>360-338-1139<br>360-708-6100 cell<br>markw@co.skagit.wa.us |
| Alternate | | | | | |
| **Snohomish**<br>Lead | Dr. Eric Cooper<br>425-551-1270<br>eric.cooper@snocountyems.org | Julie Zarn<br>Providence Everett Medical Center<br>425 261-3024<br>Julie.zarn@providence.org | Mark Correira<br>Asst. Chief Snohomish County Fire District #1<br>425-551-1255<br>425-754-5467 cell<br>mcorreira@firedistrict1.org | Dr. Gary Goldbaum, MD<br>Health Officer<br>425-339-5200<br>ggoldbaum@shd.snohomish.wa.gov | Tamara Doherty<br>Deputy Director<br>425-766-0806 cell<br>425-388-5066<br>Tamara.doherty@co.snohomish.wa.us |

| County | Medical Program Director | Coordinating Disaster Medical Control Center (DMCC) for the 8-County Region, and Primary Backups[1] | Fire Chiefs' Representative (Default: Emergency Support Function [ESF] 4 ) | County Public Health Officer (Default: ESF 8) | Department of Emergency Management (DEM) Contact |
|---|---|---|---|---|---|
| Alternate | Marsha Parker<br>Snohomish County EMS Office Administrator<br>425-551-1270<br>marsha.parker@snocountyems.org | Kelly Allen<br>Trauma Coordinator Providence<br>425-261-3014<br>Kelly.allen@providence.org | | Tim McDonald<br>Emergency Preparedness Coordinator<br>425-339-5251<br>tmcdonald@shd.snohomish.wa.gov | |
| **Thurston**<br>Lead | Dr. Larry Fontanilla<br>360-259-8266<br>Larry_fantanilla@medic-one.thurston,wa.us | | Asst. Chief Jim McGarva<br>President, Fire Chief's Assn., Thurston County<br>360-239-3587 cell<br>jmcgarva@ci.tumwater.wa.us | Diana Yu, MD<br>Local Health Officer<br>360-455-3552(P)<br>360 427 9670 ext. 582<br>yud@co.thurston.wa.us | Sandy Johnson<br>EM Coordinator<br>360-239-4419 cell<br>360-754-3360<br>johnsons@co.thurston.wa.us |
| Alternate | Dr. Bill Hurley<br>360-259-8492cell<br>hurleyw@uw.edu | | Steve Brooks<br>VP, Fire Chief's Assn., Thurston County<br>360-239-8593 cell<br>sbrooks@laceyfire.com | Rachel Wood, MD<br>360-219-8007 cell<br>Rachel.wood@lewiswcountywa.gov | |
| **State of WA**<br>ESF #8 Lead | Duty Officer DOH<br>360-888-0838<br>Hanalert@doh.wa.gov | | | | |
| Alternate | Sally Abbott<br>360-236-4037<br>Sally.Abbott@doh.wa.gov<br><br>Mike Smith<br>509-329-2201<br>509-939-2341 cell<br>Mike.smith@doh.wa.gov | | | | |

## EMS COORDINATION GROUP INITIAL CHAIRPERSON:

King County Medical Program Director – Mickey Eisenberg
Chair rotates every two years; nomination and majority vote

| EMS Coordination Group Coordinator<br>Initial Designee: Central Region EMS and Trauma Council-Pre-Hospital Sub-Committee Chairperson | | |
|---|---|---|
| Dr. Michael Copass<br>206-521-1215<br>katrinaj@uw.edu | Dr. David Carlbom<br>206-310-8406<br>dcarlbom@uw.edu | |
| Situation Assessment Unit<br>Joshua Pearson<br>Seattle Fire Dept.<br>206-255-6871 cell<br>Joshua.pearson@seattle.gov | Resource Status Unit<br>Daniel Johanns<br>Seattle Fire Dept.<br>206-902-8088 cell<br>Daniel.johanns@seattle.gov | Documentation Unit<br>Charles De Bell<br>Seattle Fire Dept.<br>206-255-7753 cell<br>Charles.debell@seattle.gov |

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This appendix will provide an overview of mobile MCI resource caches for Pre-Hospital Emergency Triage and Treatment across the Puget Sound region. The purpose of this inventory is to better understand what resources exist across the region, where they are located, and under whose authority they are maintained (along with appropriate contact information). The inventory will also aid in identifying resource gaps that may require requests for State or Federal assistance.

- Resource categories may include: hospitals; medical transport; skilled nursing facilities/residential care facilities; local medical response teams; local specialized non-medical response team (Hazmat, etc.); significant providers of medical suppliers and equipment; regional healthcare coalition leads.
- Inventories should be updated annually.

Table 3: Regional MCI Resource Inventory

| County | Organization | Available MCI Cache | Cache Content | Cache Ownership, Sustainability & Replenishment | Cache Request & Deployment Procedures | Cache Transportation | Cache Deployment Personnel |
|---|---|---|---|---|---|---|---|
| Island County | Oak Harbor Fire Department | Two trailer units | Medical equipment to treat 25 patients; includes medical supplies, backboards, oxygen manifold system, START program, generator and lights | Oak Harbor Fire Department owns and maintains the units and the cache is sustainable. Funds are available and an inventory is maintained | Units available under mutual aid agreement with all fire and law enforcement in Island County, Whidbey General Hospital, and the Puget Sound Federal Fire Department at Naval Air Station Whidbey Island | Support vehicles available | On-duty personnel available |

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|---|---|---|---|---|---|---|---|
| | Whidbey General Hospital;<br>South Whidbey Fire & Rescue;<br>Naval Hospital Oak Harbor | Multiple decontaminatio n tents | Multiple decontamination tents; hospitals have limited personnel trained in decontamination procedures | Whidbey General POC: Larry Wall, 360-675-1131<br>South Whidbey POC: Chief Palmer, 360-321-1533<br>Naval Hospital POC: Jean Lord, 360-257-9471 | Contact POC | Decontamination equipment in trailers at Whidbey General<br>South Whidbey & Naval Hospital status unknown | Unknown |
| King County | Bellevue Fire Department | Medical Supply Unit -1 (MSU -1) | Tents, heaters, generators and lights<br>Can manage ~80 non-ambulatory patients<br>Emphasis on decontamination support, BLS, limited ALS | Cache maintained by Station 9 Captain with support from EMS Division of Bellevue Fire Department | Can be deployed to any current fire zones in King, Pierce and Snohomish County<br>No other pre-existing agreements, but with BC approval, unit should be available to other areas | Self supported / stand alone | Cross-staffed at a fully paid station, ready for immediate deployment with 2 personnel |
| | Public Health – Seattle King County | Public Health Preparedness and Healthcare Coalition regional cache | 520 beds<br>3 military grade liquid oxygen system for 200+ patients<br>20 oxygen distribution kits<br>Over 300,000 masks, respirators, defibrillators, other medical kits and supplies for acute care and inpatient services for up to 500 patients/7 days | Contact Bryan Heartsfield, PHSKC, 206-263-8716<br>Sustainable but some supplies are perishable<br>Replenished through Federal reimbursement funding or local funding | Mutual aid agreements exist between most Public Health departments. Activation of MOA is coordinated and a request form. Contact Public Health Preparedness section or the Public Health On Call Duty Officer | Contract services provided by Evergreen Moving and Storage | 24 hour on-call duty officer available. Internal call tree to authorize, initiate contract and move materials |

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|---|---|---|---|---|---|---|---|
| | Renton Fire & Emergency Services Department | Red Cross storage container at Fire Station 16<br>Valley Medical Center<br>Red Cross owns equipment at Renton Community Center | Red Cross: cots and minimal shelter capabilities<br>Valley Medical Center: capabilities unknown<br>Renton Community Center: 100 cots and 200 blankets | Red Cross POC: 206-323-2345; 12923 156th Avenue, SE<br>Valley Medical Center: 400 SW 43rd Street | Contact Red Cross for specific procedures | Contact Red Cross for specific procedures | Contact Red Cross; city does not have anyone assigned to the equipment |
| | Seattle Fire Department (SFD) | MCI Van | Backboards for 100 patients; EMS supplies including ALS and BLS to treat ~100 patients | SFD Station 21 | Contact SFD Station 21, available to respond when dispatched | Cargo van with no trailers or attachments | Staffed by on-duty crews |

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|---|---|---|---|---|---|---|---|
| King County (cont.) | TBD | Seattle Tacoma International Airport (Seatac) Cache managed by the Fire Department<br>MCI van cached at South King Fire & Rescue Station 26 and maintained by Zone 3 cooperative agencies<br>Federally supported light rail cache managed by the Tukwila Fire Department | Seatac Airport and Zone 3 cache contain BLS disaster supplies – boards, straps, wound supplies, etc.<br>Tukwila cache – MCI material but also equipment for Light Rail extrication | Port of Seattle (POS) owns and maintains the airport cache<br>Tukwila is responsible for light rail cache.<br>Zone 3 cache is a cooperative effort, contact South King Fire and Rescue | Airport cache is available County-wide<br>Zone 3 cache is available to all locations within Zone 3<br>Unknown if light rail cache is deployable outside of Tukwila | Airport cache - 40” van container<br>Zone 3 cache - vehicle cache<br>Light rail cache - trailer | All caches are deployable upon request |

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|---|---|---|---|---|---|---|---|
| Kitsap County | Bainbridge Island Fire Department (BIFD) | BIFD Cache | Inventory for treating trauma injuries<br>Bandages, splints, backboards, blankets, IV supplies, intubation for 15 patients, two 10'x10' pop-up shelters, N95 masks, gloves, mass decontamination equipments and other EMS supplies<br>2010 Purchasing Program will allow care for 15 red, 20 yellow, and 25 green patients | BIFD owns and maintains MCI Cache<br>BIFD POC: Captain Butch Lundin (blundin@bifd.org) or FF/EMT Jason Livdahl (jlivdahl@bifd.org), 8895 Madison Avenue, Bainbridge Island, WA 98110, 206-842-7686<br>BIFD fully resupplies the cache | Cache deployable in any jurisdiction when requested pending staff availability<br>Cache dispatch through CENCOM or DEM | Cache trailer at Fire Station 21 with available towing vehicle | Duty personnel or on-call personnel will respond with cache |
| | South Kitsap Fire Rescue (SKFR) | SKFR Cache | Lights, medical supplies and equipment to set up colored treatment areas<br>No special equipment<br>Treat ~25 patients | SKFR owns and maintains cache; resupplied by department using them | Cache requested through 911 system<br>County-wide mutual aid agreement in place | Cache unit can be moved; no plans in place to move other supplies | Duty career staff to respond upon request |
| Mason County | Mason County Department of Emergency Management/ Mason County Fire Department 5 | See Cache Content | Backboard for 50 patients; oxygen and other accessories for a 5-person MCI | Mason County Fire Department 5 | Contact MACECOM | 1-ton pickup for MCI trailer | Staff available from Mason County Fire Department 5 |
| | Mason General Hospital (MGH) | See Cache Content | Contact Andrew Bales at MGH | Contact Andrew Bales at MGH | Unknown | Limited transport capability | Unknown |

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|---|---|---|---|---|---|---|---|
| Pierce County | Tacoma Fire Department (TFD) | Mobile patient cache and resupply cache for 100 patients | CBRNE PPE and specialized countermeasure pharmaceuticals for 100 responders<br>Oxygen cache of 50 size "K" with transfilling and manufacturing capability; 200 patient treatment capability | City of Tacoma Fire Department, 901 Fawcett Avenue, Tacoma, WA 98402, 253-591-5705<br>Cache is sustained with MMRS grant funds, all perishables are rotated or replaced prior to expiration<br>Replenishment plan in place | MMRS cache is mobile and deployable outside of jurisdiction.<br>Request through TFD Dispatch Center or TPCHD Medical Group if activated. | Mobile cache in 36ft trailer with dedicated tow unit.<br>Resupply, PPE and oxygen caches are palletized and can be move by several vehicles in the TFD fleet. | Duty TFD are responsible for moving caches |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | Lakewood Fire Department (LFD) | BLS, “Multiple Casualty/disaster Response” trailer. 2000lb payload, 7-pin electrical, 2-5/16” two ball (provided) trailer | See “MCI Electronic Inventory”, approximately 200 patients treatment capability | Lakewood Fire District 2, 10928 Pacific Highway SW, Lakewood, WA 98499<br>Rick Jankowiak Office 253-983-4571; Cell: 253-377-3508; Fax: 253-588-2317<br>Maintained and serviced by Lakewood Fire Department EMS Division<br>No provisions or arrangements for replenishing stock or durable items if utilized, lost or broken<br>Maintenance and resupply will be provided by LFD EMS Division through General Operations Budget<br>Resupply requirements have not been arranged. Expect that utilizing agencies will provide adequate resources to restock MCI capability | Contact Lakewood Fire On-Duty Battalion Chief: 253-582-4600 (non-emergency); or through Pierce County Lakewood FireComm: 253-983-4563 or 911 during emergencies<br>Trailer can be utilized outside of Pierce County by special request or Washington State mobilization requirements/plan | LFD has capability to tow the trailer for local use. LFD has limited capability to deliver to any outside requesting agency. Without special arrangements or direct coordination with the On-Duty Battalion Chief, requesting agencies should provide towing capable vehicle and driver | On-duty personnel will be assigned as necessary to respond to emergency scenes |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | Gig Harbor Fire Department – MCI 51 | Gig Harbor Fire & Medic One – 50 Patient MCI Trailer at Station 51 | Spine boards, bandage supplies, tarps, lights, generator, wheel carts for stretcher, etc.<br>Medical PPE – BLS Supplies for up to 50 patients<br>No CBRNE capability | Gig Harbor FD, 10222 Bujacich Road, NW, Gig Harbor, WA 98332, 253-851-3111<br>Gig Harbor Fire & Medic One owns and has budget for replacement of used supplies PRN. BLS supplies – very few are perishable | Request through FireComm<br>Dispatched as needed or requested<br>B51 will deploy<br>Can be deployed anywhere in Pierce County through County wide mutual aid agreement | Tow vehicle available | On-duty staff will be assigned by B51 to respond with trailer when requested |
| Skagit County | Skagit County EMS | 5 MCI trailers | Generic mass casualty supplies and PPE but no CBRNE capability | Earl Klinefelter,<br>Cell: 360-661-7415<br>Skagit County EMS owns and maintains MCI trailers with the help of the host fire agency that houses them<br>Replenished as needed | Cache could be used as needed in a mutual aid scenario if needed – in conjunction with 911 dispatch, Department of Emergency Management, and Skagit EMS approval | All host Fire Departments have the capability to haul MCI trailers | Only Mount Vernon FD, Burlington FD and Sedro-Woolly FD have this capability for personnel 24/7 |
| Snohomish County | City of Everett Fire Department | City of Everett – MCI trailer<br>Paine Field – MCI bus | 50 backboards with supplies for 50 patients | Cache is part of the Everett Fire Department<br>Restocked as budget item<br>Maintained with monthly inventory check | Call dispatch – SnoPac and request MCI vehicles<br>Special request through dispatch<br>Call on-duty Battalion Chief and request equipment as needed; or<br>Addressed as a Zone Response in the form of a Strike Team or Task Force | Vehicle available | On-duty personnel can deploy with trailer |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Thurston County | Thurston County Fire Department | 2 MCI trailers: 1 in Tumwater and 1 in East Olympia | Backboards (40), oxygen manifolds, basic BLS and ALS equipment for up to 60 patients, assuming 1/3 "Green" patients<br>No special equipment | Tumwater Fire Department, Lt. Gary Burkhardt, gburkhardt@ci.tumwater.wa.us<br>Thurston County Fire Department #6, A/C Mark Nelson, mnelson@eofd.org<br>Thurston County Medic One will replenish supplies<br>For out of county response, expect reimbursement or the ability to file a claim for incident-related damage to equipment | TFD trailer dispatched on second alarm MCI in Thurston County<br>FD #6 trailer dispatched on third alarm MCI in Thurston County<br>Deployment to other locations by request – would require agreements (i.e. Mobe agreement)<br>Contact Capcom at 360-704-2749 for out of county response | Cache is contained in a trailers | On-duty personnel can deploy with trailers |
| Grays Harbor County | Aberdeen Fire Department (AFD) | MCI trailer stored at City of Aberdeen public works motor pool | 42 backboards, MCI triage tags, tarps, oxygen manifolds, splinting and bandage supplies, mass decontamination shelters (for ambulatory and non-ambulatory victims) | Aberdeen Fire Department and available on mutual aid request. Nothing perishable | GH County mutual aid agreements in place | AFD Command Unit or heavy duty tow vehicle (standard hitch) available | No one assigned<br>For Deployment within city of Aberdeen, on-duty or call-back Aberdeen Fire Department personnel would deploy<br>For outside response area, call back personnel would deploy |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Pacific County | Raymond Fire Department | 1 MCI trailer | Basic BLS equipment, backboards, collars, bandages, oxygen manifold for up to 30 patients | Raymond Fire Department<br>Initial timeline supplied by Homeland Security Region 3<br>No agreement with Region 3 to sustain supplies | Available to any agency in Homeland Security Region 3, although no written agreement in place | Cache contained in trailer | May be deployed outside of agency by on-duty personnel, depending on staffing levels. Likely need to call in personnel |

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## Appendix D: Example Strategic or Policy-Level Issues for EMS Coordination Group Discussion

The following are examples of potential strategic or policy-level issues that may be appropriate for consideration by the EMS Coordination Group during incident response. This list is not meant to be comprehensive and may be modified as more information is gained through EMS Coordination Group trainings or exercises.

- Development of common regional situational awareness for the pre-hospital response
- Development of a plan for regional patient distribution when local healthcare facilities are overwhelmed
- Development of recommendations for pre-hospital response priorities when multiple incidents are occurring simultaneously across jurisdictions within the region
- Development of recommendations for use of limited pre-hospital resources
- Coordination of Field Treatment Sites during incident response
- Guidance on Personal Protective Equipment (PPE) for pre-hospital responders
- Coordination/implementation of crisis standards of care or WMD Field Protocols

## Appendix E: Sample Essential Elements of Information (EEI) Template for Regional Situational Awareness

Provided below is a sample reporting template that may be used during incident response to collect EEI needed by EMS Coordination Group core members to provide common regional situational awareness of the pre-hospital response.

| **Natural Disasters (e.g., earthquake, volcano, flood, winter storm)** | |
|---|---|
| <u>Fire/EMS</u><br>• Boundaries of major incident sites (e.g., collapsed structures, roadways, etc.)<br>• Access points to incident sites (for staging personnel, equipment, transport vehicles)<br>• Estimated number of casualties (distinguish critical / non-critical, if possible).<br>• Status of EMS Personnel<br>• Project resource gaps/shortfalls<br>• Field Treatment Site status | <u>Public Health</u><br>• Public Health orders<br>• Status of pharmacies and public health resources<br>• Alternate Care Facility status |
| <u>Medical Program Director</u><br>• Priorities for pre-hospital response<br>• Potential changes in standard of field practice and patient care | <u>Regional DMCC</u><br>• Status of hospitals<br>• Status of medical surge strategies that may impact pre-hospital response<br>• Estimated number of casualties |

| Terrorist Incident involving CBRNE | |
|---|---|
| Fire/EMS<br>• Boundaries of major incident sites (e.g., collapsed structures, roadways, etc.)<br>• Access points to incident sites (for staging personnel, equipment, transport vehicles)<br>• Estimated number of casualties (reported as Critical / Non-critical, if possible).<br>• Status of EMS Personnel<br>• Project resource gaps/shortfalls<br>• Field Treatment Site status<br>• PPE guidance for EMS personnel | Public Health<br>• Hazard-specific information<br>• Relevant modeling information (plume modeling, etc.)<br>• PPE guidance for EMS personnel |
| Medical Program Director<br>• Priorities for pre-hospital response<br>• Potential changes in standard of field practice and patient care<br>• PPE guidance for EMS personnel | Regional DMCC<br>• Status of hospitals<br>• Status of medical surge strategies that may impact pre-hospital response<br>• Estimated number of casualties |

| Naturally Occurring Infectious Disease Outbreak (e.g., influenza pandemic) | |
|---|---|
| Fire/EMS<br>• Status of EMS Personnel<br>• Project resource gaps/shortfalls<br>• Field Treatment Site status<br>• PPE guidance for EMS personnel | Public Health<br>• Hazard-specific information<br>• PPE guidance for EMS personnel<br>• Estimated number of casualties |
| Medical Program Director<br>• Potential changes in standard of field practice and patient care<br>• PPE guidance for EMS personnel | Regional DMCC<br>• Status of hospitals<br>• Status of medical surge strategies that may impact pre-hospital response<br>• Estimated number of casualties |

## Appendix F: EMS Coordination Group Meeting Agenda

[Meeting Date and Time]

| Agenda Item | Responsibility |
|---|---|
| 1. Roll Call | Coordinator |
| 2. Situation Assessment Summaries by Jurisdiction | County Fire Chief (or other delegated authority) |
| 3. Report on Critical Resources | Coordinator |
| 4. Review current recommendations for regional pre-hospital response priorities | Coordinator |
| 5. Issue identification/discussion | All, led by the Chairperson |
| 6. EMS Coordination Group recommendations | Chairperson |
| 7. Necessary Actions/Follow-up | Coordinator |
| 8. Schedule Next Conference Meeting/call | Coordinator |

Time: _____
Date: _____
Chairperson: _____
EMS Group Coordinator: _____

## Agenda Item 1: Roll Call

*Coordinator:*
*First, we will ask for DMCC representatives.*
*Then we will go County by County in alphabetic order, starting with Island County, and ask which representatives are on the call from each discipline:*

- *Public Health*
- *Medical Program Director*
- *Fire/EMS*

*If you are representing one of these disciplines please signify by saying "aye" and tell us your Name and Agency. If you are representing more than one discipline, please let us know.*

| Jurisdiction | Discipline | Agency | Name |
|---|---|---|---|
| State/Regional DMCC | DMCC | HMC | |
| | | Good Sam Puyallup | |
| | | Prov Everett | |
| Island | PH | | |
| | MPD | | |
| | Fire/EMS | | |
| | | | |
| King | PH | | |
| | MPD | | |
| | Fire/EMS | | |
| | | | |
| Kitsap | PH | | |
| | MPD | | |
| | Fire/EMS | | |

| | | | |
|---|---|---|---|
| Mason | PH | | |
| | MPD | | |
| | Fire/EMS | | |
| | | | |

| County | Discipline | Agency | Name |
|---|---|---|---|
| Pierce | PH | | |
| | MPD | | |
| | Fire/EMS | | |
| | | | |
| Skagit | PH | | |
| | MPD | | |
| | Fire/EMS | | |
| | | | |
| Snohomish | PH | | |
| | MPD | | |
| | Fire/EMS | | |
| | | | |
| Thurston | PH | | |
| | MPD | | |
| | Fire/EMS | | |
| | | | |
| | | | |
| State Dept of Health | | | |
| Federal HHS | | | |
| FEMA | | | |
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|---|---|---|---|
| SME | | | |
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## Agenda Item 2: Regional Situational Assessment (needs)

Coordinator: We want to get information relevant to regional situational assessment:

By this we mean information on your situation that has or could have regional impact on pre-hospital treatment and response. We don't need local impacts. Please be as concise as possible. Refer to your situational assessment templates.
We are going to do this similar to Roll Call, starting with the DMCC situation and needs. Then we will go county-by-county in alphabetical order.

DMCC Situational Assessment:

North Region (Prov Everett and St. Joseph's):

Central Region (Harborview):

West Region (Good Sam and St. Peters):

Northwest Region (Harrison):

Coordinator: *Now we want to hear from others with potentially regionally significant issues. We will go County by County, and end with the State.*

Island County – Regional Situational Awareness (needs)

- 

King County – Regional Situational Awareness (needs)

- 

Kitsap County – Regional Situational Awareness (needs)

- 

Mason County – Regional Situational Awareness (needs)

- 

Pierce County – Regional Situational Awareness (needs)

- 

Skagit County – Regional Situational Awareness (needs)

- 

Snohomish County – Regional Situational Awareness (needs)

- 

Thurston County – Regional Situational Awareness (needs)

- 

Coordinator: State DOH Rep: Any Regional Situational Awareness issues for us?

## Agenda Item 3: Report on Critical Resources

Coordinator: Now we want to identify what the critical resource needs are: What is your highest priority resource need at this time? Quantify if you can, and tell us where /how soon you need these resources. I will again start with the DMCCs and roll through each County alphabetically.

| | *Critical Resource Needs* | *Notes* |
|---|---|---|
| DMCCS:<br>North Region (Prov Everett and St. Joseph's): | | |
| Central Region (Harborview): | | |
| West Region (Good Sam and St. Peters): | | |
| Northwest Region (Harrison): | | |
| Island County | | |

| | *Critical Resource Needs* | *Notes* |
|---|---|---|
| | | |
| King County | | |
| Kitsap County | | |
| Mason County | | |
| Pierce County | | |
| Skagit County | | |
| Snohomish County | | |
| Thurston County | | |
| State DOH | | |

## Agenda Item 4: Review of Current Recommendations for Pre-Hospital Response Priorities

*(CHAIR facilitates this item) Skip this for the 1st call.*
*This is a 2nd Call + item: Review recommendations from last call: anything to add or change?*

| Current Recommendations | Status/Changes Recommended |
|---|---|
| | |
| | |
| | |
| | |
| | |
| | |

## Agenda Item 5: Issue Identification and Discussion

## Agenda Item 6: Recommendations

*Coordinator: Here is where we identify the major regional issues and figure out what recommendations we may want to make. There are two major types of recommendations:*

- *Resource Allocation –including Patient movement*
- *Operational Issues like standard of care, PPE. Let's take these in turn.*

*Chair and Coordinator may want to nominate some issues for a consensus recommendation.*

*First identify list of possible resource allocation issues.*
*Second,identify if there are operational issues on which to make recommendations.*

*Then we move on to Agenda Item 6: The CHAIR facilitates this discussion.*
*What recommendations would the group like to make with respect to the issues identified? Chair and Coordinator may want to propose recommendations with respect to each item.*

| RESOURCE ALLOCATION ISSUES | | |
|---|---|---|
| Issue | Rationale /Considerations | Recommendation of EMS Coordination Group? |
| 1. | | |
| 2. | | |
| 3. | | |

| | | |
|---|---|---|
| | | |
| 4. | | |
| 5. | | |

| STANDARD OF CARE / PPE ISSUES | | |
|---|---|---|
| Issue | Rationale /Considerations | Recommendation of EMS Coordination Group? |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |

## Agenda Item 6 Continued: Any other Recommendations?

## Agenda Item 7: Follow up Actions

*Coordinator: Personnel from each County should designate someone to convey all recommendations coming out of this call to their respective EOC managers.*

*All personnel on the call are responsible for getting the word out about this recommendation to their respective agency and fellow agencies. You may want to use your ESF or equivalent representative at the County EOC to help you get the word out.*

*Other follow-up actions?*

## Agenda Item 8: Next Conference Call – Date and Time

*(**Coordinator** should recommend a date and time for the next call to the group. If the group concurs, Coordinator should follow up to ensure the Everbridge system does the call out.)*

- We are adjourned at _____ hours.

## Appendix H: Training for EMS Coordination Group Members

NIMS/ICS trainings include special courses designed for multi-agency coordination participants and staff. The EMS Coordination Group Coordinator and Agency Representative positions should be able to participate in at least one training and one exercise each year. Trainees should be limited to no more than three at any one time and coordinated through the EMS Coordination Group Coordinator.

NOTE: ICS-100 through 400 should be taken before filling the EMS Coordination Group Agency Representatives and Coordinator positions.

Additionally, the following courses are available to provide background training for EMS Coordination Group positions:

M-480 – Multi-Agency Groups – Eight-hour course with classroom instruction and exercises for EMS Coordination Group Agency Representatives and Coordinator positions.

I-401 – Multi-Agency Coordination and MAC Groups – Seven-hour course with classroom instruction and exercises for EMS Coordination Group Agency Representatives and Coordinator positions.

IS-701 – Multi-Agency Coordination Systems – Online and classroom course and exercises for broad understanding of the NIMS coordination system.

ICS-700 NIMS

ICS-800 NRF

IS-650 (FEM 143): Building Partnerships with Tribal Governments

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# I. INTRODUCTION

In a Mass Casualty Incident (MCI), the goal of the pre-hospital response is to triage and transport patients to hospitals or other healthcare facilities as quickly as possible so that they can receive definitive care under the supervision of licensed medical professionals. Constraints on available resources (i.e., personnel, equipment, supplies, and transport vehicles) may require first responders to modify their scope of practice in order to do the greatest good for the greatest number of people. In addition, delays in identifying an appropriate "receiving" facility may require the establishment of treatment areas at or near the incident scene(s) for the temporary collection and triaging/sorting of patients, as well as the provision of emergency field treatment. However, even under these conditions, patients typically are transported to a hospital within a relatively short period of time (e.g., minutes to hours).

*Catastrophic* incidents are different. They can create such a significant surge (or multiple surges) in the number of patients requiring medical evaluation and treatment that the local healthcare system cannot meet the demand. Moreover, catastrophes may directly impact healthcare facilities or local infrastructure (e.g., transportation routes), thus making it impossible to transport patients to hospitals in a timely manner. When this occurs, pre-hospital responders may have to treat patients in the field for an extended period of time until other medical surge strategies can be implemented.

Although significant progress has been made over the past decade in planning to address medical surge (e.g., expanding capacity in hospitals, establishing Alternate Care Facilities, evacuating patients out of the region), the resulting strategies have focused mainly at the hospital or facility level and have not adequately addressed the pre-hospital response. The strategies can also take significant time to put in place (hours to days), resulting in a gap in the capability to treat large numbers of patients. Pre-hospital MCI plans in the Puget Sound Region have focused on short-term tactics and have not addressed how Emergency Medical Services (EMS) would support a prolonged field response.

One approach to enhance pre-hospital surge capacity is to establish Field Treatment Sites (FTS). A FTS is a location—facility-based or tented/free-standing—that is designated by emergency officials for the *short-term* (usually not more than 48 hours) collection and triaging/sorting of patients, and the delivery of emergency field treatment until patients can be transported to a hospital or appropriate definitive care facility. The FTS is similar in concept to treatment areas used during MCIs, with the added capacity and capability to manage large numbers of patients over an extended period of time. In this way, the FTS provides a temporary bridge between the pre-hospital and hospital settings to sustain emergency care until more permanent medical surge measures are implemented.

## A. Purpose

The purpose of this document is to establish a common definition, planning assumptions, and expectations for FTSs and their role in supporting the pre-hospital response when incident circumstances prevent patients from being transported to local/regional hospitals in a timely manner. This document provides a framework that emergency planners in the Puget Sound Region can use to develop operational FTS plans for their jurisdiction. It serves as an appendix to the *Puget Sound Region Pre-Hospital Emergency Triage and Treatment Annex* and is intended to promote regional consistency in FTS planning.

## B. Scope

The local County/City Fire and EMS authority has the primary responsibility to establish, operate, and maintain field triage and treatment activities until patients can be safely transported to receive definitive care. The guidance provided in this document applies to Fire/EMS, medical planners, Medical Program Directors, Public Health Officers, and associated pre-hospital partners and stakeholders.

## C. Key Definitions

Alternate Care Facility (ACF): An area where *long-term* (usually longer than 48 hours) medical needs sheltering, urgent (non-acute) care services, and select traditional inpatient services are not usually provided, but which is deliberately repurposed for provision of such services during disasters that overwhelm the existing healthcare system. Locations of potential ACFs are usually pre-identified, and the ACF is considered part of the healthcare system's strategy to augment surge capacity.

Casualty Collection Point: A specific location where casualties are assembled to be transported to a hospital or definitive care facility, or evacuated out of the region.

Catastrophic Incident: Any natural or manmade incident, including terrorism, which results in extraordinary levels of mass casualties, damage, or disruption severely affecting the population, infrastructure, environment, economy, national morale, and/or government functions.

Disaster Medical Assistance Team (DMAT): A group of professional and para-professional medical personnel organized to provide rapid-response medical care or casualty decontamination during a terrorist attack, natural disaster, or other incident in the United States. DMATs are part of the National Disaster Medical System and operate under the authority of the Department of Health and Human Services (HHS).

Disaster Medical Control Center (DMCC): The hospital responsible for providing EMS with a planned distribution of patients to area hospitals based on patient needs (clinical management) and concurrent assessment of hospital capabilities during the distribution. For the Puget Sound Region, Harborview Medical Center is designated as the primary Regional DMCC to coordinate patient distribution with Providence Regional Medical Center, Everett (north boundary) and MultiCare Good Samaritan, Tacoma (south boundary) designated as backups (synonymous with Hospital Control).

Field Treatment Site (FTS): An area that is designated by emergency officials for the *short-term* (usually not more than 48 hours) collection and triaging/sorting of patients and the delivery of emergency field treatment until patients can be safely transported to

a definitive care facility, evacuated from the region, transported to a fatality management site, or sent home. FTSs are part of the pre-hospital response system and are generally not pre-identified but are established at or in proximity to the incident site or in strategic locations near the disaster area for geographically dispersed incidents.

Field Triage: The process of rapidly categorizing a large number of patients according to the severity of their injury in order to prioritize their extrication and extraction to the treatment areas.

Mass Casualty Incident: Any incident in which emergency medical services personnel and equipment at the scene are overwhelmed by the number and severity of casualties at that incident.

Medical Control: Physician direction over pre-hospital activities. Also includes written policies, procedures, and protocols for pre-hospital emergency medical care and transportation.

National Disaster Medical System (NDMS): A Federally coordinated system that augments the nation's medical response capability. The overall purpose of the NDMS is to establish a single, integrated national medical response capability for assisting State and local authorities in dealing with the medical impacts of major peacetime disasters. NDMS, under Emergency Support Function #8 – Public Health and Medical Services, supports Federal agencies in the management and coordination of the Federal medical response to major emergencies and Federally declared disasters.

Treatment Area: The designated area for the collection and treatment of patients before they can be transported to a hospital or definitive care facility.

## II. FTS Planning Assumptions

- Catastrophic incidents are likely to produce a significant number of patients requiring medical evaluation and treatment and may overwhelm or severely disrupt the existing healthcare system.
- Hospitals in the Puget Sound Region routinely operate at or near capacity and will not be able to handle the large patient surge generated by catastrophic incidents that cause significant numbers of casualties.
- Hospitals and other healthcare facilities may be severely damaged or destroyed in a catastrophe.
- Transportation routes may be severely damaged or destroyed in a catastrope, making it impossible for EMS to transport patients to healthcare facilities in a timely manner.
- There may be an insufficient number of transportation assets (ambulances, etc.) available after a catastrophe to meet the demand for casualty transportation.
- Hospitals may receive significant numbers of casualties outside of the formal EMS transport system.
- Crisis standards of care and temporary changes to normal standards of practice for EMS personnel may be necessary during the response to a catastrophic incident.
- In a catastrophe, first responders will provide the highest level of patient care that is possible in accordance with available personnel, resources, and supplies. Impacts to resource availability and supply chains may require modifications in the practice of emergency field treatment.
- Patient decontamination may be necessary for certain types of events (e.g., chemical, radiological incidents) before EMS patient transport or hospital admission can occur.
- The probability of patient survival is greater at a hospital or other definitive care facility than in the field; therefore, patients should be transported to a hospital or healthcare facility as soon as it can be safely arranged.

## III. FTS Activation

Recognizing the need for and activating a FTS to support the pre-hospital response to a catastrophe will be an important factor in maximizing the numbers of lives saved. The activation decision will be based on confirmation or strong suspicion that the region's emergency medical system is overwhelmed or nearing its breaking point or that the pre-hospital response system

cannot transport patients to healthcare facilities in a timely manner. The request to activate a FTS may come from several sources, including the Incident Commander, local Public Health Officer, Regional DMCC, County Medical Program Director, or the regional EMS Coordination Group. FTSs must be responsive to the immediate medical needs of patients; therefore, a FTS should be established within 4-12 hours of an activation decision.

## A. Authority

The authority to formally activate a FTS resides with the Incident Commander or Unified Area Command, in close consultation and collaboration with the Regional DMCC, local Health Officer, Medical Program Director, or the EMS Coordination Group. Potential indicators or triggers for FTS activation include the following:

- Regional hospitals are overwhelmed or are expected to become overwhelmed by the numbers of casualties seeking medical evaluation and treatment.
- Substantial damage to or loss of function at regional hospitals results in a significant loss of medical surge capacity within the regional healthcare system.
- Regional transportation resources are insufficient to meet the patient surge demand and/or transportation routes to hospitals are blocked, severely damaged, or destroyed.
- Sufficient mutual aid required to treat or transport casualties is not readily available.
- Any combination of the above indicators.

When one or more of these indicators is present, a FTS can be activated to provide EMS personnel with a designated location to transport, triage, and initiate basic life-saving or life-sustaining interventions until further transport can be arranged to a definitive care facility either inside or outside of the affected region. The FTS helps to maximize the efficient use of limited personnel and resources by concentrating victims in one location.

It is important for regional planners to note that local officials may not always be able to control the decision to activate a FTS. Because of the nature of catastrophes, a FTS may arise spontaneously and rather quickly with little pre-planning or advanced warning anywhere that large numbers of patients gather to seek care (e.g., fire stations, parks, churches, or community centers). Therefore, it is critical for regional partners to coordinate and share information with one another during response to help them quickly recognize when such conditions are present so that appropriate resources can be identified and allocated to meet the need.

## B. Length of Operation

Once established, a FTS will operate until all patients have been transported to a local or regional healthcare facility, evacuation staging area, or fatality management center, or released home.[2] It is generally assumed that a FTS will stand down operations within 48 hours of the initial activation, or as soon as patients can be safely transported to receive definitive care. This

[2] Adapted from California Emergency Medical Services Authority, *California Disaster Medical Response Plan (EMSA #218);* September 2007.

48-hour period should allow sufficient time for other medical surge strategies (e.g., hospital decompression, establishment of ACFs) to be implemented.[3]

Many factors will ultimately determine the length of operation for an FTS in supporting the pre-hospital response. These factors may vary by jurisdiction as well as by the specific circumstances of the incident. However, the priority always should be to transport patients to an appropriate healthcare setting as soon as it can be safely arranged. This will provide the best chance for a successful outcome and will allow EMS staff to return to their regular duties in supporting the emergency medical system.

### C. Location

In consultation with emergency management authorities, Fire/EMS and local health and medical planners may pre-identify potential facilities within a jurisdiction to house a FTS (sample selection criteria are presented below). Alternatively, a FTS may be established in a "building of opportunity" or tent(s) during the incident response. Consideration should be given to locating FTSs in the following areas:

- In proximity to the incident site/disaster area (either in a fixed structure or a portable tent)
- Near hospitals or casualty collection points that may be used as staging areas for evacuating patients out of the region
- In strategic locations for geographically dispersed incidents.

The following criteria may be considered in evaluating potential FTS locations:

- Accessibility to major transportation corridors, as well as an area for staging air-based transportation assets (e.g., helicopter)
- Ability to shelter FTS staff and patients from the elements (e.g., rain, snow, wind) and provide a temperature controlled environment (working heating, ventilation, and air conditioning (HVAC) system)
- Ability to provide basic utilities (water, electricity) and services (bathrooms, food storage/prep area)
- Ability to accommodate large numbers of casualties
- Ability to provide a relatively secure and safe space for staff, volunteers, patients, and their loved ones.

As noted earlier, it is important to recognize during preparedness planning that FTSs may arise spontaneously in locations where injured people congregate after a disaster. Thus, FTS planning should be flexible enough so that personnel and supplies can be set up in locations where large numbers of patients have gathered. It may be easier to move EMS personnel and supplies to these locations than it will be to move patients to the pre-designated sites.

In some instances, an ACF eventually may be established in the same location as a FTS if the site meets the requirements of the ACF. This may occur out of necessity when there are few buildings of opportunity in the affected jurisdiction that meet the requirements of a FTS or ACF. When this occurs, responsibility for operations at the site should transition from EMS to the local health authority as soon as possible, thus allowing EMS personnel to return to their

[3] In contrast, once established, an Alternate Care Facility may operate for several days or weeks to meet the medical sheltering or treatment needs of the affected population.

normal duties. Jurisdictional planners should coordinate FTS and ACF planning activities to ensure that there is a clear understanding of the respective roles of these surge strategies and how they are implemented.

### D. FTS Staffing

A recognized challenge with standing up and operating a FTS will be staffing. When a FTS is first activated, it is anticipated that local Fire/EMS personnel will provide the core staffing for the FTS. Depending on the jurisdiction's particular needs and the availability of personnel and resources, staffing may be augmented with properly credentialed health and medical volunteers, EMS personnel from outside the affected area (obtained through mutual aid), and/or State and Federal disaster medical teams (e.g., Disaster Medical Assistance Teams). While planning efforts should examine all potential sources of staff, the core staffing component will be local EMS providers. Operational FTS plans at the jurisdictional level should define a clear process and establish procedures for integrating non-EMS personnel into FTS operations if they were available.

The staffing composition for a FTS will depend on many incident-related factors and may vary substantially across local jurisdictions within the region depending on how the FTS is being used to address medical surge needs. Table 1 provides a sample staffing structure for a 50-patient FTS per 12-hour shift, assuming the specified distribution of injury or illness severity among the patient population. Important Note: the example is provided for illustrative purposes only and to aid local planners in developing an operational FTS plan. It does not—and is not intended to—establish a regional expectation or precedent for what constitutes an acceptable level of staffing at a FTS.

Table 1. Sample staffing level for a 50-patient FTS per 12-hour shift, assuming 10% of patients are categorized as immediate (Red), 20% are delayed (Yellow), and 70% are minor (Green).

| Position | Staff Composition |
|---|---|
| Non-Medical | |
| • FTS Supervisor/Commander | 1 Fire/EMS |
| • Safety/Security Officer | 1 Fire/EMS |
| • Public Information Officer | |
| • Operations Section Lead | 1 Fire/EMS |
| • Logistics Section Lead | 1 Fire/EMS |
| • Planning Section Lead | |
| Medical | |
| Triage Team | 1 paramedic; 2 EMTs |
| Treatment Team Leader | 1 paramedic |
| • Red (assumes 5 patients) | 2 paramedics |
| • Yellow (assumes 10 patients) | 1 paramedic; 3-4 EMTs |
| • Green (assumes 35 patients) | 6-8 EMTs |
| Transport Team Lead | 1 EMT or paramedic |

In addition, it is important to consider and plan for the various types of logistical support (e.g., water, food) that might be required to operate a FTS. This support may come from a variety of sources depending on the jurisdiction and the role that the FTS will fill during the response. Potential partners or stakeholders should be identified early on and invited to participate in FTS planning efforts. Key partners and stakeholders may include public health, hospital or

healthcare community, law enforcement (to provide security for staff, patients, loved ones, volunteers, and bystanders), social services, public works, American Red Cross, faith-based organizations, volunteer groups, and the private sector.

## IV. Scope of Care

The following types of services may be provided at a FTS:

*Triage:* During a catastrophe, triage will be an ongoing process in which patients are assessed at multiple intervals to determine the severity of their injuries and to prioritize them for treatment and transport. At an incident scene, EMS personnel will conduct an initial assessment to determine which patients should be taken to a FTS; when possible, patients with life-threatening injuries should be transported directly to a hospital while those with minor or non-urgent needs should be cared for at a FTS. This will allow hospitals to focus on treating those with the most serious medical needs.

Patients transported to a FTS will be re-triaged upon arrival in order to assess their treatment and/or transportation needs. Although different protocols may be used for triage, the FTS will be organized according to the following categories:

- Red (Immediate): Patients in this category are the most critical and should be transported as soon as possible to a hospital or definitive care facility.
- Yellow (Delayed): Patients in this category require medical intervention and eventually need to be transported to the hospital for treatment. Patients in this category are the second highest priority for transport.
- Green (Minor): Patients in this category require general assessment and may be released after the provision of some minor treatment (e.g., minor wound cleaning and dressing). If transport to a hospital or ACF is necessary, this is the lowest priority group for transport.
- Black (Expectant): Patients in this category arrive deceased or die at the FTS. Patients in this category should be transported to a fatality management center, if one has been established.

*Treatment:* The focus of any treatment activities will be to do the greatest good for the greatest number of people and to provide the highest level of care possible given resource availability. Because EMS personnel will serve as the primary source of staffing for the FTS (at least initially), treatment rendered in a FTS setting will include basic measures to keep patients alive until they can be transported for definitive care and to manage pain and discomfort to the maximum extent possible.

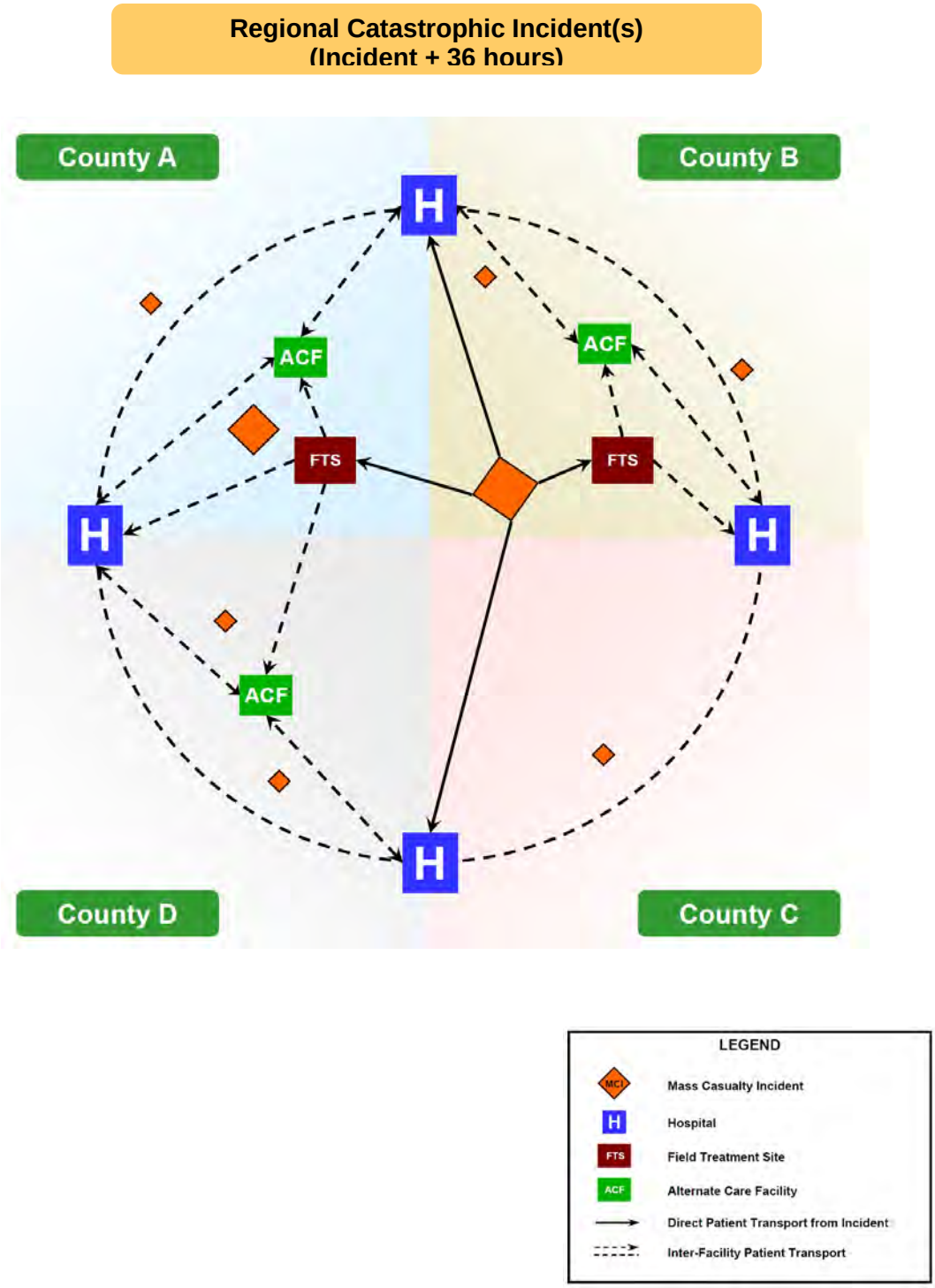
Unless otherwise specified, emergency field treatment provided at a FTS will follow and be consistent with the respective jurisdiction's MCI plan and established patient treatment protocols for crisis standards of care (as defined by the community). Treatment protocols will aim to provide the best care possible for as many people as possible given expected shortfalls in medical resources and staffing.

*Patient Transport:* During response, patients can be transported from the incident scene to an FTS, ACF (if established), or directly to a hospital. It is assumed that a majority of patients may self-transport to a FTS to receive medical evaluation and treatment.[4]

Once at an FTS, patients can be transported to a hospital, an ACF (if one exists), casualty collection point or evacuation staging area, fatality management center, or released home. Because of significant constraints on personnel, resources, and the level of care that can be provided at an FTS, priority should be given to transporting patients from an FTS as soon as an appropriate receiving facility can be identified and transportation can be arranged. Figure 1 shows the potential transport pathways between an FTS and an ACF or hospital. Note that in the figure, FTSs and ACFs appear to be physically separated; however, as stated earlier in this document, a FTS and ACF may be collocated if the site meets all of the necessary requirements.

[4] Following a catastrophe, people will adopt strategies that they believe will be most effective in gaining access to medical care or support services.

Figure 1. Potential pathways for patient movement through the emergency medical system during the response to a catastrophe (*note: for simplicity, the figure only shows movement of patients from one MCI location; however, in a real disaster patient movement would occur from each of MCI location (orange diamonds*)).



## V. Pre-Incident Planning[5]

In order to establish an FTS quickly after an incident, the Puget Sound Region should plan for FTS operations before an incident occurs and consider the following activities in the planning process:

- Assign a lead agency and/or point-of-contact (POC) in the Puget Sound Region who will maintain and update this appendix, as needed.
- Arrange the necessary approval process for activating an FTS; this may involve actions by the local political body.
- Establish Memorandums of Understanding (MOU) with pre-hospital care providers, partners, and stakeholders (e.g., private EMS providers, security/law enforcement) for resource and personnel support.
- Identify available personnel and material resources throughout the region that can support FTS operations; this includes identifying and qualifying personnel to serve in FTS command positions.
- Provide training for appropriate personnel in subjects relating to FTS operations (i.e., Incident Command System functions and command structure).
- Develop a general FTS layout to illustrate components and patient flow within an FTS. Appendix A provides a diagram depicting a generic layout for a FTS based on the requirements identified in this document; that diagram can be used as a starting point.
- Develop necessary checklists for applicable FTS job functions.
- Develop procedures to demobilize FTS operation.
- Conduct drills and/or exercises to test the region's FTS plan.

## VI. Demobilization

Once the initial activation decision is made, the relevant jurisdiction's ESF 8 authority should consider when and how the FTS will be demobilized. Planning for demobilization should begin as early as possible to ensure a smooth transition and return of the pre-hospital system to its normal (or new normal) operating status.

As the response progresses, the need to maintain FTS operations may no longer exist. Collaboration among the Incident Commander/Unified Area Command, FTS Supervisor, local Public Health Officer, Medical Program Director, Regional DMCC, ESF 8 lead, and the EMS Coordination Group will aid in determining when a FTS can cease operations. The primary criterion for FTS demobilization is the capability to transport all patients to a local/regional hospital, ACF, evacuation staging area, fatality management center, or to release them home.

## VII. Logistical Requirements

FTSs require substantial logistic and personnel support including, but not limited to, law enforcement/security, fire/EMS, public works, public health, mental health, and social services. This support will be coordinated through local Emergency Operations Centers in accordance with pre-existing mechanisms for incident management support.

[5] Adapted from the Florida Department of Health, Pre-Hospital Planning Emergency Medical Response, Alternative Medical Treatment Site (AMTS) Plan, August 30, 2006.

Appendix B provides a sample resource inventory list for a FTS based on the anticipated scope of care for patients. Jurisdictional emergency planners developing an operational FTS plan may use this list as a starting point and tailor it according to their unique needs based on the expected role that the FTS will play in their communities. MCI caches positioned throughout the Puget Sound Region can be used to support FTS operations.[6]

## VIII. Partners and Stakeholders

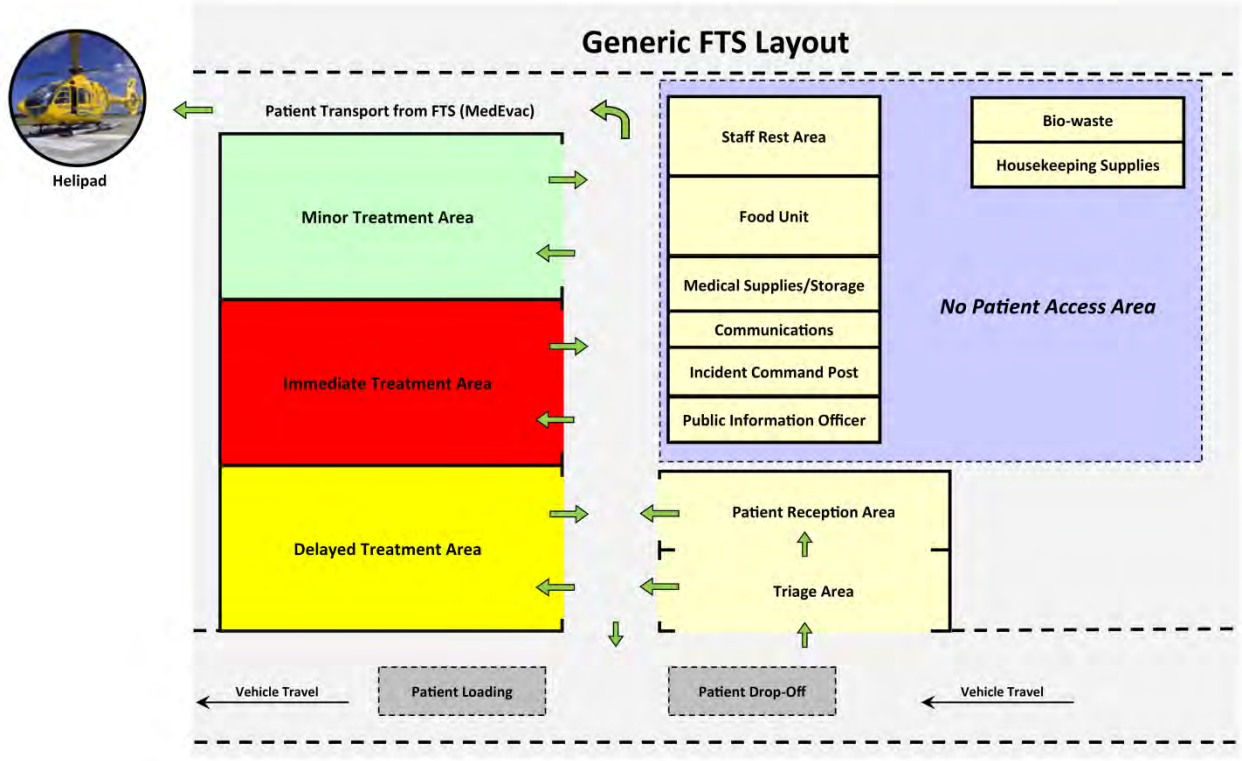
Although EMS personnel have the primary responsibility to establish, operate, and sustain FTS operations during a catastrophe, there must be close coordination among all entities engaged in the pre-hospital and healthcare system response. The following is a list of potential partners and stakeholders that may support FTS operations:

- Local Public Health Official
- County Medical Program Director
- Regional and local DMCCs
- Medical Reserve Corps or other volunteer groups
- American Red Cross
- Public Works
- Transportation
- Social Services
- Mental Health
- Disaster Medical Assistance Team (DMAT)
- U.S. Public Health Service Commissioned Corps
- Local, State, or Federal law enforcement.

[6] The *Pre-Hospital Emergency Triage and Treatment Annex* contains a comprehensive list of Puget Sound Regional MCI Resource Inventory.

SAMPLE FTS LAYOUT DIAGRAM

Provided below is a sample diagram for the layout of a potential FTS. It shows patient flow into and out of the FTS, as well as patient movement among different treatment areas within a FTS. It also highlights areas that, although not directly related to patient triage or care, are needed to support FTS operations, such as medical supplies/storage.



## RESOURCE CACHE INVENTORY

The Resource Cache Inventory specifies the minimum and optimal resource requirements for an FTS operation and is organized into the following categories:

- Patient Care Consumables
- Oxygen and Respiratory Equipment
- Diagnostic Supplies
- General Supplies
- Cardiac Care Supplies
- Immobilization Devices
- Medications
- Administrative Supplies

Initial resources for a FTS will likely come from equipment and supplies carried on ambulances and other emergency response vehicles. Additional supplies/resupplies may come from existing MCI caches located throughout the Region, other regional stockpiles, as well as materiel provided through mutual aid or State and Federal assistance.

The following table provides an initial list of base resources and supplies for a FTS.[7] This list may be expanded upon and further developed as appropriate given the FTS mission in the jurisdiction and in accordance with resources that may be available through local or regional MCI caches, mutual aid, and State or Federal assistance.

| Item Description | 24-Hour Quantities | Total Amount Required per 48-Hour Operating Period |
|---|---|---|
| Alcohol swabs | 4 boxes | 4-8 boxes |
| Arterial tourniquet | 6 | 6 |
| Backboards | 50 | 50 |
| Bandages/dressing (ABD pads) | 25 | 50 |
| Bandages/dressing (sterile multi-trauma – various sizes large and small) | 25 | 50 |
| Bandages (sterile burn sheets) | 12 | 24 |
| Bandages (triangular) | 12 | 24 |
| Band-Aids | 2 boxes | 4 boxes |
| Basins, bath | 20 | 40 |
| Bathing supply, prepackaged (e.g,. Bath in a bag (TM)) | 50 | 100 |

[7] The list of initial resources and supplies was constructed using the inventories of the City of Seattle MCI Trailer, as well as the City of Bellevue Fire's Medical Supply Unit. These inventories were compared to resource lists from the Agency for Healthcare Research and Quality, Disaster Alternate Care Facilities: Selection and Operation, Level III – Comprehensive ACF Cache, October 2009; the Pennsylvania Modular Emergency Medical System Cache Inventory List; the American College of Surgeons, American College of Emergency Physicians, National Association of EMS Physicians, American Academy of Pediatrics, and Pediatric Equipment Guidelines Committee, "Equipment for Ambulances; the Florida Department of Health Pre-Hospital Planning Emergency Medical Response – Alternative Medical Treatment Site Plan; and the Disaster Medical Assistance Team (DMAT) 72-hour Supply Cache.

| Item Description | 24-Hour Quantities | Total Amount Required per 48-Hour Operating Period |
|---|---|---|
| Bedpans – regular/disposable | 25 | 50 |
| Blankets | 50 | 50 |
| Beds/Cots (have extras available to replace broken equipment) | 50 | 50 |
| Cold Packs | 25 | 50 |
| Emesis basins | 25 | 50 |
| Facial tissue, individual patient box | 25 boxes | 50 boxes |
| Gauze pads, non-sterile, 4x4 size | 10 boxes | 20 boxes |
| Gloves non-sterile, small/medium/large (latex and non-latex) | 2 boxes each size | 12 Boxes |
| Goggles/face shields, splash resistant, disposable | 50 | 100 |
| Gown, patient | 50 | 100 |
| Gown, splash resistant, disposable | 24 | 48 |
| Hand cleaner, waterless alcohol-based | 20 | 40 |
| IV catheters, 18 g with protectocath guard | 50/box | 1 box |
| IV catheters, 20 g with protectocath guard | 50/box | 1 box |
| IV catheters, 22 g with protectocath guard | 50/box | 1 box |
| IV catheters, 24 g with protectocath guard | 50/box | 1 box |
| IV fluid bags, D5 1/2NS, 1000cc | 5 cases | 10 cases |
| IV fluid bags, NS, 1000cc | 5 cases | 10 cases |
| Kling | 6 boxes | 12 boxes |
| Large Add sets | 25 | 50 |
| IV tubing w/ Buretol Drip set for peds | 10 | 20 |
| IV tubing w/ standard macrodrip for adults | 25 | 50 |
| Mask, N95, for staff (particulate respirator) | 50 | 100 |
| Needles, Butterfly, 23g | 50/box | 1 box |
| Needles, sterile 18g | 1 box | 2 boxes |
| Needles, sterile 21g | 1 box | 2 boxes |
| Needles, sterile 25g | 1 box | 2 boxes |
| Pen Lights | 12 | 24 |
| Iodine swabs | 2 boxes | 4 boxes |
| Restraints, Extremity, soft - adult | 12 | 24 |
| Sharps disposal containers – 2 gallon | 5 | 5 |
| Sheets, disposable, paper, for stretchers and cots | 100 | 200 |
| Syringes, 10cc, luer lock | 1 box (100 ct) | 2 boxes |
| Syringes, 3cc, luer lock, w/ 21g 1.5” needle | 1 box (100 ct) | 2 boxes |
| Tape, silk – 1 inch | 12 rolls | 24 rolls |
| Tape, silk – 2 inch | 6 rolls | 12 rolls |
| Terri towels | 25 rolls | 50 rolls |
| Tongue depressors | 100/box | 1 box |
| Triage tags | | |
| Urinals | 50 | 50 |

| Oxygen and Respiratory Equipment (Per 50-Patient Unit) | |
|---|---|
| **Item** | **Quantity (per Unit)** |
| Bag-Valve-Mask w/adult ad peds masks & tubing | 10 |
| Cascade gauge for oxygen cylinders | 6 |
| Catheters, suction | 20 |
| Connector, 5 in 1 | 8 |
| Intubation equipment with oral airways/ET tubes; adults & peds | 2 sets |
| Mask, oxygen – nonrebreather, adult | 20 |
| Mask, oxygen – nonrebreather, pediatric | 10 |
| Nasal cannula, adult | 20 |
| Nasal cannula, pediatric | 5 |
| Nebulizer | |
| Regulator, Oxygen (Flow meter) | 1 |
| Suction unit – Portable | 4 |
| Tank, Oxygen E-Cylinder (700 L $O_2$) | 4 |
| Tank, Oxygen H_Cylinder (7000 L $O_2$) | 4 |
| Wrench, Oxygen tank | 2 |

| Diagnostic Supplies (Per 50-Patient Unit) | | |
|---|---|---|
| **Item Description** | **24-Hour Quantities** | **Total Amount Required per 48-Hour Operating Period** |
| Glucometer | 2 | 2 |
| Glucometer test strips | 1 bottle | 2 bottles |
| Pulse Oximeter | 1 | 1 |
| Single use shielded lancets | 25 | 50 |
| Blood pressure cuff | 12 | 12 |
| Stethoscopes | 12 | 12 |
| Thermometer | 12 | 12 |
| Thermometer probe cover | 4 boxes | 8 boxes |

| General Supplies (Per 50-Patient Unit) | |
|---|---|
| **Item** | **Quantity** |
| Biohazardous waste bags | 10 |
| Computer with Web access | 1 |
| Housekeeping cart with supplies | 1 |
| IV Pole | 50 |
| Linens (sheet/pillows/pillow cases/hand towels) | 100 |
| Pharmacy cart | 2 |
| Scissors (heavy bandage) | 15 |
| Stair chair | 2 |
| Stretcher | 2 |

| Cardiac Equipment |
|---|
| Portable, battery-operated monitor/defibrillator |

| Immobilization Devices |
|---|

| |
|---|
| Backboard, Impervious |
| Cervical collars |
| Head immobilization – firm padding or commercial device |
| Lower extremity (femur) traction devices |
| Upper and lower extremity immobilization devices (rigid support) |

| **Medications** |
|---|
| Albuterol |
| Epi pens |
| Oral glucose |
| Nitroglycerin (sublingual tablet or paste) |
| Anxiolytics |
| Intubation adjuncts (including neuromuscular blockers) |

| **Administrative Supplies** |
|---|
| Admission history & physical forms |
| Batteries – 9V; AA; C; D |
| Black permanent markers |
| Chart holders/clipboards |
| Clipboards |
| Dry-erase markers |
| File Folders – letter size, variety of colors |
| Floor lamps |
| Generators |
| Generic sign-in, sign-out forms |
| Light bulbs |
| Name bands for identification and allergies |
| Paper clips |
| Paper punch (3- or 5- hole based on chart holders) |
| Pens – Black ballpoint |
| Pens – Red ballpoint |
| Plain paper |
| Plastic bags for patient valuables |
| Stapler and staples |
| Tape dispenser and tape |
| Tents/tarps |
| Trash cans and liners |
| White boards |
| Yellow highlighter markers |

## FTS/ACF MATRIX

The following table highlights the key characteristics/attributes of Field Treatment Sites (FTSs) and Alternate Care Facilities (ACFs). The table provides a useful comparison of how these two components of a community surge strategy support the delivery of medical evaluation and treatment to patients in the Puget Sound Region during catastrophic incidents.

| | **Field Treatment Site (FTS)** | **Alternate Care Facility (ACF)** |
|---|---|---|
| **Definition** | An area designated by emergency officials for the ***short-term*** (usually not more than 48 hours) collection, sorting (triaging), holding, and provision of emergency field treatment for patients until they can be safely transported to receive definitive care. | An area where ***long-term*** (usually more than 48 hours) "medical needs" sheltering, urgent (non-acute) care services, and select traditional inpatient services are not usually provided, but which is deliberately repurposed for provision of such services during disasters that overwhelm the existing healthcare system. |
| **Purpose/Gap Filled** | • Provide a designated location under austere conditions for collecting and holding patients who require medical evaluation and emergency field treatment when transport to a definitive care site is not possible in a timely manner.<br>• Serve the public as a temporary "bridge" between an incident scene(s) and a hospital/definitive care site to facilitate extended patient holding, triaging, and emergency field treatment until other surge strategies (e.g., ACF) can be implemented. | • Deliver medical care for patients for whom adequate and timely care cannot be provided by an existing healthcare sector (e.g., ambulatory care clinics, hospitals, long-term care facilities, or home health services).<br>• Deliver urgent care to reduce patient volume at Emergency Departments (ED) and ambulatory care clinics, so that these sectors can maximize care for other patient needs.<br>• Deliver care that is traditionally provided in inpatient care settings to maximize care for more critically ill patients with potentially survivable conditions.<br>• Deliver care that is usually provided at home with home health services for patients that have insufficient home situations and for when home healthcare services and hospitals are operating above maximal capacity to offload hospitals to maximize care for more critically ill patients. |

| | | |
|---|---|---|
| **Scenario(s)** | • Catastrophic natural (e.g., earthquake, volcano, tsunami) or manmade (e.g., bomb blast) disaster resulting in overwhelming numbers of injuries that can't be transported in a timely manner.<br>• Usually not activated to treat patients in a pandemic or other biological/disease scenario. | • Catastrophic natural (e.g., earthquake, volcano, tsunami) or manmade (e.g., bomb blast) disaster resulting in overwhelming numbers of injuries.<br>• Evacuation of a hospital or Skilled Nursing Facility<br>• Pandemic or other biological event resulting in large numbers of sick. |
| **Lead Agency** | • County/City Fire & EMS authority is responsible for set up and operation/staffing of the FTS.<br>• Staffing may be potentially augmented by hospital staff (for example, if hospital has lost function and its staff can be reassigned). | • County Public Health authority is responsible for set up and operation of ACF, as coordinated through ESF 8 in the Unified Command Structure (the exception is Mason County, where the responsibility for operating an ACF resides with Mason General Hospital).<br>• Staffed by Public Health nurses, MRC volunteers, hospital staff (for example, if hospital has lost function and its staff can be reassigned). |
| **Authority to Activate** | • Incident Commander (in consultation with Local Health Officer and EMS Medical Director). | • Local Health Officer. |
| **Indicators for Activation** | • Regional hospitals and other definitive care facilities are overwhelmed or have sustained substantial damage or loss of function<br>• Transport resources are limited / transportation routes are destroyed or unavailable<br>• Sufficient mutual aid required to treat or transport casualties is not readily available. | • Incident requires medical needs sheltering (e.g., evacuation of a long-term care facility)<br>• Incident causes a surge in patients, overwhelming the capacity and capability of the regional healthcare system to adequately care for those in need, and timely evacuation is not possible<br>• Damage to infrastructure (e.g., hospitals and/or transportation routes) such that there is insufficient capacity or capability to care for those in need, or an inability to transport or evacuate patients in a timely fashion.<br>• Incident produces a combination of these effects. |
| **Deployment/ Set-up Time** | • 4-12 hours | • 24-72 hours |
| **Operational Duration** | • Usually no more than 48 hours<br>• FTS is demobilized when injured patients can be transported to a hospital or ACF, or evacuated out | • Usually more than 48 hours<br>• ACF is demobilized when all patients can be transferred to a hospital, sent home or back to a |

| | | |
|---|---|---|
| | of the region to receive definitive treatment. | SNF, or evacuated out of the region. |
| **Location** | • Building of opportunity or tent(s)<br>• May be located in proximity to the disaster scene or near hospitals; or may be local points that can be used for evacuation out of the region. | • Usually in pre-identified buildings, but can also be housed in tent(s)<br>• Requires availability of all utilities<br>• Must accommodate up to 250 treatment spaces in 50-bed increments<br>• ACFs may use an existing FTS location if it meets the requirements for the ACF. |
| **Patients** | Received from:<br>• Incident scene(s)<br>• Self-referral<br><br>Transferred to:<br>• Hospital, ACF, or other definitive care site<br>• Evacuation hub (if patient evacuation indicated)<br>• Home<br>• Medical Examiner/Mass Fatality Management site.<br><br>*Due to personnel and resource constraints, as well as the level of care that can be provided at an FTS, priority should be given to moving patients from an FTS as soon as an appropriate facility can be identified and transportation can be arranged.* | Received from:<br>• Hospital or Skilled Nursing Facility<br>• Self-referral<br>• Patients transported from an FTS<br><br>Transferred to:<br>• Evacuation hub<br>• Skilled Nursing Facility<br>• Home<br>• Medical Examiner/Mass Fatality Management site.<br><br>*Patient admission criteria differ between counties; consult each county's ACF plan for its specific patient admission criteria.* |
| **Scope of Care** | Triage<br>• Patients will be triaged upon arrival in order to determine treatment and/or transportation needs. Patient condition will also be continually reassessed.<br><br>Treatment<br>• Emergency field treatment as defined in the relevant jurisdictional MCI plan. | Triage<br><br>• Patient condition re-evaluated upon arrival at ACFs from FTS, hospitals, or SNF.<br><br>Treatment<br>• As defined for the different tiers according to the relevant jurisdictional ACF plan. |

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Finding time and money for local Multiple Casualty Incident (MCI) planning can be difficult in today's financial and political climate. The constant threat of transportation incidents, violence, hazardous materials releases, natural disasters, and terrorism however show that the need for such planning is at an all-time high. Existing MCI plans in the Puget Sound region have been built around smaller transportation style events. Events from around the United States and internationally however, highlight that major incidents can occur anywhere, demanding that MCI plans be revisited to allow for all sizes of MCIs and cooperation between jurisdictional boundaries.

A contemporary MCI plan needs to address many factors, including those that are unique and/or important to the Puget Sound Region. This document seeks to identify those important areas and provide some guidance during the planning process.
Any MCI plan should:

## *DEFINITIONS/ASSUMPTIONS:*

- Fully define a MCI. This must include a theoretical definition, such as "as an event resulting from man-made or natural causes which results in illness or injury to a significant number of people," and may include specific numbers of patients.
- Be scalable to all sizes of events. All jurisdictions have the potential for a large number of patients that will quickly overwhelm the available resources. Mutual aid agreements and regional assets are critical for this aspect of planning.
- Keep the procedures for MCIs as close to normal procedures as possible. MCI's are low frequency events. By keeping MCIs similar to everyday procedures, skill retention will be higher.
- Identify tactical benchmarks. Possible benchmarks include: all patients extracted, all red patients transported, and all patients transported.
- Recognize that other hazards such as fires or a hazardous materials spill will be present and must be dealt with simultaneously. Additional staff and resources will be needed to deal with both patient care and any ongoing hazards.
- Have procedures for scene security. Numerous security issues may be present at an MCI incident such as bystanders, additional explosive devices, armed suspects, and traffic hazards.
- Utilize a Public Information Officer (PIO) to act as a liaison with the media. The media will converge on any major incident and immediately request information. If a PIO has not been designated, information requests will be directed towards the Incident Commander (IC) who is busy trying to run the incident. Current and accurate information needs to be given to the media in a timely manner to prevent inaccurate information being broadcast.
- Engage regional partners. MCI responses will include many agencies and jurisdictions. These partners should be included throughout the planning process and be included in the final plan. A few possible partners includes law enforcement, hospitals, public health, fire agencies (if not the primary EMS provider), emergency management, local military bases, bordering EMS agencies, and regional EMS assets.
- Reduce or eliminate bottlenecks and choke points. Choke points that delay getting patients to definitive care reduce survivability. A bottleneck such as a single triage gate with the intent of "numbering" each patient with a felt pen needlessly slows patient care and transportation.

- Be National Incident Management System (NIMS) compliant. Terminology used in the plan must be in compliance with NIMS and ICS to ensure smooth coordination between agencies and jurisdictions. One example of this is to use the term “Disaster Medical Control Center”, or DMCC, instead of the old term “Hospital Control.”
- Clearly outline job descriptions. Job titles should be defined with clear descriptions of tasks and responsibilities. Job Action Sheets or checklists may be created to help with training and exercise as well as real world events.
- Clearly outline the chain of command at MCI incidents. Likely utilizing an org chart, the chain of command should be clearly defined using the ICS structure. This also helps define the responsibilities for each position (such as Triage and Extraction falling under the Rescue Group).

*RESPONSE:*

- Recognize that MCI patients almost always suffer from traumatic injuries that are most fully treated in surgery at definitive care sites. Patients are not ultimately saved in the field, but rather in surgery. All patient care decisions should revolve around getting patients to the hospitals as quickly as possible.
- Recognize that the transportation corridor is critical to the success of rapid transportation. The transportation corridor should be identified and physically secured by the first arriving units. This is critical to prevent responder vehicles from impeding transport vehicle access.
- Have plans for bystanders and volunteers. Bystanders and volunteers will likely be on scene rendering aid before emergency responders arrive. Clearing volunteers and bystanders from a large and/or chaotic scene is not practical, so they must be worked with or around. Volunteers may be carefully utilized putting them in supervised positions equal to their self-claimed knowledge and skills.
- Include a group tasked with the removal of patients from hazard zone to the treatment area. Patient removal from the hazard zone will potentially require a large amount of personnel depending on the number and type of patients as well as the geography of the incident site.
- Define one or more triage standards while recognizing that all triage standards should result in red, yellow, green, and DOA/expectant patients. A single jurisdiction may define one specific type of triage standard (START, RPM, Sick/ Not Sick), but a county wide plan may have to make allowances for many different standards.
- Recognize that triage is an ongoing and dynamic process. Patients should be reassessed throughout the patient care process for changes in their condition.
- Designate a Green Patient Manager. EMS staff needs to quickly evaluate any green patients for injuries that would reclassify them as red or yellow and help with basic treatment of injuries. Law enforcement will also likely want to interview any green patients for information about the incident.
- Handle DOA/Expectant patients in accordance with their county medical examiners protocols. Most medical examiners state that the bodies of expectant or DOA patients should not be moved unless necessary for patient care.
- Define the primary means of transport for patients during an MCI and what alternate resources are available for larger events. Primary means of transportation is usually by BLS

ambulance. Alternate resources can include regional MCI buses, taxi cabs, and public transportation resources. Any resource listed in a plan should have at least a verbal memorandum of understanding (MOU) if not a written MOU with the listed agency to ensure that the resource can actually be used in the event of an emergency.

- Clearly define how patient distribution will be handled on scene. Communication with a designated DMCC should be the primary means of patient distribution, but a backup plan should exist if communication between the scene and the hospital is compromised.
- Designate the type(s) of patient documentation that will be completed on scene. Full patient documentation may not be possible or practical in MCIs. Documentation alternatives should be identified and the triggers for their use defined. Possible alternatives include MCI triage tags and truncated medical incident report forms.
- Patients must be tracked from the incident scene using a tracking system that should easily integrate into the hospital identification system. All patients should be given a unique identifier that can stay with them from the scene through to the hospital intake system. Bar-coded tags and bracelets are an easy method to accomplish this task while allowing for future use of electronic barcode scanners. Patient tracking assists public health agencies in family reunification efforts.

*POST INCIDENT*

- Provide some sort of critical stress debriefing for responders after unique or challenging responses. The mental health or responders should be considered after challenging or unique responses.
- Procedures for after action review (AAR) and plan improvement. Any major MCI exercise or incident should be followed by a thorough review of the incident to identify what went well and which procedures need improvement. The items needing improvement should be incorporated into the MCI plan.

*SPECIAL CONSIDERATIONS:*

- Allow for multiple scenes or "fractured" incident sites when parts of the incident scene are inaccessible to each other. Numerous transportation and terrorist events throughout the world have recently shown the need to be able to operate at multiple sites and/or fractured sites simultaneously. Thought should be given to ICS, resource management for multiple sites, and communication between the sites.
- Include plans for field treatment sites (FTS). If patient transportation to a definitive care site is not possible, responders may have to provide emergency treatment in the field for an extended period of time (up to 48 hours) until transportation to definitive care centers can occur. Please refer to FTS planning documents for further discussion on field treatment sites.
- Include special procedures for possible or known terrorist events. With the increase of homegrown terrorist attacks, no jurisdiction is immune to the threat of terrorism. Special considerations need to be given to active shooters, explosives, chemical/biological releases, and any other types of terrorist events.
- Include decontamination (decon) procedures and a notification system to alert hospitals to stand up their decon procedures. Many of the possible causes of a MCI will require patient decon before transportation can occur. Hospitals should be notified as early as possible

that patient decon will be necessary so that they may initiate their decon procedures to handle walk-in patients.

# EXECUTIVE SUMMARY

This plan defines a Multiple Casualty Incident (MCI) as an event resulting from man-made or natural causes which results in illness or injury to a significant number of people. Using this definition, an MCI response should be implemented anytime the number of patients does not allow for the day to day standard of care for individual patients. Any fire or EMS agency strives to always provide the best care possible to any patient, but when there are 6, 20, 50, or even 100 or more patients, the goal must be to provide the best treatment possible for as many patients as possible. This means that operations must be adjusted to maximize the efficient use of available resources.

The "Golden Hour" of emergency medicine is a well-accepted concept that states that victims of trauma need to have surgery within one hour of the injury to have the best chance of survivability.[8] Rapid transportation to definitive care centers therefore is the best way to increase survivability in a MCI event.

This plan seeks to reduce chokepoints and unnecessary actions, and streamline efforts to reduce the time that it takes to remove all patients from the scene. This includes:

- Using the Sick/ Not Sick triage protocol to reduce time spent triaging.
- Eliminating a triage gate.
- Establishing a transportation corridor by the first arriving Fire Department unit to ensure a smooth flow of transportation resources.
- Assigning field triage to the Rescue Group as opposed to the Medical Group.
- Using geographic divisions in larger incidents to speed triage and extraction.
- Scaling patient tracking and documentation with the size and complexity of an incident.

MCI events can be as small as a few patients or as large as hundreds. Flexibility is integrated into this plan to fit all sizes of incidents. Issues related to a fractured or geographically challenging event are also addressed.

This plan is designed to be shared and integrated with local, State, and Federal governmental agencies to ensure coordination and cooperation. During an event, interagency cooperation will be in accordance with the National Incident Management System (NIMS).

[8] American College of Surgeons (2008). *Atls, Advanced Trauma Life Support Program for Doctors*. Amer College of Surgeons.

PLANNING ASSUMPTIONS

- The traditional definition of a MCI is: Any incident in which emergency medical services personnel and equipment at the scene are overwhelmed by the number and severity of casualties at that incident.[9] A more specific working definition is anytime the number of patients does not allow for the day to day standard of care for individual patients.
- The priority of an MCI response is to streamline efforts to speed patient transportation to definitive care centers.
- The plan is scalable to all sizes and complexity levels of MCI responses. Actions that delay the treatment or transport of patients may be modified or eliminated as long as it does not increase the risk to responders.
- A transportation corridor needs to be established and secured early in the incident to facilitate rapid patient transport.[10,11] Multiple corridors with corresponding patient treatment areas may be necessary.
- The SICK/ NOT SICK model can be used for MCI triage. SICK patients will be classified as red. NOT SICK patients will be yellow and green.
- All triage systems produce similar results, resulting in red, yellow, green, and stripped patients. Therefore, when working with other agencies, it does not matter if different triage systems are used.
- On scene treatment is dynamic, allowing EMS personnel to alter treatment protocols to match available resources.
- It is generally recognized that similar mechanisms of injury will have corresponding similar patterns of sick and not sick patients.[12,13] This allows responders to quickly estimate the patient distribution based on total patient count. Using this assumption allows the first in officer to simply state the estimated total number of patients during their initial scene size-up, rather than trying to determine the number of red, yellow, and green patients upon arrival. Assuming 50% of the total patients will be red or yellow allows a quick guide to call for the appropriate amount of resources and establish the scope of the incident.
- Extraction priorities will be dynamic based on severity, access, and resources. It may be necessary or prudent to remove some yellow patients before red patients. Situations such as extended extraction times, yellow patients blocking access to red patients, physical barriers, or a shortage of staffing or resources may necessitate altering extraction priorities.
- A triage gate creates an unnecessary choke point, impeding patient care, and will no longer be used.
- Deceased patients should not be moved or disturbed unless it is needed to extract viable patients.

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[9] Mistovich JJ, Karren, KJ, Hafen, BQ, Werman, HA. *Brady Prehospital Emergency Care. 6th ed*. Upper Saddle River, NJ: Prentice Hall Health; 2000: 866.

[10] Seattle Office of Emergency Management. *Alaskan Way Viaduct Field Exercise After Action and Corrective Action Report*. Seattle, WA: Seattle Office of Emergency Management; 2005.

[11] Heightman, AJ. Seattle: Bus off the Aurora Highway Bridge. *Journal of Emergency Services.* 1999; 24(6):86-95.

[12] Arnold, JL; Halpern, P; Tsai, M, Smithline H. Mass Casualty Terrorist Bombings: A Comparison of Outcomes by Bombing Type. *Annals of Emergency Medicine.* 2004; 43(2):263-273.

[13] Pretto, EA. Framework for Mass Casualty Management and the Role of the Anesthesiologist. *Anesthesia and Disaster Medicine: Part II.* 2003; 1(2)

- The mental health of the responders can be adversely affected by this traumatic type of incident, and the activation of a Critical Incident Stress Management team following the event may be necessary.

## DEFINITIONS

Ambulance Coordinator: Person responsible for the ambulance staging area; reports to the Transportation Team Leader.

ABC Field Triage: An algorithm which allows for the rapid categorization of patients dependent on the assessment of Airway, Breathing and Circulation.

Advanced Life Support (ALS): Invasive emergency medical services requiring advanced medical treatment skills as defined by chapter 18.71 RCW.

Alternate Care Facilities: Locations, preexisting or created, that serve to expand the capacity of a hospital in order to accommodate or care for patients during multiple casualty incidents or a biological (epidemic) event that overwhelms local hospital capacity. Patients will always be triaged and transported to the hospital not the ACF

Basic Life Support (BLS): Noninvasive emergency medical services requiring basic medical treatment skills as defined in chapter 18.73 RCW.

Cold Zone: Contains all emergency activities not involved in the hot or warm zones. This includes the treatment area, transportation corridor, command post, green patient area, and staging.

Disaster Medical Control Center (DMCC): Also known as Hospital Control, the Hospital responsible for providing EMS with a coordinated distribution of patients to area hospitals based on patient needs and the hospitals capabilities.

Extraction: The process of moving patients out of the hot zone to the treatment and transport areas.

Extrication: The process of removing a patient from an entrapment.

Field Incident Technician (FIT): An individual assigned to assist with logistical, tactical and accountability functions. Typically a FIT will be assigned to an I.M.S. position such as Operations Section Chief, Branch Director, Group Supervisor, etc.

Field Treatment Site: An area designated by emergency officials for the short-term (usually not more than 24-48 hours) collection, sorting (triaging), holding, and provision of initial, stabilizing treatment of patients until they can be safely transported to a definitive care site or evacuated from the region.

Field Triage: The process of rapidly categorizing a large number of patients according to their severity of injury in order to prioritize their extrication and extraction to the treatment area.

Fractured Incident: Occurs when a physical barrier provides limited access between geographical areas of the same incident.

Green Patient Screening Area: An area dedicated to containment, treatment, and care of patients. Designated as a separate area from Treatment due to the large number of potential patients and the special considerations they may need such as shelter, food and restroom facilities. Depending on the type of incident, they may also be considered witness/suspects and require a law enforcement presence.

Hot Zone: The area that includes any ongoing hazards. The hot zone will be considered a higher risk area and should be restricted to personnel who have donned appropriate PPE and have an assigned task within the hot zone.

Loading Coordinator: Member responsible for the coordination of loading of patients into transportation resources; reports to the Transportation Team Leader.

MCI Response: Varied level of resources dispatched to an incident dependent upon the nature of the incident, the number of patients, and their severity of injury.

MCI Vehicle: A mobile unit with enough EMS equipment and supplies to treat a large amount of patients.

Medical Group Supervisor (MGS): Reports to the Incident Commander or Operations Section Chief. The MGS ensures that Treatment, Transportation, Green Patient Screening, Medical Staging, and Striped (Black/White) Patient functions are performed; delegating positions as necessary.

Medical Communications Manager: Member designated to talk with the DMCC to acquire patient destinations. This person is usually located at the end of the transportation corridor with the Tracking Manager and reports to the Transportation Team Leader.

Medical Control: Physician direction over pre-hospital activities to ensure efficient triage, transportation, and care. Also includes the written policies, procedures, guidelines and protocols for pre-hospital emergency medical care and transportation.

Medical Staging: An area established to maintain medical supplies, personnel and equipment. The Medical Staging Area will not be necessary at all incidents. When it is indicated, the Medical Group Supervisor will assign a Medical Staging Manager.

MSO: Medical Services Officer, an EMS supervisor.

Multiple Casualty Incident (MCI): Sometimes called a Mass Casualty Incident, a MCI is an event resulting from man-made or natural causes which results in illness or injury to a large number of people simultaneously. The effect is that definitive patient care cannot be provided immediately to all and resources must be allocated

Paramedic: A person who has been trained in an approved program to perform all phases of prehospital emergency medical care, including advanced life support, under written or oral authorization of an MPD or approved physician delegate; and

Patient Tracking: A system integrated with other healthcare providers to follow patient progression through an incident from initial contact to final disposition.

Remote Treatment Area: An additional treatment area set up in conjunction with a transportation corridor that is distant from the hot zone to help stage patients closer to the transportation resources.

Sick/ Not Sick: The sick/ not sick approach to triage utilizes the EMT's knowledge and experience to rapidly evaluate a patient's physiological status. The sick patient is categorized as red. The not sick patient is considered green if they are able to get up and walk on their own and yellow if they have injuries preventing moving themselves.

Striped (black/white) Patient Area: An area dedicated to the holding of any patients that expire after they have been extracted from the hot zone.

Tracking Manager: Member responsible for collecting patient barcode information, general condition (red, yellow, or green), and destination from each patient as they are transported from the scene for patient tracking purposes. This person is usually located at the end of the transportation corridor with the Medical Communications Manager and reports to the Transportation Team Leader.

Transport Corridor: Ingress and egress for patient transport.

Treatment Area: The designated area for the collection and treatment of patients. A colored flag will identify each treatment area.

- Red: An area where patients require immediate assistance
- Yellow: An area where patient injuries are serious (delayed) but not life-threatening
- Green: The area where patients with minor injuries are kept
- Black: An area where the deceased are placed

Treatment Tag: A tag attached to a patient listing patient's vitals and injuries. Medical shall designate when this form will be utilized.

Triage: A process of prioritizing patients based on the severity of their condition. This rations patient treatment efficiently when resources are insufficient for all to be treated immediately. Triage at a large incident is a dynamic ongoing process. Patients will be triaged and may have their status changed as they are moved from the hot zone to the hospital.

Triage Flagging Tape: A color coded identification system used to designate medical priority of patients during a Multiple Casualty Incident.

- Red Flagging (immediate patient)
- Yellow Flagging (delayed patient)
- Green Flagging (minor patient)
- Striped (black/white) Flagging (deceased patient)
- White Flagging – Haz-Mat incidents only (decontaminated/clean patient)

Flagging will be used if the hot zone is geographically dispersed enough that duplication of triage may occur, resulting in a delay in patient movement.

Warm Zone: The transition area between the hot and cold zones during a Haz-Mat incident where decontamination procedures will occur.

# CONCEPT OF OPERATIONS

## A. Initial Incident Actions

The initial IC will complete or assign the following:

Primary actions:

- Initial and size-up reports
- Identify and secure the transportation corridor
- Perform a risk assessment
- Give assignments to incoming units

Secondary actions:

- Begin hazard mitigation for the purpose of reducing the immediate danger to patients, rescuers, and the public.
- Establish Recon Group
- Identify operational zones

- Coordinate with law enforcement to secure the transportation corridor and identify operational zones
- Designate a green patient area and have all green patients move to that location
- Begin extraction and treatment of patients as possible considering available resources

## B. Tactical Benchmarks

- All patients extracted.
- All red patients transported.
- All patients transported.
- Any tactical benchmarks appropriate for hazard mitigation.

## C. Scene Security

Scene security will be the responsibility of law enforcement, but fire and EMS personnel must stay alert to potential security issues including but not limited to:

- Additional Explosive Devices (see the Terrorist Attacks section)
- Crowd control
- Traffic control

The situation may cause the delay of certain operations while law enforcement clears the hazard area. Clear and consistent communication between fire, EMS, and law enforcement is critical to maintain security.[14]

## D. Operational Zones

Initial companies need to clearly establish hot, warm, and cold zones (Appendix A, G). These zones should be clearly communicated to all on scene responders. Larger sites may need to be secured by law enforcement.

## E. Transportation Corridor

The transportation corridor must be established early and clearly communicated by the first arriving company officer during the size-up report. The exact street, entry point, exit point, and direction of flow must all be determined and communicated. Law enforcement should be directed to clear and protect the designated corridor; all other apparatus should keep this location clear. Some incidents may require law enforcement to extend the protected corridor all the way to the hospitals.[15,16]

All apparatus operators must keep the transportation corridor clear.
Medic Units will not be parked directly in the corridor, but should be located in or near the patient treatment area.

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[14] Seattle Office of Emergency Management. *Alaskan Way Viaduct Field Exercise After Action and Corrective Action Report*. Seattle, WA: Seattle Office of Emergency Management; 2005.
[15] Heightman, AJ. Seattle: Bus off the Aurora Highway Bridge. *Journal of Emergency Services.* 1999; 24(6):86-95.
[16] Seattle Office of Emergency Management. *Alaskan Way Viaduct Field Exercise After Action and Corrective Action Report*. Seattle, WA: Seattle Office of Emergency Management; 2005.

## F. Transportation Resources

The preferred method of transportation during an MCI is by BLS ambulance. Larger incidents may require the use of non-traditional assets such as buses, taxis, or Access vans (Appendix B).

During the initial stages of an MCI, Medic and Aid Units should not be used for transport.

Ambulance staff should remain with their vehicles to prevent them from becoming entangled in other tasks and risk clogging the transportation corridor with unmanned vehicles. For the same reason, patients should be brought to transportation resources rather than send ambulance staff to retrieve patients.

Use of MCI Transportation Buses should be considered as they become available in the Puget Sound region.

## G. Treatment Area

The patient treatment area will be established in conjunction with the transportation corridor. It should be adjacent to the transportation corridor to facilitate communication, tracking, and patient transfer (Appendix D).

The Treatment Team Leader will be responsible for the treatment area.
Extracted patients will be delivered directly to the treatment area unless diverted to the transportation corridor by the Treatment Team Leader. Extraction teams may triage/retriage patients to the appropriate colored treatment area. A triage gate will not be used.

Large incidents may necessitate treatment areas with separate areas and staff for red and yellow patients.[17] Multiple treatment areas with corresponding transportation corridors may be needed.
Treatment needs to request enough staff to care for the expected number of patients.
The level of treatment performed in the treatment area may vary according to the situation, but rapid patient stabilization will be the priority. The level of care will be determined by Treatment Team Leader in accordance with standing orders and/or direction from Medical Control (See Field Treatment).

## H. Triage

Triage will not be the responsibility of a single responder, but will be a collective and ongoing effort to constantly evaluate patients at every step in the MCI process. The Sick/ Not Sick triage standards will be used to evaluate patients.

Field triage will be the responsibility of the Extraction/Triage Team Leader within the Rescue Group.

## I. Green Patient Area

The initial companies will direct those patients that can walk to a designated area of refuge, or green patient area. Ideally, this area would be:

- Close to the treatment area
- Close to the transportation corridor
- Easily secured
- Sheltered from the elements

[17] Heightman, AJ. Seattle: Bus off the Aurora Highway Bridge. *Journal of Emergency Services.* 1999; 24(6):86-95.

Facilities, or “shelters of opportunity,” that may include large sheltered areas, bathroom facilities, showers, or kitchens can be used for the green patient area if available and in close proximity to the incident.

The Green Patient Team Leader will be responsible for the Green Patient Area.
Law enforcement may need to detain people in the green patient area for questioning as witnesses or suspects.

## J. Striped (Black/White) Patient Area

The striped (black/white) patient area will be the holding location for any patients that expire after they have been extracted from the hot zone.

Patients that are identified as striped inside of the hot zone should not be removed from the hot zone unless under the direction of the county medical examiner. Movement of these patients may be necessary to access live patients, but should be minimized.

The medical examiner will assume responsibility for this area upon their arrival.

## K. Fractured Incidents

When a physical barrier limits or prevents access between geographical areas, the incident is considered fractured. Fractured incidents may require branch level organization with the need for full or partial duplication of ICS positions, resources and staff for each area.

If functional areas are duplicated (multiple transportation corridors, treatment areas etc), each area must have its own ICS positions.

If multiple Transportation Team Leaders are being utilized, each may contact the DMCC for patient destinations separately.

Transportation resources requests will be handled by Operations in fractured incidents.
Fractured Incidents will be incredibly staffing intensive. IC’s must be aware to call for adequate staffing early.

# PATIENT DISPOSITION

## L. Decontamination

Any MCI (natural or intentional) may include the release of hazardous materials (Haz-Mat). Responders will need to evaluate the potential need for Haz-Mat and decontamination (decon) procedures. If a hazardous materials release is known or suspected, a Haz-Mat response should be requested if not already dispatched.

As soon as an MCI Haz-Mat is suspected, Medical should notify the DMCC (Hospital Control) that an MCI Haz-Mat incident has occurred and to expect potential self-referred contaminated patients.

If decontamination procedures are required, the IC must ensure that a large enough footprint has been established for both gross and technical decon. In addition, rotation of staff will require additional companies.

## M. Patient Sheltering

Every attempt should be made to provide shelter for the patients in the patient treatment and green patient areas. The shelter should provide protection from the hazards, weather, media, and the public.

Shelters of opportunity, or existing buildings, should be considered first. Priority will be given to structures with bathroom facilities, running water, and those that can be easily controlled. If no existing buildings are easily accessible or adjacent to the transportation corridor, then temporary shelters may be used. Possible temporary shelters include:

- Tents
  - Public transportation buses

When choosing a shelter, the possibility for an expanding incident needs to be considered, ensuring patients are not placed into an existing or future hazard zone.

## N. Field Treatment

Field treatment will follow current EMS MCI protocols as decided by the Medical Program Director.

The amount and type of treatment performed in the treatment area will be determined by the Treatment Team Leader in conjunction with the MGS and the DMCC (Hospital Control). Patient stabilization will be the priority, but the decision to perform further intervention should be based on the following factors:

- Injury severity
- Injury type
- Length of time until the patients are transported
- Available ALS and BLS staffing in the treatment area
- Number of Patients

## O. Patient Tracking

Patient tracking should be used to track the progress of every patient from the scene through to definitive care.

## P. Documentation

Whatever form of documentation is chosen for MCI events, is should never delay patient care or transportation.

# JOB ASSIGNMENTS

## Q. Incident Commander

The Incident Commander (IC) has overall responsibility for the incident. This position will be established by the first arriving company officer, but should be assumed by a chief officer.
Additional command structure will follow ICS. See Org Chart in Appendix C.

## R. Medical Group Supervisor

The role of the Medical Group Supervisor (MGS) should initially be filled by a senior member from the first arriving ALS unit. This role should be assumed by an MSO/MSA. The Medical Group Supervisor is responsible for the following:

- Transportation
- Treatment
- DMCC notification
- Green patient management

Note that the Medical Group Supervisor will not be responsible for field triage. Field triage is now the responsibility of the Extraction/Triage Team Leader.

## S. Treatment Team Leader

The Medical Group Supervisor will designate an ALS member to be the Treatment Team Leader who will be responsible for the following:

- Receiving patients from extraction teams
- Supervising the treatment of patients
- Managing the treatment area
- Prioritizing patients for transport
- Coordinating with the Transportation Team Leader
- Overseeing the striped (black/ white) patient area

The level of care provided in the treatment area may vary according to the situation, but rapid patient stabilization will be the priority. The level of care will be determined by the Treatment Team Leader in accordance with standings orders and/or direction from Medical Control (See Field Treatment).

The Treatment Team Leader, with input from the Transportation Team Leader, may elect to have patients delivered directly to the transportation corridor for transport.

The Treatment Team Leader must request adequate staffing and resources to care for the expected number of patients.

## T. Transportation Team Leader

The Medical Group Supervisor will designate an ALS member to be the Transportation Team Leader who will be responsible for the following:

- Communicating with the DMCC
- Keeping a total patient count of all transported patients by using the patient tracking system
- Coordinating with the Treatment Team Leader
- Coordinating with ambulance coordinator
- Ensuring every patient that is transported has an associated barcode tag

The Transportation Team Leader will assign patients to transporting units as those resources arrive. Constant communication between the Transportation and Treatment Team Leaders is important to ensure patients are ready for transport as units become available.

Larger incidents may require that the Transportation Team Leader delegate tasks by designating a Medical Communications Manager, a Loading Coordinator, a Tracking Manager, and/or an Ambulance Coordinator.

## U. Green Patient Team Leader

As soon as possible, a Green Patient Team Leader will be designated. Responsibilities may include:

- Ensure a green patient area has been established
- Coordinating with law enforcement
- Medically evaluating all patients, upgrading patients to red or yellow as needed, and moving those patients to the treatment area(s)
- Providing basic medical care
- Requesting logistical support such as Port-a-potties, water, blankets, etc

- Considering the need for emotional support including department chaplains, family members, or outside counseling support
- Tracking patients (inside the green patient area)
- Documenting patients (inside the green patient area)
- Assisting other agencies to address victim assistance/family reunification

The Green Patient Team Leader should request enough staffing to handle all of the aspects involved with the green patient area.

## V. Rescue Group Supervisor

The Rescue Group Supervisor should be designated early by the IC and will have the following responsibilities:

- Extraction /Triage
- Extrication

The Rescue Group Supervisor will determine if the use of triage flagging tape is necessary. Triage flagging tape should be used if the incident scene is geographically dispersed enough that duplication of triage efforts will cause a delay in patient movement.

The Rescue Group Supervisor may choose to utilize either functional groups, geographical divisions, or a combination of the two to most efficiently accomplish their tasks.

## W. Extraction/Triage Team Leader

The Extraction/Triage Team Leader will be responsible for ensuring that all patients are triaged and removed from the hot zone.

Extraction teams will be composed of 2 or more responders and will responsible for patient removal from the hot zone, field triage and delivery to the appropriate treatment area.
Extraction teams may use a variety of equipment to help move patients. These can include:

- Backboards
- Mega Movers
- Stokes Baskets

## X. Extrication Team Leader

An Extrication Team Leader may be established to oversee patient disentanglement and technical rescue. When trapped patients are found, the extrication teams will be sent to assist with the technical removal of those patients.

Extrication teams must prioritize their operations to provide the greatest good for the greatest number of patients. Patient condition, removal complexity, and estimated time of removal should all be considered when deciding extrication priorities.

# Mutual Aid and Outside Agency Assistance

## Y. Fire Department Mutual Aid

The IC should consider asking for the following mutual aid resources:

- ALS Strike Forces – 2 ALS Medic Units, 1 MSO
- Regional MCI Vehicles
- BLS Aid Cars
- Engine and/or Ladder Truck task forces
- Regional HazMat Units
- Regional Heavy Rescue Units

## Z. Law Enforcement

Law enforcement will be involved with any MCI event in multiple ways and have their own priorities depending on the type of event (transportation event, terrorist attack, etc.). Requests for assistance in securing a transportation corridor, establishing an evacuation zone, and assisting with the green patient area must be made early to give law enforcement enough time to get enough staffing on scene to help.

It is critical that a unified command is established early so that all agencies can operate cohesively to try and stabilize the event.

Multiple law enforcement agencies exist within the Puget Sound region, and the location and type of MCI event will dictate which agency will have jurisdiction over the event. This is why there is no reference to any specific agency within the plan, as it is recognized that an event may draw any or all of the law enforcement agencies within Seattle and King County.

## AA. Field Treatment Sites

There may be times when it becomes impossible to move patients from the incident site creating the need to establish a Field Treatment Site (FTS) to hold patients until they can be safely transported to a definitive care site or evacuated from the region. Reasons for creating an FTS include any time the event:

- Produces a surge in patients that overwhelms the capacity and capability of the regional healthcare system to adequately care for those in need and timely evacuation to other regions is not possible;
- Damages infrastructure (e.g., hospitals, transportation routes) to the extent that there is insufficient capacity or capability to care for those in need or an inability to transport the injured to healthcare facilities or evacuate them out of the region in a timely fashion;
- Produces some combination of the above.

An FTS should only be activated for a short time (usually 24-48 hours), giving hospitals time to enact their internal patient surge procedures and/or time to coordinate patient movement out of the area.

## BB. Terrorist Attacks

If the MCI is the result of a known or potential terrorist attack, additional considerations need to be addressed:

- Any unexplained explosion or explosion from a terrorist device should be assumed to have dispersed a hazardous substance such as radiation or a nerve agent.
- Additional explosive devices that target first responders or the public may be in the area.

- The terrorist or terrorists may still be in the area and suspicious behavior should be noted and passed on to law enforcement.
- If patients show signs or symptoms of a HazMat exposure, emergency decon must be performed before patient contact is made.

If one has not already been called, the IC should immediately request an MCI HazMat response.

Any known or potential terrorist event should be handled as a HazMat incident per the local HazMat protocols.

# Appendix A – Operational Zones

Personnel will designate a hot zone, a warm (transition) zone, a cold zone, and the exclusion zone (the outer perimeter) for MCI's. This is necessary to provide for crowd control and keep nonessential rescue personnel out of the danger zone.

The hot zone will include the area of any non-ambulatory patients that have not been removed as well as ongoing hazards. The hot zone will be considered a higher risk area, and should be restricted to personnel who have donned appropriate PPE, and have an assigned task within the hot zone.

The warm zone is the transition area between the hot and cold zones, and will contain any decontamination procedures.

The cold zone will contain all emergency activities not involved in the hot or warm zones. This includes the treatment area, transportation corridor, command post, and staging.

The exclusion zone will be the outside limit of the cold zone. The public and media will be located outside the exclusion zone. Small incidents will allow scene tape to be used to physically designate the exclusion zone. Law enforcement should be used in larger incidents to secure the exclusion zone.

Standard patient contact PPE is required for any personnel involved in patient care. A higher level of PPE may be required in the hot zone depending on hazards or operations. Individuals are responsible for using the proper PPE according to their duties.

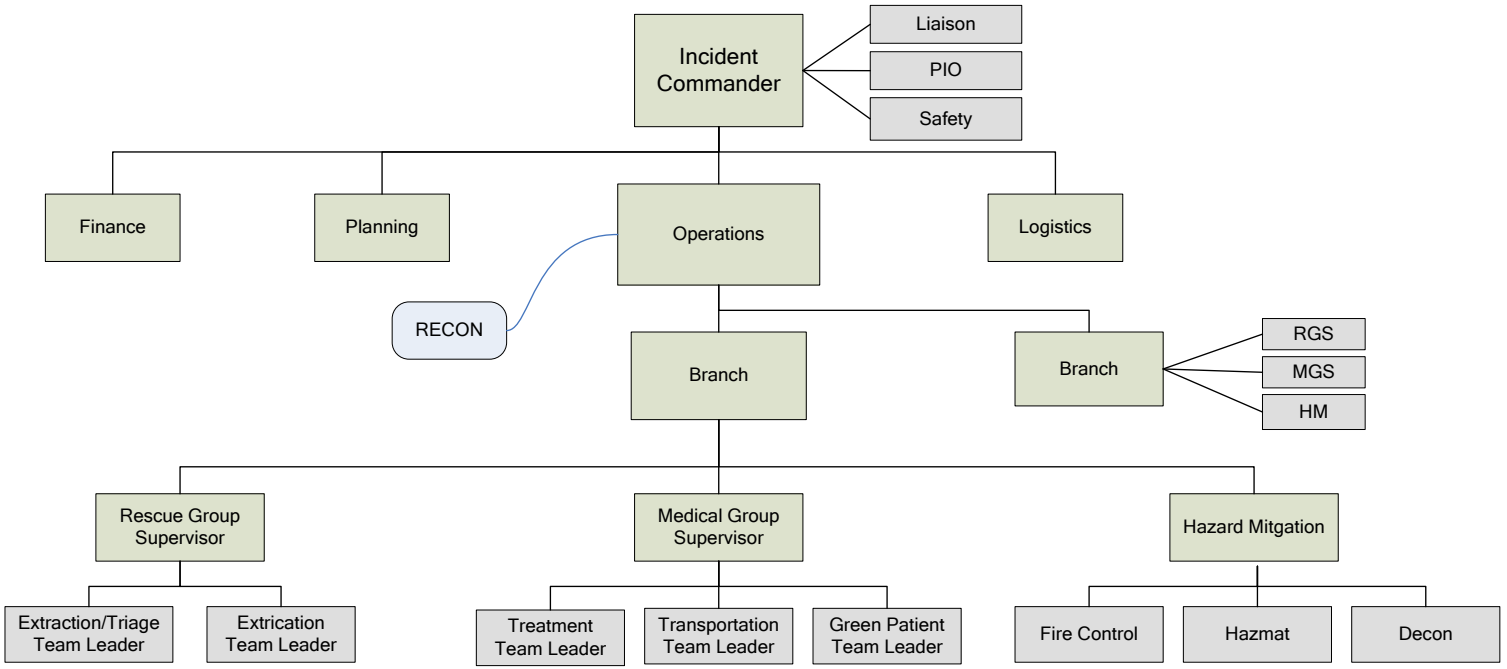
It may be necessary to establish multiple hot or warm zones depending on the size and scope of the incident.

## Appendix B – Possible Transportation Resources

The preferred method of transport during an MCI event is BLS ambulances. Possible transportation assets available during an MCI could include, but are not limited to:

- Private ambulance agencies
- Fire Department aid cars
- Metro/school buses
- Access Vans
- Mutual aid Fire Departments
- Airlift Northwest
- Coast Guard
- Military
- Taxi's

# Appendix C – MCI ICS Organization Chart



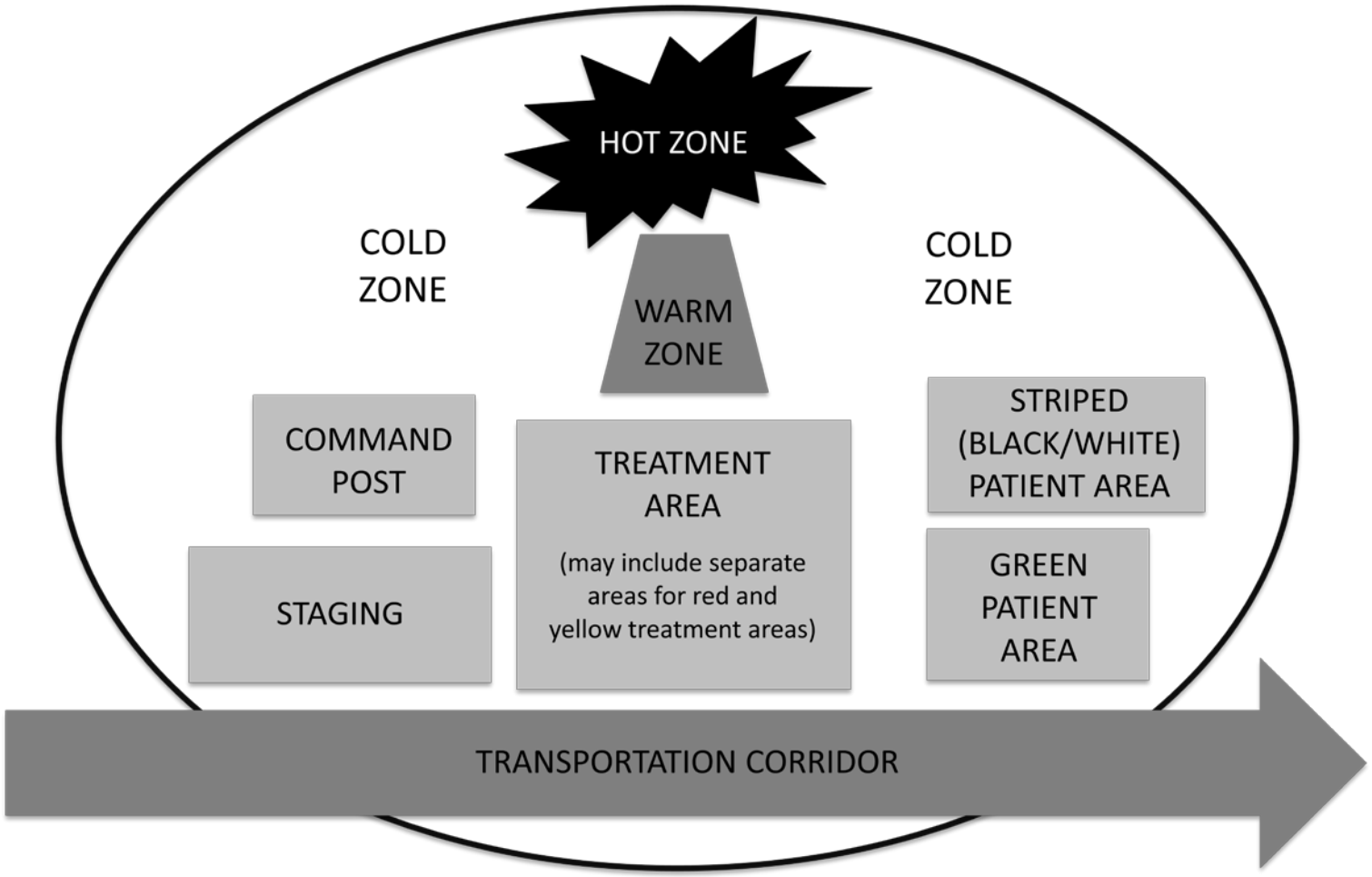

While this org chart represents a large scale incident, ICS allows for flexibility for all sizes of incidents. See the Incident Organization section for more information.

Branches can be either functional or geographic. If branches are geographic (as shown), positions will be repeated for each branch as necessary.

Unique identifiers such as “North,” “South,” “Alpha,” or “Bravo” should be used to clearly differentiate between similar positions.

The Extraction/Triage Team Leader will be responsible for field triage.

## Appendix D – Possible MCI Event Footprint



# City of Shoreline

# Comprehensive Emergency Management Plan (CEMP)

# Essential Support Function (ESF) 8

# Appendix D

# King County Long Term Care Mutual Aid Plan

# (LTC-MAP)

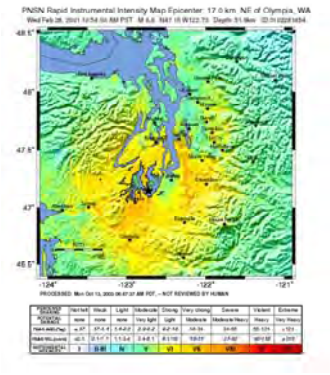
## Created by King County OEM

## Pages: 117

Note:

This document was created by King County OEM and maintained by King County OEM. The City of Shoreline incorporates this document into its CEMP in order to improve regional collaboration and coordination. This document may have a different header, footer, page numbers, and references than the rest of the ESF. For more information, please contact King County OEM.

# Region 6 – King County



# Long Term Care Mutual Aid Plan (LTC-MAP)

## for Evacuation and Resources / Assets

Final: March 4, 2010 REDACTED V.1, 05-01-10

**Sponsored by: Public Health - Seattle and King County and the King County Healthcare Coalition**

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# Plan Taskforce and Special Experts Participant List

| Organization | Name | Title |
|---|---|---|
| | | |
| | | |
| | | |

# *King County (Region 6)*
# *Long Term Care Mutual Aid Plan (LTC-MAP)*
## for Evacuation and Resources / Assets

**TASK FORCE AND SPECIAL EXPERTISE MEMBERS**

**ALGORITHMS**

**OVERVIEW**
- **PLAN OBJECTIVE**
- **SCOPE & RESPONSIBILITIES OF PLAN MEMBERS**

**ACTIONS OF:**
- **DISASTER STRUCK FACILITY (DSF)**
- **PATIENT ACCEPTING FACILITY (PAF)**

**PLAN ACTIVATION & COMMUNICATIONS**

**TRANSPORTATION OF PATIENTS**

**MEDICAL RECORDS AND PATIENT INFORMATION**
- **MEDICAL RECORDS & MEDICATIONS (Going With Patient)**
- **PATIENT IDENTIFICATION & TRACKING**

**STAFF, PHARMACEUTICALS, SUPPLIES AND EQUIPMENT (In Need Of and Transportation Of)**

**ANNEX I: MEMORANDUM OF UNDERSTANDING (including outside of Region 6)**

**ATTACHMENT A**
- **AGGREGATE PATIENT CATEGORIES OF CARE**
- **FACILITY INFORMATION**
  - **ADDRESS & PHONE NUMBERS**
  - **PATIENT CATEGORIES OF CARE**
  - **BEDS & SURGE CAPACITY NUMBERS**
  - **STOP OVER POINTS**
  - **TRANSPORTATION RESOURCES**
  - **EVACUATION SITES (HEALTHCARE FACILITIES)**

**ATTACHMENT B**
- **CONTACTS**
  - **EMERGENCY ACTIVATION PHONE NUMBERS**
  - **FACILITY EMERGENCY CONTACTS**
  - **LOCAL AND COUNTY PHONE NUMBERS**

**ATTACHMENT C**
- **TRANSPORTATION SURVEY (EVACUATION RESOURCES)**

**ATTACHMENT D**
- **AGGREGATE / FACILITY SPECIFIC SUPPLIES AND EQUIPMENT**
- **VENDORS**

**ATTACHMENT E - FORMS**
- **RESIDENT EVACUATION TRACKING FORM / TAG**
- **PATIENT / MR & EQUIPMENT TRACKING SHEET**
- **CONTROLLED SUBSTANCES RECEIVING LOG**
- **INFLUX OF PATIENTS LOG**
- **HEALTH & MEDICAL AREA COMMAND & DSF TRACKING SHEET (AGGREGATE)**

**ATTACHMENT F**
- **SAMPLE VENDORS MEMORANDUM OF UNDERSTANDING**
- **SAMPLE STOP OVER POINT AGREEMENT / TOOLS**

# RESOURCE REQUIREMENTS – TO AVOID EVACUATION

## Region 6: Individual Facility in Need of Resources

**Disaster Struck Facility:**

1. Call 911 (or non-emergency number) notifying appropriate local emergency responders of the situation
2. Implement internal disaster notification. Activate Command Center (**required** if requesting assistance) and Establish Incident Action Plan
3. Notify Public Health Duty Officer (24/7 #[redacted]) to activate HM Area Command and other local/county resources
4. Communicate with DSHS to inform them of the situation (CRU Hotline: [redacted])
5. Assign a Liaison Officer to report to the HM Area Command location or appropriate EOC to support coordination of supplies, equipment, etc.

**911:** Notify the Local Emergency Manager

**Health & Medical Area Command (HM Area Command)**

1. Utilize WATrac to alert King County healthcare facilities and critical partners of the incident
2. Verifies the local Emergency Manager / Municipality is aware of the incident
3. Activates the LTC-MAP Coordinating Team to support communication and coordination with the member facilities.
4. Notifies the Washington State DSHS for the Disaster Struck Facility(ies), if requested by Disaster Struck Facility
5. If necessary, recommend City of Seattle or KC ECC request a State Mission number from the State Emergency Management Division

Medical Needs

Non-medical Needs

### HM Area Command

Work through the HM Area Command for all medical needs. This includes staff, supplies, pharmaceuticals, medical equipment, Strategic National Stockpile (SNS) requests, and blood distribution

- HM Area Command will work with other organizations via phone, fax, e-mail and WATrac to identify available resources

### LOCAL EOC / COUNTY EOC

Work through the local EOC for all non-medical needs. This includes generators, HVAC units, transportation (i.e. box trucks), etc.

- Directly deal with the KC ECC if the Local EOC is unable to assist due to resource limitations
- If additional assistance is needed, inform the HM Area Command of the situation and seek resource coordination support

### NEED SUPPLIES AND EQUIPMENT

1. Call your facility's suppliers
2. Work with the local EOC and, if necessary, the KC ECC, to address other supplies and equipment requests
3. Work with the HM Area Command to secure vendors listed in the LTC-MAP

See supply and equipment availability from member facilities within your LTC-MAP

1. Fax request form to supplier to use as identification at police roadblocks (access may still be denied)
2. Communicate with the appropriate EOC to inform them of supplier access needs
3. Consider security needs, as necessary, for transportation of pharmaceutical and supplies

### NEED TRANSPORTATION FOR INCOMING SUPPLIES:

1. Work with the local or KC ECC to secure transportation resources
2. If the local EOC or KC ECC is overwhelmed by the complexity or magnitude of the disaster, all requests will be coordinated through the HM Area Command will in turn work with the appropriate EOC to coordinate resources.
   a. Transportation help may be secured from facilities within your LTC-MAP for box trucks or other transportation vehicles that may be available
   b. Request may be filled from outside of King County based on the magnitude of the incident

### NEED STAFF

1. Conduct staff callbacks within your facility and secure staff critical to your operations
2. Call your facility's staffing personnel vendors (i.e. Nurse relief teams, staffing agencies)
3. Work with the HM Area Command to secure staff from other LTC-MAP member facilities or via the Medical Reserve Corp (MRC)
4. Work with the appropriate EOC to address non-medical staff (i.e. damage assessment team, food service support, etc.)

NOTES:

1. Fax request form to other facilities to use as identification for staff at police roadblocks. If from another healthcare facility, ensure they have their facility ID and one other form of acceptable identification (access may still be denied)
2. Communicate with EOC to inform them of staff access needs

### Legend

**DSHS** – Department of Social and Health Services
**EOC** – Emergency Operations Center
**EMS** – Emergency Medical Services
**HM Area Command –** Health & Medical Area Command (Public Health)
**Hospital Control** – Hospital Control (Harborview)
**KC ECC** – King County Emergency Coordination Center
**LTC-MAP** – Long Term Care Mutual Aid Plan

# REGION 6 ACTIONS

## DISASTER OCCURS FORCING EVACUATION – PATIENT LIFE SAFETY IS PRIORITY

**Disaster Struck Facility (DSF):**

1. Call 911
2. Implement internal disaster notification. Activate Command Center (**required**) and Establish Incident Action Plan
3. Notify Public Health Duty Officer (24/7 #: [redacted]) to activate HM Area Command and other local/county resources
4. Communicate with DSHS to inform them of the situation (CRU Hotline: [redacted])
5. Assign a Liaison Officer to report to the HM Area Command to assist in resource coordination and communications (if applicable)
6. Continue to follow your facility's internal Emergency Management / Emergency Operations Plan

**911:** Notify the Local Emergency Manager

**Health & Medical Area Command (HM Area Command)**

1. Utilize WATrac to alert King County healthcare facilities and critical partners of the incident
2. Ensure Hospital Control is provided with a notification of the incident
3. Verifies the local Emergency Manager / Municipality is aware of the incident
4. Activates the LTC-MAP Coordinating Team to support communication and coordination with the member facilities.
5. Notifies the Washington State DSHS for the Disaster Struck Facility(ies), if requested by Disaster Struck Facility
6. If necessary, recommend City of Seattle or KC ECC request a State Mission number from the State Emergency Management Division

### TRANSPORTATION FOR EVACUEES

1. Fire / EMS provide on-site transportation for patients (primary responsibility will focus around private ambulance / transport groups)
2. HM Area Command will coordinate patient placement with DSF
3. LTC-MAP member facilities provide transportation vehicles to assist the DSF
   a. Vehicles should be Staged with other EMS and non-EMS transport vehicles

**If** additional non-EMS transportation resources are needed and requests escalate above the capacity of local EOC:

4. Evacuating Facility notifies HM Area Command
5. HM Area Command requests assistance from the KC ECC to mobilize transit agencies and private transportation contractors

### NEED TO EVACUATE

**Disaster Struck Facility (DSF) Actions:**

1. Slow Evacuation – Move patients to Stop Over Point OR transfer directly to Patient Accepting Facilities
   a. *If an extended period of time is available to evacuate and the facility has extensive damage (e.g. will not reopen in short term), all efforts will be coordinated with **DSHS** and local nursing homes to place all patients in open beds
2. Fast Evacuation – Move patients to Stop Over Points and subsequently to Patient Accepting Facilities:
   - Establish Unified Command with local / on-site Emergency Response Agencies
   - Implements census reduction (on-site patient reduction) / rapid discharge plan to minimize number of patient transfers
   - Send Medical Record / Chart and tracking forms (and staff/equipment, as necessary)
   - Track patients with *Resident Evacuation Tracking Form/Tag* and *Patient / Medical Record & Equipment Tracking Sheet*
   - Evaluate the necessity of transferring controlled substances with patients
   - Disaster Struck Facility notifies each patient's responsible party and physician (utilizing Regional Call Center support and Patient Accepting Facility Support if the facility is overwhelmed)

### SINGLE FACILITY EVACUATION

**DSF, EMS/Emergency Responders (Police/Fire) and HM Area Command Actions:**

1. Contact each Patient Accepting Facility **---** Responsibility of DSF with support from other agencies when available. DSHS will support this communication as applicable
2. DSF advises EMS of number and type of patients being sent, to which facility and required transport needs. Follow the **Facility Information Report** and **Special Care Categories**.
   a. Must provide EMS the **#** of patients needing Critical Care Transport, ALS or BLS ambulance, bus or wheelchair van (in aggregate)
3. Consider activation of an off-site Reunification Center for patients qualified for discharge
4. Health & Medical Area Command should coordinate a Regional Call Center with the KC ECC if Disaster Struck Facility is overwhelmed
5. Ongoing communications will be distributed via WATrac

### MULTIPLE FACILITY EVACUATION

**HM Area Command:**

- Coordinate with each DSF.
- Communicate with appropriate EOCs and KC ECC and work with DSHS to coordinate placement of patients within Region 6 and in other Regions that are on Alert
- Notify facilities of the numbers/types of patients they will be receiving
- Consider activation of other Stop Over Points & Alternate Care Facility (ACF)
- Activate, through DSHS / DOH, other WA Regions as necessary

### PATIENT ACCEPTING FACILITY

1. Activate internal plans to receive evacuated patients
   a. Identify patient intake areas and communicate this information when informed of the number of incoming patients
   b. Prepare to initiate Census Reduction & Surge Plan
2. Provide, if requested, a transportation vehicle to pick up the patients at the DSF – do not send a vehicle unless requested and a Staging or Pick-up location is provided
3. Assume provision of all staff and equipment required for evacuated patients until Disaster Struck Facility's staff and equipment arrive
4. Notify Disaster Struck Facility or other designated group when patients have been received (CRITICAL STEP) – Use *Influx of Patients form* and cross-reference with *Patient / Medical Record & Equipment Tracking Sheet*
5. Start a new Medical Record / Chart for the patient and clearly delineate the end point in the existing Medical Record / Chart

### Legend

**DSF –** Disaster Struck Facility
**DSHS** – Department of Social and Health Services
**EOC –** Emergency Operations Center
**EMS** – Emergency Medical Services
**HM Area Command –** Health & Medical Area Command (Public Health)
**Hospital Control** – Hospital Control (Harborview)
**KC ECC** – King County Emergency Coordination Center
**LTC-MAP** – Long Term Care Mutual Aid Plan

# ADDITIONAL REGION 6 ACTIONS

## Incapable of Handling Patient Volume

**REGIONAL EVACUATION:**

**HM Area Command and KC ECC:**

1. Communicate with the State EOC / ESF 8
2. Advise appropriate agencies what level of Statewide Mobilization of Fire Resources should be activated across Washington for additional EMS units and emergency staff
3. ***Prioritize facility evacuation locations with the State EOC / ESF 8 and LTC-MAP Coordinating Team***
4. Request the activation of the Regional Medical Evacuation and Patient Tracking Mutual Aid Plan (hospitals) to support surge capacity needs

## Activation: Adjacent Region Beds

**PRIORITY EVACUATION REGIONS (see Patient Placement):**

1. Region 5
2. Region 1
3. Region 2
4. Region 3
5. Greater Portland, OR area
6. Region 9

## Activation: Stop Over Points and Alternate Care Facilities

**(commencing, as necessary, with early phase of evacuation)**

**Legend**

**DSHS** – Department of Social and Health Services
**EOC** – Emergency Operations Center
**EMS** – Emergency Medical Services
**HM Area Command –** Health & Medical Area Command (Public Health)
**Hospital Control** – Hospital Control (Harborview)
**KC ECC** – King County Emergency Coordination Center
**LTC-MAP** – Long Term Care Mutual Aid Plan

# WATrac ACTIVATION ALGORITHM
## KING COUNTY LONG TERM CARE MUTUAL AID PLAN
## (LTC-MAP)

Incident

**Requesting activation of the Long Term Care Mutual Aid Plan via Public Health Duty Officer ([redacted])**

REASON

**Potential for Evacuation**

**Evacuation**

Public Health Duty Officer Receives Communication: Actions Below

**Actions:**

**1)** Call Facility and Verify Incident Information (Individual Name, Facility Name, City, Reason for Evacuation, Imminent or Potential to Evacuate, Actions Requested)

**2)** Send WATrac message to Region and Potential Adjoining Regions

***Primary Region: MODERATE LEVEL WATrac MESSAGE***

_____ (facility name) in _____ (city/town) is potentially evacuating due to _____ (incident). The King County Long Term Care Mutual Aid Plan is on Alert to receive evacuating residents. Review your internal plan and you will be contacted by the evacuating facility, Health & Medical Area Command or via a WATrac message for additional information.

***Region 5: MINOR LEVEL WATrac MESSAGE***

_____ (facility name) in _____ (city/town) is potentially evacuating due to _____ (incident). The Pierce County Long Term Care Mutual Aid Plan is not activating, but you are being made aware of the incident. You will be contacted by the ESF 8 / Medical Group or via WATrac if additional actions are required.

***Primary Region: SEVERE LEVEL WATrac MESSAGE***

_____ (facility name) in _____ (city/town) is evacuating due to _____ (incident). The King County Long Term Care Mutual Aid Plan is now Activated. Initiate internal actions to prepare to receive evacuating residents. You will be contacted by the evacuating facility, the Health & Medical Area Command or via a WATrac message with additional updates prior to residents arriving.

**Region 5:** ***MODERATE LEVEL WATrac MESSAGE***

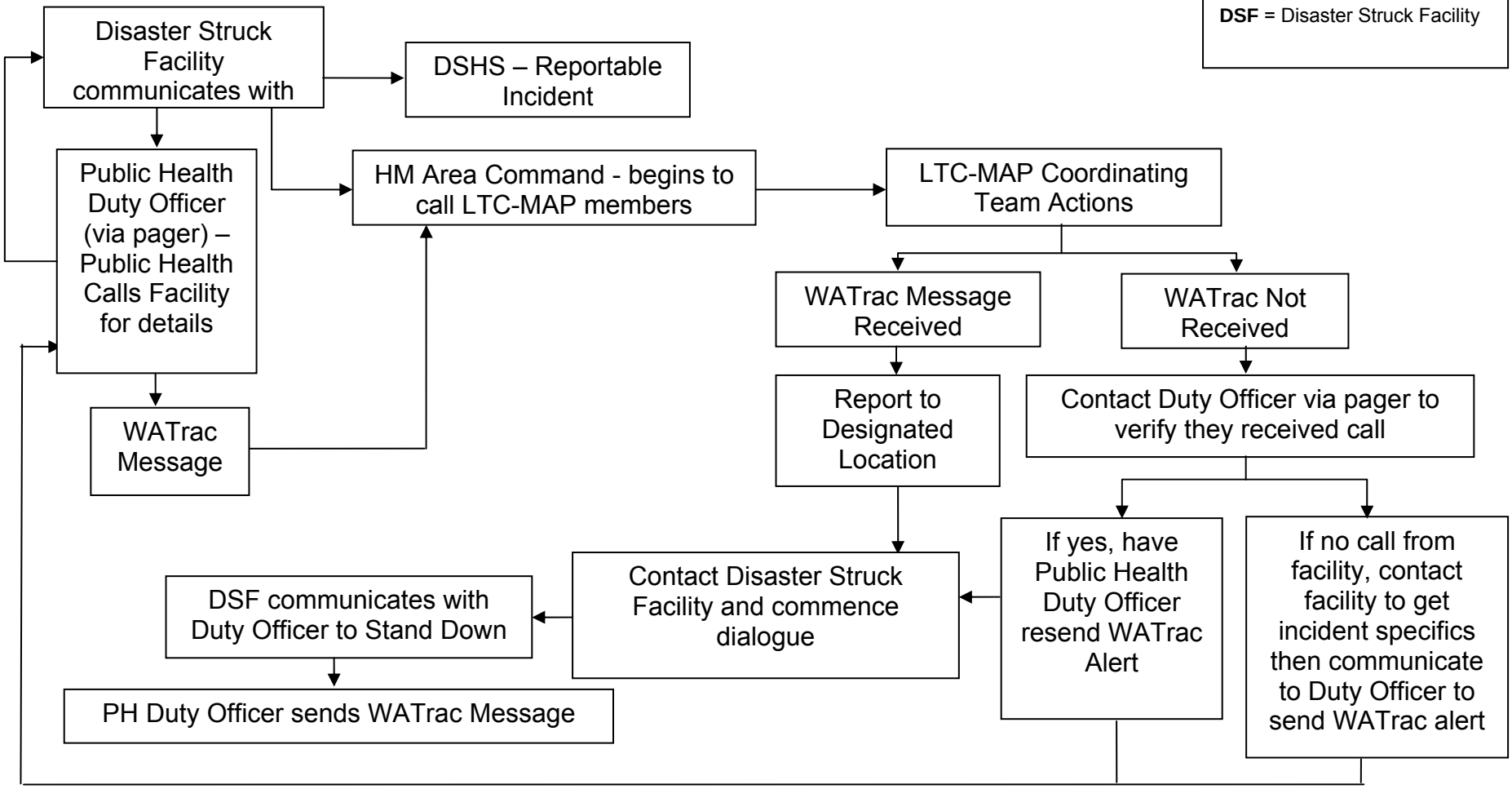
_____ (facility name) in _____ (city/town) is evacuating due to _____ (incident). The Pierce County Long Term Care Mutual Aid Plan is on Alert to receive evacuating residents. Review your internal plan to receive residents. You will be contacted by the evacuating facility, the ESF 8 / Medical Group or via WATrac for all future communications.

**STAND DOWN:** WATrac Message sent by Health & Medical Area Command – **MESSAGE:** The King County Long Term Care Mutual Aid Plan is standing down as of _____ (time) on _____ (date). We appreciate your support throughout this incident. _____ (Either the message concludes or additional information will be provided by the Public Health)

# WATrac COMMUNICATION LOOP FOR KING COUNTY LTC-MAP

*__HM Area Command__ = Health & Medical Area Command (Public Health)

__DSF__ = Disaster Struck Facility



# SECTION 2: OVERVIEW

Long Term Care Mutual Aid Plans (LTC-MAP) are important so nearby facilities can assist a member Disaster Struck Facility by accepting evacuated patients or helping with needed supplies, staffing, equipment and transportation.

In the past decade, disasters such as the 1998 Northeast Ice Storm, 2001 Nisqually Earthquake, 2001 Tropical Storm Allison's assault on Houston, the multiple fatality nursing home fires of 2003, the Florida hurricanes of 2004, Hurricane Katrina in August 2005, the California Wildfires of 2007/08 and the flooding/ice storms in Washington in December 2008/January 2009 have resulted in such substantial local and regional impact that Mutual Aid Plans must be established to institute a pre-planned methodology for regional disaster planning.

## PLAN OBJECTIVE:

1. Voluntary agreement among individual plan members to provide help for each other at the time of a disaster. Refer to the definition of a "disaster" in the Memorandum of Understanding (Annex I).

2. Become an Annex to the Comprehensive Emergency Management Plans for each of the towns and cities where member facilities are located.

## PLAN SCOPE:

1. To place and support care of patients evacuated from a Disaster Struck Facility.

2. To provide supplies as needed to a Disaster Struck Facility.

3. To assist with transportation of evacuated patients.

4. To provide staffing support as needed to a Disaster Struck Facility, whether evacuating or the facility is directly affected by the disaster.

5. To provide Stop Over Points and transportation for evacuated patients or to provide supplies from member facilities geographically removed from the region-wide disaster area.

## MEMORANDUM OF UNDERSTANDING:

The Memorandum of Understanding (MOU) in Annex I is the Agreement among Region 6 – King County long term care facilities that commit the healthcare facilities to voluntarily provide support to accept evacuated patients and/or provide assistance to Member Facilities with needed supplies, equipment, staffing and transportation.

**RESPONSIBILITIES OF PLAN MEMBERS:**

Note: Refer to the Memorandum of Understanding in Annex I for additional details.

Following is a list of responsibilities of all plan members:

- Number of Patients Accepted: All members are required to accept a minimum of 10% of their total beds. Type of patients will be those your facility is qualified to care for based on the Facility Information provided to the LTC-MAP.
- Members are required to attend the annual meeting and sign recommitment forms.
- Members are required to participate in all Region 6 long term care drills and exercises.
- Members must notify all participants and the Steering Committee of any changes throughout the year, which may include: changes in administration personnel and phone numbers and temporary changes which affect the number of Patients the Patient Accepting Facility can accommodate due to construction/renovation.
- Members are required to use the plan-specified *Resident Evacuation Tracking Form* (Disaster Tag) and *Patient/Medical Record & Equipment Tracking Sheet*. If evacuating, the Active Medical Record / Chart will be sent with the patient unless the speed of the evacuation forces the facility out to the sidewalk; then the *Resident Evacuation Tracking Form* will be utilized as a stand-alone form for each Patient prior to transport.
- Members are required to have activated their internal disaster plan and Command Center in order to request support from the plan.

It is further understood that this plan is instituted in conjunction with any additional requirements that may be identified by the Washington State Department of Social and Health Services (DSHS), which maintains ultimate regulatory authority over licensed facilities and works with additional state and local agencies to assist and support facilities in times of crisis.

1. This plan covers different levels of care. Due to this, the concept is that facilities should evacuate to like-to-like levels of care or up a level of care. During an evacuation, the following evacuation protocols should be instituted (example only as other levels of care are present within Member facilities):

    a. **Nursing Homes** would evacuate to other Nursing Homes. If additional bed availability is necessary, Nursing Homes could evacuate to regional hospitals as a last resort with the goal being a potential unit to be opened for the nursing home and their staff to care for the patients.

    b. **Dementia Secured Units** would evacuate to other Nursing Homes with Dementia Secured Units.

    c. **Ventilator Beds** evacuate to other facilities capable of handling vents or higher level of care. This would include Long Term Acute Care (LTAC) facilities and Acute Care hospitals.

    d. If it is required to evacuate to a healthcare facility that does not provide the equivalent level of care, staff from the Disaster Struck Facility should attempt to relocate to the Patient Accepting Facility or teams from other healthcare facilities should be appropriately redeployed as necessary with

the necessary equipment and supplies. This typically will require Waivers from DSHS.

i. **Advance Teams** will be deployed from the Disaster Struck Facility or a non-effected member facility to support the configuration and set-up of a unit to provide care for the evacuating patient population.

1. Advance Teams should be pre-designated by each participating facility and should include 1-2 clinical people with knowledge of the level of care being provided and a security/ support team member for the Patient Accepting Facility.

2. This plan includes an *LTC-MAP Coordinating Team.* Their responsibilities may include contacting other member facilities to secure bed capacity and resource/asset information, providing coordinating and prioritization support to the Health & Medical Area Command for patient placement and communication with Patient Accepting Facilities. This group will be operating under the direction of Health & Medical Area Command.

3. Evacuation: For a slow-out evacuation, this plan will support using close proximity open beds and having the LTC-MAP member facilities surge to 110% of licensed beds only as necessary. In a fast-out evacuation, patients will be moved to a Stop Over Point or may bypass the Stop Over Point and go directly to the Patient Accepting Facility utilizing their surge capacity plan to exceed licensed bed capacity.

a. ***Note 1:*** If the evacuation is a "slow-out" situation whereby all parties are aware that the facility will not be re-opening in the near term (flooding, facility damage, etc.), then the Health & Medical Area Command along with DSHS will be working together to find open beds within the Region and potentially outside the Region for long term patient placement.
b. ***Note 2:*** Stop Over Points (religious establishments, YMCA, gymnasiums, etc.) should have a written agreement with the LTC-MAP member facilities. Agreements should be updated annually. This is the member facilities responsibility.

**i. Please see sample Memorandum of Agreement and Stop Over Point tools in Attachment F.**

4. Payment for supplies, equipment, staffing, transportation and Patient care will be coordinated between the Borrower or Disaster Struck Facility and the Lender or Patient Accepting Facility. See additional details in the MOU (Annex I).

5. This plan complements the King County Regional Disaster Plan, the Regional Medical Evacuation and Patient Tracking Plan, the Region 6 Hospital Emergency Response Plan and the current operating strengths of Hospital Control, Public Health - Seattle & King County and the King County Healthcare Coalition, utilizing the Health & Medical Area Command.

6. It is the intent of this plan to evolve over time and be an inclusive plan. This plan was designed in conjunction with Region 5 – Pierce County and will integrate with their LTC-MAP. This plan will also incorporates reviewing opportunities to partner with and include other Regions in Washington (Region 1 to 4 and 7 to 9), adjacent states and British Columbia into future planning to ensure the boundaries between states and countries do not limit the ability to manage regional evacuations and resources or assets in a disaster.

7. In disaster response planning, Member Facilities should not rely solely on this LTC-MAP for Evacuation and Resources/Assets. After a flood, earthquake, ice storm or other substantial regional/state-wide disaster, the facilities may not receive support from vendors, first responder agencies and/or emergency management based on the severity of the disaster and prioritization of infrastructure resources. Prioritization criteria for which any given facility receives resources is incident specific with an emphasis on the impact to the community or region based on a facility being unable to sustain operations.

   *Therefore, this plan does not replace the requirement for healthcare facilities to have in place:*
   - *Internal Incident Command Systems (ICS) that are compliant with the National Incident Management System (NIMS)*
   - *Full building evacuation plans to safely transport the Patients to the sidewalk*
   - *Communications plan*
   - *Influx of Patients / Surge Capacity Plan*
   - *Isolation/rationing plans when supplies, equipment, staffing or other resources will not allow a facility to stand alone for a 96 hour period or greater.*

8. Since regional evacuation assets are vulnerable to natural and technological disaster events, they may be overwhelmed in a disaster, requiring the activation of this plan. The King County Healthcare Coalition, Public Health - Seattle & King County, King County Government departments, cities and special purpose districts can only attempt to make every reasonable effort to support this plan based on the situation, information, and resources available at the time of the disaster.

# SECTION 3: ACTIONS OF

# - DISASTER STRUCK FACILITY (DSF)
# - PATIENT ACCEPTING FACILITY (PAF)

If a disaster forces a facility to fully or partially evacuate, other facilities within the plan receive and care for the **evacuated patients**. It is the intent of this plan to be able to absorb within the region the evacuation of the largest two (2) facilities in Region 6.

For all communications, see *PLAN ACTIVATION & COMMUNICATIONS,* in Section 4, for activation protocols.

**If an extended period of time is available to evacuate and the facility has extensive damage (e.g. will not reopen in the short term), all efforts will be coordinated with Health & Medical Area Command and DSHS to only place patients into open beds and avoid using the surge capacity plans (if possible).*

**Disaster Struck Facility**

To minimize the number of patients transferred to other healthcare facilities:

1. Activate **census reduction plans** as time permits.

   a. Discharge to Home - Identify patients who could be discharged, whereby the patients would either be discharged home, if the family or responsible party is able to pick them up, or moved to an off-site *Family Reunification Center*.
      - The Incident Commander at the scene for Fire / EMS / Police, should work to identify a location in close proximity where the patients can be brought to (outside of the police perimeter) for families to pick up the patients ready for discharge
        1. The healthcare facility should have a staff member at the Family Reunification Center to support filling out the *Patient / Medical Record and Equipment Tracking Sheet* and other patient & family interactions.

   b. Stop Over Points will be utilized for slow out or fast-out emergencies for long-term care facilities.

   **NOTE: It is 25 degrees outside and there is snow falling – if you are forced to evacuate to the sidewalk, where can you go right away to shelter your patients? These conditions assume that it is unsafe to keep the patients in unprotected space (i.e. parking lot) while full transportation resources are mobilizing and Patient Accepting Facilities are being informed of the evacuation.**

2. **Stop Over Point:** Stop Over Point means a facility or facilities that are in a suitable location to be utilized for a slow or fast-out evacuation for an isolated, local or regional disaster. The person in charge of the facility at the time of the disaster will alert the Stop Over Point (in a fast evacuation, otherwise move to #3) that a disaster has occurred. Identify yourself and the problem. This will provide advance warning to the Stop Over Point to begin preparation. The intent is to use this site in the event the facility is:

- Quickly forced to the sidewalk in adverse conditions and sheltering is necessary for the patients prior to relocation to other healthcare facilities or to home
- Evacuated from the facility, yet the facility should be able to reopen in a short period of time (hours instead of days)
- It is safer to move the patients to a Stop Over Point instead of distributing them at greater distances due to regional disaster conditions.

The Disaster Struck Facility will:

a. Have a staff member present as patients arrive at the Stop Over Point.
b. Have CPR ability available at the Stop Over Point. Increase staffing appropriately as more patients arrive.
c. Be responsible for the transportation of staffing, supplies, pharmaceuticals and equipment, in coordination with the appropriate EOC.
d. Along with support from the local EOC / King County ECC and Health & Medical Area Command, manage the set-up, activation, operations and demobilization of the Stop Over Point. In the event that the staff from the staff from the Disaster Struck Facility are unable to provide the full resources necessary to support the Stop Over Point, staff may be requested from other facilities inside Region 6 and outside the area to provide additional staffing support.
e. Alternate Care Facilities may be activated in King County through the appropriate agencies to support a long term and large scale disaster.

3. **Prior to actual transfer of patients** from the Disaster Struck Facility or the Stop Over Point, in the event of a slow evacuation, the person in charge of the facility or designee at the time of the disaster should notify the Patient Accepting Facilities of the following specific information:

a. Specific number and type of patients (i.e. wheelchair, stretcher, ambulatory, special needs patients, etc.) being transported to them. *****Follow the ***Facility Information Report and Special Care Categories - Aggregate*** which describes the type of care which each facility is qualified to render as well as the number of patients they have agreed to accept.
b. The number of supporting personnel they can expect to receive.
c. The approximate time of arrival.

***NOTE 1:*** Always evacuate like-to-like or up a level of care (see *Overview*). Evacuate within your Regional LTC-MAP first. If the Regional LTC-MAP is overwhelmed, request help from other regions through Health & Medical Area Command.

***NOTE 2:*** If a patient has a significant medical emergency, utilize the standard process of transporting via EMS to a hospital.

***NOTE 3:*** *If there is considerable damage to the facility (substantial fire or flood damage) and the facility will not be reopening in the short term, work with Health & Medical Area Command and DSHS to find longer term placement for patients within open beds. Use the "Open Space" approach of the Mutual Aid Plan only if a "Holding Area" or secondary Stop Over Point is necessary to protect the patients.*

***NOTE 4:*** Each plan member should pre-select evacuation sites for the LTC-MAP and determine the total number of facilities to handle your total patient population and type of care.

4. Be familiar with the function and extent of community emergency services such as Police, Fire and EMS, Local Emergency Operations Center, Red Cross, Salvation Army, etc. and advise them of your needs.

   a. Be familiar with the functions of the Health & Medical Area Command to ensure there is effective communication and coordinated efforts.
   b. Attempt to have an individual sent to the local Emergency Operations Center to improve communication for resources and support.

5. **Send Staff:** Send nursing personnel and supplemental staff to Patient Accepting Facilities as soon as possible. Nurses will take federally controlled substances (if necessary) and Active Patient Record / Charts (if they did not initially accompany the patients).

   Notify attending physicians and responsible parties. If possible, send useable mattresses, wheelchairs, and other equipment with patients. Use your facility vehicles or request transport help from the Local Emergency Operations Center (EOC) of the King County Emergency Coordination Center (ECC). Administration must work closely with Patient Accepting Facilities throughout the process.

6. **Responsibility of patient tracking:** Use the plan specific *Patient/Medical Record & Equipment Tracking* Sheet which follows the patient as they pass through the holding area, Stop Over Point, and finally the Patient Accepting Facility. Send or make available sufficient patient medical information to ensure proper care. *Resident Evacuation Tracking Form / Tag* should record pertinent medical information. Include copy of the physician orders, medication sheets and advanced directives. This will provide a quick review of the patient.

   Consider including wrist bands (photo if possible) for patients to match with the *Resident Evacuation Tracking Form / Tag* and *Patient/Medical Record & Equipment Tracking Sheets*.

The *Resident Evacuation Tracking Form / Tag* may be completed before leaving the Disaster Struck Facility or at the Stop Over Point, and must accompany the patient at the time of transfer to Patient Accepting Facilities. At the time that a patient is transferred, the anticipated destination is entered on the *Resident Evacuation Tracking Form / Tag* and the *Patient/Medical Record & Equipment Tracking Sheet*. The top page of the *Resident Evacuation Tracking Form / Tag* is retained by the Disaster Struck Facility and copies of the *Patient/Medical Record & Equipment Tracking Sheet* are made to accompany the final patient going to a specific Patient Accepting Facility.

**7. Medications and Charts**

a. Send the patient's prescribed medications and Active Patient Record/ Chart, including insurance information, to the Patient Accepting Facility with the patient.
b. If either facility is unwilling to send or receive medications, the Patient Accepting Facility will obtain and provide essential medications.
c. Federally controlled substances will be brought to the patient accepting facilities, if necessary, when nurses from the Disaster Struck Facility arrive. If the federally controlled substances are going to be left at the Patient Accepting Facility and not administered by said nurse, a count and sign-off would take place at the Patient Accepting Facility.

8. Provide patient transportation to Patient Accepting Facilities from Stop Over Point (see Attachment A). Patient Accepting Facilities may use their own handicapped accessible vehicles to pick up evacuated patients. Transportation and lodging for staff evacuating with patients will also have to be considered, especially if out of region.

   NOTE: STAFF MUST WEAR FACILITY I.D. BADGES TO GET THROUGH POLICE ROADBLOCKS AND FOR ACCESS TO RECEIVING FACILITIES.

9. Understand that the staff of the Disaster Struck (evacuating) Facility will be under the administrative direction of the Patient Accepting Facilities.

10. Remember to record destination of patients and staff prior to leaving the facility or the facility's Stop Over Point. You are responsible for patient and staff tracking.

11. **Notification of Family / Primary MD:** Contact patients' responsible parties and physicians as appropriate. Once the Patient Accepting Facility has confirmed receipt of the patient, they will typically take over communications with the family as of that time. This should be agreed upon by both parties.

    a. If the resources of the Disaster Struck Facility are overwhelmed, the utilization of a centralized Regional Call Center should be reviewed through the Health & Medical Area Command in consult with the King County ECC. This would also be a location to receive the *Patient/Medical*

*Records and Equipment Tracking Sheet* and *Resident Evacuation Tracking Form* information (either by fax, in paper copy, e-mail, or by courier) and proactively provide status information to families or responsible party and the patient's attending or personal physician. This Regional Call Center phone number is broadcast via Television, Radio, hospital operators and recorded messages in order to direct all phone traffic to the appropriate location.

12. Contact each Patient Accepting Facility to notify them of your Command Center contact information so as to facilitate communication in cases where the Disaster Struck Facility has already evacuated (see Section 4, Communications.)

    a. These actions may be managed for the facility by the Health & Medical Area Command.

# ACTIONS OF THE PATIENT ACCEPTING FACILITIES

**For quick checklist see Section I, Algorithms**

1. YOU MUST HAVE AN INTERNAL PLAN TO APPROPRIATELY RECEIVE AND CARE FOR PATIENTS: This plan is an Influx of Patients Plan or Surge Capacity Plan to support the pre-planning efforts with the appropriate amount of supplies, equipment, staffing and other resources necessary to manage 10% over the licensed bed capacity.

    a. There are two options with regards to the charts. When the Active Patient Record / Chart arrives with the patient, a review is conducted of the records along with an assessment of the patient and the facility begins documents in the following manner:
        i. Start a new chart for each newly accepted patient, clearly noting the time in the existing chart to delineate where the documentation ended.
        ii. If using the existing chart, clearly delineate when and where the Patient Accepting Facility began documenting in the chart.*****

        ****** *When/If the determination is made that the patient will not be returning to the Disaster Struck Facility, the Patient Accepting Facility will begin a new chart for the patient.*

2. When evacuated patients arrive at your site, you agree to temporarily provide supportive coverage until the Disaster Struck Facility can provide their patients with coverage. If the physician is unable to follow the patient, the Medical Director/designee of the Patient Accepting Facility will assume responsibility on an interim basis. When evacuating out of the region or a large scale disaster, this is likely to happen.

3. **Patient Care Responsibility**: Once received and/or admitted, the patient is under the care of the Patient Accepting Facility's admitting physician until discharged, transferred, or reassigned. The Disaster Struck Facility is responsible for transferring of extraordinary drugs or other special patient needs (e.g. equipment, blood products) along with the patient if requested and if possible. When the situation that led to evacuation has been resolved and it is safe and practical to do so, patients may be returned and must be accepted at the Disaster Struck Facility.

4. Patients will go to open areas (primary focus is open beds*) of the Patient Accepting Facility. In the initial phase of the disaster, staff and equipment will be provided by the Patient Accepting Facility; if more supplies are needed, contact vendors listed in the plan. As soon as possible, the Disaster Struck Facility will send staff and equipment.

    **** Beds with a confirmed admission may be held open for an incoming patient.***

5. Agree to arrange for or provide all beds, linens, and other equipment, supplies and food (see Section 7). NOTE: Call any supporting vendors or agencies prior to exhausting all options in the plan.

6. Establish a Command Center and a person responsible for coordinating efforts and facilitating communication (Liaison Officer).

7. Upon arrival of patients, assume administrative direction for displaced patients and staff. Continue tracking of the patients, staff, medical records and equipment as applicable.

8. Notify Disaster Struck Facility of arrival of their patients, giving names and conditions. Inform the Disaster Struck Facility of any major changes in patient medical condition in the event that staff has not arrived as of that time.

    a. The primary call should be to the Disaster Struck Facility with the back-up call to their Stop Over Point if there is no response at the main facility.
        i. The Health & Medical Area Command will be utilized as a central location for information to be gathered and ultimately reported to DSHS.
    b. Communicate with the Disaster Struck Facility if you can support them in contacting the patients' responsible parties and physicians as appropriate.

9. Notify Disaster Struck Facility of (their) staff present at your facility.

10. At the end of the disaster all patients, with their medical records and equipment, must be returned to the facility of origin, unless other agreements have been made between sender and receiver or intervention from DSHS.

    a. All information that arrived with the patient should be returned to the Disaster Struck Facility unless a consumable.
    b. All records completed while at the Patient Accepting Facility must have copies provided to the Disaster Struck Facility.

# IF DISASTER OVERTAKES THE REGIONAL LONG TERM CARE MUTUAL AID PLAN (MAP) AREA

**For quick checklist see Section I, Algorithms**

When all space is used or otherwise unavailable in Region 6:

1. The adjacent regions will be activated to support evacuation and communication efforts. Priority focuses include:

   - Region 5 (Pierce County/Tacoma): Over [redacted] long term care beds
   - Region 1: Over [redacted] long term care beds
   - Region 2 (Kitsap County area/Bremerton): Over [redacted] long term care beds
   - Region 3 (Thurston County area/Olympia): Over [redacted] long term care beds
   - Greater Portland, OR area: Over [redacted] long term care beds
   - Region 9 (Spokane): Over [redacted] long term care beds

2. DSHS, if available, along with the regional coordinating groups will place facilities in their region on alert.
   a. There will be a coordination of multiple Disaster Struck Facilities by a centralized coordinating body (Health & Medical Area Command; ESF 8 / Medical Group in Region 5):
      - When assigning patients to Patient Accepting Facilities, follow the **Facility Information and Special Care Categories Reports** for the type and number of patients each facility has agreed to accept.
      - Work with each Disaster Struck Facility's Liaison Officer
      - Work directly with the adjacent regions to have their resources communicating with each potential Patient Accepting Facility.

3. If all communications are unsuccessful with the adjacent regions coordinating agencies, the Disaster Struck Facility and the Health & Medical Area Command should contact facility administrators in another Regional LTC-MAP to accept their patients. If one facility is already full, check others.

4. Ensure the following is sent with the patients: *Resident Evacuation Tracking Form / Tag*, the Active Patient Record/Chart and medications.

   a. A copy of the *Patient/Medical Record & Equipment Tracking Sheet* should go with the final patient moving to that facility location to complement the other tracking taking place.

5. Federally controlled substances should be sent to the Patient Accepting Facility, if necessary. See Section 6 for guidelines on transporting federally controlled substances.

6. Staff should be sent to the Patient Accepting Facility as soon as possible.

7. Disaster struck facilities will contact responsible parties and physicians.

**Use of a Stop Over Point in Other Regional Areas**

8. Activate the facility Stop Over Point for another member facility through the Stop Over Point Agreements if the facility is unable to move their patients into the LTC-MAP.
   a. Appropriately equip and staff the area with the support of area members.
   b. Move patients into this space until appropriate time to distribute the patients to other Patient Accepting Facilities or return to their initial location.

**PROTECTING IN PLACE (BUT IN NEED OF SUPPLIES/EQUIPMENT):**

Progressive Plan:

- Obtain supplies from local vendors with whom you have agreements.
- Contact suppliers in the LTC-MAP – Via Health & Medical Area Command or the appropriate EOC/King County ECC.
- Insert a staff member from the Disaster Struck Facility into the local Emergency Operations Center for the town/city to assist in coordinating non-medical resources and supplies.
- Communicate with Health & Medical Area Command and ask them to assist with contacting appropriate local EOC, King County ECC and state EOCs for vendors to support the Disaster Struck Facility.
- Request supplies from other facilities in the region (this should be utilized when the transfer of supplies/equipment would not put the Donor facility in jeopardy.)
- If the disaster exhausts all supply sources in the Region, via the Health & Medical Area Command and appropriate EOC / King County ECC:
  - Contact other regions Coordinating Centers to request help with supplies
  - Go to the vendor lists of another region to request supplies
  - Contact a facility within an adjoining regions MAP to request help with supplies.

  NOTE 1: Fax supply requests to those from whom you seek assistance to help the deliveries get through police roadblocks.

  NOTE 2: Coordinate supplies through appropriate Incident Commander or Emergency Operations Center (EOC), when requested.

# Clinical Transportation Categories for Evacuation
# Charge Nurse/Physician Decision Making Criteria

**a. Patients requiring ALS transport (Paramedic)**

- IVs with medication running that are within paramedic protocols (varies by county)
- IV pump(s) operating
- IV with clear fluids (no medications)
- Need limited medications administered via Physician orders by limited means in limited dosage prescribed
- Cardiac monitoring/pacing (only external pacing can be provided by the transport crew)
- Ventilator dependent with own or facility ventilator
- Prone or supine on stretcher required.

**b. Patients requiring BLS transport (EMT – *italics for EMT–IV Technician Required*)**

- O2 therapy via nasal cannula or mask (can be provided by the transport crew)
- *Basic maintenance IVF including TPN (total parenteral nutrition)*
- Saline lock and Heparin lock
- Visual monitoring / Vitals (BP/P/Resp)
- Prone or supine on stretcher required or unable to sustain
- If Behavioral Health, provide information regarding danger to self or others.

**c. Patients requiring Chair Car/Wheelchair Accessible Bus (No medical training)**

- No medical care or monitoring needed, unless the patient has their own trained caregiver in attendance capable of rendering the care
- Not prone or supine, no stretcher needed
- No $O_2$ needed, unless patient has own prescribed portable $O_2$ unit that can be safely secured en route
- If Behavioral Health, provide information regarding danger to self or others.

NOTE: Some wheelchair van companies provide a standard wheelchair, if needed, for the duration of the trip. Buses do not provide wheelchairs. Some electric wheelchairs cannot be secured in wheelchair vans due to size or design. These are NOT to be transported with the patient.

**d. Patients requiring normal means of transport (any vehicle - No medical training)**

- No medical care or monitoring needed, unless the patient has their own trained caregiver in attendance capable of rendering the care
- No $O_2$ needed, unless patient has own prescribed portable $O_2$ unit that can be safely secured en route
- Not prone, supine, or in need of a wheelchair (can ambulate well enough to climb bus steps)

NOTE: A person with a folding wheelchair, who can ambulate enough to get in and out of a car, could go by car if there was room to bring/pack the wheelchair.

**e. Patients requiring bariatric ambulance or transport (>350lbs.)**

# SECTION 4:
# PLAN ACTIVATION & COMMUNICATIONS

**For quick checklist, see Section 1, Algorithms**

**Notifications and Continuous Communications**

**Disaster Struck Facility:**

At start of a disaster, the Disaster Struck Facility immediately notifies appropriate first responder agencies via 911 (i.e. Fire, Police, EMS) or non-emergency number based on the initial severity of the incident. Their role will be to activate the appropriate Emergency Manager.

- Activate appropriate internal notifications for your staff and leadership and activate your facility Command Center based on your facility Emergency Operations Plan or Emergency Management Plan. ***The internal facility Command Center must be active in order to request resources and support from this Long Term Care Mutual Aid Plan (LTC-MAP.)***
- Develop Incident Action Plan.
- Disaster Struck Facility assesses whether evacuation is necessary or whether they can continue to provide patient care and remain open with additional staff, supplies or equipment. **Evacuation is to be avoided at all costs provided patient and staff safety is not significantly compromised.**
- Unified Command should be established at the Disaster Struck Facility with appropriate emergency agencies to support key decision-making, resource coordination and communications.

1) If a facility requires Supplies, Equipment, Staffing or other Resources (avoid evacuation at all costs) to remain operational:
   - Notify the Public Health Duty Officer to activate the Health & Medical Area Command and other local/county resources
     - **NOTE:** After paging the Public Health Duty Officer, leave a phone line available for the return call. That phone call will drive the WATrac activation for all member facilities.
       - Be prepared to communicate the following information:
         - Who – Your contact name
         - Where – Facility Name and Town/City
         - What – Resources you need
         - When – Window of time
         - Why – Reason
     - **Health & Medical Area Command** should:
       - Utilize WATrac to alert King County healthcare facilities and critical partners of the incident
       - Verify the local Emergency Manager and the King County OEM Duty Officer are aware of the incident

        - Call out to the LTC-MAP Coordinating Team and inform them if they should report to a centralized location to support the Health & Medical Area Command or a Local EOC / King County ECC to provide communication and coordination support for the member facilities
        - Notify the Washington State DSHS for the Disaster Struck Facility if requested
        - If necessary, recommend that the Seattle EOC or King County ECC request a State Mission number from the State Emergency Management Division
- Notify DSHS on the CRU Hotline for the reportable incident.
- Assign a Liaison Officer to report to the designated Health & Medical Area Command or appropriate EOC/ECC location to support coordination of medical and non-medical supplies, staff, equipment, etc.

  NOTE: If regional resources are not available or are unable to handle the situation due to infrastructure damage, communicate directly with the State EOC and directly with other member facilities and regional suppliers within the LTC-MAP.

2) <u>If Evacuating</u>:

- Notify the Public Health Duty Officer to activate the Health & Medical Area Command and other local/county resources
  - **NOTE:** After paging the Public Health Duty Officer, leave a phone line available for the return call. That phone call will drive the WATrac activation for all member facilities.
    - Be prepared to communicate the following information:
      - Who - Your contact name
      - Where – Facility Name and Town/City
      - What – Evacuating or Potential to Evacuate
      - When – Imminent or window of time
      - Why - Reason
  - **Health & Medical Area Command** should:
    - Utilize WATrac to alert King County healthcare facilities and critical partners of the incident
    - Ensure Hospital Control is provided with a notification of the incident
    - Verify the local Emergency Manager and the King County OEM Duty Officer are aware of the incident
    - Call out to the LTC-MAP Coordinating Team and inform them if they should report to a centralized location to support the Health & Medical Area Command or a Local EOC / King County ECC to provide communication and coordination support for the member facilities
    - Notify the Washington State DSHS for the Disaster Struck Facility if requested
    - If necessary, recommend that the Local EOC or King County ECC request a State Mission number from the State Emergency Management Division
- Notify DSHS on the CRU Hotline for the reportable incident.

- Assign a Liaison Officer to report to the designated Health & Medical Area Command or appropriate EOC/ECC location to support coordination of medical and non-medical supplies, staff, equipment, etc.
- Establish an internal Liaison Officer to communicate with the on-scene Incident Commander and ensure coordination with EMS.

  NOTE: If regional resources are not available or are unable to handle the situation due to infrastructure damage, communicate directly with the State EOC and directly with other member facilities and regional suppliers within the LTC-MAP.

3) In the event that the regional plan is being overwhelmed, the following communications take place:

- **Health & Medical Area Command and Seattle EOC / King County ECC**:
  - Communicate with the State EOC / ESF 8 desk to ensure appropriate resources are requested.
  - Advise appropriate agencies if Statewide Mobilization of Fire Resources should be activated across Washington for additional EMS units and emergency staff.
  - ***Prioritize facility evacuation locations with the State EOC / ESF 8 desk and the LTC-MAP Coordinating Team.***
    - ***Work with DSHS, where applicable, to support this prioritization.***
  - Request the activation of Region Medical Evacuation and Patient Tracking Mutual Aid Plan (Hospitals) to support surge capacity needs, if necessary.

**Patient Accepting Facility / Loaner Facility:**

The Patient Accepting Facility or Loaner Facility (if loaning supplies, staff, equipment, transportation) should be required to report the following at any disaster:

- Number of available beds (open beds – although the facility needs to be prepared to accept 110% of licensed beds at all times).
  - Identify the patient intake area where they should be dropped off if being evacuated to you
- Verification of when a transportation vehicle may be ready to support another member facility, if applicable
- Verification of supplies, equipment and staff that may be available to support another member facility, if applicable

**Upon Receipt of Patients:**

- Notify Disaster Struck Facility or other designated group (Health & Medical Area Command, etc.) when patients have been received using the Influx of Patients form
- When available, follow-up that communication with the name of the patient to match this up against the *Patient / Medical Record and Equipment Tracking Sheet*

**Communication Protocols specifically related to patient movement (evacuation):**

Single Facility Evacuation

- The Disaster Struck Facility (via Liaison Officer) communicates with the on-scene Incident Commander regarding patient types and numbers being sent.
- In the early phase, the Disaster Struck Facility may be communicating directly with the other Patient Accepting Facilities (nursing homes). As the incident evolves, Health & Medical Area Command and, if necessary, Hospital Control will support communication with all Patient Accepting Facilities to inform them of expected patient volume to prepare for and type of patients. Primary decision-making will ultimately reside with the Disaster Struck Facility with support from Health & Medical Area Command, Hospital Control and the on-scene Incident Commander.
    - Work with DSHS where applicable to support communication with Patient Accepting Facilities.
- Consider the activation (Police, EMS, Fire, Emergency Manager, Health & Medical Area Command) of an off-site Family Reunification Center for patients qualified for discharge to home and a Regional Call Center (with the Seattle EOC or King County ECC) if the Disaster Struck Facility is overwhelmed by incoming communications.
- Ongoing communications will be distributed via the WATrac system, as necessary.

Multiple Facility Evacuation

- **Health & Medical Area Command with the support of the LTC-MAP Coordinating Team and Hospital Control, as applicable**
    - Coordinate directly with each Disaster Struck Facility
    - A representative of the Disaster Struck Facility provides the appropriate information on the patient volume (type of patients, transportation requested, etc.)
    - Consolidate data on the patient volume, type and transportation requirements and prioritizes timing for patient movement and patient placement locations (see Section 3.)
    - DSHS and Seattle EOC / King County ECC will be intimately involved in decision-making support with Health & Medical Area Command during this incident.
    - Notify Patient Accepting Facilities of the number / type of patients they will be receiving
- Activation of the Stop Over Points will be reviewed early on in the incident and activated by the Local EOC or the Disaster Struck facility as necessary.

- Communicate directly with other Regions and with DSHS to ensure adequate support for an escalating incident.

Communication between Disaster Struck Facility and Patient Accepting Facilities

- Initial contact with Patient Accepting Facilities should be through the Main Number (See Facility Communications Reports from www.mutualaidplan.org).
- Request to speak with the Administrator-on-Call (AOC).
- Once the Patient Accepting Facility's Command Center is fully established, request to speak with the Liaison Officer.
- After initial facility contacts, communications should be through each facility's Liaison Officer.

**Modes of Communications:**

## SEE REGION 6 HOSPITAL EMERGENCY RESPONSE PLAN

**NOTE: If all communications have failed, send a representative with a Situation Status Report to the local hospital or local EOC to present the facility status.**

**FACILITY INFORMATION (Main Address and Phone Numbers)**

## SEE ATTACHMENT A

**EMERGENCY PHONE NUMBERS FOR PLAN ACTIVATION AND STATE RESOURCES / COMMUNICATIONS LIST (Individual Key Contacts for the Facility) / LOCAL AND COUNTY PHONE NUMBERS**

## SEE ATTACHMENT B

# SECTION 5: TRANSPORTATION OF PATIENTS

## *See *Facility Information Report* on the website: [redacted] and Attachment A for current information on available transportation vehicles.

This section is coordinated through Emergency Medical Services (EMS) in the town/city of disaster origin. The ideal plan supports transport the "sickest" patient to the nearest healthcare facility available that could handle their acuity (based on the LTC Facility Information Chart), while taking those who could tolerate a longer transport time to a more remote healthcare facility. It is recognized that vehicle availability, specialized patient needs, bed and staff availability will dictate this. The Disaster Struck Facility Liaison Officer works with EMS.

Once the Liaison Officer at the Disaster Struck Facility and EMS, along with Disaster Medical Control Center establish communications, the following occurs:

Transportation of Patients: The Transportation Officer at the Disaster Struck Facility is responsible for coordination with the local EMS Medical Transportation Officer (or MSO). Communication will be made to the individual healthcare facilities of the expected Patient volume and that their minimum agreed upon Patient count is being transported from the Disaster Struck Facility. The Transportation Officer at the Disaster Struck Facility, in consultation with Operations Section Chief and Planning Section Chief must assemble the following information (*see Charge Nurse/Physician criteria for Categorization of Patients for transport*):

a. Patient Pick-up Point
b. Total requiring Critical Care Transport (i.e. Ventilator)
c. Total requiring Advanced Life Support (Paramedic) ambulance
d. Total requiring Basic Life Support (EMT) ambulance
e. Total Wheelchair Car/Bus Patients - Transfer to another healthcare facility
f. Total for standard ground transport – Transfer to another healthcare facility
g. Behavioral Issues – any requiring one-to-one care
h. Total requiring Isolation for Infectious Disease
i. Total requiring bariatric transport (non-ambulatory and >350lbs.)
j. Discharge to home:
    a. Total Wheelchair Van/Bus Patients
    b. Total for standard ground transport

The point of entry for Patient drop-off is designated by the Patient Accepting Facility. Once admitted, that Patient is under the care of the Patient Accepting Facility's admitting physician until discharged, transferred, or reassigned. The Disaster Struck Facility is responsible for transferring (of) extraordinary drugs or other special Patient needs (i.e. equipment) along with the Patient, if possible.

**Tracking and Transfer Forms:** Refer to Section 6 of the plan and Attachment E for the forms to support patient movement and tracking. If the facility, due to the emergent nature of the event, has no ability to use the plan's tracking forms and/or transport medical records, the standard MCI management system by EMS is relied on until the *Resident Evacuation Tracking Form / Tag* is recovered and available for use. At minimum, the *Resident Evacuation Tracking Form / Tag* and *Patient / Medical Record & Equipment Tracking Sheet* MUST be utilized.

**Special Transportation Concerns**

- *Seattle Keiro and/or Seattle Medical***:** Ventilator patients
- Dementia Secured Units (Danger to Self of Others)
- Behavioral Issues
- Large Continuing Care Retirement Communities

**Other Forms of Transportation to supplement and expand upon EMS capabilities:**

- *Long Term Care Facility Vehicles***:** Many have vehicles that could help transfer Patients, supplies or equipment from the Disaster Struck Facility to the Patient Accepting Facility or Stop Over Point. Ensure that the deployment of these vehicles to a Disaster Struck Facility is coordinated with EMS and the On-Scene Incident Commander to provide the appropriate Staging Location
- *Private/Public Wheelchair Accessible Buses and Wheelchair Cars/Vans*: Move moderate to low acuity Patients to other Patient Accepting Facilities or Stop Over Points
- *Private/Public Non-wheelchair Accessible Buses*: Move ambulatory Patients with minimal needs for care to other Patient Accepting Facilities, Stop Over Points, or medical shelters
    - *Movement of Family*: Local Public Transit, Private Bus Transports and Personally Owned Vehicles could be utilized and family members would have to be provided a Family Reunification area to go to due to potential high level security at the Patient Accepting Facility and/or Disaster Struck Facility
    - *Movement of Staff:* Local Public Transit, Private Bus Transports, Long Term Care Facility Shuttles and Personally Owned Vehicles could be used to move staff
    - *Movement of Equipment/Supplies:* Work with the Emergency Operations Center for transport vehicles plus facility owned vehicles and supplier trucks

The ***Resident Evacuation Tracking Form*** MUST be utilized for each patient, even if the medical records and other information are accompanying the patient.

NOTES:

1. Patient pickup points should be part of each facility's internal plan.

2. Advise EMS of any vehicles your facility may have or private contracts for other transportation vehicles within the LTC-MAP to help move Patients, staff and equipment. A Staging Officer (from EMS, Fire, or other agency) provides support for the staging of these vehicles upon their arrival.

3. For planning movement of Patients, support EMS by preparing batches of Patients (5-15) to support the Ambulance Strike Teams, which are comprised of 5 ambulances and a focus on batch movement of Patients.

Facility Information Report and Transportation Survey:

Information included on the Mutual Aid Plan website [redacted], for planning purposes, provides EMS, Fire, Emergency Management and the Health & Medical Area Command with additional planning information for the facility-specific acuity levels and special care requirements. Each Member facility is providing the total number of Patients that could be cared for at the facility at full occupancy and the special categories of the Patients (see **Attachment A**.) This dictates for EMS and other Member facility the impact that each facility has on the Patient bed capacity of Region 6.

Each Member facility has also completed a ***Transportation Survey*** to inform EMS and other resources on the total number of patients, their required means of transportation and any unique information to support this (see **Attachment C**.)

Member Facilities Internal Patient Prioritization: For internal full building evacuation plans, Member Facilities should review how many Patients can be moved per hour down the stairs in the event the elevators are non-operational. This assists EMS in knowing the Patient volume they need to move over specific periods of time. Estimates should also be taken for standard Patient movement using elevators and stairs for evacuation purposes.

- NOTE: This is a recommended approach and not mandated by the MOU.

***SEE THE FOLLOWING FOR ADDITIONAL INFORMATION:***

- ***ATTACHMENT A FOR SUMMARY OF SPECIAL CARE LEVELS / SURGE CAPACITY / STOP OVER POINTS, PREPLANNED EVACUATION LOCATIONS AND TRANSPORTATION VEHICLES***

# SECTION 6:

# MEDICAL RECORDS & MEDICATIONS (going with patient)

# PATIENT IDENTIFICATION AND TRACKING

**MEDICAL RECORDS/DOCUMENATATION:**

As patients leave the Disaster Struck Facility, the following items must accompany them:

- The *Patient Evacuation Tracking Form*, containing pertinent medical information for a quick review of the patient. This should be pinned to the patients' clothing (on their back or other area where this cannot come free).
    - **Review internally if there are better ways to attach this to the patient (i.e. clear lanyards and the lanyard is attached to the patient)**
- Patient Medical Record/Chart including the Medication Administration Record (MAR.)
    - All records are returned to the original facility (noting plan exceptions in the MOU).
    - Attempt to ensure the following information accompanies the Patient from key areas of the chart:
        - Entire Active Chart, Medical Administration Record (MAR), Care Plans and Photo of Patient
    - Fast Evacuation – Face sheet and MAR (book of all MARs)
    - *All records are returned to the original facility (noting plan exceptions in the MOU) including a copy of all elements from the Patient Accepting Facility chart.*
- *Patient / Medical Record & Equipment Tracking Sheet* (may follow a group of Patients.)
- Stickers should be placed on the Medical Record and equipment with the facility name, address and phone number (to support return of the equipment post-incident.)
    - Keep in a "go-kit" trash bags or other waterproof containers that patients meds, records and basic personal belongings could be transported in

NOTE 1: As nurses and physicians from the Disaster Struck Facility go to various Patient Accepting Facilities to resume care of their Patients, it is recommended they bring the charts, if not already done, and controlled substances (if requested by the Patient Accepting Facility) needed to care for these Patients.

NOTE 2: There are two options with regards to the charts for Patients. When the Patient Record Chart arrives with the Patient, a review is conducted of the records along with an assessment of the Patient and the facility begins documents in the following manner:

- **RECOMMENDED APPROACH:** Start a new chart for each newly accepted Patient, clearly noting the time in the existing chart to delineate where the documentation ended.
    - If using the existing chart due to immediate need to care for the Patient, clearly delineate when and where the Patient Accepting Facility began documenting in the chart.*

***** *The Patient Accepting Facility begins a new chart for the Patient as soon as possible.*

NOTE 3: Many facilities are moving towards or have achieved **Electronic Health Records**. If Electronic Health Records are currently in place, it is critical that a strong effort be made to provide a clear and concise *Resident Evacuation Tracking Form* in the event that access to the computers is limited. Issues to consider focusing on include:

- Can the Electronic Health Record be accessed and printed from an outside location? If yes, the facility's internal full building evacuation plan should address the steps necessary to secure access. Usually, this is accessed via a physician portal or other IT means, with the Disaster Struck Facility granting access to the receiving facility.
    - It is recommended that the IT teams from each of the receiving hospitals be briefed by the Disaster Stuck Facility as to what options there are to access records.
        - Consideration should be given to controlling the firewall at the Patient Accepting Facility and IT should be consulted if the firewall becomes an issue in accessing information on the patient.
    - A representative from the Disaster Struck Facility may be sent to the Patient Accepting Facility to assist with accessing information.
- Is there independent emergency generator back-up to run the server(s), computer(s) and printer(s) that provide the facility the ability to print out the records?
- Can batch printing be completed by the facility, either at one central location or to the floor, in the event the floor does not have printing capability at the time or the floor is overwhelmed with the patient care needs to secure enough time to print out each record?

**IMPORTANT: DOWNTIME PROCEDURES**

If a clinical team from the Disaster Struck Facility will be taking over a unit at the Patient Accepting Facility, the Patient Accepting Facility should review moving to downtime procedures to ensure that patient care is the primary focus, and not the short-term re-education of the clinical team on a computer system.

**MEDICATIONS:**

When sending patient-specific medications, package them along with their other personal affects, label with their name and Medical Administrative Number before sending with the patients (as they are transferred).

Necessary **medications and controlled substances** are sent with the evacuated patient, if possible.

1. It is the discretion of the Patient Accepting Facilities to continue to use these meds or order their own. It is recommended that medications be placed in water resistant, tamper evident containers/bags.
2. Patients arriving with Physician Orders (MAR should accompany the patient) are filled by the Patient Accepting Facility, if necessary, until a physician with privileges at the Patient Accepting Facility is present and can write a new order.

In some situations, a licensed Health Care Professional (HCP) may go with the patient and be responsible for the Controlled Substances. If meds are administered during transport, appropriate documentation on name of medication, quantity and dose administered must be documented.

1. The Patient Accepting Facility may also request that the patients same LTC pharmacy can dispense new supply of medication to new location. The LTC pharmacy computer system will have the current medications of the patient.
   a. DSHS or other insurance provider may comply with request to fill before usual due date.
   b. The name of patients' pharmacy will be supplied to new site.

2. If primary LTC pharmacy is not able to dispense medication due to loss of function:
   a. Medication request sent to other LTC pharmacy from MAR and/or medical record.
   b. If it is necessary to move outside of pre-designated pharmacies, a new pharmacy will be allowed to dispense (72 hours up to 10 days) medication until new signed medication orders can be obtained. This new pharmacy will include other members of the LTC-MAP.

3. A licensed HCP may bring the medications to the Patient Accepting Facility during or immediately post disaster. If large volumes of medications are necessary, the Disaster Struck Facility may provide larger quantity shipment to the Patient Accepting Facility.
   a. If civil unrest is taking place or there is potential, consideration should be given for a security or law enforcement personnel presence for transfer of controlled substances

In any situation where the controlled substances are transferred from one healthcare facility to another, there should be clear and concise documentation of the transfer by a licensed nurse or a pharmacist. A DEA Form 222 should be used where applicable and the *Controlled Substance Receiving Log* and copies of the *Narcotics Count Record* (follows after the patients arrive) should be utilized to support this process of transferring medications from facility to facility within Region 6. The process of receiving includes the following:

- form completed by licensed health care practitioner (this verifies a count done by the receiving facilities)
- name of patient, if applicable (*unless a facility to facility transfer*)
- name of medication and amount (solid dose units)
- The Disaster Struck Facility sends a copy of a *Narcotics Count Record* over after the disaster is concluded for verification of the counts.

NOTES:

1. Only unopened vials or solid-dose medications can be transferred. Partially used vials of controlled substances are not to be transferred.

2. The evacuation process already includes the MAR and transfer of the patient record/chart, thus completing the second phase of required documentation. If the patient is returned to the Disaster Struck Facility following the event, this information should be returned with the patient.

**PATIENT IDENTIFICATION AND TRACKING (see the next page)**

All patients must have wristbands (or some other form of identification). It is recommended that the following information should be contained on the wristband:

- Name and DoB (and MR# if possible)
- If unable to apply a wristband: Utilize a permanent marker on the forehead / arm / belly or other immediately identifiable location writing:
    - Name and DoB

Review having a **digital photo** of each patient to link up to their *Resident Evacuation Tracking Form* number or a **photo that can be printed** and go with the patient. At times, a digital photo is taken of each patient as they leave the building with a close-up picture of their *Resident Evacuation Tracking Form* number.

Patient Accepting Facilities **continue tracking** of incoming patients using the Comment Field on the Face Sheet *(inserting the Resident Evacuation Tracking Form # or previous MR# into that field)* and the location of their original charts. They keep the Disaster Struck Facility advised by contacting them to confirm the patients' arrival.

## TRACKING SHEETS (see Attachment E Forms)

A. The *Patient / Medical Record & Equipment Tracking Sheet* is intended to track patients, their medical records and equipment as the patients leave the Disaster Struck Facility. These fields should be used to capture aggregate patient data for anticipated transportation locations and sent to the Patient Accepting Facility for verification of receipt of the patients.

   A sheet should be filled out for <u>each facility</u> that is receiving one or more of your patients. If a number of patients are all being sent to the same facility, these patients can all be listed on one Tracking Sheet. Additionally, if multiple patients are being discharged, several sheets could be used for "discharge to home" and note the vehicle they left in if possible to minimize the risk to the Member facility. The top sheet or a copy of the tracking sheet is kept by the Disaster Struck Facility as a record of where the patients have been sent.

   It is important that the Patient Accepting Facilities continue this tracking process. As evacuated patients arrive at the Patient Accepting Facility, the facility should make enough copies of this tracking sheet so that one copy can be placed with each patient's chart. This information should remain with the patient and their medical records. The Patient Accepting Facility should confirm the arrival of the patients with the Disaster Struck Facility or, if unable to communicate with the Disaster Struck Facility, the Regional Call Center (if active) should be communicated with. If the Regional Call Center is not active, communication should take place with Health & Medical Area Command or appropriate EOC / King County ECC.

   When a new medical record number is assigned (due to a new patient medical record/chart being started) to the patient, this should be noted on the Tracking Sheet.
   - Patient Accepting Facility should "flag" these charts either physically or electronically to aid in tracking/documenting patients cared for during an evacuation.
   - The chart must be "safely kept" for return to the Disaster Struck Facility at the appropriate time.

B. The *Resident Evacuation Tracking Form* supplies critical information on the patient to enable care to start for the evacuated patient until the "chart" can be reviewed. It should be pinned to the patients' clothing, on their back or other location where it cannot be lost. These forms should also be used on a day to day basis for the transfer of patients between healthcare facilities. Copies of this form are:
   - Copy 3: Retained by the Disaster Struck Facility
   - Copy 2: Retained by the Transportation Unit Leader (EMS)
   - Copy 1: Retained by the Patient Accepting Facility with a copy made for any local, regional or state groups involved with tracking support

   Patient Accepting Facilities **continue tracking** of incoming patients using the Comment Field on the Face Sheet *(inserting the Resident Evacuation Tracking Form # or previous MR# into that field)* and the location of their original charts. They keep the Disaster Struck Facility advised by contacting them to confirm the patients' arrival.

C. The *Controlled Substance Receiving Log* must be completed by a licensed HCP at the Patient Accepting Facility for each patient and also be utilized for larger volume movement of pharmaceuticals – facility to facility.

D. The *Influx of Patients Log* should be completed at the intake point for the patients at the Patient Accepting Facility. This will be matched up against the *Patient / Medical Record & Equipment Tracking Sheet*. The Patient Accepting Facility will then have a clear understanding if they have accountability for all patients they are supposed to have received.

E. The *Health & Medical Area Command or Disaster Struck Facility Patient Tracking Chart* (Aggregate) should be completed at the Health & Medical Area Command location and/or by the Disaster Struck Facility to have complete tracking for all patients. This sheet is populated by the *Patient / Medical Record and Equipment Tracking Sheet* information and by direct calls into the local healthcare facilities. Final confirmation of the exact location of the patients is verified between groups via the information on the *Influx of Patients Log* that is matched against the *Patient / Medical Record & Equipment Tracking Sheet*. This aggregate tool is used to ensure that no patient is misplaced and to support coordination between the Disaster Struck Facility, the Patient Accepting Facility and the Health & Medical Area Command.

# SECTION 7:
# STAFF, PHARMACEUTICAL, SUPPLIES & EQUIPMENT
## ("In Need of" and "Transportation of")

To enable a Patient Accepting Facilities to care for Patients, extra **staff, pharmaceuticals, supplies and equipment** may be necessary.

Staff, pharmaceuticals, supplies and equipment may be needed by:

- a Disaster Struck Facility that is not evacuating but is overtaxed by the disaster and in need of emergency support
- a Patient Accepting Facility that needs additional resources
- a Stop Over Point to which a Disaster Struck Facility has evacuated.

A Patient Accepting Facility should be cautious about requesting staff, pharmaceuticals, supplies and equipment from a Disaster Struck Facility. While it is their responsibility to provide these resources and it is the intent of the Disaster Struck Facility to attempt to move staff to the Patient Accepting Facility to support their own Patient population, the severity of their situation may prohibit this from taking place in the early phases of a disaster.

- It is important for facilities to provide realistic orders to suppliers. In certain disasters, facilities order a complete duplicate of their previous order and there are many supplies or pharmaceuticals that they do not need at that time. The ripple effect is that a vendor may fill an order for a facility when another medical institution had greater needs at that time but they were unable to fill additional regional orders due to the overwhelming requests. Working together is a key to success and integration through the LTC-MAP will assist with the prioritization of resources as well.

Facility Actions: The Patient Accepting Facility opens existing staffed beds or areas first. However, overflow areas may need to be utilized and staff, supplies and equipment to care for Patients are necessary to support Patient care. Providing staff, pharmaceuticals, supplies and equipment is the responsibility of the Disaster Struck Facility, if possible. It is assumed that Patient Accepting Facilities and other non-affected facilities help as necessary through staff call-back lists, lending of supplies and working together to ensure vendors are informed of the situation to provided support to the Patient Accepting Facilities.

Region 6 LTC-MAP Website [redacted] It is the intent for the facilities to utilize the web-site for a general listing/inventory of available supplies and equipment to support other Region 6 facilities. It is the responsibility of the facilities to update their inventory listings based on request or on an as needed basis and print a hard copy of information on an annual basis to ensure that the paper copy of information from website is available in the event of a systems failure during a disaster.

**NOTES:**

1. When requesting staff, pharmaceuticals, supplies or equipment, it is recommended that you fax your written request to the Lender. This can be used at police road blocks as these resources are being sent to your facility. Appropriate communication with the Emergency Operations Center (EOC) should be completed to ensure they can inform the appropriate authorities of the resource/assets that should be allowed to access the facility (*NOTE: Access may still be denied by authorities*).
2. All medical needs should be coordinated through the Health & Medical Area Command and all non-medical needs should be coordinated through the Local Emergency Operations Center (EOC) or King County Emergency Coordination Center (ECC).
3. It is in the best interests of the Disaster Struck Facility to have a representative in the Local EOC for coordination purposes.

Special Transportation and Supply Considerations for Vendors and Town / City / Region / State Agencies: There are three primary concerns in dealing with disaster transportation of supplies to Member Facilities:

1. Elevated requests that overwhelm the inventory of the suppliers
2. Inability to communicate with the Member Facility and distribution of pharmaceuticals, supplies or equipment without verification of the safe accessibility to the Member Facility
3. Limited access to the Member Facility due to the scope of the disaster.

Vendor Transportation Prioritization: In most situations, the vendor is able to meet the requests of the Member Facilities and distribute supplies to their site (Elevated Requests – Minimal Impact.) When the requests are Elevated and the impact is High, the Local EOC is the conduit for the vendor to support prioritization for pharmaceuticals, supplies and equipment. This by no means takes the control away from the Member Facility, this approach helps to ensure that the Member Facility is internally prioritizing their needs and working with the Local EOC, with the exception being when the facility is faced with immediate threat to life and this is automatically escalated to the highest level of priority for the Local EOC.

While Traffic Control is to be handled by the Department of Transportation, State Patrol and the local police departments for the areas impacted, appropriate coordination with Emergency Management within the appropriate EOC is of the utmost importance during a disaster that impacts the transportation capacity of the region.

The vendors and the appropriate EOC along with Health & Medical Area Command must coordinate in order to ensure safe access to the Member Facilities and verify if the risk to enter an area is too great based on where the facility is prioritized at that time.

# STAFF ASSISTANCE

1. Communication of request: The request for staff help initially can be made verbally. The request, however, must be followed up with written documentation. This should ideally occur prior to the arrival of personnel at the recipient facility.

   It is recommended that healthcare facilities prepare to create and deploy integrated clinical and non-clinical teams. These would either be on-call staff responding to the facility for deployment or on-duty teams where staff call-backs are initiated and once the responding staff arrives, the facility is able to deploy the on-duty teams. Requesting healthcare facility should be specific with the resources they request to properly utilize responding staff.

   Staff should not be requested from a facility that is involved in an active disaster. If the Lenders staff is at your facility when their facility goes into disaster activation, they must be allowed to return at once, if requested.

2. Documentation/Credentials: The arriving personnel are required to present their facility identification badge at the Borrowers facility upon arrival. The Borrower is responsible for the following:

   a. Meeting the arriving personnel from a Lender facility and signing them into the facility (sign out will also be required)
   b. Confirming the personnel's ID badge and Picture ID with the list of personnel provided by the Lender facility
   c. Providing additional identification, such as "visiting personnel" badge, per facility policy, to the arriving personnel
   d. If possible, conduct a Watch Background check and check their license with DSDS.

   The Borrower accepts the professional credentialing determination of the Lender facility, but only for those services for which the personnel are credentialed for and have privileges to provide at the Lender facility and only if those privileges do not contradict with privileges provided for similar positions in the Borrower facility.

3. Supervision: The Borrower's senior administrator or designee (Medical Care Branch Director, Casualty Care Unit Leader, Labor Pool & Credentialing Unit Leader) identifies where and to whom the donated personnel are to report, and professional staff of the Borrower's facility who supervise them.
   - Provide a baseline orientation for the arriving personnel to the facility (similar to how Traveler staff are handled)

4. Demobilization Procedures: The Borrower provides and coordinates any necessary demobilization procedures and post-event stress debriefing. The Borrower is responsible for providing the personnel transportation necessary for their return to the Lender facility and all documentation of hours worked while on-site along with sign-out.

# DISASTER CREDENTIALING AND PRIVILEGING

As a facility evacuates, it is likely that staff and clinicians from one facility will be working at other healthcare facilities, throughout the duration of the disaster, as they help to care for their patients at the Patient Accepting Facilities.

This situation may also occur if physicians, nurses, Nursing Assistants – Certified (NAC) and other care providers from around the community and surrounding communities volunteer their time during a disaster.

Each member facility should have an internal procedure for credentialing of emergency providers/volunteers and granting of temporary privileges in a disaster. These internal procedures should follow the base requirements from The Joint Commission and the DSHS. In order to activate these internal procedures, the facility's Emergency Operations Plan has been activated the facility (Incident Commander / Administrator-on-call, in consultation with Medical Director or designee) determines that it is unable to handle the immediate patient needs with their existing staff.

The Joint Commission standards for Emergency Credentialing are outlined on the following pages and should be followed as the baseline plan for all institutions (accredited by The Joint Commission or directly by CMS).

As soon as the immediate situation is under control, not to exceed 72 hours unless communication is disrupted - this must be documented, the verification process of credentials and privileges of individuals who have received disaster privileges must be completed. This privileging process is identical to the process established under the medical staff bylaws for granting temporary privileges to fulfill an important patient need.

Within 72 hours, the organization will determine the need to continue this disaster privileging policy.

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| **EM.02.02.13** | **Granting disaster privileges to volunteer licensed independent practitioners (LIPs).** |
| EM 1 | The facility grants disaster privileges to volunteer LIPs only when the Emergency Operations Plan has been activated and additional staff is needed – General. |
| EP 2 | The medical staff identifies, in its bylaws, those individuals responsible for granting disaster privileges to volunteer LIPs. |
| EP 3 | The facility determines how it will distinguish volunteer LIPs from other licensed independent practitioners. |
| EP 4 | The medical staff describes, in writing, how it will oversee the performance of volunteer LIPs |
| EP 5 | facility obtains his or her valid government-issued photo identification and at least one of the following:<br>- A current picture identification card from a health care organization that clearly identifies professional designation.<br>- A current license to practice.<br>- Primary source verification of licensure.<br>- Identification indicating that the individual is a member of a Disaster Medical Assistance Team (DMAT), the Medical Reserve Corps (MRC), the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP), or other recognized state or federal response facility or group.<br>- Identification indicating that the individual has been granted authority by a government entity to provide patient care, treatment, or services in disaster circumstances.<br>- Confirmation by a LIP currently privileged by the facility or a staff member with personal knowledge of the volunteer practitioner's ability to act as a LIP during a disaster. |
| EP 6 | The medical staff oversees the performance of each volunteer LIP |
| EP 7 | The facility determines within 72 hours of the practitioner's arrival if granted disaster privileges should continue. |
| EP 8a | Primary source verification of licensure occurs as soon as the immediate emergency situation is under control or within 72 hours. |
| EP 8b | If verification can not be completed in 72 hours, document (all):<br>- Reason(s) why it could not be performed within 72 hours of the practitioner's arrival.<br>- Evidence of the licensed independent practitioner's demonstrated ability to continue to provide adequate care, treatment, and services.<br>- Evidence of the facility's attempt to perform primary source verification as soon as possible. |
| EP 9 | If, due to extraordinary circumstances, primary source verification of licensure of the volunteer licensed independent practitioner cannot be completed within 72 hours of the practitioner's arrival, it is performed as soon as possible - General. |
| **EM.02.02.15** | **During disasters, the facility may assign disaster responsibilities to volunteer practitioners who are NOT LIPs.** |
| EP 1 | The facility assigns disaster responsibilities to volunteer practitioners who are not LIPs. |

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| EP 2 | The facility identifies, in writing, those individuals responsible for assigning disaster responsibilities to volunteer practitioners. |
| EP 3 | The facility identifies how it will distinguish volunteer practitioners who are not licensed independent practitioners from its staff. |
| EP 4 | The facility describes, in writing, how it will oversee the performance of volunteer practitioners. |
| EP 5 | Prior to fulfilling their role, the facility obtains his or her valid government-issued photo identification (for example, a driver's license or passport) and one of the following:<br>- A current picture identification card from a facility that clearly identifies professional designation.<br>- A current license, certification, or registration.<br>- Primary source verification of licensure, certification, or registration (if required by law and regulation in order to practice).<br>- Identification indicating that the individual is a member of a Disaster Medical Assistance Team (DMAT), the Medical Reserve Corps (MRC), the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP), or other recognized state or federal response facility or group.<br>- Identification indicating that the individual has been granted authority by a government entity to provide patient care, treatment, or services in disaster circumstances.<br>- Confirmation by facility staff with personal knowledge of the volunteer practitioner's ability to act as a qualified practitioner during a disaster. |
| EP 6 | The facility oversees the performance of each volunteer practitioner |
| EP 7 | The facility determines within 72 hours after the practitioner's arrival whether assigned disaster responsibilities should continue. |
| EP 8 | Primary source verification of licensure, certification, or registration (if required by law and regulation in order to practice) of volunteer practitioners who are not licensed independent practitioners occurs as soon as the immediate emergency situation is under control or within 72 hours |
| | If primary source verification of licensure, certification, or registration for a volunteer practitioner cannot be completed within 72 hours due to extraordinary circumstances, the facility documents all of the following:<br>- Reason(s) why it could not be performed within 72 hours of the practitioner's arrival.<br>- Evidence of the volunteer practitioner's demonstrated ability to continue to provide adequate care, treatment, or services.<br>- Evidence of the facility's attempt to perform primary source verification as soon as possible. |
| EP 9 | If, due to extraordinary circumstances, primary source verification of licensure of the volunteer practitioner cannot be completed within 72 hours of the practitioner's arrival, it is performed as soon as possible. |

# PHARMACEUTICALS, SUPPLIES & EQUIPMENT

## I. SUPPLIES AND EQUIPMENT

1. Communication of request: The request for supplies and equipment from a vendor or for the transfer of supplies or equipment from another member facility initially can be made verbally. The request, however, must be followed up with written documentation. This should ideally occur prior to the receipt of any material resources at the Borrower's facility. The Borrower identifies to the vendor or Lender the following:

   a. The quantity and exact type of requested items
   b. Time estimate of when supplies/equipment is needed on-site
   c. Time period for which the supplies/equipment are needed
   d. Location to which the supplies/equipment should be delivered

   The vendor or Lender identify how long it will take them to fulfill the request. Since response time is a central component during a disaster response, decision and implementation should occur quickly.

2. Documentation: The Borrower honors the vendor or Lender facility's standard order requisition form as documentation of the request and receipt of the materials. The Borrower's designee confirms the receipt of the material resources. The documentation details the following:

   a. The items involved
   b. The condition of the equipment prior to the loan (if applicable)
   c. The responsible parties for the borrowed material.

   The Vendor or Lender is responsible for tracking the borrowed inventory through their standard requisition forms. Upon the return of the equipment, the original invoice is co-signed by the senior administrator or designee of the Borrower, recording the condition of the borrowed equipment.

3. Transporting of supplies or equipment: The Borrower is responsible for coordinating the transportation of materials both to and from the Vendor or Lender through the Local EOC or King County ECC. This coordination may involve government and/or private organizations and the vendor or Lender may also offer transport. The Borrower must return and pay the transportation fees for returning or replacing all borrowed materials.

4. Safety (equipment): The Lender is responsible to verify the operational status and preventative maintenance for all equipment being transported to the Borrower. All reporting requirements, policies, procedures and documentation following receipt of the equipment (i.e. Safe Medical Devices Act) is the responsibility of the Borrower.

5. Supervision: The Borrower is responsible to ensure appropriate staff competency for use and maintenance of all borrowed supplies and equipment.

6. Demobilization procedures: The Borrower is responsible for the rehabilitation and prompt return of the borrowed equipment to the vendor or Lender. To facilitate this, all facility equipment should be properly marked with identification.

## II. PHARMACEUTICALS

**Pharmaceuticals:** Pharmaceuticals follow the same process as supplies and equipment with the exceptions seen in **Section 6**.

- For a Disaster Struck Facility that is not evacuating but is overtaxed by the disaster and in need of emergency support:
    - The Disaster Struck Facility requests emergency support from patients primary pharmacy followed by other area pharmacies
    - If response is inadequate to meet the facilities needs, the Disaster Struck Facility requests emergency support from pharmaceutical suppliers within the region and their regional or national supply chain
    - If response is inadequate to meet the facilities needs, the Disaster Struck Facility requests emergency support from other area facilities. Depending on the severity of the incident, police and security measures should be taken into account to safeguard medications.
- For a Patient Accepting Facility that is in need of emergency support:
    - The Disaster Struck Facility requests emergency support from patients primary pharmacy followed by other area pharmacies
    - If response is inadequate to meet the facilities needs, the Disaster Struck Facility requests emergency support from pharmaceutical suppliers within the region and their regional or national supply chain
    - If response is inadequate to meet the facilities needs, the Patient Accepting Facility requests emergency support from other area facilities. Depending on the severity of the incident, police and security measures should be taken into account to safeguard medications.
        - Note that it is expected Patient medications will arrive with the evacuated Patient and this is primarily referencing controlled substances.

# ANNEX I:
## *Long Term Care Mutual Aid Plan (LTC-MAP)*

LTC-MAP Memorandum of Understanding

**March 4, 2010**

### I. Introduction and Background

The goal of healthcare providers is to ensure safe and effective care for their patients. Each facility has the potential to encounter situations that may overwhelm or exceed the resources of that individual healthcare facility. When a facility activates their disaster plan, some disasters require a need for a higher level of support from the surrounding healthcare facilities. King County and the surrounding areas are susceptible to disasters, both natural and man-made, that can result in the need for a full scale, coordinated disaster response.

These situations may exceed the resources of more than one healthcare facility. Disasters may involve incidents that generate an overwhelming number of patients that exceed the resources of the impacted facilities or from incidents such as building or plant problems resulting in the need for partial or complete healthcare facility evacuation. It may also be a response to incidents involving biological outbreaks that overwhelm the facility.

### II. Purpose of Long Term Care Mutual Aid Plan (LTC-MAP) Memorandum of Understanding (MOU)

The LTC-MAP support concept is well established and is considered "standard of care" in most emergency response disciplines. The continuum of mutual aid is coordinated and based on the scale of the incident. Regardless of the coordinating agency, healthcare facilities and other agencies participating in this agreement are agreeing to support one another in providing patient care.

This MOU also addresses the loan of staff, pharmaceuticals, supplies, and equipment, or assistance with emergent healthcare facility evacuation, including the acceptance of transferred patients.

This LTC-MAP Memorandum of Understanding (MOU) is a **voluntary** agreement among Participating Agencies/Healthcare Facilities that have agreed to lend support in a disaster. The degree and level of support for the number of patients each facility will accept is clearly outlined in the LTC-MAP as each facility must be able to expand bed capacity to 110% of licensed bed capacity (while the goal is to use open beds, each facility needs to be prepared to accomplish this level of surge) whereas other resources will be determined at the time of the incident based on available equipment, supplies, staff and transportation capabilities.

For purposes of this MOU, an all-hazards incident is defined as an overwhelming incident that exceeds the effective capability of the impacted health care facility or facilities. An all-hazards incident requires the Disaster-Struck Facility to establish a Command Center and

may involve the local community or King County Office of Emergency Management to establish a local Emergency Operations Center (EOC) or King County Emergency Coordination Center (ECC) as well as an activation of the Health & Medical Area Command. An incident of this magnitude will always involve the local emergency responders (via 911), local Emergency Management and Public Health – Seattle & King County. The disaster may be an "external" or "internal" incident for the healthcare facility and **assumes that each affected healthcare facility's Emergency Operations Plans have been implemented through the activation of the facility Command Center.**

This document addresses the relationships between and among healthcare facilities in routine situations and disaster situations and is intended to augment, not replace, each facility's disaster plan. The MOU also provides the framework for healthcare facilities to coordinate under Health & Medical Area Command in concert with local EOCs, King County Office of Emergency Management and the Public Health - Seattle & King County during planning and response. This document does not replace, but rather supplements, the rules and procedures governing interaction with other organizations during an all hazards incident (e.g., law enforcement agencies, the local emergency medical services, local public health department, fire departments, American Red Cross, etc).

**By signing this MOU each participating organization is evidencing its intent to support the terms of the MOU:**

A. Provide urgent support to a facility that has activated their Emergency Operations Plan
B. Provide support in the event of a ***regional disaster*** that exceeds the effective response capabilities of the impacted healthcare facility or facilities. The terms of this MOU are to be incorporated into the healthcare facility's Emergency Operations Plan.

## III. Definition of Terms

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| Assistance Costs | Assistance Costs means any direct material costs, equipment rental fees, fuel, and the fully loaded labor costs that are incurred by the Donor or Patient Accepting Facility in providing any requested assets or services. |
| Census Reduction Plan | Census Reduction Plan is an internal strategy utilized by a healthcare facility to open up existing staffed beds in order to receive additional patients. This plan would include approaches to expedite the safe discharge of patients. |
| Command Center | Command Center is a location from which the facility's specific Incident Command oversees all incident operations. It is established in a facility during an emergency and is the facility's primary point of administrative authority and decision-making. This term references what individual facilities may call their internal Emergency Operations Center, Incident Command Center or other name for internal Command. |

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| Disaster | An incident that exceeds a facility's effective response capability or cannot appropriately resolve solely by using its own resources. A full-scale disaster will impact more than one facility. Such disasters will very likely involve the local EOC, King County Office of Emergency Management and Public Health - Seattle & King County and may involve loan of medical and support staff, pharmaceuticals, supplies, and equipment from another facility, or, the emergent evacuation of patients. Coordination of resources will occur at the appropriate EOC, King County ECC or Health & Medical Area Command location for a full-scale disaster. |
| Disaster-Struck Facility | The Disaster-Struck Facility is a healthcare facility where the disaster occurred. Transportation, staff, equipment or supplies may be requested, or the evacuation and transportation of patients may be required. |
| Donor Facility | The healthcare facility that provides staff, pharmaceuticals, supplies, transportation or equipment to a facility. |
| Emergency Contacts | Emergency Contacts are the persons, in a line of succession, listed in the Long Term Care Mutual Aid Plan (LTC-MAP) for Emergency Contact Information and submitted to the Public Health - Seattle & King County, King County Office of Emergency Management and each local EOC by the LTC-MAP. The list includes names, addresses, and 24-hour phone numbers of the Emergency contact points of each healthcare organization. The people listed as Emergency Contacts have (or can quickly get) the authority of the healthcare facility to commit available equipment, services, and staff for the organization. Note: The phone number of a dispatch office staffed 24 hours a day that is capable of contacting the Emergency contact point(s) is acceptable. |
| EOC (Local) or ECC (County) | Emergency Operation Center or Emergency Coordination Center is established for the purposes of coordinating the incident response on a local or regional level.<br>The EOC / ECC provides planning, communications, coordination, and oversight of the disaster response including coordination with the Health & Medical Area Command function. |
| First Responder Agencies | First Responder Agencies' refers to local fire, EMS and police; typically accessed through 911 or a non-emergency direct line. |

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| Health & Medical Area Command | Health & Medical Area Command is an incident management group used to coordinate emergency response efforts across all jurisdictions in King County, and among multiple healthcare agencies vying for the same resources. Health, medical and mortuary response agencies across King County will utilize the Incident Command System, and specifically Area Command, to manage information, resources and decisions during disasters. The health, medical and mortuary response are led by the ESF 8 Area Commander, who reports to the Local Health Officer. |
| Hospital Control | Hospital Control is a facility designated by King County to coordinate King County pre-hospital patient care and patient distribution between EMS and hospitals. The responsibilities of Hospital Control include communication with the EMS personnel and Emergency Departments and patient distribution. The primary Hospital Control for King County is Harborview. In the event that Harborview is unable to fulfill the duties, then Overlake is the designated alternate. |
| Long Term Care Mutual Aid Plan (LTC-MAP) | LTC-MAP means this Agreement. |
| Medical Reserve Corp (MRC) | The mission of the Medical Reserve Corps (MRC) is to improve the health and safety of communities across the country by organizing and utilizing public health, medical and other volunteers. |
| Participating Agencies/ Healthcare Facilities | Agencies/ Healthcare Facilities that have fully committed to the LTC-MAP MOU. |
| Patient Accepting Facility | The facility that receives patients from another Participating Healthcare Facilities in an evacuation or due to another type of all hazards incident. |
| Stop Over Point / Alternate Care Facility | Nearby building where patients can be held pending return to original healthcare facility or distribution into Mutual Aid Plan. This building should be reviewed for its ability to handle the entire patient population or multiple facilities should be chosen to accomplish this. Additionally, the facility should be reviewed from a vulnerability standpoint to ensure that movement to the facility will not endanger evacuated patients or staff (i.e. flood area). |

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| Surge Capacity Plan (or Influx of Patients Plan) | Surge Capacity Plan means an internal strategy utilized by a healthcare facility to open up existing beds and open non-traditional areas of the healthcare facility for patient care and potentially open up an alternate site to support a mass influx of patients over a short duration or extended period of time. This plan might include a Census Reduction Plan, cohorting of patients and other strategies employed that are specific to each individual healthcare facility. |

## IV. General Principles of Understanding

1. **Participating Healthcare Facility:** Each Participating Healthcare Facility:
    a. Designates Emergency Contacts to participate with community disaster planning and to coordinate the Long Term Care Mutual Aid Plan (LTC-MAP) initiatives with the individual healthcare facility's Emergency Operations Plan.
        i. Ensure the most current Emergency Contacts are included in the LTC-MAP and WATrac.
        ii. Report any changes occurring during the plan year that preclude the Participating Healthcare Facility from participating or modifies the level of actual participating.
        iii. Maintain a current hard-copy of the LTC-MAP in the healthcare facility Command Center or other designated location.
    b. Commit to participating in community exercises and drills to test the plans' effectiveness.

2. **Implementation of LTC-MAP Memorandum of Understanding (MOU):** A health care facility becomes a Subscribing Organization when an authorized administrator signs the MOU.

    During a disaster, only the authorized administrator (or designee) or Command Center at each facility has the authority to **request or offer assistance** through the LTC- MAP. Representatives from the Local or State Emergency/Licensing Agencies (Public Health - Seattle & King County, Office of Emergency Management, Washington Emergency Management Division, Emergency Medical Services, State DSHS, Local EOC, etc.) may also make this request.

3. **Command Center:** The Command Center is activated when a facility activates its disaster plan. The Disaster Struck Facility must activate a Command Center in order to request resources through this LTC-MAP. The impacted facility's Command Center is responsible for informing the local emergency responders (911) and the Public Health Duty Officer of its situation and defining needs that cannot be accommodated by the healthcare facility itself. The senior administrator or designee is responsible for requesting staff, pharmaceuticals, supplies, equipment, transportation or authorizing the evacuation of patients. The senior administrator or designee will coordinate both internally, and with the Donor / Patient Accepting Facility, all of the logistics involved in implementing assistance under this LTC-MAP MOU. Logistics include identifying the number and specific location where staff, pharmaceuticals, supplies, equipment, or patients should be sent, how to enter the security perimeter, estimated time interval to arrival and estimated return date of borrowed supplies, etc.

4. **Local EOC:** The Local EOC is activated by the local first responders or a request from the Disaster-Struck Facility. The Local EOC will have authority to provide resources to the Scene Incident Commander or Unified Command and will make the necessary request to the King County ECC and the Health & Medical Area Command, as necessary.

5. **King County ECC and Health & Medical Area Command:** The King County ECC is activated by the King County Office of Emergency Management Duty with requests for activation coming from Public Health - Seattle & King County, local EOCs, by law enforcement, by fire service, or by other approved sources. The ECC, when fully activated, includes a liaison from Health & Medical Area Command. Health & Medical Area Command will consist of representatives from the Public Health - Seattle & King County, participating hospitals, EMS and other agencies/healthcare facilities as necessary.

   Health & Medical Area Command has the authority and responsibility to coordinate and direct all disaster related medical response for the healthcare facilities. The healthcare facilities remain responsible for internal operational issues.

6. **Documentation for Loans of Supplies, Transportation, Staff and Equipment:** During an all-hazards incident, the Donor Facility will accept and honor the requesting facility's standard requisition forms or verbal communication in the event of a technological failure (this will be followed by a written requisition form at the earliest possible time and prior to demobilization.) Documentation provided by the Donor Facility should detail the items or individuals involved in the transaction, condition of the material prior to the loan (if applicable), and the party responsible for the material (if applicable.)

7. **Payment for Supplies, Transportation, Staff and Equipment:** The recipient facility will assume responsibility for the supplies, transportation, staff and equipment from the Donor Facility upon receipt and during the time the supplies, transportation, staff and equipment are at the recipient facility. If the Donor Facility requests reimbursement for salaries or expenses, the recipient facility shall reimburse the Donor Facility, to the extent permitted by federal law, for all of the Donor Facility's costs determined by the Donor Facility and the recipient facility working together to determine the appropriate costs. Costs includes all use, breakage, damage, replacement, and return costs of borrowed materials. Staff wages, benefits, taxes, insurance, or other compensation is always paid by their home facility (employer). Reimbursement will be made within a mutually agreed upon timeframe between the Donor Facility and the recipient facility following receipt of the invoice.

   All processes will be consistent for reimbursement of vendors that are supporting the LTC-MAP during a disaster.

8. **Patient Care Responsibility:** Once admitted, the patient is under the care of the Patient Accepting Facility's admitting physician until discharged, transferred, or reassigned. The Disaster Struck Facility is responsible for transferring of extraordinary drugs or other special patient needs (e.g. equipment) if possible. At the end of the disaster, patients may be returned and must be accepted at the Disaster Struck Facility as capable. The following conditions immediately eliminate the potential for a transfer:

a. The patient is discharged to home or alternate level of care (rehabilitation hospital, skilled nursing facility)
b. The patient/family/responsible party refuses transfer
c. The attending physician deems the patient unstable for transport.

*NOTE 1: The parties hereto recognize that certain parties hereto are religious or church-sponsored entities and that with respect to said parties any services provided hereunder must be provided in a manner that is consistent with said parties' Mission and Core Values and the moral tradition as articulated in such documents as The Ethical and Religious Directives for Catholic Health Care Services (other documents as applicable)*

*NOTE 2: From an ethical standpoint, it is expected that no marketing efforts will be made by the Patient Accepting Facility.*

9. **Communications:** The impacted healthcare facilities are responsible for informing emergency agencies and the appropriate Washington State licensure agency (DSHS) of its situation and defining needs that cannot be accommodated by the facility itself. The senior administrator (or designee) in the Disaster Struck Facility Command Center is responsible for requesting supplies or authorizing the evacuation of patients in conjunction with Emergency Agencies.

   Communications between facilities for formally requesting and volunteering assistance should therefore occur among the senior administrators (or designees).

10. **Public Relations:** Each Participating Healthcare Facility is responsible for developing and coordinating with other healthcare agencies, relevant organizations, and the appropriate EOC for the media response to the disaster. Coordination of public information during an all hazards incident will occur through the Joint Information Center activated by the appropriate EOC / King County ECC.

11. **Hold Harmless Condition:** The recipient facility should hold harmless the Donor Facility for acts of negligence or omissions on the part of the Donor Facility in their good faith response for assistance during an all hazards incident. The Donor Facility, however, is responsible for appropriate credentialing of personnel and for the safety and integrity of the equipment and supplies provided for use at the recipient facility.

## V. General Principles Governing Medical Operations, the Transfer of Pharmaceuticals, Supplies or Equipment, or the Evacuation of Patients

1. **Mutual Aid:** When an isolated facility has activated their disaster plan, the impacted facility may request assistance from another healthcare facility for staff, supplies, transportation or equipment and then the Donor Facility will inform the requesting facility of the degree and time frame in which it can meet the request.

2. **Operational Status:** Participating Disaster Struck Facility and/or, when activated, the Health & Medical Area Command of their operational status.

3. **EOC / ECC / Health & Medical Area Command:** All facilities are responsible for notifying the appropriate EOC (Local) for any non-medical resource needs including staff, supplies, transportation or equipment. Any evacuation of patients

and medical needs requests will be via Health & Medical Area Command who will request an updated resource assessment to determine the availability of additional staff or material resources, including the availability of beds, as required by the situation. The Health & Medical Area Command will prioritize requests and direct the distribution of the resources in coordination with the appropriate EOC. Once resources have been assigned, the recipient facility will be informed to contact the Donor Facility directly and complete the arrangements. The Incident Commander (or designee) of the recipient or Disaster Struck Facility, will coordinate directly with the Incident Commander (or designee) of the Donor or Patient Accepting Facility for this assistance.

** NOTE: For evacuation of patients, the Disaster Struck Facility may initially be communicating directly with Patient Accepting Facilities and their Stop Over Points with Health & Medical Area Command standing up while the incident is unfolding to provide supplemental coordination support.*

## VI. Specific Principles of Understanding

### A. Loaning of Staff

1. **Communication of request:** The Incident Commander (or designee) of the recipient facility authorizes the request. The request for the transfer of staff initially can be made verbally to the Incident Commander or designee of the Donor Facility. The request must be followed up with written documentation before staff will be released and in the event of a technological failure this will be followed by a written requisition form at the earliest possible time and prior to demobilization. The documentation may be sent by any available means including fax, radio, phone, e-mail, or courier.

   The recipient facility will identify to the Donor Facility the following:
   a. The type and number of requested staff.
   b. An estimate of how quickly the requested staff are needed.
   c. Information regarding parking, entry, where to report, and who to report to.
   d. An estimate of how long the staff will be needed.
   e. The method of transportation.

   The Donor Facility will provide:
   a. A list of names and credentials of the volunteers.

2. **Documentation:** The arriving donated staff will be required to present their facility identification badge along with another accepted form of identification (see Credentialing in the LTC-MAP: Section 7) at the time of arrival and continue to wear the badge while on duty at the recipient facility.

   The recipient facility will be responsible for the following:
   a. Meeting the arriving donated staff at the entry point and escorting them to the Labor Pool or check in location for sign-in.
   b. The check in process will include:

- Confirming the donated staff's ID badge with the list of personnel provided by the Donor Facility and a second form of identification per the LTC-MAP.
- Providing additional identification, e.g., "visiting staff" badge, to the arriving donated staff. This is to be worn in addition to the volunteer's normal badge.
- Providing a briefing regarding the situation.
- Designating an assignment and supervisor for each individual based on experience and credentials.
- Escorting or directing staff to assigned area.

c. Completing timesheets and documentation of assignments and providing copies to the Donor Facility.

The recipient facility will accept the current professional credentialing status of the Donor Facility. Additional privileges may be granted at the discretion of the recipient facility with agreement from the appropriate senior physician and/or Medical Director, as determined by the facility, and the individual.

3. **Supervision:** Each volunteer will be assigned to a direct supervisor as well as an all-hazards incident position leader. The supervisor or designee will meet the donated staff in the labor pool and brief them on the situation and their assignment. The direct supervisor is responsible for ensuring that the volunteer is oriented to the work area, understands and is capable of the assignment, and has the ability to ask questions and report concerns. In addition the supervisor will assess the donated worker periodically and relieve the individual if unfit to continue to work.

   If appropriate, the "emergency staffing" rules of the recipient facility will govern assigned shifts. The donated staff's shift will not exceed the shifts outlined in the emergency-staffing plan. The length of the shift may be negotiated in advance with the Donor Facility.

4. **Demobilization procedures:** Donated staff are expected to remain on duty until relieved, unable or unsafe to continue, or dismissed. The supervisor is responsible for communicating with the individual any change in assignment. All donated staff will be expected to sign out through the labor pool, return the identification badge, and document their time on the assignment log.

   The recipient facility will provide and coordinate:
   a. Any necessary demobilization procedures and post-incident stress debriefing.
   b. Transportation necessary for their return to the Donor Facility.
   c. Copy of the assignment log and time sheets for tracking and payment purposes.

   NOTE: If the Donor Facility is experiencing a disaster, a process for rapid demobilization will be implemented to support returning staff to their primary place of employment.

5. **Payment for Services:** Normal payroll procedures will be followed by the Participating Healthcare Facility. If the Donor Facility requests reimbursement for salaries or expenses, the Donor Facility shall submit the payroll expenses to

the recipient facility. The Donor Facility will also accept the timesheets from the recipient facility as evidence of hours worked. All financial matters will be worked out between the participating facilities.

If the Donor Facility requests reimbursement for salaries or expenses, the recipient facility shall reimburse the Donor Facility for the salary expenses incurred by donated personnel while working at the recipient facility. An invoice will be submitted to the recipient facility for reimbursement. Recipient facility shall pay to the Donor Facility all valid and invoiced Assistance Costs in a mutually agreed upon amount of time following the receipt of the Donor's invoice, for all of the Emergency Assistance services provided by the Donor.

All processes will be consistent for reimbursement of vendors that are supporting the LTC-MAP during a disaster.

6. **Exceptions:** In the event that the Donor Facility is actually the Disaster Struck Facility that has evacuated and sent staff along with patients, it is the requirement of the Disaster Struck Facility to provide transportation to the staff during demobilization.

## B. Transfer of Pharmaceuticals, Supplies or Equipment

1. **Communication of Request:** The Incident Commander or designee of the recipient facility authorizes the request. The request for the transfer of pharmaceuticals, supplies, or equipment initially can be made verbally to the Incident Commander or designee of the Donor Facility. The request must be followed up with written documentation before pharmaceuticals, supplies or equipment will be released or verbal communication in the event of a technological failure and this will be followed by a written requisition form at the earliest possible time and prior to demobilization. The documentation may be sent by any available means including fax, radio, phone, e-mail, or courier.

   The recipient facility will identify to the Donor Facility the following:

   a. The quantity and exact type of requested items.
   b. An estimate of how quickly the requested items are needed.
   c. Time period for which reusable supplies or equipment will be needed.
   d. Location to which, and to whom, the items should be delivered.
   e. Transportation method

   The Donor Facility will identify how long it will take them to fulfill the request. A timely response to the requests is critical for effective disaster response.

2. **Documentation:** The Donor Facility will honor the recipient facility's standard order requisition form as documentation of the request and receipt of the materials. The receipt of supplies, equipment, and pharmaceuticals will be the responsibility of a designated individual within the recipient facility. The recipient facility's designee will confirm the receipt of the material resources. The documentation will detail the following:

a. The items delivered.
b. The condition of the equipment received (if applicable).
c. Recipient facility's contact person for durable medical equipment or reusable supplies.

The recipient facility is responsible for tracking the borrowed inventory via their standard requisition system.

3. **Transporting of pharmaceuticals, supplies, or equipment:** The recipient facility is responsible for coordinating the transportation of materials both to and from the Donor Facility. The appropriate EOC will facilitate transportation when requested, and if available. This coordination may involve government and/or private organizations, and the Donor Facility may also offer transport. Upon request, the recipient facility must return and agree to pay or reimburse the transportation fees for returning or replacing all borrowed material.

4. **Supervision:** The recipient facility is responsible for appropriate use and maintenance of all borrowed pharmaceuticals, supplies, or equipment.

5. **Demobilization Procedures:** The recipient facility is responsible for the cleaning, maintenance, and prompt return of the borrowed equipment to the Donor Facility. It is expected that the equipment will be returned in good working order. Once the equipment is no longer in use, or upon resumption of normal operations, every reasonable effort will be made to replace the borrowed equipment or return it to the Donor Facility in a timeframe that is acceptable to both institutions. Upon the return of the equipment the original invoice will be co-signed by the Incident Commander or designee of the Donor Facility recording the condition of the returned equipment. A copy of the signed invoice will be provided to the Donor Facility as part of the tracking process.

6. **Payment for pharmaceuticals, supplies, or equipment:** If the Donor Facility requests reimbursement for materials and expenses, the recipient facility shall reimburse the Donor Facility for its costs in replacing any used, damaged, or lost pharmaceuticals, supplies, or equipment. The Donor Facility is expected to submit an invoice detailing the cost of the pharmaceuticals, supplies, equipment, maintenance, and transportation for reimbursement to the recipient facility. Recipient facility shall pay to the Donor Facility all valid and invoiced costs under this Section in a mutually agreed upon amount of time following the receipt of the Donor's invoice. In the event the Donor provides supplies or parts, the Donor shall have the option to accept payment of cash or in kind for the supplies or parts provided.

   All processes will be consistent for reimbursement of vendors that are supporting the LTC-MAP during a disaster.

## C. Transfer/Evacuation of Patients

*Please note that a facility is not required to provide beds with a Confirmed Admission as a bed for evacuated patient.*

1. **Communication of request:** The Incident Commander or designee of the Disaster Struck Facility will authorize the decision to transfer or evacuate patients. Patients may be transferred or evacuated if facility conditions are not safe to continue to provide patient care. The request for the transfer or evacuation of patients initially can be made verbally to the senior administrator or designee of the Patient Accepting Facility. Requests for transfers or evacuation should be coordinated with Health & Medical Area Command with the exception being when there is an immediate threat to life and the local Authority Having Jurisdiction (AHJ) orders an evacuation of the facility or a situation whereby the Health & Medical Area Command is acting in a support role only in a situation where the Disaster Struck Facility, EMS and Patient Accepting Facilities have coordinated all patient transfers. The request must be followed up with written documentation prior to the actual transferring/ evacuating of any patients or verbal communication in the event of a technological failure or immediate threat to life and this will be followed by a written requisition form at the earliest possible time and prior to demobilization. The documentation may be sent by any available means including fax, radio, phone, e-mail, or courier.

2. **Medical Staff:** The Patient Accepting Facility is also responsible for coordinating with the Medical Staff to assign a care provider. Whenever possible, the transferring physician will contact the receiving physician and provide information regarding the care. In the event that the physician is credentialed in both facilities, the physician may continue to care for the patient unless the disaster prevents this from occurring. If time and condition permits, patient permission for transfer should also be obtained.

3. **Documentation:** The Disaster Struck Facility will provide for the Patient Accepting Facility (certain disaster conditions may impact the ability to provide this information in a timely manner and all efforts should be made to accomplish this):

    a. The number of patients needing to be transferred.
    b. The general nature of their illness or condition.
    c. Any type of specialized services required (i.e. cycler)
    d. Patient condition reports given to the receiving facility's medical and nursing staff.
    e. Mode of transportation
    f. Expected time of arrival
    *g. Resident Evacuation Tracking Form/Tag* for each patient
    *h. Patient/Medical Record and Equipment Tracking Sheet* for the total number of patients to be provided as the last patient(s) arrive at the Patient Accepting Facility
    i. If time and situation permits, the Disaster Struck Facility is responsible for providing the patient's complete medical records, insurance information and other patient information necessary for care. The Disaster Struck Facility is responsible for tracking the destination of all patients transferred out and providing such tracking information to the Health & Medical Area Command who will work in coordination with the Disaster Struck Facility and the Patient Accepting Facilities to ensure all patients are accounted for.
    j. All HIPAA requirements should be maintained by the Participating Healthcare Facilities unless removed by Federal Waiver.

*NOTE: Many facilities are moving towards or have achieved electronic medical records. If electronic medical records are currently in place, it is critical that a strong effort be made to provide a clear and concise Resident Evacuation Tracking Form in the event that access to the computers are limited. The facility should attempt to batch print the records, if possible, on each evacuating unit. Additionally, if the facility was unable to print the appropriate sections of the records prior to evacuation, it should be reviewed if the electronic medical record can be accessed from an off-site location and be printed out from that location to support patient care.*

4. **Transporting of patients:** The Disaster Struck Facility is responsible for coordinating and financing the transportation of patients to the Patient Accepting Facility(ies). The transferring/evacuating facility is responsible for transferring of extraordinary drugs or other special patient needs (e.g., equipment, blood products) as time and condition permits along with the patient.
    - The Patient Accepting Facility will:
        - Designate a point of entry
        - Assign medical staff and other care providers
        - Identify the location for care
        - Communicate back to the transferring/evacuating facility to inform them of the receipt of the patients
            - Or Health & Medical Area Command will facilitate this communication if the transferring/evacuating facility is not accessible and all coordination has been channeled through Health & Medical Area Command.

5. **Supervision:** Once admitted, that patient becomes the Patient Accepting Facility's patient and under care of the Patient Accepting Facility's admitting physician until discharged, transferred or reassigned.

6. **Notification:** The Disaster Struck Facility is responsible for notifying both the patient's family or authorized surrogate decision maker and the patient's attending or personal physician of the situation. The Patient Accepting Facility may assist in notifying the patient's family and personal physician or a centralized Regional Call Center may assist in these efforts.

7. **Exceeding Licensed Bed Capacity:** It is the intent of this Mutual Aid Plan to support patients with placement into licensed beds. In situations where the bed capacity is going to exceed licensed beds, this will be addressed in conjunction with DSHS or with decisions being made by local Authorities Having Jurisdiction to protect the lives of patients.

    A. Fast-out Evacuation: If you are receiving immediate transfers of evacuated patients from a Disaster Struck Facility, you are allowed to exceed the number of licensed beds by the amount stated in the plan (10%) and provide appropriate care for them in “open space” (i.e. activity rooms, OT/PT rooms, etc.) or in existing patient rooms.
        - Additionally, this disaster may include the movement of patients to a Stop Over Point (YMCA, Gymnasium, etc.) to provide protection of the patients until they can return to the Disaster Struck Facility or a

distributed to other area Patient Accepting Facilities. In coordination between Public Health - Seattle & King County, DSHS and the Patient Accepting Facility, a waiver will be requested (post-incident due to the fast-out evacuation.) If the disaster exceeds a certain period of time or the acuity of the patient dictates it, the patient may be moved to another facility with more capacity or beds available.

B. Fast-out Evacuation or slow out but returning within a few days to the Disaster Struck Facility (usually this is a loss of HVAC during high heat or extreme cold, a fire that does not effect the safety of the patients but does require relocation, a generator failure during a power loss, etc). While the Mutual Aid Plan is activated and patients are being moved, additional requests and communication will take place through Health & Medical Area Command and DSHS to find open beds. The goal is to keep the patients in close proximity to the Disaster Struck Facility to ensure that staff from the evacuating facility can go with them, if necessary, and that families can visit them. Additionally, this disaster may include the movement of patients to a Stop Over Point to provide protection of the patients until they can return to the Disaster Struck Facility or a distributed to other area Patient Accepting Facilities. A waiver would be requested, as necessary, for a Patient Accepting Facility.

C. Slow-out evacuation where the Disaster Struck Facility will clearly not be opening anytime soon (flooding inside the building, substantial fire, etc.)

    a. This will involve movement of patients to open beds and may spread a larger geographic area. Patients may initially move into a local Patient Accepting Facility, but then patients without beds would be moved further out as the beds become available. A waiver may need to be requested for the short term care provided at a Patient Accepting Facility.

In each of these situations, the Patient Accepting Facility will work on preplanning how they can either open beds for the patients they receive (discharge of patients ready to go home and their bed is not accounted for yet) or ensure that every effort is being made to provide an appropriate level of care. It is assumed that patients may not have beds initially, but the planning should include requesting beds/equipment/supplies from other Mutual Aid Plan members not affected by the disaster, requesting beds/equipment/supplies from the town or city Emergency Operations Center, and requesting beds/equipment/supplies from vendors.

8. **Payment for Patient Care:** The member healthcare facilities will work with the appropriate payer (Medicare, Medicaid or Private Payer) to work through the payment of services for the care of patients.

   If it is required that there be a division of payment, each party will attempt to work out the division of payment amicably and incorporate into the discussions, as necessary, the Washington State DSHS and the appropriate payer (private, state or federal.)

***NOTE*:** Reimbursement covers facility costs but not necessarily ambulance/ transportation costs. Please review your facility specific business interruption insurance and agreements with private Emergency Medical Services transportation firms or private bus contracts.

**NURSING FACILITIES (NF):**

Emergency Involving NF to NF Transfer – Licensed Beds:

In the event that the patient **WILL** be able to return in 30 days, DSHS would continue to reimburse the disaster-struck facility during this 30 day period. It will be the responsibility of the two Nursing Facilities (disaster-struck and patient accepting) to divide the payment amicably and the allocation of DSHS member patient paid amounts.

In the event the patients will **NOT** be able to return in 30 days, the disaster-struck facility should proceed with discharge documentation on day 16 (DSHS does not pay for day of Discharge) and the Patient Accepting Facility should commence with admission procedures on day 16 for these DSHS members (DSHS does pay for day of Admission.)

In effect, on day 16 these patients would be treated like any new admission. The Patient Accepting Facility would follow all standard admission procedures and practices.

***NOTE 1*:** DSHS may make a determination with the Disaster Struck Facility and the Patient Accepting Facility that the facilities should move forward with the discharge and admit process in advance of the day 15 decision-making process.

****NOTE 2***: Consistent with the Center for Medicare and Medicaid Services (CMS) guidelines, the discharge and admission process should be completed within the 30 day timeframe. It is understood that it would be impractical to completely discharge all patients from one Disaster Struck Facility and admit all of the patients in other facilities in one day. The key from a billing and payment standpoint regarding discharges and admissions is to ensure the discharge forms and the Admissions forms are filled out on the same day by the Disaster Struck Facility and the patient receiving facility. The day of discharge is not paid for, but the day of admissions is and would therefore limit the financial impact on both organizations.

***** *This model should be reviewed by other payers for acceptance. This approach would be accepted by CMS and the federal payer program as the language above was modified from the CMS guidelines released on 9/30/2007 in the Provider Survey and Certification FAQ on Declared Public Health Emergencies – All Hazards.*

Emergency Involving NF to NF Transfer: Un-licensed Beds – overflow/surge:

The same provisions as above would apply provided DSHS issues the necessary approvals (licensure and certification) to the Patient Accepting Facility to commence with and continue in an overflow situation.

The approvals would need to be effective from the first day of the emergency.

NOTE: It is assumed private paying patients will follow the same guideline above.

Patient Choice – Clarification Regarding Discharge from Facility with Emergency Situation:

In the event that a patient chooses, during the first 30 days of the emergency period to:

a) become a full time patient of the Patient Accepting Facility OR
b) wishes to transfer to a new Nursing Facility.

The Disaster Struck Facility should initiate standard discharge and transfer procedures while the Patient Accepting Facility should initiate standard admission practices. This situation may not be applicable whereby the facility does not have a contract with the insurance company or does not take Medicaid. Therefore a patient would not be allowed formal admission to the facility and a transfer request would be put into effect.

NOTE: While DSHS will continue to pay for a DSHS member during this 30 day period, the process does not prohibit or preclude a DSHS member from seeking a different nursing facility to care for their needs. In that event, standard operating procedures governing admissions and discharges would apply.

** This model should be reviewed by other payers for acceptance.*

## VII. Payment for Services and Assistance

A. All parties agree upon working to secure payments for emergency services and support amongst themselves (as detailed in Sections IV and VI). If there are any disputes, see XIII for Mediation and Arbitration approaches.
B. All processes will be consistent for reimbursement of vendors that are supporting the LTC-MAP during a disaster.

## VIII. Term and Termination

A. This LTC-MAP is effective upon execution by two or more Participating Healthcare Facilities.
B. A Participating Healthcare Facility opting to terminate its participation in this LTC-MAP, shall provide written termination notification to the Preparedness Director at Public Health - Seattle & King County, [redacted], Phone at [redacted] or by Fax at [redacted] Notice of termination becomes effective 60-days following receipt by Public Health -

Seattle & King County who shall, in turn, notify all Participating Agencies / Healthcare Facilities. Any terminating Participating Healthcare Facility shall remain liable for all obligations incurred during its period of participation, until the obligation is satisfied.

## IX. Independent Contractor

Each party is an independent contractor with respect to the other parties of this MOU. Neither party is authorized or permitted to act or to claim to be acting as an agent or employee of the other party. Nothing in this Agreement alters in any way control of the management, assets or affairs of either party. Neither party by virtue of this Agreement assumes any liability for any debts or obligations of any kind incurred by the other party to this Agreement. Nothing in this Agreement shall be construed as limiting the rights of either party to contract with any other facility on a limited or general basis.

## X. Loans of Equipment

Use of equipment, such as construction equipment, road barricades, vehicles, and tools, shall be at the Donor Facility's current equipment rate, or if no written rates have been established, as mutually agreed between recipient facility and Donor Facility. Equipment and tool loans are subject to the following conditions:

A. At the option of the Donor Facility, loaned equipment may be loaned with an operator. See XII for terms and conditions applicable to use of borrowed staff.

B. Loaned equipment shall be returned to the Donor Facility upon release by the recipient facility, or immediately upon the recipient facility's receipt of an oral or written notice from the Donor Facility for the return of the equipment. When notified to return equipment to a Donor Facility, the recipient facility shall make every effort to return the equipment to the Donor Facility's possession within 24 hours following notification.

C. Recipient facility shall, at its own expense, supply all fuel, lubrication and maintenance for loaned equipment. The recipient facility takes proper precaution in its operation, storage and maintenance of Donor's equipment. Equipment shall be used only by properly trained and supervised operators. Recipient facility takes responsibility to assure users are properly trained in the use of any equipment or supplies. Donor Facility shall endeavor to provide equipment in good working order. All equipment is provided "as is", with no representations or warranties as to its fitness for particular purpose.

D. Donor Facility's cost related to the transportation, handling, and loading/unloading of equipment shall be chargeable to the recipient facility (if the Donor Facility request reimbursement for materials and expenses.) Donor Facility shall provide copies of invoices for such charges where provided by outside sources and shall provide hourly accounting of charges for Donor Facility's employees who perform such services.

E. In the event loaned equipment is lost or damaged while being dispatched to recipient facility, or while in the custody and use of the recipient facility, or while being returned to the Donor Facility, recipient facility shall reimburse

the Donor Facility for the reasonable cost of repairing said damaged equipment. If the equipment cannot be repaired within a time period indicated by the Donor Facility, then recipient facility shall reimburse Donor for the cost of replacing such equipment with equipment, which is of equal condition and capability. Any determinations of what constitutes "equal condition and capability" shall be at the discretion of the Donor Facility. If Donor Facility must lease or rent a piece of equipment while the Donor Facility's equipment is being repaired or replaced, recipient facility shall reimburse Donor for such costs. Recipient facility shall have the right of subrogation for all claims against persons other than parties to this LTC-MAP who may be responsible in whole or in part for damage to the equipment. Recipient facility shall not be liable for damage caused by the sole negligence of Donor Facility's operator(s).

## XI. Exchange of Materials and Supplies

If the Donor Facility requests reimbursement for materials and expenses, the recipient facility shall reimburse Donor Facility in kind or at Donor Facility's actual replacement cost, plus handling charges, for use of partially consumed or non-returnable materials and supplies, as mutually agreed between recipient facility and Donor Facility. Other reusable materials and supplies which are returned to Donor in clean, damage-free condition shall not be charged to the recipient facility and no rental fee is charged. Donor Facility shall determine whether items returned are "clean and damage-free" and items shall be treated as partially consumed or non-returnable materials and supplies if item is found to be damaged.

## XII. Loans of Staff

If the Donor Facility requests reimbursement for salaries and expenses, the recipient facility shall reimburse the Donor Facility appropriately. Donor Facility may, at its option, make such employees, as are willing to participate, available to recipient facility at recipient facility's expense equal to Donor Facility's full cost, including employee's salary or hourly wages, call back or overtime costs, benefits and overhead, and consistent with Donor Facility's personnel union contracts, if any, or other conditions of employment. Costs to feed and house loaned staff, if necessary, shall be chargeable to and paid by the recipient facility. The recipient facility is responsible for assuring such arrangements as may be necessary to provide for the safety, housing, meals, and transportation to and from job sites/housing sites (if necessary) for loaned staff. The Participating Healthcare Facility's Emergency Contacts or their designees shall develop planning details associated with being a recipient facility or Donor Facility under the terms of this LTC-MAP Agreement. Donor Facility staff providing Emergency Assistance shall be under the operational control of the command structure of the recipient facility. Donor Facility shall not be liable for cessation or slowdown of work if Donor Facility's employees decline or are reluctant to perform any assigned tasks if said employees judge such task to be unsafe.

## XIII. Limitation of Liability and Disputes

A. DELAY/FAILURE TO RESPOND. No Participating Healthcare Facility shall be liable to another Participating Healthcare Facility for, or be considered to be in breach of or default under this LTC-MAP Agreement on account of any delay in or failure to perform any obligation under this LTC-MAP

Agreement, except to make payment as specified in this LTC-MAP Agreement.

B. MEDIATION AND ARBITRATION. If a dispute arises out of delay or failure to make payment, and if said dispute cannot be settled through direct discussions, the parties agree to first endeavor to settle the dispute in an amicable manner by mediation. Thereafter, any unresolved controversy or claim arising out of or relating to this Agreement, or breach thereof, may be settled by arbitration, if they agree to do so, and judgment upon the award rendered by the arbitrator may be entered in any court having jurisdiction thereof. The parties to this Contract may seek to resolve disputes pursuant to mediation or arbitration, but are not required to do so.

## XIV. Worker's Compensation and Employee Claims

Each party's employees, officers or agents, made available to a recipient facility, shall remain the general employee, officer or agents of such party while engaged in carrying out duties, functions or activities pursuant to this LTC-MAP Agreement, and such party shall remain fully responsible as employer for all taxes, assessments, fees, premiums, wages, withholdings, workers' compensation and other direct and indirect compensation, benefits, and related obligations with respect to its own employees. Likewise, each party shall provide worker's compensation in compliance with statutory requirements of the state of residency.

## XV. Modifications

No provision of this LTC-MAP Agreement may be modified, altered, or rescinded by any individual Participating Healthcare Facility without two-thirds affirmative concurrence of the Participating Healthcare Facilities. Public Health - Seattle & King County is the coordinating body for facilitating modifications of this LTC-MAP Agreement. Modifications to this LTC-MAP Agreement must be in writing and becomes effective upon approval of the modification by a unanimous affirmative vote of the Participating Healthcare Facilities. Modifications must be signed by an authorized representative of each Participating Healthcare Facility.

## XVI. Non-Exclusiveness and Prior Agreements

This Agreement shall not supersede any existing mutual aid agreement, transfer agreements or any other agreements between two or more Participating Healthcare Facilities, and as to assistance requested by a party to such mutual agreement within the scope of the mutual aid agreement, such assistance shall be governed by the terms of the mutual aid agreement and not by this LTC-MAP Agreement.

## XVII. Governmental Authority and Law

This Agreement is subject to laws, rules, regulations, orders, and other requirements, now or hereafter in effect, of all governmental authorities having jurisdiction over the emergencies covered by this LTC-MAP Agreement, the Participating Healthcare Facility or either of them. This LTC-MAP Agreement shall be interpreted, construed, and enforced in accordance with the laws of Washington State.

## XVIII. No Dedication of Facilities

No undertaking by one Participating Healthcare Facility to the other Participating Healthcare Facilities under any provision of this LTC-MAP Agreement shall constitute a dedication of the facilities or assets of such Participating Healthcare Facility, or any portion thereof, to the public or to the other Participating Healthcare Facility. Nothing in this LTC-MAP Agreement shall be construed to give a Participating Healthcare Facility any right of ownership, possession, use or control of the facilities or assets of the other Participating Healthcare Facility.

## XIX. No Partnership

This LTC-MAP Agreement shall not be interpreted or construed to create an association, joint venture or partnership among the Participating Healthcare Facilities or to impose any partnership obligation or liability upon any Participating Healthcare Facility. Further, no Participating Healthcare Facility shall have any undertaking for or on behalf of, or to act as or be an agent or representative of, or to otherwise bind any other Participating Healthcare Facility.

## XX. No Third Party Beneficiary

Nothing in this LTC-MAP Agreement shall be construed to create any rights in or duties to any Third Party, nor any liability to or standard of care with reference to any Third Party. This Agreement shall not confer any right, or remedy upon any person other than the Participating Healthcare Facilities. This LTC-MAP Agreement shall not release or discharge any obligation or liability of any Third Party to any Participating Healthcare Facilities.

## XXI. Entire Agreement

This Agreement constitutes the entire agreement amongst the Participating Healthcare Facilities.

## XXII. Successors and Assigns

This LTC-MAP Agreement is not transferable or assignable, in whole or in part, and any Participating Healthcare Facility may terminate its participation in this LTC-MAP Agreement subject to XVI.

## XXIII. Venue

Any action which may arise out of this LTC-MAP Agreement shall be brought in Washington State and King County.

## XXIV. Waiver of Rights

Any waiver at any time by any Participating Healthcare Facilities of its rights with respect to a default under this LTC-MAP Agreement, or with respect to any other matter arising in connection with this Agreement, shall not constitute or be deemed a waiver with respect to any subsequent default or other matter arising in connection with this Agreement. Any delay short of the statutory period of limitations, in asserting or enforcing any right, shall not constitute or be deemed a waiver.

**XXV. Invalid Provision**

The invalidity or unenforceability of any provisions hereof, and this LTC-MAP Agreement shall be construed in all respects as if such invalid or unenforceable provisions were omitted.

**XXVI. Notices**

Any notice, demand, information, report, or item otherwise required, authorized, or provided for in this LTC-MAP Agreement shall be conveyed and facilitated by the Public Health - Seattle & King County, [redacted] Phone at [redacted] or by Fax at [redacted] Such notices, given in writing, and shall be deemed properly given if (i) delivered personally, (ii) transmitted and received by telephone facsimile device and confirmed by telephone, or (iii) sent by United States Mail, postage prepaid.

**The document will be reconfirmed annually and be maintained at <u>Public Health - Seattle & King County</u> offices.**

**King County Memorandum of Understanding**
**Long Term Care Mutual Aid Plan (LTC-MAP)**

*This Memorandum of Understanding (MOU) is effective on [redacted] by and among signatory healthcare facilities, the designated representatives of which have signed hereto.*

It is understood that ***this MOU is not a legally binding document***, but rather signifies the belief and commitment of the signatory healthcare facilities that in the event of a single facility, multiple facility and/or a region-wide disaster, the medical needs of the community will be best met if they cooperate and coordinate their response efforts.

This MOU and any attached exhibits constitute the entire MOU between the signatory healthcare facilities. Amendments to this MOU must be in writing and signed by participating healthcare facilities. A signatory healthcare facility may at anytime terminate its participation in the MOU by providing sixty-day written notice to the lead administrative agency for the LTC-MAP.

[redacted]

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| _____ | _____ |
| Signature | Date |
| _____ | _____ |
| Name (Printed) | Title |

**Multicounty MOU**
**MEMORANDUM OF UNDERSTANDING**

Your organization provides the ability for a Region 6 / King County long term care facility to safely evacuate this special care population out of the region in a disaster.

The intent of this agreement is for your organization to agree to accept these patients from the Disaster Struck health care facilities as requested when the long term care facilities within King County are unable to provide appropriate levels of care for these patients.

You agree to the language and content of this Long Term Care Mutual Aid Plan (LTC-MAP) and its terms to support the transfer/evacuation of these patients to your member facilities.

It is important that you maintain an updated 24/7 contact number within this LTC-MAP.

Name of County / Agency / Organization [PRINT]: _____

Name of Person Representing this County / Region / Organization: [PRINT]:

Name: _____

Signature: _____

Date: _____

24/7 Contact Name and Phone Number [PRINT]:

_____

# ATTACHMENT A

**AGGREGATE PATIENT CATEGORIES OF CARE**

**FACILITY INFORMATION**

- **ADDRESSES AND PHONE NUMBERS**
- **PATIENT CATEGORIES OF CARE**
- **BEDS & SURGE CAPACITY NUMBERS**
- **STOP OVER POINTS**
- **TRANSPORTATION RESOURCES**
- **EVACUATION SITES (HEALTHCARE FACILITIES)**

(Currently on Website)

[redacted]

# ATTACHMENT B: CONTACTS

**CONTACTS**

- **EMERGENCY ACTIVATION PHONE NUMBERS**
- **FACILITY EMERGENCY CONTACTS (Currently on Website [redacted]**
- **LOCAL AND COUNTY PHONE NUMBERS**

## ATTACHMENT B: CONTACTS

## EMERGENCY PHONE NUMBERS FOR PLAN ACTIVATION AND STATE RESOURCES

### For Any Potentially Life Threatening Emergency, Contact 9-1-1

| Main Office/Region | Primary Phone | Alternate Phone |
|---|---|---|
| Hospital Control – [redacted] (Primary) | [redacted] | [redacted] (Charge Nurse) |
| Hospital Control – [redacted] (Back-up) | [redacted] | |
| Public Health Duty Officer | [redacted] (activation mode for Health & Medical Area Command) | |
| Washington State Emergency Management Division (EMD) and Emergency Operations Center (EOC) | [redacted] or [redacted] for 24/7 emergency phone numbers | [redacted] for State EOC, if active |
| Washington State Department of Health | [redacted] or [redacted] (24/7 DoH Duty Officer) | |
| Western Washington Medical Services Communications Team (A.R.E.S. Medical Services Teams) | Text or Numeric Page: [redacted] (USA Mobility) | |

# ATTACHMENT B: CONTACTS

- **FACILITY EMERGENCY CONTACTS**

(Currently on Website)

[redacted]

# ATTACHMENT B: CONTACTS (INCOMPLETE AS OF 1.28.10)

## LOCAL AND COUNTY EMERGENCY CONTACTS

**CITY OF AUBURN**

UPDATED 9/17/08

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | [redacted] | [redacted] | [redacted] | | | [redacted] | [redacted] | [redacted] |
| SECONDARY | [redacted] | [redacted] | [redacted] | | | [redacted] | [redacted] | [redacted] |
| TERTIARY | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | [redacted] |
| EMERGENCY OPERATIONS | | [redacted] | | | [redacted] | | | |
| ValleyComm/ 24-7 | | [redacted] | | | | | | |
| 800 MHz PRIMARY TALKGROUP = [redacted] | | | | | VHF/HAM: [redacted] | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | | | | | | |

**CITY OF BELLEVUE**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| SECONDARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| TERTIARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| ECC/EOC / 24-7 | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | | | | | | |

# ATTACHMENT B: LOCAL & COUNTY EMERGENCY CONTACTS (Cont.)

**CITY OF BOTHELL**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | | | | | | | | |
| SECONDARY | | | | | | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC | | | | | | | | |
| ValleyComm /24-7 | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

**CITY OF BURIEN**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | |
| SECONDARY | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | |
| TERTIARY | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | |
| ECC/EOC | | [redacted] | | | | | | |
| ValleyComm /24-7 | | [redacted] | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

**CITY OF DES MOINES**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | | | | | | | | |
| SECONDARY | | | | | | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC | | | | | | | | |
| ValleyComm /24-7 | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

# ATTACHMENT B: LOCAL & COUNTY EMERGENCY CONTACTS (Cont.)

As of: 9/11/08

**CITY OF ENUMCLAW**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | | |
| SECONDARY | [redacted] | [redacted] | [redacted] | | | | | |
| TERTIARY | [redacted] | [redacted] | [redacted] | | | | | |
| ECC/EOC | | [redacted] | | [redacted] | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: [redacted] | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

**CITY OF FEDERAL WAY**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | |
| SECONDARY | [redacted] | [redacted] | [redacted] | | [redacted] | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC | | [redacted] | | | | | | |
| ValleyComm / 24-7 | | [redacted] | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: [redacted] | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

**CITY OF ISSAQUAH**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | [redacted] | [redacted] | [redacted] | [redacted] | | [redacted] | | |
| SECONDARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| TERTIARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| ECC/EOC | | [redacted] | | | | | | |
| Police Dispatch / 24-7 | | [redacted] | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | | | | | | |

# ATTACHMENT B: LOCAL & COUNTY EMERGENCY CONTACTS (Cont.)

**CITY OF KENT**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | | | | | | | | |
| SECONDARY | | | | | | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC | | | | | | | | |
| ValleyComm /24-7 | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

**CITY OF KIRKLAND**

As of: 9/11/08

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | Helen [redacted] | [redacted] | [redacted] | [redacted] | | [redacted] | | |
| SECONDARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| TERTIARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| ECC/EOC | | [redacted] | | | | | | |
| 24/7 | | [redacted] | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | | | | | | |

**MERCER ISLAND**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | | | | | | | | |
| SECONDARY | | | | | | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC | | | | | | | | |
| ValleyComm /24-7 | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

# ATTACHMENT B: LOCAL & COUNTY EMERGENCY CONTACTS (Cont.)

**CITY OF NORTH BEND**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | | | | | | | | |
| SECONDARY | | | | | | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC | | | | | | | | |
| ValleyComm /24-7 | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

**CITY OF REDMOND**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | [redacted] | [redacted] | [redacted] | [redacted] | | [redacted] | | |
| SECONDARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| TERTIARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| ECC/EOC | | [redacted] | [redacted] | | [redacted] | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | | | | | | |

# ATTACHMENT B: LOCAL & COUNTY EMERGENCY CONTACTS (Cont.)

**CITY OF RENTON**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
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| TERTIARY | | | | | | | | |
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| ECC/EOC | | | | | | | | |
| ALT-ECC COOR. | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | | | | | Portable sat Phone | | | |

**CITY OF SEATTLE**

As of: 9/11/08

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | | | | | | | | |
| SECONDARY | | | | | | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC - 105 5th Avenue South; Seattle 98104 | | | | | | | | |
| Staff Duty Officer / 24-7 | | | | | | | | |
| | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | | | | | | | | |

# ATTACHMENT B: LOCAL & COUNTY EMERGENCY CONTACTS (Cont.)

| CITY OF SHORELINE | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
| PRIMARY | | | | | | | | |
| SECONDARY | | | | | | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC | | | | | | | | |
| ValleyComm /24-7 | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

| CITY OF SNOQUALMIE | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
| PRIMARY | [redacted] | [redacted] | | | | [redacted] | | |
| SECONDARY | [redacted] | [redacted] | | | | [redacted] | | |
| TERTIARY | | | | | | | | |
| ECC/EOC / 24-7 | | [redacted] | | | [redacted] | [redacted] | | |
| | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | | | | | | |

| CITY OF TUKWILA | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
| PRIMARY | | | | | | | | |
| SECONDARY | | | | | | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC | | | | | | | | |
| ValleyComm /24-7 | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

# ATTACHMENT B: LOCAL & COUNTY EMERGENCY CONTACTS (Cont.)

**CITY OF VASHON**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | | | | | | | | |
| SECONDARY | | | | | | | | |
| TERTIARY | | | | | | | | |
| ECC/EOC | | | | | | | | |
| ValleyComm /24-7 | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = | | | | | VHF/HAM: | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | | | | | |

**KING COUNTY EM**

As of: 9/11/08

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | [redacted] | | | | | [redacted] | | |
| SECONDARY | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | | |
| TERTIARY | | | | | | | | |
| Duty Officer | | [redacted] | [redacted] | [redacted] | | | | |
| KC ECC | | [redacted] | | | [redacted] | [redacted] | | |
| 3511 NE 2nd St. | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP =KC EOC COMMON | | | | | VHF: Primary Secondary | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | | | | | | |

**HEALTH & MEDICAL AREA COMMAND**

| PLANNING CONTACT INFORMATION | NAME | OFFICE | CELL | PAGER | FAX | E-MAIL | NEXTEL DC# | NEXTEL PIN# |
|---|---|---|---|---|---|---|---|---|
| PRIMARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| SECONDARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| TERTIARY | [redacted] | [redacted] | [redacted] | | | [redacted] | | |
| EOC / Public Health Duty Officer / 24-7 | | [redacted] | | | | | | |
| | | | | | | | | |
| 800 MHz PRIMARY TALKGROUP = [redacted] | | | | | VHF/HAM: [redacted] | | | |
| 800 MHz SCANLIST: | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | | | |

# ATTACHMENT C
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |

# ATTACHMENT C (CONT.)
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] |
| [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | | | | | | | [redacted] | [redacted] | [redacted] | | |
| [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] |
| [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |
| [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |

# ATTACHMENT C (CONT.)
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | | [redacted] | [redacted] | [redacted] | [redacted] | | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |

# ATTACHMENT C (CONT.)
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |

# ATTACHMENT C (CONT.)
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | | | | | | | | | | | | | | | | | | [redacted] |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | [redacted] |
| [redacted] | | | | | | | | | | | | | | | | | | |

# ATTACHMENT C (CONT.)
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | [redacted] |
| [redacted] | | | | | | | | | | | | | | | | | | [redacted] |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | [redacted] |

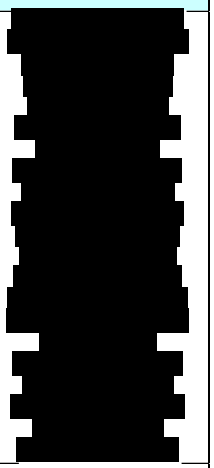
# ATTACHMENT C (CONT.)
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |

# ATTACHMENT C (CONT.)
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | | | |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |

# ATTACHMENT C (CONT.)
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | | | | | | | | | | | | | | | | | |  |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |
| [redacted] | | | | | | | | | | | | | | | | | | |

# ATTACHMENT C (CONT.)
# AGGREGATE TRANSPORT NUMBERS FROM TRANSPORTATION EVACUATION SURVEY

| **Organization Name, City** | **Region (5 or 6)** | Total Number of Residents | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Bariatric** Residents (included in overall Total) | ALS Transport (Paramedic) | BLS Transport (EMT) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Total # of **Discharge Home** Residents (included in overall Total) | Wheelchair Accessible Vehicle | Normal (bus, etc.) | | Special Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |
| [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | | [redacted] | [redacted] | [redacted] | | [redacted] | [redacted] | [redacted] | | |

# ATTACHMENT D:

## AGGREGATE FACILITY-SPECIFIC EQUIPMENT AND SUPPLIES

(Currently on Website)

[redacted]

# ATTACHMENT D:

# INDIVIDUAL FACILITY EQUIPMENT AND SUPPLIES

# EQUIPMENT AND SUPPLIES

(Currently on Website)

[redacted]

# ATTACHMENT D:

# VENDOR LISTS

(Currently on Website)

[redacted]

# ATTACHMENT E

# FORMS

# (see attachment)

- **Resident Evacuation Tracking Form / Tag**
- **Patient / Medical Record and Equipment Tracking Sheet**
- **Controlled Substance Receiving Log**
- **Influx of Patients Log (completed as patients enter the facility)**
- **Health & Medical Area Command & Disaster Struck Facility Patient Tracking Spreadsheet (Aggregate)**

# ATTACHMENT F

# VENDOR MEMORANDUM OF AGREEMENT

The Region 6 (King County) Long Term Care Mutual Aid Plan (hereafter "LTC-MAP") and _____ (hereafter "Supporting Vendor") agree to provide support to one another in a local and regional disaster and in times of normalcy.

**WHEREAS**, the LTC-MAP Members have expressed a mutual interest in the establishment of an Agreement with Supporting Vendor to facilitate and encourage Emergency Assistance during a local or regional disaster; and

**WHEREAS**, in the event of a disaster, an LTC-MAP Member may need Emergency Assistance in the form of supplemental staff, equipment, transportation, supplies or other support; and

**WHEREAS**, the Supporting Vendor agrees to provide _____ (insert products and services) to the LTC-MAP Members to enables them to continue to provide care to their patients in a disaster situation; and

**WHEREAS**, the LTC-MAP agrees to notify all Members of the willingness of the Supporting Vendor to sign on to the plan and recommit this participation annually with the Supporting Vendor and all Members; and

**WHEREAS**, each LTC-MAP Member who requests services from the Supporting Vendor will at minimum provide a verbal order followed by a written order in the form of a fax (if technology systems are functioning) and will provide subsequent payment in a timely manner once the effects of the disaster have been mitigated.

**NOW THEREFORE**, in consideration of the Agreement hereinafter set forth, the undersigned Supporting Vendor agrees as follows:

- Supporting Vendor provides needed items to health care facilities located in Region 6 / King County (see attached listing).

- The intent of this Agreement is for Supporting Vendor to agree to deliver products or services to the Disaster Struck Health Care Facilities when requested when these health care facilities are unable to obtain the needed supplies, equipment and/or transportation.

- The Supporting Vendor also agrees to deliver to any LTC-MAP member facility who calls for assistance, regardless of existing contracts. The requesting facility(ies) will fax (if possible) their request. This written request can be used at police roadblocks to help justify the need to reach the Disaster Struck Facility(ies). Payment will be made by the requesting facility(ies). This payment commitment is confirmed when the LTC-MAP members sign the LTC-MAP Memorandum of Understanding.

- It is understood by the LTC-MAP that if the Supporting Vendor is impacted by the disaster or extensive needs arise by the Supporting Vendors' existing client base due to the disaster, the Supporting Vendor is not obligated to provide goods or services and should make the Local Emergency Operations Center or King County Emergency Operations Center (for non-medical equipment and supplies) or the Health & Medical Area Command (for medical equipment & supplies) aware of the situation.

It is important that the Supporting Vendor maintain an updated 24/7 contact number within this LTC-MAP.

Name of Vendor Company [PRINT]: _____

Name of Person Representing this Vendor: [PRINT]: _____

Signature: _____

24/7 Contact Name and Phone Number [PRINT]:

_____

Decision on Signatory

[SIGNATURE]: _____

Printed Name: _____

Organization: _____

*NOTE: Potential signatories include: Private EMS, Local Municipalities, Fuel Suppliers, Pharmaceutical Suppliers, Medical Equipment Suppliers, etc.

# ATTACHMENT F

# SAMPLE STOP OVER POINT AGREEMENT / TOOLS

- **Stop Over Point Memorandum of Understanding (Sample)**
- **Stop Over Point Guide (Sample)**
- **Stop Over Point Cover Sheet (Sample)**
- **Stop Over Point Survey Tool (Sample)**

# MEMORANDUM OF AGREEMENT (SAMPLE)

# STOP OVER POINT

The below listed Participants, by affixing their signatures to this Memorandum of Agreement (MOA), agree in principle to voluntarily coordinate mutual aid service with each other in a good faith effort to maximize the ability of participants to provide patient care when the health care facility is forced into an evacuation.

_____ ("Health Care Facility")

_____ ("Stop Over Point")

## I. Scope and Applicability

The Participants agree that, in the event of a natural or unnatural disaster which precipitates an evacuation of the Health Care Facility (hereinafter "Event"), the Health Care Facility may request assistance from the Stop Over Point in allowing the Health Care Facility to convert a part of the Stop Over Point into a Temporary Medical Care location in order to provide patient care during the crisis. This MOA shall govern the Stop Over Point for activation and support. A Stop Over Point should not be in operation for greater than 3 days and will typically be in operation for a period of 2 – 8 hours.

Each Participant agrees to take all appropriate actions without regard to race, color, creed, national origin, age, sex, gender orientation, religion, or handicap to assist the Health Care Facility as necessary, and agrees to follow the guidelines set forth herein to the extent possible. There shall be no cause of action or basis of liability for breach of this MOA by either Participant against the other Participant.

This MOA is not intended to replace the Health Care Facility's Disaster Plan or to adversely affect existing transfer agreements between other health care facilities, but is intended to support those plans and agreements. Each Participant shall incorporate this MOA into its disaster plan consistent with the provisions agreed to herein.

## II. Guidelines

A. SUPPLIES AND EQUIPMENT

The Stop Over Point shall provide habitable space and other requested areas, use of existing infrastructure, and equipment as described below. It is recognized that the Long Term Care Mutual Aid Plan for Evacuation and Resources / Assets intends to provide necessary supplies and equipment to support the Stop Over Point, and that the Stop Over Point shall not be required to expend additional resources outside its normal operations to establish the Stop Over Point.

The Stop Over Point will permit the Health Care Facility to use and operate its physical facilities and equipment, including but not necessarily limited to:

Designated areas of the Stop Over Point (list):

- _____ _____

  _____ _____

- Office equipment including telephones, copy machines, computers, fax machines
- Tables, chairs, desks, cots, wheelchairs
- Refrigerators
- Other equipment, materials, or resources, including but not limited to:

  _____ _____

  _____ _____

- Other resources and materials as mutually agreed upon by Participants to be utilized during an Event are incorporated by reference in this agreement.

B. POINTS OF CONTACT

The Stop Over Point will designate two points of contact:

- An administrator who will serve as the primary point of contact and who has authority to open the building.
- A building maintenance and systems point of contact, to include or in addition to a janitorial point of contact who will work with Stop Over Point personnel to move tables, chairs, etc.

The Health Care Facility will provide a point of contact to answer any questions that the Stop Over Point may have.

| | Health Care Facility | Stop Over Point | |
|---|---|---|---|
| Contact: | _____ | _____ | _____ |
| Title: | _____ | _____ | _____ |
| Phone: | _____ | _____ | _____ |
| Alternate: | _____ | _____ | _____ |

## C. OTHER AGREEMENTS

The Stop Over Point will allow visits to the Stop Over Point by members of the Health Care Facility, the local health department, local and/or state law enforcement and Washington State Department of Social and Health Services (DSHS) for the development and maintenance of a Stop Over Point plan. The Facility understands that these visits may take place before a disaster (for advance planning purposes), and/or while the Stop Over Point is serving as a Stop Over Point.

The Stop Over Point will encourage personnel to volunteer to work at the site, or to assist in other response activities. The Health Care Facility and the Stop Over Point shall develop and provide an appropriate notice to any volunteers that provide services to the Stop Over Point indicating that their services shall neither be compensated nor covered by any general liability or workers compensations insurance coverage.

The Health Care Facility will coordinate the provision of extra support personnel, and will provide any post-event cleanup that is needed.

It is understood that the Stop Over Point will maintain and does not relinquish its flexibility to make arrangements that will minimize the disruption that serving as a Stop Over Point site could entail.

## D. COST OF SERVICES, EQUIPMENT, AND PERSONNEL.

The Health Care Facility may attempt to seek reimbursement for patient care provided during the activation and operation of the Stop Over Point pursuant to the Health Care Facility's applicable credit and collection policies, or through available public or private resources. The Health Care Facility recognizes and agrees that it shall be responsible for covering the costs required in providing the patient care, as well as covering the operational costs of the Facility. Such operational costs shall be mutually agreed upon by the Participants including, but not limited to, utilities and supplies that are used during the Stop Over Point activation and operation. The Health Care Facility shall coordinate with the Stop Over Point to ensure that appropriate property and/or casualty insurance is provided. The Health Care Facility and Stop Over Point shall further not be responsible to pay for any resources or supplies provided by a public or private entity to run the Stop Over Point, pursuant to an understanding that such resources and supplies are freely given.

Both Participants agree to help each other in providing documentation that may be necessary in seeking reimbursement for expenses from any private, state or federal payer programs, Washington State Emergency Management Division, the Federal Emergency Management Agency, or any other public or private entity. Both Participants recognize that this MOA is executed without knowing what those reimbursements may be or whether there will be any reimbursement forthcoming that precipitates the activation of this agreement.

## III. Effective Date, Future Amendment, and Construction

This MOA shall become effective on _____. The date at which it becomes active shall be determined by the Health Care Facility and DSHS through appropriate notice to the contacts determined throughout this MOA. Either Participant may terminate its participation in this MOA by giving 120 days written notice to the other Participant of its intentions to terminate.

This MOA shall be reviewed periodically to ensure that it meets the requirements of the Participants.

This MOA shall automatically terminate after three (3) years; i.e. on _____. The Participants agree to review any renewal agreements before that time and renew it if necessary.

_____ [Stop Over Point] has reviewed and approves the provisions of this agreement.

_____
Facility Chief Executive Officer/Administrator Date

_____ [Health Care Facility] has reviewed and approves the provisions of this agreement.

_____
Health Care Facility Chief Executive Officer/Administrator Date

# Stop Over Point Selection and Survey Guide

**OVERVIEW:**

This guide is designed to assist you in completing the Stop Over Point Survey to select suitable locations to be established for a slow or fast-out evacuation for an isolated, local or regional disaster. The intent is to use this site in the event the facility is:

- ① Quickly forced to the sidewalk in adverse conditions and sheltering is necessary for the patients
- ① Evacuated from the facility yet the facility should be able to reopen in a short period of time (hours instead of days)
- ① It is safer to move the patients to a Stop Over Point instead of distributing them at greater distances due to regional conditions.

Most questions will be answered with a simple "yes" or "no." Supporting information should be filled in based on questions in the Comments section, clarifications listed in this document or with Additional Information based on your observations.

**NOTE: If it is 25 degrees outside and there is snow falling – if you are forced to evacuate to the sidewalk, where can you go right away to shelter your patients?**

**I. SITE LOCATION**

- Enter the site name and other information about their location and contact information.
- Type of Facility: This will be either Public or Private.
- Type of Business/Use: This helps us to understand the reality of how long we will be able to keep the Stop Over Point operational and additional resources that can be utilized to prepare the site to accept equipment.
- Duration of Potential Use: In a disaster, how long would you be able to move operations in order to allow the Stop Over Point to function?
- Site Availability: Can the site be made available and prepared to accept people and equipment within 4 hours or greater? This is focusing on how quickly you can A) get someone there to open the facility and/or B) clear the space in order to begin bringing in the supplies.
- Is the site available 24 hours? If not, is there anything that can be done to make it available 24 hours a day – security, etc.
- Are there any other agreements in place for the use of the facility? This may include them being a Red Cross Shelter, special needs shelter or a Point of Distribution. If so, we will need to consider abandoning this site as there could be contradictory needs.

## III. FACILITY PHYSICAL CHARACTERISTICS

- Security: What is the type of security in place: Guards, electronic lockdown, cameras, etc.?

- Structural Integrity of Floors, Roofs and Walls: Are they structurally sound based on cracks, integrity issues, decrepit condition, etc.?

- Location Hazards: Town maps and facility experiences will verify flood zone information. Other dangers can be observed by an exterior tour.

- Electrical Power: For getting power to the patient care floor, this should be reviewed as to how they may have done it in the past and what mechanisms are currently in place to support outlets for the patient care floor.

- Electrical Power: In dealing with generator hook-up capability, this has proven to be an issue in many regional disasters. It can be fixed, but the question needs to be asked about if they have hooked up a generator before and/or if they are set-up to accept a generator (what size).

- Electrical Power: Additional questions may be added on such things as lighting to find out if they are not 100%, what is actually covered.

- Refrigeration: Appropriate contracts for use of refrigeration trucks or other sources may be acceptable. Detail this and ask for the written agreements.

- Fire Safety: In the comments, put in if the facility is fully sprinkled and detected. The carbon monoxide detectors are important due to trucks, ambulances and cooking under unique conditions that the facility may not have initially been designed for. May present a risk to staff and patients.

- Food Supply and Prep Area: Detail what they have currently and add additional information for what could be made available based on current capabilities.

- Laundry Service Area: How many commercial washers and dryers?

- Accessibility/Proximity to Public Transportation: We are most concerned with understanding if this facility will be obstructing other services and is the site easily accessible for staff, patients, suppliers, Emergency Medical Services and family.

- Facility Services: This should help to understand what services we could potentially receive from the site and where we will need to augment services.

- NOTES: Please attempt to get clean floor plans so that that logistics and operations can review the patient flow and supply flow for the facility. Additionally, the more pictures that can be provided, along with video footage, would be beneficial.

# Stop Over Point
# Evaluation Cover Sheet

## I. SITE LOCATION

**Site Name:** _____ **Type of Facility: Private / Public / Other:** _____

**Address:** _____ **Type of Business/Use:** _____

**City:** _____ **Duration of Potential Use:** _____

**Zip Code:** _____

**Telephone:** _____ **Fax:** _____

**Can the site be made available and prepared to accept people and equipment:**

**Within 4 hours of request?** **YES** ☐ **NO** ☐

**> 4 hours of request?** **YES** ☐ **NO** ☐

**Total Estimated Amount of Time:** _____

**Is the site available 24 hours?** **YES** ☐ **NO** ☐

**Can the map be posted on the web, if necessary?** **YES** ☐ **NO** ☐

**Is the site familiar to the local population?** **YES** ☐ **NO** ☐

**Are there any other agreements in place for use of the facility in an emergency (ie: Shelter, POD)?** **YES** ☐ **NO** ☐

## II. CONTACT INFORMATION

| | Primary Contact: | Secondary Contact: |
|---|---|---|
| **Name:** | _____ | _____ |
| **Position:** | _____ | _____ |
| **Phone Number:** | _____ | _____ |
| **Cell Phone:** | _____ | _____ |
| **E-mail Addresses:** | _____ | _____ |

**Can the contact person be contacted after hours and on holidays?**

**YES** ☐ **NO** ☐ **YES** ☐ **NO** ☐

**If yes, what is the best way to contact the each person after hours and on holidays?**

_____ _____

# Stop Over Point
# Survey Tool

| BUILDING INFRASTRUCTURE | | Comments | Additional Information / Notes |
|---|---|---|---|
| **Building & Perimeter Security**:<br>-To monitor patient traffic<br>-To control ingress/egress<br>-To secure perimeter | <br>Yes □ No □<br>Yes □ No □<br>Yes □ No □ | Type of Security: _____ | |
| **Doors**:<br>-Minimum 33" for gurney<br>-Entry and internal doors ADA compliant | Yes □ No □<br>Yes □ No □ | One external entry way and one to enter bedding area. | |
| **Floors**:<br>-Tile or other hard cleanable surface in patient care area<br>-Condition: Structurally Sound | Yes □ No □<br>Yes □ No □ | | |
| **Roof**:<br>-Condition: Structurally Sound | Yes □ No □ | | |
| **Walls**:<br>-Condition: Structurally Sound | Yes □ No □ | | |
| **Location Hazards**:<br>-Flood Zone (building or access routes to the building)<br>-Danger from falling trees or projectiles (stone ballast roof) in high wind conditions | Yes □ No □<br>Yes □ No □ | | |

| BUILDING INFRASTRUCTURE | | Comments | Additional Information / Notes |
|---|---|---|---|
| | | | |
| **Loading/Unloading Area**:<br>-Supply delivery area able to accommodate semis or box trucks?<br>-Do you have a loading area?<br>-Is forklift, pallet jack & operator available?<br><br>**Parking**:<br>-Is parking available?<br>-Adjacent lots available?<br>-Is the parking area lit?<br>-Alternate parking capabilities<br><br>**TOILETS/SHOWERS**:<br>**Men's Room**:<br>Total number of:<br>-Toilets/urinal (ADA)<br>**-**Showers (ADA)<br><br>**Women's Room:**<br>Total number of:<br>-Toilets (ADA)<br>-Showers (ADA)<br><br>-Are bathrooms/showers accessible without using stairs?<br>-Are men's & women's bathrooms separate from each other? | Yes □ No □<br>Yes □ No □<br>Yes □ No □<br><br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br><br>Yes □ No □<br><br>Yes □ No □<br><br>Yes □ No □<br><br>Yes □ No □ | Number of spaces: _____<br>Number of spaces: _____<br><br>Distance? _____ Comments: _____<br><br># of Toilets/Urinals: _____<br># of Showers: _____<br><br># of Toilets/Urinals: _____<br># of Showers: _____ | For a school, # if school is out: _____ |

| BUILDING INFRASTRUCTURE | | Comments | Additional Information / Notes |
|---|---|---|---|
| **UTILITIES:**<br><br>**Mechanical Ventilation**:<br>-What is the maximum occupancy for the building in routine use?<br>-Does the air handling system handle that capacity?<br>-Is the building air conditioned?<br>-Availability of industrial fans?<br><br>-**Electrical Power:**<br>**-**Size of Service?<br>-Do you have back-up power (generator)?<br>-Does the back-up power system support:<br>A) HVAC<br>B) Hot Water Heaters<br>C) 100% Lighting<br>D) Food Service Areas<br>E) Elevators<br>-Wired appropriately to hook-up trailer mounted generators?<br><br>**Water:**<br>**-**Hot/cold running water available<br>-Potable water (city dependent or not)<br><br>**Refrigeration**:<br>-Do you have refrigeration?<br>-Temperature controlled<br>**-**Do you have a separate refrigerator for pharmaceuticals? | Yes □ No □<br>Yes □ No □<br>Yes □ No □<br><br>Yes □ No □<br><br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br><br>Yes □ No □<br>Yes □ No □<br><br>Yes □ No □<br>Yes □ No □<br>Yes □ No □ | Standard Occupancy: _____<br>Building Maximum Occupancy: _____<br><br>AMPS: _____<br>Type of fuel required (gen): _____<br><br>Availability of Outlets: Good / Average / Poor (ability to get power to the patient floor)<br><br>Typical on-site storage quantity:<br>_____<br><br>Type & Size:<br>_____ | |

| BUILDING INFRASTRUCTURE | | Comments | Additional Information / Notes |
|---|---|---|---|
| **Lighting:**<br>Dimmer switch in sleeping area?<br>Is sufficient lighting available?<br><br>**Fire Safety**:<br>-Does facility have sprinklers?<br>-Does facility have fire alarms?<br>-Does facility have smoke detectors?<br>-Does facility have carbon monoxide detectors (exhaust issues)? | <br>Yes □ No □<br>Yes □ No □<br><br><br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □ | Auxiliary lighting can be brought in to supplement internal and external needs with FD approval. | |
| **TOTAL SPACE & LAYOUT:**<br><br>**Auxiliary Rooms/Space:**<br>Are there rooms that could be considered appropriate for:<br>**-**Chapel/Family Counseling<br>-Common Area / Family rest area<br>-Waiting area<br>-Incident Command/Communications<br>-Security Office<br>-Medical / Pharmacy / Storage Area<br>-Equipment / Supply Area<br><br>**Open bedding area:**<br>-What is the square footage of open space?<br><br>**Secured Areas:**<br>-Are there areas that can be locked down and secured? | <br><br><br><br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br><br><br><br><br>Yes □ No □ | Please provide square footage for each separate room and of all open space.<br><br>Total Square Footage: _____<br>Individual Room Square Footage (list below):<br><br><br><br><br><br><br><br><br><br>Open Area Square Footage: _____<br><br><br>Square Footage of those spaces: _____<br><br>_____ | |

| BUILDING INFRASTRUCTURE | | Comments | Additional Information / Notes |
|---|---|---|---|
| **Floor Layout:**<br>-Are the open areas at grade level?<br>-If not, are there elevators available for other floors?<br><br>**Staff Break Area:**<br>**-**Quiet and isolated in secured area<br>-Staff bathrooms<br>-Staff sleeping area<br>-Staff showers<br><br>**Food Supply and Prep Area:**<br>-Full commercial kitchen<br>-Warming kitchen<br>-Partial kitchen<br>**-**Walk-in refrigerator/freezer<br><br>**Laundry Services Area:**<br>Commercial Washers/Dryers? | Yes □ No □<br>Yes □ No □<br><br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br><br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □<br><br>Yes □ No □ | Is there a Cafeteria: Yes / No<br>How many people can it hold: _____ | |
| **COMMUNICATIONS:**<br><br>**Phones:**<br>-Analog phone lines?<br>-Digital phone lines?<br>and ports available per room/area.<br>-Fax availability<br>-Cell phone friendly with no interference or signal shielding which could affect connectivity. | Yes □ No □<br>Yes □ No □<br><br>Yes □ No □<br>Yes □ No □ | How many: _____<br>How many: _____ Ports per room: _____<br><br>Carriers (if known): _____ | |

| BUILDING INFRASTRUCTURE | | Comments | Additional Information / Notes |
|---|---|---|---|
| **Two-way Radio/800 mhz/Ham Radio**:<br>-No interference or signal shielding which could affect transmissions?<br>Is there a room with an antenna feed?<br><br>**IT and Internet Access:**<br>-Is it wired for internet access and IT?<br><br>-Capacity to add additional ports as needed.<br>-Wireless friendly with no interference or signal shielding which could affect connectivity.<br>-Wired for CAT 5 or above? | Yes □ No □<br>Yes □ No □<br><br>Yes □ No □<br><br>Yes □ No □<br><br>Yes □ No □<br><br>Yes □ No □ | Number of Ports Available: _____ | |
| **OTHER SERVICES:**<br><br>**Accessibility/Proximity to Public Transportation:**<br>-Located on/near Public Transportation<br>-Located on/near congested roadway?<br>-Located on/near Interstate Highway<br>-Will the location interfere with Fire, Police or EMS response<br><br>**Proximity to an area hospital:**<br><br>**Proximity to an area shelter:** | Yes □ No □<br>Yes □ No □<br>Yes □ No □<br>Yes □ No □ | Driving Time: _____<br>Facility/Facilities Name: _____<br><br>Driving Time: _____<br>Facility Name: _____ | |

**FACILITIES SERVICES:**

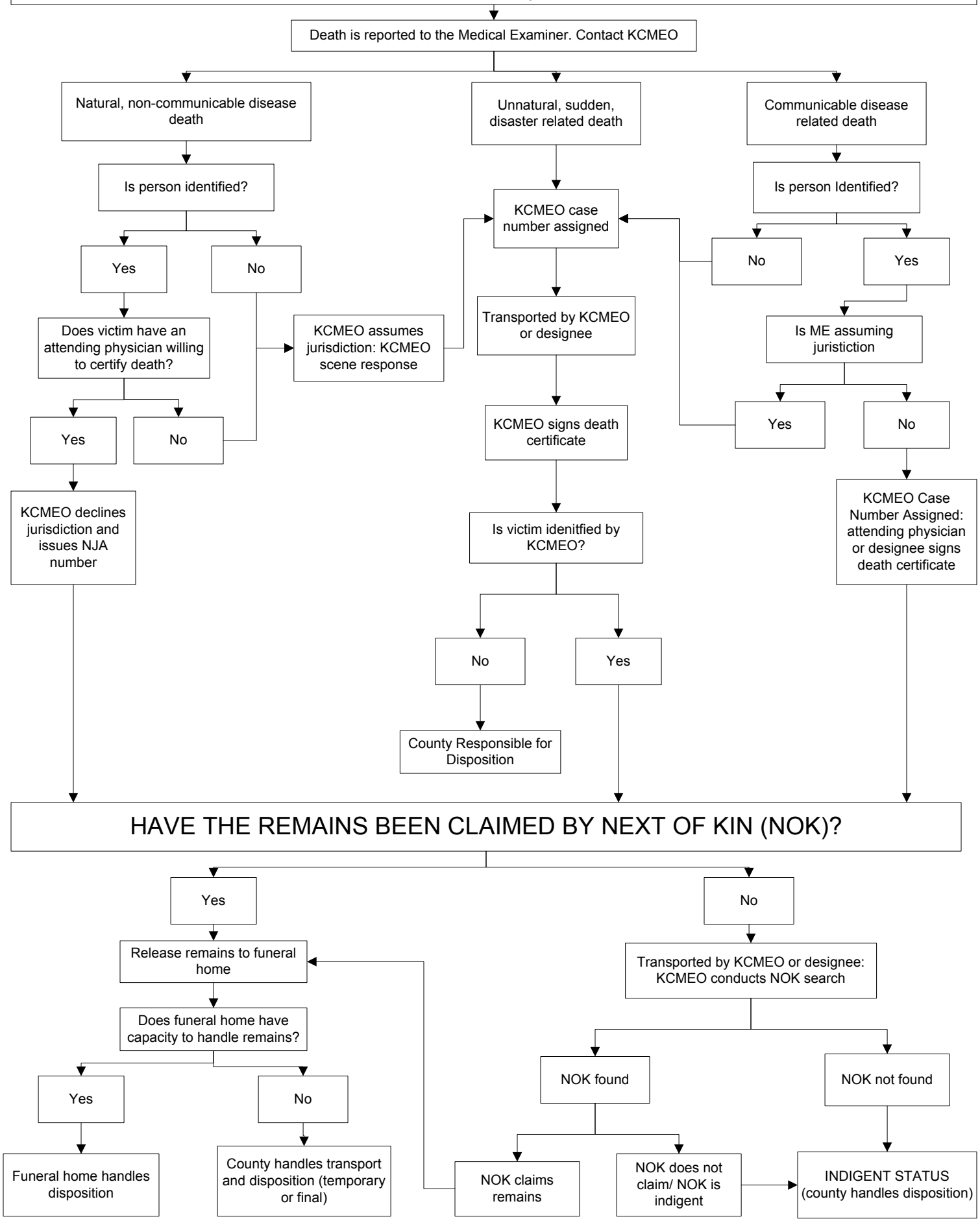
During operations, can the facility provide these services or do so with outside vendors . . .

| | | |
|---|---|---|
| Bio-waste Removal | Yes ☐ | No ☐ |
| Janitorial Services | Yes ☐ | No ☐ |
| Food Service | Yes ☐ | No ☐ |
| Restroom Maintenance | Yes ☐ | No ☐ |
| Security | Yes ☐ | No ☐ |
| Laundry Services | Yes ☐ | No ☐ |

NOTE 1: Agreements with vendors must be in place for any service not provided by the facility.
NOTE 2: A building survey should take place to verify the safety & integrity of the structure by an appropriate Building Inspector or Town Engineer.

***Attach Facility Layout and Flow Plan: If Accepted as a Stop Over Point, Create and Attach Facility Map for Pre-established Location of Services. Include Digital Pictures and any Video of the Site**

# Mass Fatality Management - Deaths Occurring Out of a Healthcare Facility



## Catastrophic Fatality Management: Guidelines for Cities

The following information is meant to assist Cities in preparing for a catastrophic mass fatality incident when KCMEO[1] staff members may not be able to retrieve decedents due to downed infrastructure or an overwhelming number of fatalities. By reviewing this document and taking the suggested steps, Cities can prepare themselves for those instances when they will be expected to manage fatalities until relief is available.

### Definitions

Reporting Death: The process of notifying the King County Medical Examiner's Office (KCMEO) regarding a death and providing specific information as to the circumstances surrounding the death. KCMEO must be informed of all deaths required by law to be reported
Assuming Jurisdiction of a Death: The KCMEO will triage all reported deaths and determine if it will assume jurisdiction. Assuming jurisdiction means KCMEO will conduct an investigation into the cause and manner of death.
Investigating Death: Investigation is done by the KCMEO to determine the circumstances surrounding the death.
Certification of Death: The official determination of cause and manner of death. This is determined by the pathologist after autopsy or by a medical provider responsible for the care of an individual prior to death.

### Reporting and Certifying Death

#### *Reporting Deaths to the King County Medical Examiner's Office*

The role of the KCMEO is to investigate sudden unexpected, violent, suspicious or unnatural deaths. In any emergency or disaster, deaths that result from the incident, or occurred during an incident are potentially unnatural deaths and therefore are within the legal jurisdiction of the King County Medical Examiner's Office, and should be reported to the KCMEO as soon as is practically possible. At the time the death is reported the KCMEO will determine whether it will assume jurisdiction of the death.

- Examples:
  - During an earthquake, if someone dies as a result of a structural collapse, the KCMEO will take jurisdiction over the death.
  - All influenza deaths should be reported to the KCMEO unless otherwise notified by Public Health.

Reportable Deaths

Per RCW 68.50.010 the following types of cases must be reported to the KCMEO:

- Persons who die suddenly when in apparent good health and without medical attendance within thirty-six hours preceding death.
- Circumstances that indicate death was caused *in part or entirely* by unnatural or unlawful means.
- Deaths that may have resulted from complications of therapy or where equipment, medication, or other supplies were faulty.

[1] Wherever KCMEO is mentioned, it should be understood that this could also include any state, federal or other mutual aid assets that are operating under their authority.

- Suspicious circumstances.
- Unknown or obscure causes.
- Deaths caused by any violence whatsoever, whether the primary cause or any contributory factor in the death.
- Contagious disease.
- Unidentified human remains.
- Unclaimed human remains.

To report a death when telephone lines are up, call the King County Medical Examiner's Office at 206-296-4606 24 hours daily.

If communication systems are down, Cities should keep track of the fatalities until such time as they are able to report them to KCMEO via telephone. Work is currently being done to plan for scenarios when telephone reporting is not possible.

***Certification of Death***
Each death has to be legally documented and a cause and manner of death identified.

Deaths that the KCMEO Investigates:
The KCMEO is responsible for certifying deaths resulting from any type of disaster or mass fatality incident.

Deaths that the KCMEO does not Investigate:
When KCMEO declines jurisdiction on a reported death, the death should be certified by the attending medical professional [this can be done by a Physician (MD or DO), Physician's Assistant, ARNP or Chiropractor within the state of Washington, before human remains are released to the funeral home]. These deaths must still be reported to the KCMEO.
The funeral home is responsible for filing the death certificate with Public Health per county protocol.

**Planning Considerations**
***Identifying Vulnerable Populations/Concentrations of people***
Each jurisdiction should identify vulnerable populations. King County has a diverse population, with over 150 different languages spoken. Cities should consider these where populations with limited English proficiency are located to ensure that they are able to communicate information about mass fatalities if necessary. Cities should also make note of locations that could have a high concentration of people in their community: hospitals, long-term care facilities, day care facilities, schools, churches, community centers, sporting events, etc. While Public Health, including KCMEO, has responsibility for overall mass fatality planning, given the reality that there may be a time when KCMEO is unable to assist in decedent removal immediately, jurisdictions should communicate and coordinate with facilities and organizations in their community about local mass fatality planning.

***Responding to 911 calls concerning bodies/missing persons***
Immediately following a mass fatality event, prior to a regional or state call center being established, 911 will be flooded with calls concerning bodies and missing persons. These require

different responses; sample templates for both types of calls are attached. Each jurisdiction should have a plan in place to offload calls concerning bodies and unaccounted for persons from 911 operators to allow them to respond to emergency calls; Public Health is currently working on guidance to help formulate these plans.

Once a call center is established all calls concerning missing or deceased persons should be referred to the call center. Consider having a recorded message referring people to the call center for information on unaccounted for persons. Ensure that all 911 operators are aware of the importance of unaccounted for persons calls.

***In place vs. central morgue strategy***

There are two strategies for caring for human remains in the event of a disaster. Remains can be left in place to await the KCMEO, or they can be carefully documented, tagged, tracked, and placed into a central morgue location in the region to await the KCMEO. It is preferable for jurisdictions to use one method for consistent messaging, but KCMEO recognizes that some situations may necessitate a combination of both methods. However, it is important to understand that unless communications with KCMEO are completely down, you must get approval from KCMEO prior to moving bodies from the incident location.

***Body Bag Caches/Tips if no Body Bags Available***

Body bags will be strategically deployed and distributed throughout the county to facilitate emergency access. Locations will be shared with local emergency managers.

Suggested body bag specification:

- Handles – for easy lifting
- Zipper on the top of the bag – to prevent leaking
- Durable – for long term storage

If body bags are not available consider using some of the following materials to store remains:

- Plastic sheets
- Plastic bags
- Plastic Tarps
- Sheets/blankets

***Behavioral Health Considerations***

Behavioral health encompasses both mental health and spiritual care of the community. Jurisdictions should plan to support the behavioral health needs of their community as well as their staff in coordination with PHSKC and the King County Department of Community and Human Services Mental Health Division. Our ability as a region to respectfully handle the deceased will in turn support the wellbeing of the living. Cities should follow King County plans and messaging for fatality management and public messaging to provide consistent messaging. Having systems in place and coordinating with the County will help alleviate behavioral health impacts in the community and staff.

**Communications**

***Public Messaging***

How to handle remains following a disaster

Health and Medical Area Command will be responsible for public messaging concerning the handling of human remains through the internet, media, a call center, radio, press releases, and recorded messages. We encourage all communities to provide links to county messages through community resources.

KCMEO Procedures

- Please do not make any assumptions about the procedures the KCMEO may or may not take. Do not promise a specific time frame in which an examination and release of remains may occur. Do not comment on whether or not an autopsy will be required. Only the KCMEO can provide confirmed numbers of dead following a disaster.
- If families are requesting information about Medical Examiner cases, please refer them to the KCMEO. The KCMEO may or may not require additional investigation into the cause and manner of death. Each death will require a determination by the KCMEO as to the appropriate steps to take.

Cultural Considerations

When reporting deaths during a disaster, it is important to alert the KCMEO of any cultural factors. There is no guarantee that the KCMEO will be able to accommodate specific cultural practices, especially in a mass fatality situation. However, every effort will be made to respect cultural practices. The KCMEO may work with community or religious leaders to best manage the death within the appropriate traditions or customs.

Reporting Deaths – Media Issues

Individuals who work in government roles (e.g. fire fighters, police officers, city officials) are likely to be approached by the media for information on the number of decedents. In order to limit confusion, that information should only be shared with the media by Public Health. If you are approached by a member of the media, you should always direct that person to Public Health.

If you find that officials in your jurisdiction are sharing numbers with the media, please ensure that those deaths have also been reported to KCMEO. Deaths must be reported to KCMEO to be included in the official numbers; without this there could be widely divergent reports in the media, including double-counting of decedents.

***Notifications to Families***

Positive forensic identification procedures may be required to properly identify the deceased. It is the responsibility of the KCMEO to establish positive scientific identification. Following a mass casualty or mass fatality incident a Regional or State-level Family Assistance Center will be established to take inquires into the status of victims thought to be injured or deceased. The Family Assistance Center will coordinate with the KCMEO to make notifications. During an incident, the Public Health will provide information about the status of Family Assistance Center(s) or phone numbers families should call for more information.

**Death Investigation**

In general, permission must be obtained from the KCMEO before remains are removed from any incident site. There are three scenarios in which a community may be required to conduct death investigation in lieu of the KCMEO.

1. A mass fatality incident has occurred in another jurisdiction and KCMEO does not have the resources to send someone to respond to non-disaster-related deaths in other jurisdictions.
2. There is a mass fatality incident within a city but the city is isolated due to the nature of the incident (e.g. infrastructure breakdown after an earthquake).
3. There is a catastrophe throughout the region and response will be delayed region wide due to overwhelming demand and infrastructure impacts.

If any of these events occur and death investigations are necessary without KCMEO, law enforcement is the next authorized, trained and recommended interim replacement for KCMEO. KCMEO will ensure they provide clear objectives surrounding their need for law enforcement engagement in fatality recovery/death investigation. The recoveries may include victims of potentially or known criminal actions and deaths occurring due to the known catastrophe. Law enforcement should be responsible for death investigations in the interim and apply standards they would employ in any potentially criminal investigation. Victim recovery without any obvious indications of criminal activity reduces law enforcement investigation responsibilities to basic information collection surrounding the recovery. These steps will include:

- Photography: photograph the scene and the body in place, including the positioning of the body, any clothing or jewelry, any covering, relevant scene indicators (drugs, medications, etc.).
- Police Report (preferred) or Narrative: Document information surrounding the location, condition, and means of death of the victim, documentation of the person's identity (if possible), to include a description of how the body was found, the position of the body, the immediate surroundings, the circumstances of death (if known), medical history, physician contact information, name/contact of Next of Kin (if known), and any suspicious circumstances.[2]

In anticipation of law enforcement being overwhelmed, law enforcement may work with their city government in advance to train and organize people from other disciplines to follow these steps and work under a local law enforcement member assigned to lead the multidiscipline team's efforts during mass fatality incidents.

**Tracking of Human Remains**

***In place tracking/Death at home tracking***

Tagging: Fire jurisdictions have been equipped with Fatality Packets that will include tags. If these tags are not available print out tags or write information on a piece of paper, complete the outlined information, laminate them (or cover them completely with clear packing tape), and, using a zip tie, affix one tag to the ankle of the decedent and one tag to the bag or wrapping around the body.

*Tag Information*

- Tentative Identification
- Location Found (specific and address)
- Date and Time of Death ***OR*** Date and Time Found

[2] Forms are being developed to assist with this.

- Person Completing Tag
- Other

Forms: In addition to any police report and narrative completed, the Decedent Information Form should be completed for each decedent. Describe the circumstance of death, including how the body was discovered, if it was in a locked or secure location, etc. Describe in detail how the body was identified. In lieu of a KCMEO investigator on the scene, KCMEO will rely upon the police report; ensure that the following information is captured in the police report: how the body was identified and was the death attended.

If the identification of the deceased in unknown, in lieu of a name write "unknown" and the incident location where found. Do not use John or Jane Doe.

***Temporary Morgue Tracking***

Tagging/Forms: Use the procedures listed above to properly tag/track and complete the decedent information form.

Movement, Storage and Release of Human Remains:

Keep detailed records like that of a chain-of-evidence for each individual body and personal effects bag.

Ensure dates, times, persons involved and locations are recorded. A simple spreadsheet may be used to list the decedent names and/or the unique identifier, delivery date and by whom, date in and date out, removal date and by whom, personal effects accounted for, etc. Keep these records as part of the official record for the response as there may be questions by the families of decedents about the identity, correct release of bodies and loss of personal effects in such large scale events.

***Personal Effects***

Whether personal effects are left on the body or removed they should be carefully documented. If personal effects are the only thing that can assist the Medical Examiner in determining the decedent's identity they should be left on the body. Personal effects may also be used as evidence in a criminal event and may be needed for law enforcement's investigation.

Personal effects should be carefully tracked with the decedent. If personal effects are relinquished to the Next of Kin they should be thoroughly documented (be very specific) using the attached form and the receiving family member should sign for them upon receipt. Personal effects should only be released when the relationship and identification of the family member can be reliably determined, and only after the items are photographed to ensure there is no confusion as to what has been returned to the family after the fact.

**Care of Human Remains after Death**

***In place human remains care***

Individuals caring for remains at the incident locations should be aware that bodies will emit fluids after death. Human remains should be kept as cool as possible (ideally between 34-37 F degrees) to help slow postmortem changes. Remains can be placed on plastic (sheeting, garbage

bags, tarps) and covered with a cotton sheet or towel. Bodies should be kept in a secured and isolated location, as they will begin to smell after death. Human remains are not dangerous but precautions should be taken with respect to blood borne pathogens in bodily fluid.

Personal effects can remain on the body or can be removed. If removed, all personal effects should be carefully documented and stored. If removing personal effects and the decedent has any form of identification, this should be removed from his or her belongings and placed in a sealable sandwich bag for protection. The bag should be pinned or stapled to the clothing so that it is secured to the body.

After the body has been recovered and removed from site, the area where the body has been stored should be disinfected. This can be done by washing the area with a 10% bleach solution (1 part bleach to 9 parts water).

***Temporary Morgue Facility***

Human remains should be placed in fully sealed impermeable human remains pouch (disaster body bag) prior to storage or removal. The decedent's body and the pouch should be clearly tagged with the individual decedent's identifiers such as name, date of birth, social security number, where body was found etc. Complete labeling reduces the number of times mortuary staff needs to open pouches to confirm the contents.

***Human Remains Storage***

The following considerations are important when assessing your options for human remains storage:

Security: Location should be fully secured with access limited to a minimal number of approved staff. Law enforcement may be tasked with supporting security efforts until private contractors can be secured. A log should be kept of all who access the storage site, including the date, time, and reason for access.

Access: Ensure that human remains can be transported into and out of the location with ease. To the extent possible, any path traveled with a body should be devoid of stairs. Elevators on the access route should be large enough to accommodate a gurney, or similar transport equipment needs to be able to move in and out of the space. If used, refrigerated trucks/trailers will require appropriate ramps for loading and unloading.

Temperature: 34-37 F degrees is ideal for storing human remains. If this is not achievable, space should be kept as cool as possible.

Placement: Human remains should be stored on gurneys, pallets or on a non-porous floor (something that can be disinfected with a bleach solution). At no time should remains be stacked on top of each other to prevent distortion of features (which could affect identification) and to allow easier moving and lifting of remains. Thought should be given at all times to respect the decedent.

Privacy: Human remains should be stored away from public view.

Ventilation: As human remains decompose they will begin to smell. Your storage location should not be connected into a main ventilation system.

Pest Control: Human remains should be placed on palates to prevent rodent/pest problems. Other pest control measure should be taken as necessary (e.g. traps).

Location: Keep in mind that any location used for a temporary morgue site may not be able to be used again for its original purpose. Places to consider for storing human remains:

- A secured portion of a parking garage
- A conference room with air conditioning and non-porous floors
- Other secure, cool spaces

Body Bags: Consider using body bags with the following specifications

- Handles – for easy lifting
- Zipper on the top of the bag – to prevent leaking
- Durable – for long term storage

Considerations for Using Refrigerated Trucks or Trailers:
During a disaster the supply of refrigerated trucks or trailers will be severely limited and KCMEO will not be able to provide one. Please consider other forms of storage.

*Specifications for refrigerated trucks or trailers:*

- A normal 40' trailer will hold 22 pouched remains. If shelving is installed at 3-3 ½ feet off the floor the number can be doubled.
- The interior (including the floor) needs to be metal (not wood).
- Electricity and/or diesel fuel will be required to run the refrigerated unit.
  - Electric requirements: 230 volts, 3-phase, 50 amp circuit
  - Fuel: average of 50 gallons per 7 days
- Refrigerated units will require sufficient space for parking, transport and access and exchange of units.
  - Location: accommodate 40ft long by 8 ft. wide; may require tailgate lift, use of forklift or loading dock location
- Truck drivers will be required for movement and transport of the unit.
- Refrigerated units will require maintenance to maintain ongoing operations.

**Health Risks Associated with Human Remains**

As a rule, human remains do not pose a public health risk to the general population or the environment. Any viruses and bacteria that may be present in human remains do not pose a risk to someone walking nearby, nor do they cause significant environmental contamination. Per the Centers for Disease Control and Prevention (CDC) there is no direct risk of contagion or infectious disease from being near human remains for people who are not directly involved in recovery or other efforts that require handling dead bodies. This includes human remains from pandemic influenza. There are general precautions that should be taken by individuals who may directly handle human remains with regards to minimizing risk associated with blood borne pathogens or bodily fluids that could be infectious.

***Personal Protective Measures***

Handling Human Remains – Non-Pandemic Incident:

For people who must directly handle human remains there can be a risk of exposure to some viruses or bacteria (i.e. blood borne pathogens). Workers who handle human remains should follow general precautions as outlined by the Occupational Safety and Health Administration (OSHA). These include personal protective equipment such as hand protection, foot protection and eye and face protection.

Handling Human Remains – Pandemic

Workers who handle pandemic related human remains should utilize the current recommendations of the World Health Organization (WHO) for personal protective equipment when exposed to infectious agents. These include:

- Disposable, long-sleeved, cuffed gown (waterproof if possibly exposed to body fluids)
- Single-layer non-sterile ambidextrous gloves which cover the cuffs of the long sleeve gown.
- Surgical mask (a particulate respiratory mask if handling the body immediately after death)
- Waterproof shoe covers if required.
- Proper hand washing after handling human remains
- Avoid touching face and mouth with hands

Changes or updates to the guidelines concerning personal protective equipment in handing human remains will be communicated by Public Health – Seattle & King County.

**Response Staffing Structure Recommendations**

If you elect to establish a temporary morgue we suggest that you use the following to staff to run the operations. Personnel do not have to consist of law enforcement but should be pre-approved and vetted members of the community who could function in the following capacities.

Mission: Ensures that all human remains are handled, transported, and stored in an appropriate, dignified manner, consistent with policies and procedures.

Morgue Team Leader/Manager

- Ensure that human remains and associated paperwork and identification are linked via chain of custody.
- Ensure staff are consistently using recommended personal protective equipment and following all other safety and infection control guidelines
- Establish system to receive deceased patient medical records and any associated forms (e.g. death certificate), which accompany the deceased from various treatment areas.
- Follow protocol and procedures for receipt, registration, placement into disaster body bag, tagging of the body and/or body bag and storage of all human remains in a dignified manner.
- Maintain a roster/manifest of the deceased who are placed in storage.
- Ensure that necessary identification and documentation is linked to associated remains until collection by authorized mortuary personnel or the KCMEO.
- Direct how and where bodies are placed within morgue/temporary storage to maximize space utilization.

- Identify and indicate which bodies are MFI incident cases vs. day to day cases for appropriate pick up by KCMEO/Funeral Home.
- Provide KCMEO with as much information as possible regarding decedent, Next of Kin, identification, and determination of cause and manner of death (may be designated to report deaths to KCMEO).
- Notify appropriate supervisor of the number of bodies requiring collection.

Personal Effect Manager

- Maintain roster/manifest of personal effects including description, associated decedent identification information, location and when and to whom the items are handled and are released.
- Manage storage of personal effects for extended period of time.
- Coordinate with KCMEO/Health and Medical Area Command regarding personal effects if no Next of Kin are available.
- Ensure two people are documenting all property (e.g., one person counts money, then the other counts it as well to confirm).

Morgue Security Manager or Officer

- Ensure security of morgue/temporary storage by providing general surveillance of the storage location and surrounding area.
- Monitor access into and out of morgue/temporary storage to authorized personnel only.
- Maintain roster of those who enter/exit morgue/temporary storage area.

Storage Facility Maintenance Manager

- Work with Morgue Manager to identify/establish human remains storage location.
- Monitor condition of storage location to check for temperature control, maintenance and sanitation issues.
- Manages logistical requirements (e.g. access to fuel, appropriate power supply, coordinate w/drivers if refrigeration trailer used) for maintaining storage operations.

Public Health
Seattle & King County

**Instruction for using Personal Effects Tracking Form**

General Instructions

- Clearly mark the case number of the decedent on the top of each page in the space provided.
- Upon completion, fill in the page numbers and total pages on the top of each form and staple (or clip) all pages together.
- Print and print legibly so all information is clear.
- Fill in address and contact number where effects are being kept.

Cataloguing Effects

- Write out the details of each personal effect found with the remains. Use as many additional sheets as necessary, assigning sequential numbers.
- Be specific but do not make assumptions. Instead of saying the item is "a gold engagement ring with a diamond," say it is a "gold colored metal ring with a single diamond-like stone surrounded by five blue-colored stones."
- Do not list "$100 US currency," list the amount, such as "Three 20 dollar bills and four ten dollar bills US currency."
- Sign for all property, and have witness sign as well.

Releasing Effects

- List the exact details of each effect being released. It should match the description of an effect catalogued as found with the remains.
- Check the appropriate box or fill in 'other' reason
- Fill out name, organization (if applicable), address and phone numbers for person receiving released effects.
- Repeat for each person taking possession of effects
- **ALL** people receiving the effects should receive a copy of the form.

Returning Released Effects

- If law enforcement or the medical examiner is returned the effects to the organization responsible for the decedent, complete the form and add it to the file, adjusting all "page ____ of _____" and initialing the change
- **ALL** people receiving the effects should receive a copy of the form.

Routing and Filing

- All forms must be filed and retained according to the jurisdictions procedures for tracking evidence.

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**Case #**_____

**Page**_____**of**_____

**Personal Effects Tracking Form**
* Please remember to print legibly *

**Name of Decedent** _____

**Date** _____ **Time** _____ **Location** _____

**List Personal Effects found with remains** (be very specific)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____

List any additional personal effects on attached sheet.

*Name of Person Completing Form* (print) _____

*Signature* _____ Date _____

*Witness* (print) _____

*Signature* _____ Date _____

**If Personal Effects are released to anyone please complete the Personal Effects release form.**

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Seattle & King County

**Case #**_____

**Page**_____**of**_____

**Released Personal Effects**
* Please remember to print legibly *

**Name of Decedent** _____

**Date** _____ **Time** _____ **Location** _____

1. _____
2. _____
3. _____
4. _____
5. _____

List any additional personal effects released (or released to another entity) on attached sheet.

**Reason for release:** ☐ Returned to family member ☐ Taken by Law Enforcement

☐ Take by Medical Examiner ☐ Mistakenly associate with decedent

☐ Other _____

**Name of person receiving personal effects** _____

**Organization** (if applicable) _____

**Address** _____

**City** _____ **State** _____ **Zip Code** _____

**Phone Number** _____ **Alternate Phone Number** _____

***Signature*** (of person receiving property) _____Date _____

***Name of Person Completing Form*** (print) _____

***Signature*** _____ Date _____

***Witness*** (print) _____

***Signature*** _____ Date _____

Public Health
Seattle & King County

**Case #**_____

**Page**_____**of**_____

**Returned Personal Effects**

* Please remember to print legibly *

**Name of Decedent** _____

**Date** _____ **Time** _____ **Location** _____

**List personal effects that have been taken and are being returned**

1. _____
2. _____
3. _____
4. _____
5. _____

**Reason for return:** ☐ Law Enforcement completed testing

☐ Medical Examiner completed testing

☐ Other _____

**Name of person receiving returned personal effects** _____

*Signature* (of person receiving returned property) _____Date _____

*Name of Person Completing Form* (print) _____

*Signature* _____ Date _____

*Witness* (print) _____

*Signature* _____ Date _____

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Seattle & King County

**Decedent Identification Tag**

**Tentative Identification:** _____

_____

**Location Found**

**Specific:** _____

_____

_____

**Address:** _____

_____

_____

***Circle One***

Time of Death  Time Found

**Date:** _____

**Time:** _____

**Other:** _____

_____

**Person Completing:** _____

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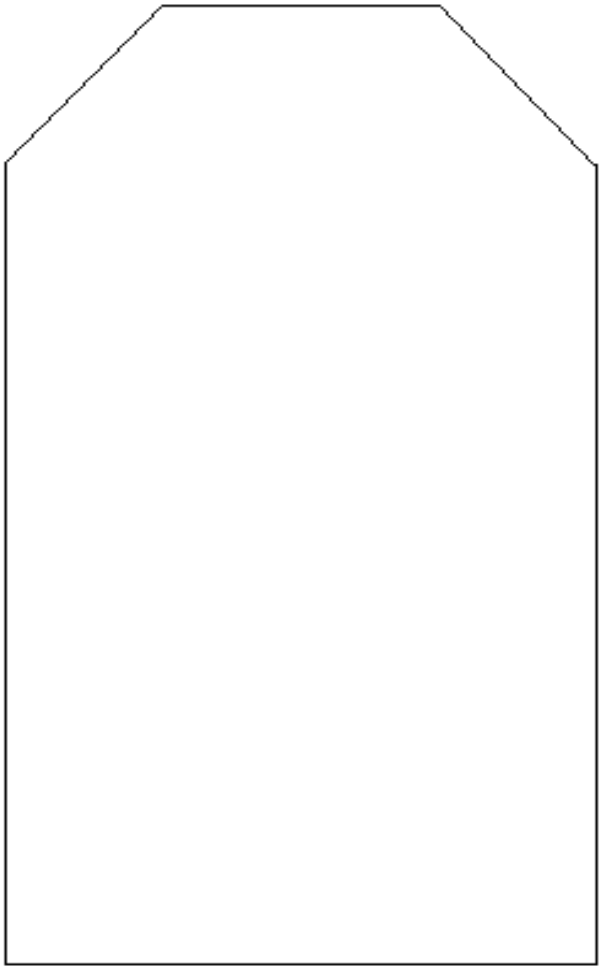
Seattle & King County



Specifications

- Water proof (or water resistant) material, with [illegible]
- Large reinforced hole to accommodate the thickness of a zip tie

Instructions

- Attach 1 tag to the ankle of the decedent with a zip tie or other fastener
- Attach 1 tag to the outside of the body bag or wrappings
- If printing on regular paper, fill out information, cover completely with clear packing tape or seal in a sandwich bag

Shoreline Comprehensive Emergency Management Plan (CEMP)
Emergency Support Function (ESF) #9
Urban Search and Rescue (USAR)

**ESF COORDINATOR:** King County Sheriff's Office/Shoreline Police Captain

**LEAD AGENCIES:** Police Department
Fire Department

**SUPPORT AGENCIES:** Emergency Operations Center
Public Works Department
Department of Planning and Community Development
Seattle Fire Department
Zone 1 Emergency Coordinator
King County Emergency Coordination Center
Washington State Emergency Management Division
Utilities (Power, Water, Gas, etc)

## Article I. Introduction

### Section 1.01 Purpose

**(a)** The purpose of this ESF #9 is to provide guidance and coordination for a variety of search & rescue operations within the City of Shoreline. Urban Search and Rescue (USAR) provides guidance for urban search and rescue operations during or following natural or manmade disasters. In addition, Search and Rescue guidance is given for lost people needing assistant from the King County Sherriff's Search and Rescue Unit.

### Section 1.02 Scope

**(a)** State law encompasses both wildland and disaster search and rescue within the definition of search and rescue, RCW 38.52.010 Section 7. The Federal government separates the two and covers wildland search and rescue in the National Search and Rescue Plan and disaster search and rescue, specifically urban search and rescue, in the National Response Framework. Search and rescue in this ESF is defined as land and/or water search and rescue including both wildland and disaster search and rescue. Urban search and rescue will be coordinated by the Shoreline Fire Department and supported by the Shoreline Police Department.

**(b)** This ESF addresses urban search and rescue operations. Operational activities include conducting physical search and rescue in collapsed buildings and structures; providing emergency medical care to trapped victims; assessment and control of gas, electricity, and hazardous materials; and evaluating and stabilizing damaged structures. Additional capabilities include trench-collapse

rescue, confined-space rescue, high-angle rescue and surface-water rescue are covered.

**Section 1.03 Situation**

**(a)** A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to field efforts to save lives and protect property.

**(b)** In situations that entail structural collapse, large numbers of people may require rescue and medical care.

**(c)** Because the mortality rate among trapped victims rises dramatically after 72 hours, US&R must be initiated without delay.

**(d)** In the course of response, rescue personnel may encounter extensive damage to the infrastructure, such as buildings, roadways, public works, communications, and utilities. Such damage can create environmental safety and health hazards, such as downed power lines, unsafe drinking water, and unrefrigerated food.

**(e)** Weather conditions such as temperature extremes, snow, rain, and high winds may pose additional hazards for emergency victims and rescue personnel.

**(f)** In some circumstances, rescue personnel may be at risk from terrorism, civil disorder, or crime.

**(g)** Facilities that survive with little or no structural damage may be rendered unusable or only partially usable because of a lack of utilities (power, water, sewer) or because staff are unable to report for duty as a result of personal injuries and/or damage/disruption of communications and transportation systems.

**Section 1.04 Assumptions**

**(a)** The resources routinely available within the affected emergency area may be inadequate to conduct comprehensive US&R.

**(b)** Many structural collapses may result from a natural disaster. They also may occur as the result of a significant manmade event.

**(c)** At the time of a public emergency, there may be structural collapses elsewhere in the Shoreline and in the Puget Sound Region. These structural collapses will draw upon the same resources (engines or other tactical and support resources) that would be needed to support US&R and other emergency operations. It must be assumed that some US&R resources will become scarce, resulting in the disaster-

related US&R operations competing for resources. Telephone communications may be interrupted.

**(d)** Fire and EMS 800-MHz radio communication may be compromised, either totally or in part.

**(e)** Access may be hampered by bridge failures, traffic, landslides, damaged road systems, air traffic restrictions, etc., making conventional travel to the incident location extremely difficult or impossible.

**(f)** Efficient and effective mutual aid among the various local, state, and federal US&R teams requires the use of ICS together with compatible US&R equipment and communications.

**(g)** Local residents, workers, and/or converging volunteers may initiate search and-rescue efforts but will usually lack specialized equipment and training

**(h)** In situations where there are significant US&R shortfalls in the area, and a Presidential Declaration of disaster or emergency has been made, WA State EMD may request federal assistance from FEMA and Federal US&R resources through a Consequence Management Team.

**(i)** Control of utilities, including Gas, Water, and Electricity, will be in collaboration

**Section 1.05 Policies**

**(a)** When available, the Personnel Accountability System will be used as an incident site US&R accountability system to track and control the movement of Fire and EMS personnel.

**(b)** All activities within ESF 9 – Urban Search and Rescue (USAR) will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

**(c)** As a signatory of the King County Regional Disaster Plan and through local mutual aid agreements, the City and Fire Department will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible.

**(d)** Mutual aid agreements exist with numerous jurisdictions and department throughout King, Pierce and Snohomish Counties. Requests for assistance will be initiated by the City Emergency Operations Center (EOC) and directed to the Zone 1

Emergency Coordinator (Zone 1 EC), King County Emergency Coordination Center (KC ECC), and Washington State Emergency Operations Center.

**(e)** The legal definition of search and rescue is as follows: Search and Rescue (SAR) means the act of searching for, rescuing or recovering by means of ground, marine or air activity any person who becomes lost, injured or killed while outdoors or as a result of a natural or manmade disaster, including instances involving searches for downed aircraft when ground personnel are used. (RCW 38.52.010[7]).

**(f)** The definition of USAR is as follows: Operational activities that include locating, extricating, and providing on-site medical treatment to victims trapped in collapsed structures. (NRF)

**(g)** The Shoreline Police Department will be the main liaison with Search and Rescue through the King County Sheriff's Office, Search and Rescue Unit. For Technical rescue as defined in Urban Search and Rescue (USAR), the Shoreline Fire Department will be the main liaison with other Fire Departments that offer that capability. If technical rescue capabilities are needed that are outside the scope of the police and fire staff on scene they will ask for the assistance of the appropriate trained staff through their respective mutual aid agreements.

**(h)** The Chief Law Enforcement Officer within the political subdivision shall be responsible for local USAR activities. Operation of USAR activities shall be in accordance with state and local operations plans adopted by the elected governing body of each local political subdivision. (RCW 38.52.400[1].

**(i)** The City's Emergency Operations Center (EOC) will coordinate direct support to all USAR and SAR activities.

**(j)** Heavy rescue operations will be a team effort of law enforcement, fire service, heavy rescue trained USAR volunteers and other required agencies under the Incident Commander (IC).

**(k)** Control of utilities, including Gas, Water, and Electricity, will be in collaboration with appropriate utilities through the EOC.

**(l)** SAR personnel and volunteers will provide basic emergency medical care to trapped victims within their appropriate training. Fire Department will provide Basic Life Support and Advance Life Support, as appropriate, to trapped victims.

## Article II. Definitions

| Word | Definition |
|---|---|
| **Urban Search and Rescue (USAR)** | Operational activities that include locating, extricating, and providing on-site medical treatment to victims trapped in collapsed structures. (NRF) |
| **Confined Space** | Space large enough for a body to work with limited entry and egress. Not designed for continuous habitation. |
| **High (low) Angle** | Using rope and other associated rescue devices in above- and below grade situations. |
| **Search and Rescue** | Searching for missing people |
| **Structural Collapse** | Structures whose ability to remain self-supporting have been compromised. |
| **Trench Rescue** | Narrow excavation below the surface of the earth where the depth is greater than the width at the bottom. |
| **Water Rescue** | Locating and removing persons from moving or standing bodies of water (to include ice, salt and fresh) both surface and subsurface. |

## Article III. Concept of Operations

### Section 3.01 General

**(a)** The Incident Command System (ICS) will be used by all assigned staff for all field operations. The IC will report information and requests to the City's Emergency Operations Center (EOC).

**(b)** At least one incident command post will be established for the coordination of all field operations. If needed, an Area Command can be established. The unified command structure will be used when multiple departments/agencies are responding to an event.

**(c)** People may become lost, injured or killed during disasters such as the collapse of buildings, leaving persons in life-threatening situations requiring prompt SAR or USAR and medical care.

**(d)** Communications will be through established channels. (See ESF #2 – Communications, Information Sharing and Warning)

**(e)** All assigned staff shall operate according to specific directives, department standard operating procedures (SOP) and by exercising reasonable personal judgment when unusual or unanticipated situations arise and command guidance is not available.

**(f)** When an event requires a specific type or response mode, technical and subject matter expertise may be provided by an appropriate person(s) from a supporting agency with skills relevant to the type of event. The individual will advise and/or direct operations within the context of the Incident Command System structure.

**(g)** Search and rescue teams are responsible for training and continuing education of their personnel.

**Section 3.02 Organization**

**(a)** The PD is the lead agency for the SAR activities within the City. The police department is a contract department through the King County Sheriff's Office and as such has access to the King County Search & Rescue Unit for any urban search and rescue needs.

**(b)** The FD is the lead agency for the USAR activities within the City. The fire department will coordinate with other Fire Departments to ensure this capability is met within the City of Shoreline.

**(c)** Specialty rescue teams including waterborne, inland/wilderness, aeronautical, confined space, high angle, and heavy rescue are available through mutual aid within the area. Rescue personnel from outside the area may be requested by the Washington State Emergency Operations Center. The City has personnel from the PD, FD, Customer Response Team and Public Works Departments trained in some areas of specialty rescue.

**(d)** Advanced rescue operations, including trench-collapse rescue, confined-space rescue, high-angle rescue, waterborne, and swift-water rescue, during or following

natural or manmade disasters will be coordinated by the FD with support from the PD, Customer Response Team and Public Works Departments. The Department of Planning and Community Development will provide technical support in the event of structural damage or collapse. Volunteers, as in Registered Volunteer Disaster Workers/CERT, outside agencies and the private sector may also be utilized during heavy rescue emergencies. Additional resources may be obtained through the KC ECC.

**(e)** SAR volunteer units will be organized under the authority of the PD. Any volunteers not already affiliated with the King County Sheriff's Office Search and Rescue Unit must be registered as Volunteer Emergency Workers (VEWs) with the City's Office of Emergency Management. VEWs must follow guidelines established by RCW 38.52 and WAC 118-04.

**(f)** SAR volunteers and emergency workers should be trained in Basic ICS. This requirement may be waived during situations that require temporary registration of VEWs.

**(g)** The primary resources for wilderness area SAR are the volunteers of the King County Search and Rescue Association and may be activated through the Police Department or the KC ECC. The Snohomish County Volunteer Search and Rescue is an additional resource, which may be activated through King County Sheriff's Office. Wilderness include operations conducted in backcountry, remote, or underdeveloped or rural road-less areas that primarily require operations necessitating the use of specialized equipment to access these areas and may require responders traveling over land by alternate methods or aircraft. The City of Shoreline has very little land that meets the above wilderness definition.

**(h)** Search and rescue operations for missing aircraft, including aeronautical search and rescue operations, are the responsibility of the Washington Department of Transportation (DOT), Division of Aeronautics. The Police Department will be responsible for coordinating ground support for these operations upon request.

**(i)** In the event of an incident of national significance, Federal USAR resources may be available at the request of the State Emergency Operations Center.

**(j)** On-scene management of emergencies will follow the Incident Command System (ICS) in accordance with the (NIMS).

**(k)** Any site designated by the Incident Commander (IC) may serve as any of the six ICS facilities: incident command post, staging area, base, camp, helibase or helispot, or in any other function capacity appropriate for the situation.

**Section 3.03 Actions**

**(a) Preparedness:**

(i) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(ii) Maintain a list of City and Police Department assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources, if applicable,

(iii) Assign and schedule sufficient personnel to implement indentified tasks for an extended period of time,

(iv) Ensure lead agency personnel are trained in their responsibilities and duties,

(v) Develop and implement emergency response strategies relating to USAR and SAR,

(vi) Maintain liaison with support agencies,

**(b) Response for a USAR:**

(i) Upon arriving at the incident scene, the Incident Commander may do the following:

Phase One - Assessment of the collapse. The area is scanned for possible victims (surface and/or buried). Evaluate the structure's stability. Shut off utilities.

Phase Two - Removal of all surface victims. Rescuers must be cautious as not to become victims themselves. Watch for secondary collapse.

Phase Three - Voids and accessible spaces searched and explored for viable victims. Only specially trained canines and trained personnel should be employed in this process.

Phase Four - Selected debris removal, using special tools and techniques, may be necessary after locating a victim. Gather information on the location of other possible victims.

Phase Five - General debris removal is conducted after all known victims have been removed.

USAR Operations - The US&R will employ the following strategy and tactics in an effort to rescue trapped victims, as equipment and resources allow:

i) Physical void search (visual and vocal)

ii) Audible call out/knocking method

iii) Use of fiber optics

iv) Use of infrared and thermal imaging

v) Use of electronic listening devices

vi) Use of search canines (dogs)

(ii) Coordinate operations in the Shoreline EOC and/or at other locations as required,

(iii) Develop, prioritize and implement strategies for the initial response to EOC requests.

(iv) Establish communications with appropriate field personnel to ensure readiness for timely response,

(v) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(vi) Coordinate with support agencies, as needed, to support emergency activities,

(vii) Obtain other resources through the Statewide Emergency Management Mutual Aid and Assistance Agreement and/or the Regional Mutual Aid Agreements,

(viii) Coordinate with other jurisdictions to obtain resources and facilitate an effective emergency response among all participating agencies,

**(c)** Monitor and direct USAR and response activities to include prepositioning for response/relocation due to the potential impacts of the emergency situation.

**(d)** Inventory, update, and maintain a database of offers of services, goods, and monetary donations.

**(e)** Coordinate with the Logistic Section of the EOC serve as an informational group on the availability and coordination of resources from volunteers and donations.

**(f)** Pre-position response resources when it is apparent that USAR resources will be necessary. Relocate health and medical resources when it is apparent that they are endangered by the likely impacts of the emergency situation.

**(g) Recovery**

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

**(h) Mitigation**

(i) Mitigation activities for this ESF are covered in the Multijurdictional Hazard Mitigation.

## Article IV. Responsibilities

### Section 4.01 Lead Agencies

**(a) Shoreline Police Department**

(i) Provide, direct, and coordinate ESF #9 operations, as appropriate, and in general responsible for wide area search and water rescue/recovery operations.

(ii) Coordinates the City's SAR activities with the King County Sheriff's Office SAR Unit and ensure that pre-incident activities such as training, equipment purchases, and evaluation of operational readiness occur.

(iii) Provide support to specialty rescue operations when appropriate.

(iv) Ensure that SAR has policies and procedures for SAR activities within the City.

(v) Provides status reports to the City's EOC on SAR operations throughout the City.

(vi) Coordinates logistical supports for SAR assets during field operations.

(vii) Manages SAR team deployment to, employment in, and deployment from an affected area of the City.

(viii) Communications shall be through normal established channels. (See ESF #2 – Information Systems, Communications and Warning)

**(b) Shoreline Fire Department**

(i) Provide on scene rescue and structural search in support of USAR activities.

(ii) Coordinates the City's USAR activities, including, pre-incident activities such as training, equipment purchases, and evaluation of operational readiness.

(iii) Provide support to specialty rescue operations when appropriate.

(iv) Develops policies and procedures for USAR activities within the City or

coordinates with other Fire Departments who have these capabilities.

(v) Provides status reports to the City's EOC on USAR operations throughout the City.

(vi) Coordinates logistical supports for USAR assets during field operations.

(vii) Manages USAR team deployment to, employment in, and deployment from an affected area of the City.

(viii) Communications shall be through normal established channels. (See ESF #2 – Information Systems, Communications and Warning)

(ix) Provide emergency medical care and transportation of victims beyond initial collection sites.

**Section 4.02 Support Agency**

**(a) Emergency Operations Center**

(i) Coordinate support for USAR/SAR activities within the City.

(ii) Provide support for USAR/SAR activities by coordinating additional resources and activating the City's EOC when appropriate.

(iii) Submit and coordinate requests for assistance to the Z1 ECC, KC ECC, and/or the State Emergency Operations Center.

(iv) Request County, State and Federal resources, as necessary.

**(b) Public Works**

(i) Provide trained staff and resources for USAR/SAR activities as appropriate.

(ii) Provide equipment and other major resources needed to provide access to and remove debris from entrapment sites, and clear roadways or other areas in support of emergency response actions.

**(c) Department of Planning and Community Development**

(i) Provide technical expertise in the evaluation of damaged structures.

(ii) Provide resources for USAR/SAR activities when requested.

**(d) Zone 1 Emergency Coordinator**

(i) Coordinate requests for resources from jurisdictions within Zone 1.

(ii) Facilitate communication with local jurisdictions, KC ECC, State Emergency Operations Center and other organizations, as needed.

**(e) King County Emergency Coordination Center**

(i) Coordinate requests for resources from Z1 EC and/or jurisdictions within King County to the State Emergency Operations Center.

(ii) Facilitate communication with Z1 EC, State Emergency Operations Center and local jurisdictions, as needed.

**(f) Washington State Emergency Management Division**

(i) Alerts appropriate state agencies of the possible requirement to assistant with USAR activities.

(ii) Coordinates incoming resources for deployment within the State, as needed.

**(g) Utilities (Power, Water, Gas, etc)**

(i) Coordinate with Shoreline EOC to address search and rescue problems due to leaking natural gas, downed power lines, water main breaks, or other utility infrastructure issues.

## Article V. Appendices

**(a)** Urban Search and Rescue Volunteer Emergency Workers Guidelines

## Article VI. References

**(a)** National Incident Management System (NIMS)

**(b)** RCW 38.52 and WAC 118.04

**(c)** Washington State Comprehensive Emergency Management Plan

**Note:**

**The following text is from WAC 118-04-120 Classes and Qualifications of Search and Rescue Emergency Workers**

There are three classes of search and rescue emergency workers: Novice, support personnel, and field personnel. The basic qualifications listed below define each of the three classes. Local requirements may include more extensive and detailed qualifications to meet local needs. Authorized officials also may require search and rescue emergency workers to demonstrate proficiency in the skills required to carry out their assignments.

Emergency workers who are not qualified for specific search and rescue duties shall not be assigned to such duties unless specifically directed by an authorized official and then only when under the direct supervision and control of personnel who are qualified for that specific assignment.

1) **The following are basic qualifications for novice search and rescue emergency workers without specific duties including those personnel in a training status. Novice personnel shall:**

   a) Be physically and mentally fit for the position assigned.

   b) Possess sufficient knowledge of search and rescue skills and techniques to fulfill their emergency assignment.

2) **The following are basic qualifications for support search and rescue emergency workers. Support-qualified personnel shall:**

   a) Be physically and mentally fit for the position assigned.

   b) Possess knowledge of the skills required of field search and rescue emergency workers but are not required to have the field tested experience nor the physical capabilities of field-qualified personnel.

   c) Possess knowledge in first aid for the control of bleeding, cardiopulmonary resuscitation, bone immobilization, protection from the elements, and protection from exposure to blood borne pathogens.

   d) Possess basic knowledge of helicopter operations. Successful completion of a helicopter operations basic course approved by the emergency management division satisfies this requirement.

e) If duties require involvement in helicopter operations, possess demonstrated knowledge and proficiency in helicopter operations. Successful completion of helicopter operations intermediate and, as applicable, advanced course, approved by the emergency management division satisfies this requirement.

**3) The following are basic qualifications for field search and rescue emergency workers. Field-qualified personnel shall:**

a) Be physically and mentally fit for the position assigned.

b) Possess knowledge of and demonstrated proficiency in survival techniques and outdoor living.

c) Possess knowledge in first aid for the control of bleeding, cardiopulmonary resuscitation, bone immobilization, protection from the elements, and protection from exposure to blood borne pathogens.

d) Possess knowledge in wilderness navigation including map, compass, and other navigation methods as appropriate.

e) Possess basic knowledge of helicopter operations. Successful completion of a helicopter operations basic course approved by the emergency management division will satisfy this requirement.

f) Possess knowledge of search and rescue techniques.

g) Possess knowledge of crime scene recognition, evidence recognition, human remains recognition and the provisions of RCW 68.50.010, 68.50.020, and 68.50.050.

h) If duties require involvement in helicopter operations, possess demonstrated knowledge and proficiency in helicopter operations. Successful completion of a helicopter operations intermediate, and, as applicable, advanced course approved by the emergency management division, satisfies this requirement.

**ESF COORDINATOR:** HazMat Team Leader

**LEAD AGENCIES:** Shoreline Fire Department

**SUPPORT AGENCIES:** Seattle Fire Department
Customer Response Team
Public Health - Seattle & King County
Public Works Department
Shoreline Police Department
King County Emergency Coordination Center
Washington State Emergency Management Division
Washington State Patrol Department of Fire Marshal
Washington State Department of Agriculture
Washington State Department of Ecology
Washington State Department of Labor and Industries
Washington State Department of Health
Washington State Department of Transportation
Washington State Utilities and Transportation Commission
U.S. Environmental Protection Agency (EPA)
U.S. Department of Homeland Security/ United States Coast Guard (DHS/ USCG)
U.S. Department of Energy (DOE)
U.S. Department of Transportation
Emergency Preparedness and Response Directorate/ Federal Emergency Management Agency (FEMA)

## Article I. Introduction

### Section 1.01 Purpose

(a) This ESF provides for the response to an actual or potential discharge and/or uncontrolled release of oil or hazardous materials (hazmat) during a disaster within the City of Shoreline (City). (NOTE: For the purpose of the ESF, hazmat is a general term intended to mean hazardous substances, pollutants, and contaminants as defined in the National Oil and Hazardous Substances Pollution Contingency Plan (NCP) (separately published document).

### Section 1.02 Scope

(a) This ESF provides for a coordinated response to actual or potential discharges and/or releases of hazardous materials within the City. It includes the appropriate response and recovery actions to prepare for, prevent, minimize, or mitigate a threat to public health, welfare, and the environment caused by an actual or potential oil and hazardous materials incident. Major activities include control, containment, identification, assessment, mitigation, and monitor of hazardous material released into the environment.

(b) This ESF is intended to defer to and coordinate with existing plans that are referenced in the ESF. It is not intended to serve as a hazardous material response plan. The Shoreline Fire Department operates under the King County Local Emergency Planning Committee (KCLEPC) Hazardous Materials Plan.

### Section 1.03 Situation

(a) Among the daily activities in the City's business and industrial community, it is recognized that various amounts of hazardous materials (HazMat) are used in a myriad of processes. In addition to the normal and regulated amounts used and stored, larger bulk quantities are transported in and through the City over the highways and major arterials, the railroad system, in pipelines, and on ships. Examples of Hazardous Materials incidents may include:

(i) Transportation incidents

(ii) Clandestine drug labs

(iii) Fixed site incidents

(iv) Spill or release

(v) Multiple incapacitated patients

(vi) Visible environmental

(b) A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to field efforts to save lives and protect property.

(c) Weather conditions such as temperature extremes, snow, rain, and high winds may pose additional hazards for emergency victims and rescue personnel.

(d) In some circumstances, rescue personnel may be at risk from terrorism, civil disorder, or crime.

(e) Natural, mechanical or human caused disasters could result in releases, spills, fires and other catastrophic events.

(f) Fixed facilities that produce, generate, use, store, or dispose of hazardous materials could be damaged so severely that existing spill-control apparatus and containment measures are not effective.

(g) Facilities that use large quantities of hazardous chemicals, such as wastewater treatment plants, significantly contribute to this risk.

(h) Risks are further compounded by other hazards such as floods.

(i) Terrorist incidents involving WMD, including chemical, biological, and radiological material, represent additional risks associated with hazardous materials.

**Section 1.04 Assumptions**

(a) The resources routinely available within the affected emergency area may be inadequate to conduct comprehensive hazmat response

(b) Fire and EMS 800-MHz radio communication may be compromised, either totally or in part.

(c) Access may be hampered by bridge failures, traffic, landslides, damaged road systems, air traffic restrictions, etc., making conventional travel to the incident location extremely difficult or impossible.

(d) The Fire Department will be responsible for the stabilization of all hazardous materials incidents that threaten the public safety, except those incidents that are normally resolved by the law enforcement or other federal/state response group.

(e) In situations of major proportions that exceed the physical limitations of the Fire Department, help from outside the City shall be provided through other fire departments by way of mutual aid agreements, the King County Fire Resource Plan, and from other state and federal agencies arranged through the City of Shoreline EOC.

(f) In addition, should there be a radiological emergency, technical assistance and specialized resources from the State Department of Health, State Military Department, US Department of Energy, and the Federal Nuclear Regulatory Commission can be made available through the Shoreline EOC or Shoreline Fire Department.

(g) Control of utilities, including Gas, Water, and Electricity, will be in collaboration with local utilities.

(h) Areas adjacent to these transportation systems, that may have hazardous material transported on them, are most at risk from the occurrence of an incident.

(i) Additionally, terrorist incidents that involve the intentional release of hazardous materials, as well as the possible use of chemical, biological, radiological, and other WMD, place other areas of the City under additional risks. Hazardous materials incidents may occur anywhere in the City and cause a public emergency. These incidents will draw upon the same resources (engines or other tactical and support resources) that would be needed to assist other emergency operations. It must be assumed that some resources will become scarce, resulting in disaster-related hazardous materials operations competing for resources.

**Section 1.05 Policies**

(a) All activities within ESF 10 – Hazardous Materials Response will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS). In addition, hazardous material incident response will be carried out according to:

(i) The Shoreline Fire Department Standard Operating Procedure (separately published document)

(ii) King County Hazardous Materials Emergency Resource Plan (separately published document)

(b) As a signatory of the King County Regional Disaster Plan and through local mutual aid agreements, the City and Fire Department will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible.

(c) Mutual aid agreements exist with numerous jurisdictions and department throughout King, Pierce and Snohomish Counties. Requests for assistance that are made after Fire has exhausted their mutual aid procedures through NORCOM will be initiated by the City Emergency Operations Center (EOC) and directed to the Zone 1 Regional Emergency Coordinator (Zone 1 REC), King County Emergency Coordination Center (KC ECC), and Washington State Emergency Operations Center.

(d) Control of utilities, including Gas, Water, and Electricity, will be in collaboration with appropriate utilities through the EOC.

(e) Planning related to this ESF will be conducted and maintained in conjunction with SARA Title III requirements and WAC 118.40.

## Article II. Concept of Operations

### Section 2.01 General

(a) The Shoreline Fire Department (FD) will be the lead agency for the coordination of hazmat activities within the City. The Shoreline Fire Department has agreed to provide Hazardous Materials initial response for the City at the operations level, understanding that the City has overall jurisdiction of any hazardous materials incident within its jurisdictional boundaries.

(b) The Shoreline Fire Department will send resources to assess any potential hazmat incident, initiate incident command, manage the incident and, depending on the need, request assistance from the Seattle Fire Department Hazmat Team, or other appropriate team, for technician level response.

(c) The ICS will be used by all responders within the City for all response operations. The Incident Commander (IC) will report information and requests to the Emergency Operations Center (EOC) Manager as appropriate.

(d) At least one incident command post will be established for the coordination of all field operations. The unified command structure will be used when multiple departments/agencies are responding to an event.

(e) In the event of a disaster, fixed facilities (e.g., chemical plants, tank farms, laboratories, operating hazardous waste sites which produce, generate, use, store, or dispose of hazmat) could be damaged so that existing spill control apparatus and containment measures are not effective.

(f) Hazmat that is transported may be involved in railroad accidents, highway collisions, waterways or airline mishaps.

(g) Damage to, or rupture of, pipelines transporting materials that are hazardous if improperly released will present serious problems.

(h) Emergency exemptions may be needed for disposal of contaminated material.

(i) Laboratories responsible for analyzing hazardous material samples may be damaged or destroyed in a disaster.

(j) State and federal assistance may be available, but will take time to mobilize.

(k) The King County Emergency Coordination Center (KC ECC), Washington State Emergency Operations Center and the Washington State Department of Ecology will be contacted in the event of any reportable spill or release. A mission number will be assigned for significant events.

(l) The U.S. Coast Guard (USCG) will be notified of any hazmat spill or release in navigable waters. The USCG may assume the role of IC upon arrival.

(m) Training requirements for personnel involved in emergency response operations for hazmat events is defined in WAC 296-62-3112.

(n) Communications will be through established channels. (See ESF #2 – Communications, Information Sharing and Warning)

(o) All staff shall operate according to specific directives, department standard operating procedures (SOP) and by exercising reasonable personal judgment when unusual or unanticipated situations arise and command guidance is not available.

(p) When an event requires a specific type or response mode, technical and subject matter expertise may be provided by an appropriate person(s) from a supporting agency with skills relevant to the type of event. The individual will advise and/or direct operations within the context of the Incident Command System structure.

(q) Throughout the response and recovery periods, the Shoreline Fire Department will evaluate and analyze information regarding material identification; securing, removing, and disposing of the hazardous materials; requests for response; develop and update assessments of the hazardous materials situation and status in the impact area; and implement contingency planning to meet anticipated demands or needs.

(r) HazMat teams are responsible for training and continuing education of their personnel.

**Section 2.02 Organization**

(a) It is the responsibility of the Shoreline Fire Department, in cooperation with the City of Shoreline to coordinate the command, control, and effective mitigation of hazmat emergencies. The department will operate under NIMS during all emergencies

(b) Any employee involved in emergency response operations relating to the release of hazardous substances must be trained in accordance with WAC 296-62-3112.

(c) The KC ECC may coordinate additional resources that are available to the City through mutual aid agreements and the Regional Disaster Plan (RDP).

(d) Trained Fire Department staff will be utilized for hazmat emergencies within the City. Initial FD operations will be defensive in nature at the operations level. The FD may utilize mutual aid HazMat Teams or private contractors to stop and/or contain the release or spill

(e) On-scene management of emergencies will follow the Incident Command System (ICS) in accordance with the (NIMS).

(f) Any site designated by the Incident Commander (IC) may serve as any of the six ICS facilities: incident command post, staging area, base, camp, helibase or helispot, or in any other function capacity appropriate for the situation.

**Section 2.03 Actions**

(a) Preparedness:

(i) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(ii) Maintain a list of City and Fire Department assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources, if applicable,

(iii) Assign and schedule sufficient personnel to implement indentified tasks for an extended period of time,

(iv) Ensure lead agency personnel are trained in their responsibilities and duties,

(v) Develop and implement emergency response strategies relating to hazardous response

(vi) Maintain liaison with support agencies,

(vii) Conduct All Hazards exercises involving hazardous materials response.

(b) Response:

(i) Coordinate operations in the Shoreline EOC and/or at other locations as required,

(ii) Develop, prioritize and implement strategies for the initial response to EOC requests.

(iii) Establish communications with appropriate field personnel to ensure readiness for timely response,

(iv) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(v) Coordinate with support agencies, as needed, to support emergency activities,

(vi) Obtain other resources through the Statewide Emergency Management Mutual Aid and Assistance Agreement and/or the Regional Mutual Aid Agreements,

(vii) Coordinate with other jurisdictions to obtain resources and facilitate an effective emergency response among all participating agencies,

(c) Monitor and direct response activities to include prepositioning for response/relocation due to the potential impacts of the emergency situation.

(d) Coordinate with other Logistic Section of the EOC serve as an informational group on the availability and coordination of resources from volunteers and donations.

(e) Pre-position response resources when it is apparent that hazardous materials resources may be necessary. Relocate health and medical resources when it is apparent that they are endangered by the likely impacts of the emergency situation.

(f) Monitor the environmental impact of HazMat incidents with regard to the safety of responders as well as the public.

(i) For more detailed actions, see the Fire Department – Hazardous Materials Team Standard Operating Procedures.

(ii) In accordance with the NIMS, the structure of local agency on-scene management will depend on the size and scope of the incident. The IC will be responsible for the coordination and management of the on-scene response. The ICS requires the IC to be the most qualified responder at the scene regardless of rank or seniority.

(iii) Upon arriving at the incident scene, the Incident Commander may do the following:

**1) Management and Control**

a) Approach uphill and upwind

b) Initiate the Incident Command System

c) Call for additional resources as needed

d) Identify and start setting up control zones (hot, warm, cold)

e) Notify proper authorities – DOE, EPA, FBI, etc.

f) Begin site safety plan

**2) Identify the hazardous material**

a) Use placards, UN ID#, reference DOT Emergency Response Guide.

b) Use other clues-container shape, size, location, shipping papers, MSDS

**3) Hazard and Risk Analysis**

a) Identify if product is solid, liquid or gas

b) What is the product doing?

c) Where is it likely to go?

d) What will happen if we do nothing?

e) What is the primary hazard – toxic, flammable, reactive?

**4) Personal Protective Equipment (PPE)**

a) Identify appropriate level of PPE based on hazard

b) Will firefighting turnouts protect personnel?

c) If not, wait for HazMat team

**5) Containment**

a) Control run-off to storm drains, sewers, streams

b) Vapors may be controlled with ventilation or hose streams

c) Refer to DOT ERG for isolation and evacuation distances, control and evacuate area as needed.

**6) Decontamination**

a) Decontamination must be set up prior to entry to hazard area

b) Hose lines may be used for decontamination (Gross Decon Line)

c) Decontaminate those exposed to hazmat

d) Decontaminate patients prior to transports to hospital

**7) Termination**

a) Equipment cleaned

b) Product disposed and contained by authorized company

c) All documentation completed, event reviewed.

**8) Be alert for the possibility of terrorist action. Indicators include:**

a) Is the response to a target hazard?

b) Has there been a threat?

c) Are there multiple victims (not trauma-related)?

d) Are responders victims?

e) Are hazardous substances involved?

f) Has there been an explosion?

g) Has there been a secondary attack/explosion?

**9) The lead person from each responding agency should work with the IC to ensure their agency's objectives are identified and coordinated.**

(g) Recovery

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

(h) Mitigation

(i) Mitigation activities for this ESF are covered in the Multijurdictional Hazard Mitigation.

## Article III. Responsibilities

### Section 3.01 Lead Agency

(a) Shoreline Fire Department

(i) Provide, direct, and coordinate hazardous materials response operations.

(ii) Utilize the ICS for all hazmat activities.

(iii) Maintain Operations Level readiness for hazmat response.

(iv) Develop and maintain relationships with specialized response teams such as:

1) Seattle Fire HazMat Team

2) Eastside HazMat Team

3) Snohomish County HazMat Team

4) Private facilities

5) Technical advisors for response and recovery

(v) During an incident, establish command and on-scene control, assess the situation, decontaminate and provide emergency medical treatment for exposed victims, contain and control for release of escaping hazardous substances only if:

1) Such containment and control could reasonably be expected to have a favorable impact the outcome of the emergency and,

2) Personnel are available with the necessary equipment and training to perform such operations safely.

(vi) During an incident, safety and/or evacuation zones will be established to provide for the safety of emergency responders and the community.

(vii) Assist Public Works and CRT with efforts that are determined to be non-emergent in nature: i.e. oil sheen on waterways, diesel spills on roadways and parking lots.

(viii) Develops policies and procedures for Hazardous Materials response activities within the City.

(ix) Provides status reports to the City's EOC on Hazardous Materials Response operations throughout the City.

(x) Communications shall be through normal established channels. (See ESF #2 – Information Systems, Communications and Warning)

(xi) Provide emergency medical care and transportation of victims beyond initial collection sites.

(xii) Assist with emergency evacuations and re-entry of threatened areas.

(xiii) Transfer Command of stabilized incidents to appropriate agency

**Section 3.02 Support Agency**

(a) Police Department

(i) Provide perimeter, crowd, and traffic control at hazmat scenes.

(ii) Coordinate with the Fire Department for evacuation, as necessary.

(iii) Provide incident command in the event of an intentional release or spill and coordinate crime scene operations.

(iv) Assume Command of stabilized clandestine drug lab incidents

*(v)* Transfer Command of stabilized incidents to appropriate agency

(b) Public Works Departments

(i) Assume command of HazMat incidents once the incident is stabilized and the fire department is ready to transfer Command.

(ii) Provide logistical, contractual, and/or financial support during the incident as needed.

(iii) Initiate contact with responsible party and assume liaison role with the agency

(iv) Assist with releases and spills that enter sewers, drains, and waterways and provide materials and equipment when necessary.

(v) Coordinate efforts that are determined to be non-emergent in nature: i.e. oil sheen on waterways, diesel spills on roadways and parking lots.

(vi) Coordinate with CRT, private facilities, and contractors to ensure an effective and efficient recovery and clean up.

(c) Public Health – Seattle & King County

(i) Collects and reports building and infrastructure damage that impacts the operation of health care facilities and functions to the King County ECC (if activated) and local EOCs.

(d) Private Facilities

(i) Each facility will appoint a facility emergency coordinator, who:

1) Notify appropriate local, state, and federal entities in a reliable, effective, and timely manner of a release of hazmat (consistent with the emergency notification requirements of SARA Title III, Section 304 and other state and federal regulations governing hazardous material incidents).

2) Inform the City of any relevant changes taking place at their facility as the changes occur or are anticipated to occur.

3) Promptly provide information to responders that may be needed for developing and implementing the emergency plan, upon request.

(e) Private and Quasi-Private Utilities

(i) Each facility will appoint a liaison, who:

1) Coordinate with ESF-4 to address fire prevention and suppression problems due to leaking natural gas, downed power lines, water supply, or other utility infrastructure issues.

2) Notify appropriate local, state, and federal entities in a reliable, effective, and timely manner of a release of hazmat (consistent with the emergency notification requirements of SARA Title III, Section 304 and other state and federal regulations governing hazardous material incidents).

3) Inform the City of any relevant changes taking place at their facility as the changes occur or are anticipated to occur.

4) Promptly provide information to responders that may be needed for developing and implementing the emergency plan, upon request.

(f) King County Emergency Coordination Center

(i) Coordinate requests for additional assistance at the request of the City's EOC Manager or Incident Commander.

(ii) Serve as the coordination point for the local emergency planning efforts and maintain the King County All Hazards Plan and other appropriate SARA Title III records.

(iii) Prepare follow-up documentation and reports and make appropriate notifications as needed.

(iv) Provide technical expertise and on scene assistance if requested.

(g) Washington State Emergency Management Division

(i) Maintain 24-hour capability to receive notification of incidents and requests for assistance and initial notification to local, state and federal response agencies.

(ii) Coordinate the procurement and allocation of state resources as requested by local EOCs, local IC, or other designated local response agencies or state response agencies.

(h) Washington State Department of Agriculture

(i) Develop, with the assistance of county extension agents, lists of farms, dairies, and stock ranches that may require monitoring or sampling due to a hazmat release.

(ii) Provide technical assistance, laboratory testing and sampling, and estimates on recovery costs for incidents involving pesticides and environmental contamination of farm properties, in coordination with the Department of Health.

(iii) Quarantine contaminated food, feed and hay.

(i) Washington State Department of Ecology

(i) Lead agency for spill response cleanup. Provides on-scene coordination, technical information on containment, cleanup, disposal, and recovery; environmental damage assessment; laboratory analysis and evidence collection for enforcement action for non-radioactive environment threatening hazmat incidents.

(ii) Serve as the state on-scene coordinator under the Federal National Contingency Plan.

(j) Washington State Department of Fish and Wildlife

(i) Provide coordination and resource information on potential or actual fish or fish habitat damage and cleanup.

(ii) Provide coordination and resource information on potential or actual wildlife or wildlife habitat damage and cleanup.

(k) Washington State Patrol Department of Fire Marshal

(i) Provide assistance in damage assessments, investigations, and coordination with officials.

(ii) Authority for incidents involving common or special fireworks (Class B and C) explosives.

(l) Washington State Department of Labor and Industries

(i) Enforce safety and health standards whenever employees are exposed to hazardous chemicals.

(ii) Provide technical expertise and information concerning worker exposure to hazardous chemicals including information on procedures, protective equipment, and specific chemical properties and hazards of substances.

(m) Washington State Department of Health

(i) Assume the role as lead agency in incidents involving radioactive materials. Provides technical personnel and equipment and advises state and local governments of the hazards of radioactive materials.

(ii) Provide technical expertise and guidance regarding the health hazards of pesticides and other toxic substances.

(iii) Provides technical assistance, sample collection, laboratory analysis, risk assessment, and control information related to incidents involving pesticides and other toxic substances.

(n) Washington State Patrol

(i) Act as designated Incident Command Agency for hazmat incidents unless the local jurisdiction assumes that responsibility as per Section 4, Chapter 172, laws of 1982, as amended, and SHB Number 154, April 1987 in conjunction with RCW 70.136.060 and 70.136.070.

(ii) Coordinate with the State Emergency Operations Center to notify other agencies as needed.

(o) Washington State Department of Transportation

(i) Coordinates the activation of WSDOT personnel and equipment needed to establish traffic control and cleanup activities on state roads and interstate highways. Activation may be initiated by the State Patrol.

(ii) WSDOT personnel will initially establish traffic control and notify the Washington State Patrol when they discover a hazmat spill, on state roads and interstate highways.

(p) Washington State Utilities and Transportation Commission

(i) Investigates rail accidents involving hazmat in conjunction with the State Patrol.

(ii) Assists first responders by providing supportive data on shippers and haulers of hazmat statewide.

(iii) Investigates maritime vessel accidents.

(q) U.S. Environmental Protection Agency (EPA)

(i) Maintain close coordination between EPA headquarters and the affected regional offices; the Department of Homeland Security/U.S. Coast Guard (DHS/USCG), as appropriate; the Interagency Incident Management Group (IMG), the National Response Coordination Center (NRCC): other ESFs; and the National Response Team (NRT).

(ii) Provide expertise on the environmental effects of oil discharges and releases of hazmat and environmental pollution control techniques.

(iii) Manage EPA special teams under the NCP, including the Environmental Response Team and Radiological Emergency Response Team, which provides specialized technical advice and assistance to responders.

(iv) Coordinate, integrate, and provide investigative support, intelligence analysis and legal expertise on environmental statutes related to oil and hazmat incidents, particularly regarding criminal cases, in support of responders.

(v) May provide damage reports, assessments, and situation reports to support Shoreline Emergency Management and/or EOC.

(vi) Provide technical, coordination and administrative support and personnel, facilities, and communications for the City of Shoreline and/or EOC.

(vii) Develop and promulgate the National Contingency Plan (NCP), chairs the NRT and co-chairs the Regional Response Teams (RRTs), implements Superfund and other environmental legislation, can provide emergency response team support for hazardous material contingencies, and trains state emergency officials.

(viii) Act as sector lead for critical infrastructure protection and bio-monitoring for the water sector under Homeland Security Presidential Directive 7 and Homeland Security Presidential Directive 9.

(r) U.S. Department of Homeland Security/ United States Coast Guard (DHS/ USCG)

(i) Assist in planning and preparedness efforts as Vice-Chair of the NRT and Co-Chair for RRTs.

(ii) Maintain the National Response Center (NRC)

(iii) Manage the National Strike Force, composed of three strike teams located on the Pacific, Atlantic, and Gulf coasts, to provide technical advice, assistance, and communications support for response actions.

(iv) Offer expertise in domestic and international port safety and security, maritime law enforcement, ship navigation, and the manning, operation, and safety of vessels and marine facilities.

(v) Maintain continuous staffed facilities that can be used for command, control, and surveillance of oil discharges, and hazmat releases occurring within its jurisdiction.

(s) U.S. Department of Energy (DOE)

(i) Provide a Federal On-scene Coordinator and direct response actions for releases of hazmat from its vessels, facilities, and vehicles

(ii) Provide advice in identifying the source and extent of radioactive releases relevant to the NCP, and in the removal and disposal of radioactive contamination.

(iii) Provide additional assistance for radiological incidents pursuant to, or in coordination with, Public Health and Medical Services.

(t) U.S. Department of Transportation

(i) Provide expertise on all modes of transporting oil and hazmat including information on the requirements for packaging, handling, and transporting regulated hazmat.

(u) Emergency Preparedness and Response Directorate/ Federal Emergency Management Agency (FEMA)

(i) Provide coordination support during national ESF activations, as well as recovery and mitigation assistance during federally declared disasters or emergencies.

## Article IV. Appendices

(a) Vulnerability to Hazardous Materials and Waste

(b) Hazardous Materials Incident Response Levels and Action Classifications

## Article V. References

(a) The National Response Framework, ESF #10 – Oil and Hazardous Materials Response

(b) Superfund Amendments and Re-authorization Act (SARA Title III)

(c) City of Shoreline Fire Department Standard Operating Procedures

(d) King County Local Emergency Planning Committee (LEPC) Hazardous Materials Plan

(e) Washington State Comprehensive Emergency Management Plan

1. The City of Shoreline (City) has, or may have, or be adjacent to, various hazardous materials; the general types of hazardous materials are:

    a. Chemical Materials: Those materials that do not exhibit etiological or radiological properties.
    b. Etiological Materials: Those organisms that have a pathogenic effect on life or the environment and can exist in normal ambient environments.
    c. Radioactive Materials: Those materials that emit alpha, beta, or gamma radiation.

2. The physical state of hazardous materials may be classified as gases, solids, or liquids. They can be stored or contained at high or low pressure and may be affected by the environment in which the incident occurs.

3. The City has several major highway transportation corridors. High volumes of vehicle traffic move daily on these highways. Most of the hazardous materials and waste in King County is moved to, from, and through King County on this same highway net.

4. Some types of hazardous materials moving over the highways are:

| | |
|---|---|
| Acids | Lacquers |
| Adhesives | Monomers |
| Aerosols | Office Copier Chemicals |
| Anodizing Chemicals | Paints |
| Battery Fluids | Pesticides |
| Catalysts | Photographic Chemicals |
| Cleaning Agents (all types) | Photoresists |
| Degreasing Agents | Pickling Agents |
| Detergents | Printing Inks |
| Duplicating Machine Fluids | Process Chemicals |
| Electrolytes | Radioactive Materials |
| Electroplating Chemicals | Resin Ingredients |
| Etching Baths | Rubber Chemicals |
| Etiological Material | Shellacs |
| Explosives | Soaps |
| Foaming Resins | Solvents |
| Foundry Mold Material | Surfactants |
| Fuels (all types) | Varnishes |
| Industrial Oils | Wastewater Treatment Chemicals |
| Janitorial Supplies | Water Treatment Chemicals |

5. Waterborne hazardous material spills could easily occur due to the storm sewer system that has direct discharge into the natural watercourses.

6. While aircraft carry hazardous materials, including fuel, and flight paths fly over the City, it is a low probability that a major airliner or cargo aircraft would crash in the City.

7. Natural gas is supplied to the City through large underground gas transmission lines that run through the County. The primary hazard of piped natural gas is the rupture of lines and release of gas in areas affected by major earthquake. In this case, explosion and widespread fuel fed fire would likely occur.

8. A demonstrated hazard is the storage of flammable fuels in above and below ground storage tanks. Leaks and ruptures pose a direct threat to not only the people and structures nearby, but to the environment, especially water.

9. Continued growth in population and business will increase the need for certain hazardous materials and will result in more hazardous waste.

**MINOR**

1. Spills which can be contained and absorbed by equipment and supplies immediately available to the emergency personnel.

2. Fires which can be extinguished with the resources immediately available to the first response agency.

3. Leaks which can be controlled using equipment and supplies immediately available to the emergency personnel.

4. Incidents which do not require evacuation.

**MODERATE**

1. An incident involving a greater hazard or larger area which poses a potential threat to life, property and/or the environment.

2. An incident involving a toxic substance which may require evacuation of citizens.

3. A hazardous materials incident which requires assistance from outside agencies (such as the Red Cross) to work with evacuees, medical facilities, and personnel for treatment of casualties and agencies concerned with the environmental impact.

**MAJOR**

1. A major hazardous materials incident requiring resources beyond those of local departments and requiring expertise or resources of state, federal or private agencies and/or organizations in the first response community.

2. A hazardous materials incident within the City of Shoreline that involves evacuation of areas outside of the City.

3. A hazardous materials incident whose location is outside the City of Shoreline but requires evacuation of areas within the City.

4. Waterborne hazardous material spills could easily occur due to the storm sewer system that has direct discharge into the natural watercourses.

5. While aircraft carry hazardous materials, including fuel, and flight paths fly over the City, it is a low probability that a major airliner or cargo aircraft would crash in the City.

7. Natural gas is supplied to the City through large underground gas transmission lines that run through the County. The primary hazard of piped natural gas is the rupture of lines and release of gas in areas affected by major earthquake. In this case, explosion and widespread fuel fed fire would likely occur.

8. A demonstrated hazard is the storage of flammable fuels in above and below ground storage tanks. Leaks and ruptures pose a direct threat to not only the people and structures nearby, but to the environment, especially water.

9. Continued growth in population and business will increase the need for certain hazardous materials and will result in more hazardous waste.

**ESF COORDINATOR:** Parks, Recreation, and Cultural Services Director

**LEAD AGENCIES:** Parks, Recreation, and Cultural Services Department

**SUPPORT AGENCIES:**
Emergency Management Coordinator
Communications Coordinator/PIO
Public Works Department
Department of Planning and Community Development
Administrative Services Department
All City Departments
Public Health - Seattle & King County
Zone 1 Emergency Coordinator
King County Emergency Coordination Center
WA State Department of Agriculture

## Article I. Introduction

### Section 1.01 Purpose

(a) The purpose of this ESF is to coordinate efforts to provide nutrition assistance; control and eradicate an outbreak of highly contagious or economically devastating animal/zoonotic or plant disease or plant pest infestation; assure food safety and security; and protect natural and cultural resources and historic properties prior to, during, and after a disaster

### Section 1.02 Scope

(a) This ESF provides for four primary functions:

(i) Provision of nutrition assistance

(ii) Animal and plant disease and pest response

(iii) Assurance of the safety and security of food supply

(iv) Protection of natural, cultural, and historic resources (NCH resources)

### Section 1.03 Situation

(a) A significant public emergency may deprive substantial numbers of people access to food or the means to prepare food. In addition to substantial disruption to the commercial food supply and distribution network, a major disaster may destroy, partially or totally, food products stored in the affected area.

### Section 1.04 Assumptions

(a) The resources routinely available within the affected emergency area may be inadequate to conduct comprehensive response

(b) Communications systems may be compromised, either totally or in part.

(c) Access may be hampered by bridge failures, traffic, landslides, damaged road systems, air traffic restrictions, etc., making conventional travel to the incident location extremely difficult or impossible.

(d) Approval of requests from the Incident Commander (IC) for access to and/or distribution of food may be given by telephone, radio, or written communications, depending on circumstances.

(e) Within the emergency area, the following conditions may exist:

(i) Food processing and distribution capabilities in the City are disrupted.

(ii) A large amount of the water supply is unusable, requiring juices or potable water supplies to be made available to the affected population.

(iii) There is a near-total disruption of energy sources (e.g., electricity and gas). Most commercial cold storage and freezer facilities are inoperable.

(f) On the fringes of the geographic areas affected, there may be schools and small institutions with large inventories that are estimated to be sufficient to feed up to 10,000 people for three days and supply their fluid needs for one day (i.e., a minimum of 1,800 calories and 3 gallons of liquid per day per person).

**Section 1.05 Policies**

(a) General

(i) The City of Shoreline (City) Parks, Recreation and Cultural Services Department is responsible for the four primary functions within ESF 11.

(ii) All activities within ESF 11 – Agriculture and Natural Resources will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(iii) As a signatory of the King County Regional Disaster Framework, through the use of the Washington State Mutual Aid System, (WAMAS), and through local mutual aid agreements, the City and Fire Department will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible. The City will utilize those same systems when requesting assistance.

(iv) Actions conducted under ESF# 11 are coordinated and conducted cooperatively with Federal, State, County and Regional agencies and private and nonprofit organizations, whenever possible.

(v) All public information released regarding any aspect of ESF# 11 will be coordinated by the Communications Coordinator/PIO in the City Manager's Office. This will be done through the Emergency Operations Center (EOC) if it is activated and approved by the Director of Emergency Management or his/her designee.

(vi) The City may utilize volunteer disaster workers to assist the Parks Department with ESF# 11 operations. Any volunteer disaster worker should be pre-registered with the City's Office of Emergency Management. If a volunteer is not pre-registered they can be registered onsite as a temporary disaster worker for the duration of specific disaster operations under ESF# 11.

(b) Nutrition Assistance

(i) It is the policy of the City to educate its citizens, businesses and City staff regarding their responsibility to provide for their own food and water for a minimum of three days following a natural or human caused disaster.

(ii) The City government does not have the infrastructure or resources to provide food and water to the population. The City relies on a partnership with human services organizations such as the American Red Cross (ARC) and Salvation Army; State and County public service agencies; faith based organizations; and the private sector to provide food and water to citizens following a disaster. Actions taken under ESF #11 relating to nutritional support will be coordinated and conducted cooperatively with the above organizations whenever possible.

(iii) In the event of a major disaster, the Parks Department will attempt to identify and coordinate local and city resources providing food and water. The Parks Department will attempt to use any and all local resources to meet the community's need for food and water. This will be coordinate with KCECC, Public Health - Seattle & King County, and the Washington State Emergency Operations Center.

(iv) Parks Department will establish predetermined points of distribution (POD) sites throughout the City for the distribution of food and water, such as recreation centers, schools, faith based facilities, parks, etc. (See Appendix A).

(v) Priority is given to provide critical supplies of food to areas of acute need and then to areas of moderate need.

(vi) The Administrative Services Department will assist the Parks Department in procuring food and water from the public and private sectors, as needed.

(vii) The Parks department will utilize congregate feeding arrangements as the primary outlet for disaster food supplies whenever possible.

(viii) The EOC will coordinate with County, State and Federal agencies through the KC ECC to provide food and water to residents on a long term basis.

(ix) The Emergency Coordinator will assist in facilitation of this by liaisons with those social services agencies who will be providers during such an event.

(x) The PIO will assist in developing and dissemination of all information that is needed to educate the public.

(c) Animal and Plant Disease and Pest Response

(i) All action taken in ESF# 11 regarding animal and plant disease and pest response will be coordinated with Public Health - Seattle King County whenever possible.

(ii) When addressing animal diseases, all animal depopulation activities will be conducted as humanely as possible while stopping pathogen spread and limiting the number of animals that must be euthanized. Disposal methods for infected or potentially infected carcasses and plant host material are chosen for their effectiveness in stopping pathogen spread and for their minimal impact on the environment.

(d) Food Safety and Security

(i) Under emergency/disaster conditions the Parks Department will be responsible for the security and protection of food, water and donated goods.

(ii) The Shoreline Police Department (PD) will assist with the security and protection of food, water, and donated goods whenever possible.

(iii) Whenever possible, the City will utilize information provided by Public Health - Seattle King County to ensure the safety of food, water, and donated goods.

(iv) The City will not accept unprocessed donated goods during an emergency/disaster.

(e) Natural and Cultural Resources and Historic Properties (NCH)

(i) Actions taken under ESF# 11 to protect, conserve, rehabilitate, recover, and restore NCH resources are guided by City policies and procedures. During a disaster these actions will be coordinated with the EOC, if activated and with Planning and Development Service (PADS).

(ii) The Parks Department may utilize volunteers to carry out the tasks necessary to protect, conserve, rehabilitate, recover, and restore NCH resources.

(iii) The Parks Department will ensure appropriate use of volunteers to carry our NCH resource tasks and will ensure appropriate measures are in place to protect the health and safety of all workers.

## Article II. Concept of Operations

### Section 2.01 General

(a) Staff will coordinate with the EOC and field staff to ensure ample and timely deliveries of food, water, and ice supplies.

(b) The Parks Department is the lead agency for the coordination of activities with this ESF within the City. The Parks staff will be mobilized on a case-by-case basis. This will normally be done by telephone or pager through the department's notification procedures. As communication systems may fail in a major event, the Parks Department staff should report to work as soon according to the City's 24 hour staffing plan.

(c) The Incident Command System (ICS) will be used by Parks Department for all field operations. The Incident Commander will report information and requests to the Emergency Operations Center (EOC) Manager.

(d) At least one incident command post will be established for the coordination of all field operations. The unified command structure will be used when multiple departments/agencies are responding to an event.

(e) Distribution of food, water and donated goods will tax government agencies and every social service agency in the City, in a Puget Sound-wide disaster, the entire state.

(f) The City has limited experience in coordinating the distribution of food, water and donated goods in a catastrophic event. But staff will be sent to POD training through the State of Washing Department of Emergency Management and trained staff will be assigned to assist with coordination of setting up Points of Distribution within the City is deemed necessary.

(g) If not handled properly, food, water and donated goods can become vehicles for illness and disease transmission that must clearly be avoided.

(h) If ARC shelters are activated, the primary distribution of food and water will be handled through their emergency shelter/mass care system, whenever possible.

(i) Communications will be through established channels. (See ESF #2 – Communications, Information Sharing and Warning)

(j) Department personnel shall operate according to specific directives, department standard operating procedures (SOP) and by exercising reasonable personal judgment when unusual or unanticipated situations arise and command guidance is not available.

(k) When an event requires a specific type or response mode, technical and subject matter expertise may be provided by an appropriate person(s) from a supporting agency with skills relevant to the type of event. The individual will advise and/or direct operations within the context of the Incident Command System structure.

(l) See ESF 7: Appendix G – Donations Management Plan for information on how the City will coordinate donated goods, including donated food, water, etc.

**Section 2.02 Organization**

(a) During a disaster, the Parks Department will be responsible for actions taken in conjunction with ESF# 11. The City's EOC will coordinate these actions along with other emergency management activities within the City, as appropriate.

(b) During a large scale disaster that impacts multiple jurisdictions, the City's EOC may submit requests for nutritional support to the Z1 EC, the KC ECC, or directly to the State Emergency Operations Center. As a signatory to the Zone 1 Regional Disaster Framework, the City will attempt to submit requests through the Z1 EC whenever possible.

(c) The EOC may coordinate through the Z1 EC or KC ECC with Federal, State, and County services to provide food and water to Shoreline residents on a long-term basis.

(d) The EOC will coordinate the transportation and delivery of incoming donated goods and resources. The Parks Department will coordinate and manage the distribution of donated goods and resources within the community**.**

**Section 2.03 Actions**

(a) **Preparedness**:

(i) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(ii) Maintain a list of City and Parks, Recreation, and Cultural Services Department assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources, if applicable,

(iii) Assign and schedule sufficient personnel to implement indentified tasks for an extended period of time,

(iv) Ensure lead agency personnel are trained in their responsibilities and duties,

(v) Develop and implement emergency response strategies relating to Agricultural and Natural Resources response

(vi) Maintain liaison with support agencies,

(vii) Conduct All Hazards exercises involving agriculture and natural resources.

(b) Response:

(i) Coordinate operations in the Shoreline EOC and/or at other locations as required,

(ii) Develop, prioritize and implement strategies for the initial response to EOC requests.

(iii) Establish communications with appropriate field personnel to ensure readiness for timely response,

(iv) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(v) Coordinate with support agencies, as needed, to support emergency activities,

(vi) Obtain other resources through the Statewide Emergency Management Mutual Aid and Assistance Agreement and/or the Regional Mutual Aid Agreements,

(vii) Coordinate with other jurisdictions to obtain resources and facilitate an effective emergency response among all participating agencies,

(c) Monitor and direct response activities to include prepositioning for response/relocation due to the potential impacts of the emergency situation.

(d) Coordinate with other Logistic Section of the EOC serve as an informational group on the availability and coordination of resources from volunteers and donations.

(e) Pre-position response resources when it is apparent that resources may be necessary.

(f) Inventory food and water supplies.

(g) Identify local resources for the acquisition of food, potable water, and ice and attempt to obtain written agreements.

(h) Coordinate with the EOC, in consultation with Gas and Electric utilities, to restore power to water treatment plants, grocery stores, and ice-producing companies as a priority. This will significantly reduce the need for distribution of food, water, and ice.

(i) Recovery

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

(j) Mitigation

(i) Mitigation activities for this ESF are covered in the Multijurdictional Hazard Mitigation.

## Article III. Responsibilities

### Section 3.01 Lead Agency

(a) Parks Department:

(i) Provide, direct, and coordinate Agriculture and Natural Resources response operations.

(ii) Identify local resources with the ability to supply large amounts of non-perishable food, ice, and equipment necessary to transport and handle the commodities following a major disaster.

(iii) Coordinate with the Administrative Services Department to obtain contracts or agreements with local businesses to supply necessary commodities.

(iv) Develops policies and procedures for Agriculture and Natural Resources response activities within the City.

(v) Provides status reports to the City's EOC on Agriculture and Natural Resources operations throughout the City.

(vi) Communications shall be through normal established channels. (See ESF #2 – Information Systems, Communications and Warning)

(vii) Nutrition Assistance:

1) Determine the availability of food within the City that could be used for human consumption and assess damage to food supplies.

2) Working with the Public Health – Seattle King County determines the nutritional needs within the City based on the following categories: acutely deficient, moderately deficient, self-sufficient, and surplus supplies.

3) Coordinate with the EOC to ensure incoming nutritional supplies are delivered to the appropriate POD and to ensure the security of the supplies.

4) Coordinate with regional, County, State and Federal agencies and volunteer organizations to develop a plan of operation that ensures timely distribution of food in good condition to the proper location, as appropriate.

5) Predetermine multiple PODs throughout the City for the disbursement of nutritional supplies to the residents of the City.

6) Develop and maintain procedures for procuring food and water from local businesses, whenever possible, to provide for the nutritional needs of first responders and the community.

7) Designate staff member(s) to act as Emergency Food Coordinator.

8) Coordinate with the Administrative Services Department regarding the purchase of food and water.

9) Coordinate with city departments and relief agencies regarding transportation and distribution of food and water to citizens.

10) Coordinate with all City departments regarding preparation, transportation and distribution of food and water to city employees.

11) Alert the local volunteer organizations about the disaster and damage.

12) Coordinate with food distributors for the provision and distribution of food to disaster victims or food service organizations.

13) Coordinate the donation or purchase of food and water through pre-identified sources.

14) Coordinate the transportation of food and water through the pre-identified sources.

15) Develop plans and select sites for the distribution of food and water to City of Shoreline residents.

16) Coordinates with the EOC of potential sites for holding donated goods, food and water supplies. Provides logistical support in distribution of food, water and donated goods.

(viii) Animal and Plant Diseases and Pest Response Assistance

1) During a disaster, coordinate with the Public Health – Seattle King County and Animal Control agencies to reference any changes in animals and plant life within the City to ensure any abnormalities are notices and reported to the EOC.

2) Coordinate surveillance activities along with ESF #8 – Public Health and Medical Services in the event of zoonotic diseases.

3) Coordinate with ESF #8 in the event of a natural disaster in which there are animal/veterinary/wildlife issues to ensure support for each issue.

4) Coordinate with Shoreline FD and PD on all incidents involving the intentional release of chemical and biological substances.

5) Assist PD and Public Health – Seattle King County to quarantine any person, animal, or plant that becomes exposed to a chemical or biological agent.

(ix) Food Supply Safety and Security Assistance:

1) Assess whether businesses within the community are able to provide safe and secure food.

(x) Natural and Cultural Resources and Historic Properties (NCH) Assistance:

1) Coordinate with Planning and Development Services to ensure policies pertaining to preservation of historic properties are followed.

2) This area is covered in the City of Shoreline Disaster Recovery Plan

**Section 3.02 Support Agency**

(a) Emergency Operations Center

(i) Alert the Parks Department Director when activation of ESF# 11 is necessary.

(ii) Coordinate with parks for holding and distribution sites.

(iii) Coordinate through the EOC the dissemination of public information concerning availability of food and water.

(iv) Coordinate all public information and instructions and media relations as defined in ESF #15 Public Affairs.

(b) Department of Planning and Community Development

(i) In coordination with the Parks, ensure all polices pertaining to historical sites are followed.

(c) Administrative Services Department

(i) Provide for the procurement of food and water.

(ii) Develop system for the tracking of necessary financial expenditures such as staffing, vehicles, food, water, etc.

(d) Communications Coordinator/PIO

(i) Coordinates all public messaging with Public health - Seattle King County

(e) All City Departments

(i) City employees may be requested to assist in the transportation of food and water to distribution sites as directed through the EOC.

(f) King County Office of Emergency Management

(i) Coordinate food and water distribution needs with appropriate city, county, state, federal and volunteer agencies.

(g) American Red Cross (ARC)

(i) Whenever possible, the ARC may assist the City to provide disaster victims and first responders with food, clothing, shelter, first aid and supplementary medical/nursing care and assist the City to meet other urgent immediate needs.

(ii) Will maintain a list of ARC shelters within the City and surrounding communities and will open shelters in or around the area as needed.

(iii) May certify additional shelters as needed during a disaster depending on the size and significance of the disaster.

(iv) Assess and maintain ARC equipment and supplies staged within the City.

(v) Provide training related to mass care and sheltering to City employees and citizens.

(vi) Provide a liaison to KC ECC during disasters and exercises, whenever possible.

(h) Salvation Army

(i) May provide mobile canteen services, as resources allow.

(ii) May provide emergency feeding services, as resources allow.

(iii) Whenever possible, will coordinate with ARC and the City's EOC to collect and distribute food, clothing and other supplies.

(iv) Maintain a resource listing of equipment, supplies and facilities and their availability.

(v) Provides a copy of the resource listing to the Emergency Management office upon request.

(vi) Assesses equipment and training needs.

(vii) Coordinates activities with the City EOC.

(i) Public Health- Seattle-King County

(i) Analyzes water samples from sources suspected of contamination and makes appropriate recommendations.

(ii) Develops procedures to notify the residents of the City how to treat contaminated food and water.

(iii) Inspects (if available) donated goods with the Department of Agriculture. Oversees the safe distribution of food, water and donated goods.

(iv) Provide food safety/food borne disease prevention consultation and regulatory oversight regarding emergency food sources, storage, preparation and/or distribution facilities.

(j) Washington State Emergency Management Division

(i) Requests the assistance of state agencies and private organizations having emergency mass care capabilities when requested by local governments.

(ii) Provides overall logistical support of nationally donated goods by managing the State Logistics Center following its activation.

(iii) Alerts those state and local agencies that have the expertise needed with managing food (Agriculture), and water (Department of Health)

(k) Washington State Department of Health

(i) Supplements local health agencies in the regulation and inspection of consumable foods at the point of preparation.

(ii) If available, coordinates and inspects appropriate response with all Group A water purveyors (15 or more homes or serves 25 people per day for more than 60 days).

(l) Washington State Department of Agriculture

(i) Provide coordination of State resources to provide support when local jurisdictions, as appropriate, when all local, regional and county resources have been expended, as outlined in WA CEMP ESF 11.

(m) U.S. Department of Agriculture

(i) Responsibilities are outlined in the National Response Framework. The US Department of Agriculture assists in the inspection of donated foods and other goods.

## Article IV. Appendices

(a) Points of Distribution/Staging Areas

## Article V. References

(a) The National Response Framework

(b) King County Regional Disaster Framework

(c) Washington State Comprehensive Emergency Management Plan

**In addition the below listed city owned parks, the City Emergency Management Office has a data base of Faith-Based Organizations. Many have agreed that depending on the nature of the event and the impact on them, they can serve as Points of Distributions. The Shoreline School District and Shoreline Community College has also agreed under the same restrictions of impacts to them.**

**Hamlin Park**
**16006 15th Ave NE**
**(73 Acres) EAST SIDE OF CITY**
Facilities: 1 Grass Multi-Purpose Field (approx. 320' X 275'), 2 Grass Baseball Fields (approx. 275' X 275' each), 1 Picnic Shelter with water/electricity, 2 Restroom buildings with electricity/water, 1 playground, and 3 parking lots.
Adjacent to: Kellogg Junior High School, Shorecrest High School and Shoreline School District Warehouse.

**Shoreline Park (at Shoreline Center)**
**1st Ave. NE @ N. 190th Street (9 Acres)**
**CENTRAL AREA OF CITY**
Facilities: 2 Synthetic Field Turf Fields (approx. 320' X 225'/side-by-side), 1 Grass Multi-Purpose Field (approx. 320' X 225'), 1 restroom building, 4 tennis courts, 1 playground, small parking lots and angle parking for 50 cars.
Adjacent to: Shoreline Pool, Shoreline Conference Center, Shoreline School District Administration and Maintenance Facilities, Shoreline Stadium.

**Richmond Highlands Recreation Center and Ball fields**
**16544 Fremont Ave. N.**
**(4.3 Acres) WEST SIDE OF CITY**
Facilities: 1 Community Center (capacity 214) with small kitchen, meeting room, game room, small gym, 3 restrooms and small parking lot 30 cars, 1 Grass Multi-Purpose Field (250' X 300'), 1 outdoor restroom near ball fields and on-street parking.
Adjacent to: 1 block south of Shorewood High School

**Hillwood Park**
**3rd Ave. NW & NW 190 St.**
**(10 Acres) WEST SIDE OF CITY**
Facilities: 1 Grass Multi-Purpose Field, 1 restroom building, 1 playground, small parking lot, and natural area
Adjacent to: Einstein Junior High

**Shoreview Park**
**Innis Arden Way & 9th Ave. NW**
**(47.5 Acres) WEST SIDE OF CITY**
Facilities 2 Grass Baseball Fields (Upper Field approx. 200' X 200' / Lower Field approx. 250' X 250'), 1 All-Weather (Dirt) Soccer Field (approx. 320' X 225'), 2 restroom buildings, 6 Tennis Courts, 155 parking stalls.
Adjacent to: Shoreline Community College and Highland Terrace Elementary School

**ESF COORDINATOR:** Public Works Director

**LEAD AGENCIES:** Public Works Department
Seattle City Light
Puget Sound Energy

**SUPPORT AGENCIES**: Emergency Management Coordinator
Zone 1 Emergency Coordinator
King County Emergency Coordination Center

## Introduction

### Purpose

The purpose of this ESF is to coordinate efforts to restore damaged energy systems and components during a potential or actual disaster and to provide for the effective utilization of available electric power and natural gas, as required, to meet essential needs in the City of Shoreline (City) during a disaster. This ESF provides for electricity and natural gas systems only. Other utilities such as water and sewer are coordinated through ESF # 3 Public Works and Engineering.

### Scope

This ESF addresses the collection, evaluation and coordination of information on energy system damage and estimations on the impact of energy system outages within the City. The term "energy" includes producing, refining, transporting, generating, transmitting, conserving, building, distributing, and maintaining energy systems and system components. Additionally, ESF #12 provides information concerning the energy restoration process such as projected schedules, percent completion of restoration, geographic information on the restoration, and other information as appropriate.

### Situation

The suddenness and devastation of a public emergency, either natural or human-caused, may sever key energy infrastructure, constraining supply in affected areas and, most likely, adversely impacting adjacent areas, especially those with supply links to the directly affected areas. Such an event also could affect transportation, communications, and other infrastructure necessary for sustaining public health and safety, as well as maintaining the continuity of government and a number of critical infrastructures.

(a) A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to field efforts to save lives and protect property.

(b) Weather conditions such as temperature extremes, snow, rain, and high winds may pose additional hazards for first responders and utility crews.

(c) Power and fuel are critical to protecting lives and property and maintaining the continuity of the government, business, transportation, emergency services, and other critical infrastructures.

(d) Damage to an energy system in one geographic region may affect energy supplies in other regions that rely on the same delivery systems. For instance, damage to the electric power system in one jurisdiction could have a rippling effect on supplies, distribution, or transmission systems of electric power or petroleum products in the neighboring states.

**Section 1.02 Assumptions**

(a) There may be widespread and possibly prolonged electric power outages or interruptions.

(b) There may be widespread and possibly prolonged disruption to the supply and distribution of natural gas.

(c) Transportation and telecommunication infrastructures may be affected.

(d) Delays in the delivery of petroleum-based products may occur as a result of loss of commercial electric power.

(e) The resources routinely available within the affected emergency area may be inadequate to conduct comprehensive response

(f) Fire and EMS 800-MHz radio communication may be compromised, either totally or in part. Utility companies' communication systems may be compromised, either totally or in part.

(g) Access may be hampered by bridge failures, traffic, landslides, damaged road systems, air traffic restrictions, etc., making conventional travel to the incident location extremely difficult or impossible.

(h) Control of utilities, including Gas, Water, and Electricity, will be in collaboration with local utility companies.

(i) During periods of abnormal weather or in the event of multiple unanticipated outages there may be occasional times when generating capacity is limited or falls below customer demand.

(j) There will likely be an urgent need for restoring power at critical facilities

(k) There may be widespread and prolonged electrical power failure. With no or little electrical power, communications will be effected and traffic lights will not operate, causing surface gridlock. Such outages will impact other public health and safety services, including the movement of petroleum products for transportation and emergency power generation

**Section 1.03 Policies**

(a) All activities within ESF 12 –Energy will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) As a signatory of the King County Regional Disaster Framework, through the use of the Washington State Mutual Aid System, (WAMAS), and through local mutual aid agreements, the City and Fire Department will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible. The City will utilize those same systems when requesting assistance.

(c) Energy is provided to the City by Seattle City Light. Natural gas is provided by Puget Sound Energy (PSE). Restoration of normal operations at energy facilities is the responsibility of the facility owners.

(d) The Public Works Department (PW) will be responsible for coordinating the activities with ESF #12 with Seattle City Light and PSE.

(e) The City has established the protection of lives and property as the top priority during a disaster.

(f) During an emergency or disaster, City departments and other organizations, such as utility companies, may need the authority to go onto private property to evaluate and repair utilities that jeopardize the integrity of public and private property or threaten public health or the environment.

(g) The Governor may direct any state or local governmental agency to implement programs relating to the consumption of energy, as deemed necessary to preserve and protect public health, safety, and general welfare, and to minimize to the fullest extent possible the injurious economic, social and environmental consequences of such energy supply alert. (RCW 43.21G.040)

1) "To protect the public welfare during a condition of energy supply alert or energy emergency, the executive authority of each state or local agency is authorized and directed to take action to carry out the orders issued by the Governor.....a local governmental agency shall not be held liable for any lawful actions consistent with RCW 43.21G.030 ...in accordance with such orders issued by the Governor." (RCW 43.21G.050)

## Article II. Concept of Operations

### Section 2.01 General

(a) The PW is the lead agency for the coordination of public works activities within the City.

(b) In the event of a disaster, the PW staff will be mobilized on a case-by-case basis. This will normally be done by telephone or pager through the department's notification procedures. As communication systems may fail in a major event, PW staff should report to work according to the City's emergency staffing (Green/Gold) plan.

(c) An incident command post (ICP) will be established for the coordination of field operations. The Incident Commander (IC) will provide regular status reports and provide timely reports to the EOC. A unified command system will be utilized, whenever necessary, to enable multiple departments/agencies to coordinate operations with the ICP.

(d) While restoration of normal operations at energy facilities is the primary responsibility of the owners of those facilities, ESF #12 provides the appropriate information and resources to enable restoration of services to the City in a timely manner.

(e) A natural disaster or other significant event may sever key energy and utility lifelines, constraining supply in impacted areas, or in areas with supply links to impacted areas, and also affect firefighting, transportation, communication, and other lifelines needed for public health and safety.

(f) There may be widespread and/or prolonged electric power failure. With no electric power, communications will be affected, and traffic signals will not operate, causing service movement gridlock. Such outages will impact all emergency response services.

(g) The PW will assist industry authorities with requests for emergency response actions as they pertain to the restoration of services with the City.

(h) The City concurs with PSE that citizens should turn off gas ONLY if a leak is detected (heard or smelled). The City also agrees with PSE that gas service should not be reestablished (turned on) by anyone other than a qualified representative of PSE. There may be a delay for PSE to reestablish gas service once it has been turned off.

(i) To the maximum extent possible during a disaster, utility companies will continue to provide services through normal means.

(j) Seattle City Light and PSE are responsible for the continuation of service and available energy resources will be used to meet immediate local needs, whenever possible. If shortages exist, requests to meet needs will be submitted through normal emergency management channels. Actions may be necessary to limit the use of energy, water or other utilities until normal levels of service can be restored or supplemented. These resources, when limited, will be used to meet immediate and essential emergency needs (e.g. hospitals, etc.).

(k) Energy and utility information will be furnished to emergency government officials at all levels to inform the public on the proper use of services.

(l) Communications will be through established channels. (See ESF #2 – Communications, Information Sharing and Warning)

(m) Department personnel shall operate according to specific directives, department standard operating procedures (SOP) and by exercising reasonable personal judgment when unusual or unanticipated situations arise and command guidance is not available.

(n) When an event requires a specific type or response mode, technical and subject matter expertise may be provided by an appropriate person(s) from a supporting agency with skills relevant to the type of event. The individual will advise and/or direct operations within the context of the Incident Command System structure.

**Section 2.02 Organization**

(a) The City does not own any energy facilities. Electricity is provided by Seattle City Light and natural gas is provided by PSE. Restoration of normal operations at energy facilities is the responsibility of the facility owners.

(b) Seattle City Light and PSE are the lead organizations for the rapid restoration of infrastructure-related services after an incident occurs. Appropriate entities of the private sector will be integrated into ESF #12 planning and decision-making processes and will be included in the disaster related training and exercise activities of the City.

(c) The PW will coordinate the activities within ESF #12 with Seattle City Light and PSE to ensure an effective and efficient response to energy related situation during a disaster within the City.

(d) Additional resources or assistance may be obtained through existing mutual aid agreements and/or contracts through private contractors. During a disaster all resources should be accounted for at the EOC. Request for additional assistance should be coordinated through the EOC to the Z1 EC, KC ECC, and/or the State Emergency Operations Center. Communications between the IC and the EOC shall be through established channels.

(e) A complete list of utility service providers is provided in Appendix A. This ESF provides for electricity and natural gas systems only. Other utilities such as water and sewer are coordinated through ESF # 3 Public Works and Engineering.

**Section 2.03 Actions**

(a) Preparedness:

(i) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(ii) Maintain a list of City assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources, if applicable,

(iii) Assign and schedule sufficient personnel to implement indentified tasks for an extended period of time,

(iv) Ensure lead agency personnel are trained in their responsibilities and duties,

(v) Develop and implement emergency response strategies relating to energy response

(vi) Maintain liaison with support agencies,

(vii) Conduct All Hazards exercises involving energy.

(b) Response:

(i) Coordinate operations in the Shoreline EOC and/or at other locations as required,

(ii) Develop, prioritize and implement strategies for the initial response to EOC requests.

(iii) Establish communications with appropriate field personnel to ensure readiness for timely response,

(iv) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(v) Coordinate with support agencies, as needed, to support emergency activities,

(vi) Obtain other resources through the Statewide Emergency Management Mutual Aid and Assistance Agreement and/or other Regional Mutual Aid Agreements,

(vii) Coordinate with other jurisdictions to obtain resources and facilitate an effective emergency response among all participating agencies,

(c) Monitor and direct response activities to include prepositioning for response/relocation due to the potential impacts of the emergency situation.

(d) Recovery

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

(e) Mitigation

(i) Mitigation activities for this ESF are covered in the Multijurdictional Hazard Mitigation.

## Article III. Responsibilities

### Section 3.01 Lead Agency

(a) Public Works Department

(i) Monitor energy sector emergency response and recovery operations.

(ii) Make specific requests for energy restoration assistance, as needed.

(iii) The PW Director or designee will designate at least one EOC representative to coordinate communications, field operations, and resources for maintenance crews from the EOC when it is activated. The Liaison Officer in the EOC can fulfill this role.

(iv) PW will provide damage assessments of public utility facilities. The department will also provide for emergency repairs and restoration of all city-owned facilities. Priority shall be given to facilities which provide critical and essential services.

(v) Coordinate repair operations with outside agencies and private utility field representatives as appropriate.

(vi) Provide or contract major recovery work and/or services, as appropriate.

(vii) Provide debris removal, emergency protective measures, emergency temporary repairs and/or construction to (a) maintain passable vehicular circulation on priority routes, (b) control flooding on public drainageways or resulting from failure of public drainageways, (c) mitigate damage to public utilities caused by ground movement, and/or (d) mitigate damage to any facility, public or private, resulting from ground movement caused by the failure of public utilities.

(viii) Provide emergency public information through the EOC regarding matters of public health hazards related to damaged facilities.

(ix) Develop coordination mechanisms (i.e., franchise agreements, letters of understanding, contracts, and other formal documents) with utilities and other private businesses responsible for electricity and natural gas services to ensure all response and recovery operations are conducted in an orderly manner and in citywide priority sequence to the greatest extent possible.

(x) Communications shall be through normal established channels. (See ESF #2 – Information Systems, Communications and Warning)

(b) Seattle City Light - Electricity

i) Provide for the rapid restoration of infrastructure-related electrical services after an incident occurs.

ii) Coordinate with the City on matters relating to ESF #12 planning and decision-making processes.

iii) Participate in disaster related training and exercise activities, when requested.

iv) Provide for the continuation of service and energy resources to meet immediate local needs, whenever possible.

v) Coordinate with the PW department and the EOC to ensure an effective, efficient response during a disaster.

vi) Appoint a member to serve on the City's Emergency Management Council

(c) Puget Sound Energy – Natural Gas

(i) Provide for the rapid restoration of infrastructure-related natural gas services after an incident occurs.

(ii) Coordinate with the City on matters relating to ESF #12 planning and decision-making processes.

(iii) Participate in disaster related training and exercise activities, when requested.

(iv) Provide for the continuation of service and energy resources will be used to meet immediate local needs, whenever possible.

(v) Coordinate with the PW department and the EOC to ensure an effective, efficient response during a disaster.

(vi) Appoint a member to serve on the City's Emergency Management Council

**Section 3.02 Support Agency**

(a) Emergency Operations Center

(i) Submit and coordinate requests for resources to the Z1 ECC, KC ECC and/or State Emergency Operations Center. Facilitate communication with Seattle City Light and PSE EOCs to ensure effective and efficient response and recovery activities.

(ii) Coordinate all public information and instructions and media relations as defined in ESF #15 Public Affairs.

(b) Fire Department

(i) Provide support in debris removal, emergency protective measures, and utility restoration when appropriate.

(ii) Provide first line response for fires and other energy-related emergencies requiring trained personnel and equipment.

(iii) Provide support in establishing an ICP.

(c) Police Department

(i) Provide assistance in implementing road closures and detours for roadways.

(ii) Provide support in field operations as appropriate.

(iii) Provide perimeter control due to unsafe conditions.

(iv) Provide security and protection of supplies, including escorting fuel and generator deliver, as requested.

(d) All City Departments

(i) Provide support in the initial damage assessment of city infrastructure.

(ii) Provide assessment of damage or endangered structures due to flooding or land movement.

(iii) Provide support in field operations activities as appropriate.

(e) Zone 1 Emergency Coordinator

(i) Coordinate requests for resources from jurisdictions within Zone 1.

(ii) Facilitate communication with local jurisdictions, KC ECC, State Emergency Operations Center, Seattle City Lights and PSE, as needed.

(f) King County Emergency Coordination Center (KCECC)

(i) Coordinate requests for resources from Z1 EC and/or jurisdictions within King County.

(ii) Facilitate communication with Z1 EC, State Emergency Operations Center, Seattle City Lights, PSE, and local jurisdictions, as needed.

(g) Washington State Emergency Management Division

(i) Alerts appropriate state agencies of the possible requirement to supplement local energy and utility needs.

(ii) Coordinates with the Utilities and Transportation Commission and State Energy Office to provide supplemental assistance to local government.

## Article IV. Appendices

(a) Energy Services Emergency Contact Information

## Article V. References

(a) The National Response Framework, ESF #12 - Energy

(b) Washington State Comprehensive Emergency Management Plan

(c) Utility Franchise Agreements

## NATURAL GAS SERVICE

| | |
|---|---|
| Puget Sound Energy | 1-888-225-5773 |

## ELECTRICAL SERVICE

| | |
|---|---|
| Seattle City Light | (206) 625-3000 |
| Power Outages | (206) 684-7400 |
| Street Lights | (206) 684-7056 |

**ESF COORDINATOR:** Police Chief

**LEAD AGENCIES:** Police Department

**SUPPORT AGENCIES:** Shoreline Fire Department
Emergency Operations Center
E911 Communications Center

## Article I. Introduction

### Section 1.01 Purpose

(a) This document has been developed to coordinate public safety and security capabilities and resources to support the full range of incident management activities associated with a potential or actual natural or man-made disaster.

### Section 1.02 Scope

(a) This ESF addresses the coordination and provision of law enforcement and public safety related activities during a disaster or emergency. Those activities may include but are not limited to the following:

(i) Warning and evacuation

(ii) Damage assessment

(iii) Crime scene control

(iv) Search and rescue

(v) Emergency Operations Center (EOC) representation and coordination

(vi) Emergency transportation

(vii) Emergency communications

(viii) Control of disaster site access

(ix) Looting control

(x) Crowd control

(xi) Emergency traffic control

(xii) Threat mitigation

(xiii) Investigation

(xiv) Intelligence

(xv) Security

### Section 1.03 Situation

(a) A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to field efforts to save lives and protect property.

(b) Weather conditions such as temperature extremes, snow, rain, and high winds may pose additional hazards for first responders.

(c) Terrorist activity, including the threat of terrorist activity, may hamper the ability for personnel to respond quickly.

**Section 1.04 Assumptions**

(a) The resources routinely available within the affected emergency area may be inadequate to conduct comprehensive response

(b) Police 800-MHz radio communication may be compromised, either totally or in part.

(c) Access may be hampered by bridge failures, traffic, landslides, damaged road systems, air traffic restrictions, etc., making conventional travel to the incident location extremely difficult or impossible.

(d) Calls for service may overwhelm the primary 911 Center(s)

(e) Accidents and natural events evolve in a generally predictable pattern whereas the effects of deliberate criminal acts are more difficult to predict and may include steps to hinder the response.

(f) Due to an already overwhelmed road network, during a disaster or major incident supplies and mutual aid may have difficulty reaching the scene and patients and evacuees may have difficulty moving to hospitals or shelters.

**Section 1.05 Policies**

(a) All activities within ESF 13 – Public Safety, Law Enforcement and Security will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) As a signatory of the King County Regional Disaster Framework, through the use of the Washington State Mutual Aid System, (WAMAS), and through local mutual aid agreements, the City and Fire Department will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible. The City will utilize those same systems when requesting assistance.

(c) Local authorities have primary responsibility for public safety and security within the City, and are typically the first line of response and support in these activities.

(d) The City's Police Department (PD) will coordinate activities within ESF #13. It is anticipated that the City will retain primary authority and responsibility for law enforcement activities, utilizing the ICS for all response and recovery activities.

(e) Law enforcement units supplied by other levels of government will remain under the command of that agency but will operate under the direction and control of the PD while operating within the City.

## Article II. Concept of Operations

### Section 2.01 General

(a) The City's PD is a contracted unit of the King County Sheriff's Office and therefore functions as both the City's PD and as part of the King County Sheriff's Office.

(b) The City's PD is the lead agency for the coordination of public safety, law enforcement, and security activities within the City.

(c) An incident command post (ICP) will be established for the coordination of field operations. The Incident Commander (IC) will provide regular status reports and provide timely reports to the EOC when activated. A unified command system will be utilized, whenever necessary, to enable multiple departments/agencies to coordinate operations with the ICP.

(d) In addition to maintaining 24-hour operational capabilities, the PD has two way radio communications on the 800 MHz system. Each officer has a handheld radio and mobile phone. In addition, the Police Department has a portable satellite phone and has access to a fixed one installed in the City's EOC located at the Shoreline Fire Department Headquarters. (See ESF #2 Communications, Information Systems, and Warnings).

(e) The PD is set up with "Gold/Green" squads of officers in the event of an emergency. The on-duty supervisor will distribute personnel into Gold and Green squads depending on who is actually on duty for the transition period. The Gold/Green schedule will change shifts at 6:00 a.m. and 6:00 p.m. after the transition period. The department will work two shifts of 12 hours, 24 hours a day, seven days a week until the event is over.

(f) PD units, with the use of their sirens and public address systems, will be used to disseminate warning and emergency information.

(g) The Police Chief or designee may designate a communications officer to operate backup communications equipment from the EOC when requested by the EOC manager or anytime it is necessary to supplement regular communications capabilities to provide for the coordination and/or allocation of city resources.

(h) Department personnel shall operate according to specific directives, department standard operating procedures (SOPs) and by exercising reasonable personal judgment when unusual or unanticipated situations arise and command guidance is not available.

(i) The alert system utilized to mobilize PD personnel shall be the call out system established with critical incident standard operating procedures. As communication systems may fail in a major event, Police staff should report to work as soon as possible following obvious major disasters regardless of whether they have been notified.

(j) Mutual aid agreements exist with all Washington law enforcement agencies. Letters of mutual support exist with various law enforcement agencies. Supplemental law enforcement assistance should be requested through the EOC when activated.

(k) Communications will be through established channels. (See ESF #2 – Communications, Information Sharing and Warning)

(l) When an event requires a specific type or response mode, technical and subject matter expertise may be provided by an appropriate person(s) from a supporting agency with skills relevant to the type of event. The individual will advise and/or direct operations within the context of the Incident Command System structure.

(m) Throughout the response and recovery periods, The Police Chief, or delegate, will evaluate and analyze information regarding law enforcement and security requests for response; develop and update assessments of the security situation and status in the impact area; and implement contingency planning to meet anticipated demands or needs.

(n) The Police Captain, or delegate, will be responsible for evaluating and notify command personnel of any threats. The Police Department will coordinate the response to threats. The Chief of Police will determine which department (s) will be notified. Notification may be limited to protect the investigation. For specific threats, the EOC may be activated and an Incident Action Plan written. Potential strategies for addressing a threat include, but are not limited to:

(i) Increasing security at likely targets;

(ii) Conducting an investigation;

(iii) Increasing intelligence collection, analysis and dissemination;

(iv) Staging key resources;

(v) Activating command centers;

(vi) Close coordination with other response partners;

(vii) Dispersal of key resources;

(viii) Closure or limitation of access to certain critical infrastructure; Modification of the transportation network security measures;

(ix) Closure of schools and/or other public buildings;

(x) Cancellation of public events;

(xi) Activation of mutual aid;

(xii) Requests for state or federal resources;

(xiii) Public information.

**Section 2.02 Organization**

(a) The Police Chief or successor will designate an EOC representative to coordinate field operations and resources from the EOC when it is activated.

(b) The Police Department will follow all departmental policies and procedures relating to chain of command and on-scene management and will utilize the ICS.

(c) A unified command structure will normally be established when law enforcement agencies from outside the City are assisting with operational activities within the City.

(d) In the event military support is utilized within the City, the Police Chief or designee will coordinate activities with the military commander.

(e) Communications between the EOC and the IC will be through established channels.

**Section 2.03 Actions**

(a) Preparedness:

(i) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(ii) Maintain a list of Police Department assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources, if applicable,

(iii) Assign and schedule sufficient personnel to implement indentified tasks for an extended period of time,

(iv) Ensure lead agency personnel are trained in their responsibilities and duties,

(v) Develop and implement emergency response strategies relating to Public Safety, Law Enforcement and Security.

(vi) Maintain liaison with support agencies,

(vii) Conduct All Hazards exercises involving public safety, law enforcement and security.

(b) Response:

(i) Coordinate operations in the Shoreline EOC and/or at other locations as required,

(ii) Develop, prioritize and implement strategies for the initial response to EOC requests.

(iii) Establish communications with appropriate field personnel to ensure readiness for timely response,

(iv) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(v) Coordinate with support agencies, as needed, to support emergency activities,

(vi) Obtain other resources through the Law Enforcement State Wide Mobilization and Mutual Aid Plan, Washington State Mutual Aid System (WAMAS),and/or Regional Mutual Aid Agreements,

(vii) Coordinate with other jurisdictions to obtain resources and facilitate an effective emergency response among all participating agencies,

(c) Monitor and direct response activities to include prepositioning for response/relocation due to the potential impacts of the emergency situation.

(d) Coordinate with the Logistic Section of the EOC to serve as an informational group on the availability and coordination of resources from volunteers and donations.

(e) Pre-position response resources when it is apparent that resources may be necessary.

(f) Upon arriving at the incident scene, the Incident Commander may do the following:

(i) The response to a major incident or disaster will build on the initial response listed above in normal operations.

(ii) Law enforcement will secure the incident scene.

(iii) Establish ingress and egress routes for responders.

(iv) Operate a credentialing system.

(v) Protect critical infrastructure.

(vi) Evacuate involved areas.

(vii) Conduct an investigation.

(viii) Provide bomb sweeps and render safe procedures.

(ix) Coordinate public information.

(x) Provide traffic control.

(g) Recovery

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

(h) Mitigation

(i) Mitigation activities for this ESF are covered in the Multijurdictional Hazard Mitigation.

## Article III. Responsibilities

### Section 3.01 Lead Agency

(a) Police Department

(i) Provide support to the Director of Emergency Management or the EOC Manager in the dissemination of emergency warning information to the public and in the operation of the EOC. (See ESF #2)

(ii) Provide command and control for field operations through established command posts as appropriate.

(iii) Provide law enforcement activities within the City that includes the enforcement of any special emergency orders issued.

(iv) Provide security and perimeter control at incident scenes and the EOC during activation when appropriate.

(v) Provide emergency traffic control.

(vi) Assist and support Public Works Department in determining satisfactory evacuation routes. (See ESF #16 Evacuation)

(vii) Provide direction and control for evacuation efforts as appropriate. (See ESF #16 - Evacuation)

(viii) Provide direction and control for urban search and rescue activities. (See ESF # 9 Urban Search and Rescue)

(ix) Work with the Fire Department in locating and setting up possible temporary morgue sites and provide site security. (See ESF #8 Medical, Health, and Mortuary Services)

(x) Provide windshield survey and initial City-wide damage assessment in coordination with the Shoreline Fire Department and the City's Customer response Team as appropriate.

(xi) Document costs and activities.

(xii) Develop emergency and evacuation plans for facilities under department management.

(xiii) Provide for the identification and preservation of essential department records.

(xiv) Develop and maintain resource lists for equipment, personnel and supply sources.

(xv) Develop and maintain departmental plans and standard operating procedures for emergency operations.

(xvi) Coordinate with the Shoreline Fire Department to develop and maintain a public warning system for the City. (see ESF #2 Communications, Information Systems, and Warning)

(xvii) Communications shall be through normal established channels. (See ESF #2 – Information Systems, Communications and Warning)

**Section 3.02 Support Agency**

(a) Emergency Operations Center

(i) Activate, when necessary, to provide for coordination of resources with all agencies involved.

(ii) Coordinate information between various departments within the City to ensure efficient and accurate communication.

(iii) Submit and coordinate requests for additional resources to the Zone 1 Emergency Coordinator (Z1 EC), King County Emergency Coordination Center (KC ECC), or Washington State Emergency Operations Center.

(b) Fire Department

(i) The Shoreline Fire Department (FD) will assist and support the PD as needed with activities within this ESF.

(c) 911 Center(s)

(i) King County Sherriff's Office 911 Center will provide for the continuation of day to day emergency communication, whenever possible. They have back-up contingencies in place if their 911 lines are not operational.

(d) Zone 1 Emergency Coordinator

(i) Communicate and coordinate with jurisdictions within Zone 1 and KC ECC.

(ii) Submit and coordinate requests for assistance from Zone 1 jurisdictions with KC ECC to ensure proper distribution of resources.

(e) King County Emergency Coordination Center (KCECC)

(i) Communicate with Zone 1, 3, and 5 ECCs and cities, State Emergency Operations Center and all related agencies regarding law enforcement activities.

(ii) Coordinate requests for resources with the above entities and facilitate the equitable distribution of available resources.

(f) Washington State Emergency Operations Center

(i) Provide coordination of State resources to provide support, as appropriate, when all local, regional and county resources have been expended.

(ii) Facilitate the requisition of resources from other states through the Emergency Management Assistance Compact (EMAC).

(iii) Request and coordinate Federal resources through the Federal Emergency Management Agency (FEMA).

(g) Washington State Patrol

(i) Assist the PD in law enforcement operations, when requested and as available.

(ii) Coordinate and maintain liaison with the appropriate state departments, as identified in the Washington State Comprehensive Emergency Management Plan.

(iii) Provide warning and communications support.

## Article IV. Appendices

(a) Police Department Disaster Incident Checklist

See Terrorism Incident Annex for additional information on Terrorism Response.

## Article V. References

(a) Mutual Aid Act (Washington Laws of 1985, Chapter 89, Section 7 [1])

(b) The National Response Framework

(c) Washington State Comprehensive Emergency Management Plan

(d) King County Zone 1 Regional Disaster Plan

(e) Washington State Law Enforcement State Wide Mobilization and Mutual Aid Plan

_____ 1. Notify key staff: The decision to notify remaining staff of possible activities will be made on the basis of information received from the EOC and based on visual observations of the conditions that pose a threat to lives and/or property of citizens.

_____ 2. Activate emergency operating procedures.

_____ 3. Activate public warning and evacuation procedures, as necessary.

_____ 4. Support emergency operations as defined in agency emergency operating procedures or as requested by the EOC or the King County EOC.

_____ 5. Provide windshield survey and initial citywide damage assessment as appropriate.

_____ 6. Assist and support Public Works in determining satisfactory evacuation routes.

_____ 7. Provide direction and control for evacuation efforts as appropriate.

_____ 8. Establish an Incident Command Post as needed.

_____ 9. Provide support for the King County Medical Examiner in the identification of the deceased.

_____ 10. Provide direction and control for urban search and rescue activities.

_____ 11. Provide crime scene, security and perimeter control at incident scenes and the EOC as appropriate.

_____ 12. Document costs and activities.

**ESF COORDINATOR:** Emergency Management Coordinator

**LEAD AGENCIES:** City Manager's Office

Public Works

**SUPPORT AGENCIES:** All City of Shoreline Departments
Zone 1 Emergency Coordinator
King County Emergency Coordination Center
Washington State Emergency Management Division

## Article I. Introduction

### Section 1.01 Purpose

(a) The purpose of this ESF is to provide guidance for the implementation of federal, state, county, local, and private resources to enable the long term recovery of the community and to reduce or eliminate risk from future incidents, whenever possible. This may include economic, infrastructure and human services needs recovery. Detailed recovery planning can be found in the City of Shoreline Disaster Recovery Plan.

### Section 1.02 Scope

(a) This ESF applies to organizations and agencies that may be involved in the long term recovery of the City of Shoreline (City) and the mitigation of future disasters.

(b) This Recovery Annex is designed for the following:

(i) To describe the roles and responsibilities of the City Manager's Office, Emergency Management Coordinator, and other supporting departments in Emergency Support Functions (ESFs) in both short and long term recovery activities.

(ii) To guide interactions with external partners in recovery, including other jurisdictions, county, state and federal agencies, as well as community organizations and citizens.

(c) It is not the intent of this document to anticipate all possible contingencies resulting from potential disasters. Rather, the purpose is to establish a flexible framework from which, at the time of a disaster, City managers will assess recovery needs and develop a recovery strategy, based on the nature and scope of the event. Furthermore, this ESF is not meant to replace the Shoreline Disaster Recovery Plan.

### Section 1.03 Situation

(a) A public emergency or other significant event may be of such severity and magnitude as to require long-term community recovery and mitigation. ESF-14 will provide the overall coordination of Federal, City government, and private sector recovery from long-term consequences of a disaster affecting City of Shoreline.

### Section 1.04 Assumptions

(a) The resources routinely available within the affected emergency area may be inadequate to conduct comprehensive response

(b) As a result of a disaster event, there may be long-term economic, physical, and social/psychological impacts and other hardships that face the City government, individuals, businesses and non-profits;

(c) Short-term recovery begins immediately following a disaster

(d) The extent and type of recovery activities will be driven by the impacts of the disaster event. Appropriate city departments and external organizations will be involved at different times and at different levels in the recovery process; event; long-term recovery may take several years;

(e) Decisions impacting recovery will be made under great pressure of competing priorities, limited resources and the desire to bring the community quickly back to "normal".

(f) Personnel may not return to their normal assignments for a period of weeks or months, depending on the level of effort required.

(g) Depending on the extent of damage to infrastructure, housing stock, and business centers, the long-term recovery phase may provide opportunities to implement economic or redevelopment strategies that enhance portions of the City;

(h) The City leads recovery activities for its jurisdiction. Support from neighboring jurisdictions and from State and Federal agencies will be requested as needed. Some city agencies with infrastructure outside the City of Shoreline boundaries may be required to work with other entities to restore service and receive the full benefit of recovery funding.

(i) The State Emergency Operations Center and the Federal Emergency Management Agency (FEMA) offer grant assistance programs to help offset the burden of disaster recovery of public and private interests following appropriate disaster declaration procedures. It is recognized that the terms and funding levels may change.

(j) Local businesses and organizations are willing, whenever possible, to assist the community and the local government during a period of resource shortage, particularly following a large-scale disaster.

**Section 1.05 Policies**

(a) All activities within ESF 14 – Long term Community Recover will be conducted in accordance with the National Incident Management System (NIMS), the Washington State Comprehensive Emergency Management Plan, and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) As a signatory of the King County Regional Disaster Framework, through the use of the Washington State Mutual Aid System, (WAMAS), and through local mutual aid agreements, the City and Fire Department will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible. The City will utilize those same systems when requesting assistance.

(c) ESF 14 excludes economic policymaking and economic stabilization

(d) Long term community recovery and mitigation efforts are forward looking and market based, focusing on permanent restoration of infrastructure, housing, and the local economy, with attention to mitigation of future impacts of a similar nature, whenever possible.

(e) The City will utilize the post-incident environment as an opportunity to measure the effectiveness of previous community recovery and mitigation efforts.

(f) ESF 14 facilitates the application of loss reduction building science expertise to the rebuilding of critical infrastructure.

(g) The long term recovery efforts for the City will be coordinated through the Emergency Operations Center (EOC) until the EOC is closed. Once the EOC has been closed, the efforts will be coordinated from the City Manager's Office, under the direction of the Recovery Coordinator appointed by the City Manager, until all recovery and mitigation activities have been concluded.

(h) The Emergency Management Coordinator in conjunction with the Administrative Services Director and other department Directors as applicable will apply for and coordinate the receipt of state and federal recovery funds.

(i) The City will make reasonable attempts to ensure application process's for services and benefit programs are accessible, including providing phone registration for people with mobility issues, communicating with people utilizing preferred communication method, such as emails with large font or phone calls for people who might be sight impaired. Agencies should strive to avoid mandating only in-person or only online applications.

(j) The City will make the best use possible of key post-disaster opportunities to improve, strengthen and revitalize the city, and will go beyond using "back to normal" as the main disaster recovery goal. Specifically, the City will strive to:

  (i) Integrate cost-effective hazard mitigation principles into repairs and reconstruction

(ii) Be guided by policies and visions set forth in the City's comprehensive plan and neighborhood plans to guide redevelopment

**Article II. Definitions**

| Word | Definition |
|---|---|
| **Economic Recovery** | Involves economic impact assessment to the City and the business community, support to small businesses from federal and other sources, and economic revitalization planning; |
| **Infrastructure Recovery** | Includes repair and reconstruction of the physical plant – facilities, infrastructure, utilities, communications and other life-line services; |
| **Human Needs Recovery** | Encompasses disaster-related community outreach, long-term housing, health (physical and mental), human services, assistance to non-profit agencies, and problem-solving to address unusual circumstances generated by the disaster for which no existing programs provide assistance. |
| **Short-term recovery** | Involves<br>1) immediate restoration of services and government functions as well as<br>2) Assistance to residents in resuming essential life activities.<br><br>Activities may include: sheltering, debris clearance, damage/impact assessment, temporary service provision, traffic control, temporary space for displaced government/business/community functions, public information, inspections and permitting for repairs, volunteer and donations management, and initiation of state/federal assistance programs. Immediate mental health, public health or other community issues may also be addressed.<br><br>There can be no definitive time period for short or long-term recovery as the process is dictated by the type and scope of event. Typically a moderate incident may require 6 - 12 months to bring circumstances back to normal functionality. |

| | |
|---|---|
| **Long-term recovery** | Involves<br><br>1) permanent repair and reconstruction of infrastructure, facilities, or property,<br><br>2) area specific or city-wide redevelopment planning,<br><br>3) economic and business recovery, and<br><br>4) social/community restoration.<br><br>Long-term recovery topics include temporary and permanent housing, transportation, economic development, historic preservation, and community revitalization.<br><br>Due to the nature of restorative activities involved, long term recovery often requires years. A typical timeframe would be 1 – 10 years. |

## Article III. Concept of Operations

### Section 3.01 General

(a) The City Manager's Office will advise the City Council on the long term recovery implications of response activities and will coordinate the transition from response to long term recovery.

(b) The City will conduct assessments of the social and economic consequences of the disaster within the City to better understand the requirements needed to develop an effective long term recovery plan.

(c) The City will determine/identify responsibilities for long term recovery activities within the City and will coordinate with all agencies involved to ensure follow through of recovery and mitigation efforts.

### Section 3.02 Organization

(a) The City Manager's Office will serve as the lead agency for the coordination of long term recovery and mitigation activities within the City.

(b) The Emergency Management Coordinator will serve on the Recovery Task Force and assist with coordination of the long term recovery and mitigation activities with all of the applicable city departments and community partners.

(c) All City departments will participate in post-incident coordination activities to ensure an effective long term recovery process.

### Section 3.03 Actions

**(a) Preparedness:**

(i) Prepare and maintain the City's Disaster Recovery Plan.

(ii) Assign and schedule sufficient personnel to implement indentified tasks for an extended period of time,

(iii) Ensure lead agency personnel are trained in their responsibilities and duties,

(iv) Develop and implement emergency response strategies relating to long term community recovery, especially those of community and business preparedness.

(v) Maintain liaison with support agencies,

(vi) Conduct All Hazards exercises involving public long term community recovery.

**(b) Response:**

(i) Coordinate operations in the Shoreline EOC and/or at other locations as required,

(ii) Begin thinking of Recovery strategies shortly after activating the EOC, so that policies, resources, and community partners can be effectively utilized,

**(c) Recovery**

(i) Detail recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

**(d) Mitigation**

(i) Mitigation activities for this ESF are covered in the multi-jurisdiction Hazard Mitigation.

## Article IV. Responsibilities

### Section 4.01 Lead Agency

**(a) City Manager's Office**

(i) Lead long term recovery planning efforts within the City by appointing the Recovery Coordinator before the EOC is fully deactivated, and the members of the Recovery Task Force. (See Recovery Plan for details).

(ii) Coordinate the post-incident assistance efforts within the City.

(iii) Coordinate with the EOC for the transition from response activities to long term recovery activities.

(iv) Coordinate with federal, state, county, local and private organizations involved in the long term recovery activities.

**(b) Public Works Department**

(i) Identify the community lifeline systems and public safety services that need restoration and/or replacement in order for them to be back in service and fully functional. This will be coordinated with the Recovery Task Force as identified in the City of Shoreline Recovery Plan. Examples of these community lifelines are:

- Roadways
- Bridges
- Water and sewer lines
- Electric and gas
- communication systems

- critical facilities (Police, EOC, Fire, City Hall, etc)

(ii) Establish timelines with the agency responsible for the restoration
(iii) If it is a City owned system or structure assign staff to establish a timeline for restoration.
(iv) Implement the strategies developed for timely and reliable functioning of these systems and facilities.
(v) At the time of this planning of restoration, consider what enhancements to the systems for redundancy or locations of infrastructure should be integrated in order to make them less vulnerable in the future.

Support Agency

**(a) All City Departments**

(i) Document all costs associated with long term recovery and mitigation.

(ii) Coordinate activities with the EOC and the City Manager's Office to ensure effective recovery and mitigation activities.

(iii) Assist with the development of a city-wide long term recovery plan and operational procedures

(iv) Train departmental personnel in the implementation of the recovery plan and operational procedures.

**(b) King County Emergency Coordination Center**

(i) Coordinate county, state and federal long term recovery assistance with communities within King County to ensure equitable distribution of resources.

**(c) Washington State Emergency Management Division**

(i) Support local long term recovery and mitigation activities. This support will be contingent upon the resources available.

## Article V. Appendices

## Article VI. References

(a) The National Response Framework

(b) Washington State Comprehensive Emergency Management Plan

(c) King County Regional Disaster Framework

(d) City of Shoreline Disaster Recovery Plan

**ESF COORDINATOR:** City Public Information Officer

**LEAD AGENCIES:** Management Analyst/Media Liaison, City Manager's Office

**SUPPORT AGENCIES:** Fire Department – Public Information Officer
Police Department – Public Information Officer
Emergency Management Coordinator
School District – Public Information Officer
All Departments
King County Emergency Coordination Center
State of Washington
Federal Government

## Article I. Introduction

### Section 1.01 Purpose

(a) To provide guidance for the development and delivery of accurate, coordinated, and timely incident-related information to affected audiences, including the citizens of the City of Shoreline (City), City personnel and their families, government and public agencies, the media and the private sector.

### Section 1.02 Scope

(a) This ESF addresses the communication needs of the City and outlines the responsibilities for processing, coordinating, and disseminating incident-related information to affected audiences.

### Section 1.03 Situation

(a) A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to field efforts to save lives and protect property. Activation of the Public Affairs function is contingent on the need to keep the public informed of the status of the emergency/disaster, reassured of the actions taken to respond to the emergency/disaster by the City and other jurisdictions/agencies, and informed on actions the public should take in response to the emergency/disaster.

(b) After a public emergency, normal means of communications in the affected area may be destroyed or severely disrupted; therefore, only limited and incomplete information may be expected from the area until communications can be restored.

### Section 1.04 Assumptions

(a) The resources routinely available within the affected emergency area may be inadequate to conduct comprehensive response

(b) Decisions impacting recovery will be made under great pressure of competing priorities, limited resources and the desire to bring the community quickly back to “normal”.

(c) Personnel may not return to their normal assignments for a period of weeks or months, depending on the level of effort required.

(d) The PIOs are trained in Public Affairs functions, including operation of the PIO Unit at the EOC and receive regular updates/training on related issues.

### Section 1.05 Policies

(a) All activities within ESF 15 – Public Affairs will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) As a signatory of the King County Regional Disaster Plan and through local mutual aid agreements, the City will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible.

(c) In the event of a disaster or emergency situation, it is the responsibility of the City to provide accurate and timely incident-related information to affected audiences.

(d) The release of incident-related information will be through the Emergency Operations Center (EOC) or the Joint Information Center (JIC).

(e) All incident-related information will be developed by the Public Information Officer (PIO) in coordination with EOC staff.

(f) Before being released to the public, all incident-related information must be approved by the Emergency Management Coordinator (EMC) or his/her designee.

(g) The City will make a reasonable effort, when necessary, to consider cultural, social, people with disabilities, and economic backgrounds when considering community outreach and communications. This may include format of services, languages offered, colors of handouts, font size, etc.

(h) The City will make a reasonable effort, to offer written text in different languages, when appropriate.

(i) In the event of an after-hours emergency, such as an earthquake, major storm, or other major disruption, it's possible PIO's may need to report to an alternative site for the EOC.

(j) As an acknowledgment of different jurisdictions, PIOs staffing the EOC/ JIC will avoid statements that evaluate or judge other governmental agencies. Public information staff will take care not to provide information beyond the expertise or purview of the City. They will refer such matters to the appropriate jurisdiction, most likely via that jurisdiction's JIC.

## Article II. Concept of Operations

### Section 2.01 General

(a) The release of incident-related information is the responsibility of the City through either the EOC or the JIC.

(b) When activated, the King County Emergency Coordination Center (KC ECC), Public Health – Seattle- King County and the Washington State Emergency Operations Center may release incident-related information to the affected audiences and the public by working with lead agency.

(c) In the event of an Incident of National Significance, the Federal Emergency Management Agency (FEMA) may provide support to the City to assist with the dissemination of accurate and timely information.

(d) In the event of a terrorist incident, the release of information to the public may be coordinated with the Federal Bureau of Investigation (FBI) and other Federal agencies.

(e) During an incident of national significance, the State Emergency Operations Center and FEMA may establish a JIC to coordinate federal, state, and local information.

(f) Demands for information from media outside the City will be significantly increased during and after a disaster.

(g) Normal means of communication within the affected areas may be either destroyed or largely incapacitated; and therefore only limited or incomplete information should be anticipated from the disaster area until communication can be restored.

(h) Sufficient support personnel may be available to coordinate public information and interface with the media and other agencies.

(i) The Incident Command System (ICS) will be used by all organizations operating within this ESF.

**Section 2.02 Organization**

(a) The Emergency Management Director will appoint a PIO to coordinate the dissemination of incident-related information to the public.

The following individuals are designated to serve as PIO:

(i) Management Analyst/Media Liaison

(ii) Assistant City Manager

(iii) Emergency Management Coordinator – if it is before or after the EOC is activated. (i.e. pre or post event information).

Support may be provided by the following:

(iv) Shoreline Police Department PIO

(v) Shoreline Fire Department PIO

(vi) Shoreline School District PIO

(vii) Other area PIO's from King or Snohomish County

(b) The release of incident-related information shall be coordinated by the PIO through the EOC or JIC.

(c) Assistants may be assigned from other agencies or departments involved.

(d) The designated PIO may appoint an Assistant PIO as needed. This Assistant PIO may be used to ensure the media is kept informed regarding media briefing locations.

(e) A media staging area will be designated by the PIO and the Emergency Management Coordinator.

(f) The location of media briefings will be determined by the event. In the event that the location is not functional or communications are inadequate, an alternate location will be identified and announced by the PIO.

(g) In some situations, it may be necessary to release incident-related information from field command posts. Should this occur, the Incident Commander (IC) will contact the EOC in a timely manner and provide a detailed account of the information that was released.

(h) The PIO will utilize the PIO Emergency Checklist and the PIO Press Release Worksheet during any emergency situation or disaster that requires the dissemination of incident-related information to the public. (See Appendix A - PIO Emergency Checklist and Appendix B - Press Release Worksheet).

(i) Communications between the EOC and the IC will be through established channels.

**Section 2.03 Actions**

(a) **Preparedness**:

(i) Coordinate with local media on public information procedures, content of information, information dissemination strategies, and roles and responsibilities of the Public Information Officer (PIO) under ICS.

(ii) Assist in the dissemination of written and graphic disaster preparedness materials such as brochures and publications, public presentations, news releases, and media events. The information is to encourage preparedness activities, awareness, and personal responsibility to minimize the loss of life and property during a disaster. This information also identifies vulnerable areas for each hazard as described in the All-Hazards Mitigation Plan.

(iii) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(iv) Assign and schedule sufficient personnel to implement indentified tasks for an extended period of time,

(v) Ensure lead agency personnel are trained in their responsibilities and duties,

(vi) Develop and implement emergency response strategies relating to long term community recovery.

(vii) Maintain liaison with support agencies,

(viii) Conduct All Hazards exercises involving public affairs

(b) **Response**:

(i) Coordinate operations in the Shoreline EOC and/or at other locations as required,

(ii) Develop, prioritize and implement strategies for the initial response to EOC requests.

(iii) Establish communications with appropriate field personnel to ensure readiness for timely response,

(iv) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(v) Coordinate with support agencies, as needed, to support emergency activities,

(vi) Obtain other resources through the Statewide Emergency Management Mutual Aid and Assistance Agreement and/or the Regional Mutual Aid Agreements,

(vii) Coordinate with other area PIO's to obtain resources and facilitate an effective emergency response among all participating agencies,

(c) Pre-position response resources when it is apparent that resources may be necessary.

(d) Arranging media briefings and media access to important news stories;

(e) Preparing the City Manager, and other officials, for media briefings, media advisories and releases;

(f) Arranging for public notice of City Manager proclamations, emergency ordinances, and executive orders;

(g) Arranging for the preparation of multilingual advisory and informational materials for the public, to include consideration for people with hearing and visual disabilities;

(h) Notify the media of disaster impacts, protective measures, and other topics that will facilitate and expedite response and recovery and address public information needs. Post all relevant information on the Regional Public Information network (RPIN) (http://www.rpin.org/rpinweb/)

(i) Provide updates to the news media about disaster conditions and actions taken in response to those conditions, primarily information and instructions provided for the survival, health, and safety of the citizens in the impacted area. Informational releases will be prepared via the following prioritization:

1) Lifesaving – including information essential to survival, health and safety

2) Recovery – including instructions concerning disaster recovery, relief, programs, and services

3) Other – including non-emergency notices released by participating government and volunteer agencies

**(j) Recovery**

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

**(k) Mitigation**

(i) Mitigation activities for this ESF are covered in the Multijurdictional Hazard Mitigation.

## Article III. Responsibilities

### Section 3.01 Lead Agency

**(a) Emergency Management Director/Coordinator**

(i) Appoint PIO to coordinate the dissemination of emergency public information.

(ii) Approve incident-related information prior to release by the PIO.

### Section 3.02 Support Agency

**(a) Public Information Officer (s)**

(i) Managing emergency public information before, during and after the incident;

(ii) Determine appropriate vehicle/format for all communications, releases, advisory bulletins, and interviews.

(iii) Correct misinformation being disseminated by media.

(iv) Send information to other jurisdictions' JICs and/or EOC's

(v) Monitor other jurisdictions' Web sites, provide links to other jurisdictions' Web sites, and/or post information on joint Web sites;

(vi) Participate in videoconferences among PIOs of other jurisdictions;

(vii) Participate in conference telephone calls among PIOs of other jurisdictions;

(viii) Contact public information officers of other jurisdictions to exchange information or coordinate activities;

(ix) Serve as the City's lead Public Information Officer. Establish and maintain standard operating procedures for use during emergencies, pre-establish priorities for release of emergency information. Establish contact with media; develop information dissemination channels and systems.

(x) Gather and coordinate emergency public information for timely release to the public, with approval by the Emergency Management Coordinator.

(xi) Give information briefings to City officials, King County, news media and the public.

(xii) Provide pre-printed emergency public information brochures for distribution to the public.

(xiii) Coordinate with King County when information is to be released via the Emergency Alert System and on RPIN.

(xiv) Notify appropriate agencies to assist in the dissemination of emergency public information.

(xv) Determine appropriate location(s) for public official and media briefings.

(xvi) Oversee all media releases.

(xvii) Provide liaison with State or County Public Information Officers.

(xviii) Provide support for King County jurisdictions and/or the JIC when activated by KCECC.

(xix) Maintain copies of information released.

**(b) City Departments**

(i) Provide timely information to the EOC regarding field activities and incident-related public information.

(ii) In coordination with the HR Director, timely information will be disseminated to employees with their families if necessary.

(iii) Coordinate requests for assistance through the EOC.

**(c) King County Emergency Coordination Center**

(i) Provide additional PIO Support

(ii) Establish a Joint Information Center (JIC) or Joint Information System to support regional events.

(iii) Provide additional PIO Support

**(d) State of Washington**

(i) The Governor's Communications Director serves as the State Emergency Public Information Officer (EPIO), and under the direction of the Governor, may direct, coordinate and supervise the release of all State emergency instructions and news releases pertaining to the State's disaster operations.

(ii) In the absence of the Governor's Communications Director or Assistant, the State Emergency Management Division's PIO may direct, coordinate and supervise the incident-related public information functions in coordination with local jurisdiction

(iii) The EPIO coordinates with local and federal agencies on the release of emergency information and instructions

**(e) Federal Government**

(i) The Department of Homeland Security (DHS) through the National Response Framework (NRF) ensures that sufficient Federal assets are deployed to the field during a potential or actual Incident of National Significance to provide accurate, coordinated, and timely information to affected audiences, including governments, media, the private sector, and the local populace.

(ii) According to the NRF, the DHS recognizes that it is the City's responsibility to provide information to the citizens of the City.

## Article IV. Appendices

(a) Public Information Officer Checklist

(b) Public Information Officer Press Release Worksheet

(c) Media Contact List

(d) Public Information Media Strategy

## Article V. References

(a) The National Response Framework, ESF #15 External Affairs

(b) Washington State Comprehensive Emergency Management Plan

(c) King County Regional Disaster Framework

(d) The National Incident Management System

In the event of a major emergency when communications may have been disrupted, pre-designated PIOs should report to the Emergency Operations Center (EOC) as soon as possible.

PRIOR TO ARRIVAL:

_____1. When possible, ask what the situation is, where the EOC is located, who the Emergency Management Coordinator is, and where they want you located.

_____2. Advise them of how long it will take for you to reach your assigned location.

AFTER ARRIVAL AT YOUR ASSIGNED AREA:

_____1. Meet with the Emergency Management Coordinator, or his designee, to get an update as to the situation and any specific concerns.

_____2. Establish a work area for yourself and an area for the media to be briefed. The media area should be a distance away from the EOC so there is no interruption in the work of the EOC.

_____3. Set up the network to have access to the information you need. A part of this process is to make sure field personnel know you are in place and will be doing releases.

_____4. Try to establish a set schedule for press conferences (such as every hour, every two hours). This will reduce interruptions and allow all to be aware when releases will be available.

_____5. If possible, develop or obtain handouts with basic information concerning the emergency. This will assure that all in the media get the same information and reduce the number of questions you will be asked.

_____6. Take a pro-active stance. Develop plans for possible situations that may occur. This could include such things as street closures, evacuations, information sheets on purifying water, guidelines for items to bring if evacuated to a shelter, etc.

_____7. If possible, acquire at least one person to assist you in the paperwork and the information handling process of the job.

_____8. If possible, get access to a computer, a copier, phone, etc

_____9. Coordinate with other PIO's, (Fire, Police, School, etc).

_____10 Remember to includes avenues of messaging that can reach people with hearing and visual disabilities or who may not have basic ways to receive information like TV, radio and print media.

DURING THE EMERGENCY:

_____1. Establish an event journal to log the emergency events and activities of the PIO function. This PIO event journal will be of value to track activities during the event and to evaluate activities after the emergency is over.

_____2. Establish a press release binder or folder. Keep copies of all press releases in chronological order.

_____3. Have regular briefings with the EOC to assure that you have timely information and the facts that the EOC needs to be disseminated.

_____4. Make extra copies of all press releases. This will allow you to update late arriving media without needing to recreate a release or to spend time giving the data verbally.

_____5. Post critical information and updates about road closures, event status, shelters, points of distribution, etc to www.RPIN.org

DEMOBILIZATION:

_____1. Assure all "loose ends" are taken care of and that there is someone available to handle any late-coming inquiries.

_____2. Make sure that the PIO event journal is up to date and covers all activities of your office.

_____3. Assure that any information the public needs to access is released to the media and to those who will be contacts after the EOC is deactivated.

Appendix B –Public Information Officer (PIO) Press Releases Worksheet

Action Item:_____ Date:_____

Time:_____

General Situation:_____

_____

Who:_____

_____

What:_____

_____

When:_____

_____

Where:_____

_____

Why:_____

_____

How:_____

_____

Source of Info:_____

Who was it released to:_____

*Comments:*

# Printed and/or Online Media

| Outlet | General Email | Phone |
|---|---|---|
| Shoreline Area News | editor@shorelineareanews.com | 206-650-1573 |
| Richmond Beach Newsletter | editor@richmondbeachwa.org | |
| Seattle Times | newstips@seattletimes.com | 206-464-2204 |
| Seattle P-I | citydesk@seattlepi.com | 206-448-8030 |
| The Everett Herald | newstips@heraldnet.com | 425-339-3428 |
| Seattle Weekly | news@seattleweekly.com | 206-623-0500 |
| Associated Press NW | apseattle@ap.org | 206-682-1812 |
| Puget Sound Biz Journal | seattle@bizjournals.com | 206-876-5500 |
| Seattle Daily Journal of Commerce | maudes@djc.com | 206-622-8272 |
| Russian World Newspaper | russianworld@russianreklama.net | 206-214-8232 |

## Television

| Station | Newsroom Email | Phone |
|---|---|---|
| KING5 TV (NBC) | newstips@king5.com | 888-557-8679 |
| KOMO TV (ABC) | tips@komo4news.com | 888-477-5666 |
| KIRO TV (CBS) | newstips@kirotv.com | 206-728-7777 |
| Q13 TV (FOX) | tips@q13.com | 206-674-1305 |
| NWCN (NW Cable News) | newstips@nwcn.com | 206-448-3600 |

## Radio

| Station | Newsroom Email | Phone |
|---|---|---|
| 88.5 KPLU | news@kplu.org | 253-535-7758 |
| 94.9 KUOW | newsroom@kuow.org | 206-543-2710 |
| 97.3 KIRO & 710AM KIRO | newsdesk@973kiro.com | 206-726-5476 |
| 97.7 KOMO & 1000AM KOMO | tips@komonews.com | 206-404-5666 |
| 570AM KVI | comment@kvi.com | 206-421-5757 |
| 1090AM KPTK | jim.trapp@cbsradio.com | 206-436-1090 |
| 1150AM KKNW | ericb@1150kknw.com | 888-298-5569 |

City of Shoreline's public information staff will provide information to media outlets and the public during an incident. These activities may be provided solely by the City of Shoreline or through the cooperation of multiple jurisdictions as indicated above. All of the same avenues referred to above can be utilized as well as email distribution list and recorded information on a designated phone number.

**Coordination with the Joint Information Center (JIC)**

Communications should be coordinated through the King County Joint Information Center (JIC) or Joint Information System (JIS); if a JIC or JIS has not been established, coordination should take place through the City's PIOs.

The Emergency Management Coordinator can assist the PIO in public information to be disseminated by directing them to subject matter experts or pre-scripted materials that can be used to educated the public. Information, covering the below topics, will be placed on the City's WEB site and on a pre-identified telephone number that will be set up so that citizens can also get recorded information.

- Shelter/Mass Feeding info
- Point of Distributions
- Traffic Detours
- Utility updates, if applicable
- Ongoing safety concerns
- Cleanup instructions for various types of debris to include:
    - Status of cleanup
    - Locations of drop-off or collection sites
    - How to source-separate waste
    - Handling procedures
    - Illegal dumping provisions
    - Addressing complaints regarding debris piles or illegal dumping
- Recovery issues

**Pre-scripted Information**

Public information products should use various types of information vehicles (print, radio, internet, etc.) and include pre-scripted information concerning topics, such as:

- Public Health Concerns

- Where and how to report damages
- How to file a missing person report
- Debris pick-up schedules
- Process for answering the public's questions
- Disposal methods and restrictions and penalties for creating illegal dumps
- Public drop-off locations for all debris types

**Distribution Strategy**

The public information strategy should include methods to disseminate the prepared information to the general public. This can be accomplished in a number of ways. The following are suggested vehicles for dissemination of information:

- **Media** – Local television, radio, newspapers, or community newsletters
- **Internet Site** – The City's WEBSITE and the Regional Public Information Network (RPIN [1])
- **Public Forums** – Interactive community meetings, or shopping mall kiosks
- **Direct Mail Products** – Door hangers, direct mail, fact sheets, flyers within billings, and billboards located at community gathering places, utilizing City of Shoreline CERT members, Police Volunteers, Block Watch Captains, Police Volunteers, Shoreline Auxiliary Communications Team and members of the City of Shoreline 14 Neighborhood associations.
- **Telephone Information Hotline** – Pre-identified telephone number that citizens can call to get recorded information.

**Media Distribution**

The City of Shoreline's Management Analyst/Media Officer has a listing of available media outlets and contact information and it is updated as needed.

The public information staff must take advantage of every information vehicle available if power, utilities, and other infrastructure have been damaged. Often, the best carriers of information are the responders in the field. The general public recognizes their role and frequently asks questions regarding the operations. Stocking the equipment and trucks with

[1] http://www.rpin.org/rpinweb/

flyers, pamphlets, and other print media allows responders to perform their duties while also satisfying the public's need for information. Post all relevant information on RPIN.

**Developing Messages in Alternate Languages and Formats**

Message materials have been developed in alternate languages that are spoken in the community. Based on the community demographics in the City of Shoreline, messages may need to be developed in the following languages:

- Spanish
- Russian
- Korean
- Chinese
- Filipino
- Vietnamese

Alternate formats or message materials have also been developed to assist the special needs population within the community. The following resources are available to develop messaging materials for alternate language and special needs community and are available both through calling 211 or using their on line service at www.win211.org

**Alternate Language/Translation Resources**

- American Red Cross Seattle/Kitsap Counties
- Chinese Information and Service Center
- Lutheran Community Services Northwest
- Refugee Federation Service Center
- Ukrainian Community Center of Washington
- Vietnamese Buddhist Community
- Public Health Seattle King County Web Site -Disaster preparedness fact sheets and flyers in Chinese, Korean, Russian, Spanish, Somalia, Spanish, Vietnamese
- Washington State Department of Emergency Management Preparedness Web Page (prepared messages in Spanish, Chinese, Russian, Korean, Vietnamese and large print).
- Additional WEB sites that can help with translations are:
    - http://www.allwords.com/

- http://www.freetranslation.com/
- http://babelfish.yahoo.com/
- http://www.paralink.com/

**Special Needs Message Development Resources**

- SignOn: A Sign Language Interpreting Resource, Inc.
- DSHS - Office of the Deaf and Hard of Hearing
- Washington Telecommunications Relay Service
- Northwest Braille Services
- Association of Retarded Citizens
- Seattle Speech and Hearing Center
- Public Health Seattle King County's Vulnerable Populations Action Team
- Washington State Department of Emergency Management Preparedness Web Page (prepared messages in Spanish, Chinese, Russian, Korean, Vietnamese and **large print).**

**ESF COORDINATOR:** Police Chief

**LEAD AGENCIES:** Police Department

**SUPPORT AGENCIES:** Public Works Department (PW)
Emergency Operations Center
Fire Department
All Departments
Zone 1 Emergency Coordinator
King County Coordination Center
State Emergency Operations Center
Washington Department of Transportation

**Note:**
The ESF 16 was created utilizing the King County Office of Emergency Management UASI Evacuation Template Project. Therefore, this ESF is in a slightly different format than other City of Shoreline CEMP ESF's.

## Article I. Introduction

### Section 1.01 Purpose

(a) This ESF has been developed to provide guidance to the City of Shoreline (City) to affect an evacuation should a major disaster threaten or occur within the City. Evacuations may result from naturally occurring events such as earthquakes, mudslides, health related incidents, flooding, volcanic activity, fires or from industrial accidents, terrorism or illegal activities like drug labs and waste dumping. They City may evacuate all or part of the City, including certain population groups, in order to protect the general safety and welfare of its citizens.

### Section 1.02 Mission Statement

The Police Department, in collaboration and consultation with the EM Coordinator and Emergency Management Council, is responsible for providing recommended changes and keeping the plan updated as needed in accordance with the CEMP maintenance plan.

### Section 1.03 Police Department Objectives

(a) To arrange for safe evacuations from the area requested to a destination able to receive the evacuees.

(b) To work with appropriate partners to utilize buses, cabulances, ambulances, and

appropriate modes of transportation to meet the needs of the population being evacuated.

(c) To effectively communicate to the population needing to be evacuated the necessity of the evacuation order to reduce loss of life or injuries.

(d) To effectively communicate to the population evacuated the necessary information updates in order to reduce loss of life or injuries.

(e) To ensure the area is safe prior to allowing populations evacuated back into the area evacuated.

**Section 1.04 Scope**

(a) **Legal Jurisdiction**

(i) This ESF addresses evacuation activities to ensure an efficient and effective evacuation of people within the City of Shoreline and the authorization, direction, routing and relocation of people from their homes, schools and places of business.

(ii) The City is situated in the northwestern corner of King County along the shores of Puget Sound. Shoreline is bounded by Lake Forest Park to the east, Seattle to the south, Puget Sound to the west and Snohomish County to the north. Shoreline covers 11.74 square miles and is Washington's fifteenth most populated city with a population of approximately 53, 000 people.

(b) **Geographical Distinctions Covered:**

(i) Flood Plain

(ii) Snow or Ice Hazard

(iii) Storm Surge

(iv) Earthquake Hazard

(v) Landslides

(vi) Wildland Fire

(vii) Hazardous Materials

(c) **Geographically-Distinctions Outside of City:**

(i) Potential Evacuation Destinations:

1) City of Seattle and cities south

2) Snohomish County (local cities) and cities/county north

3) Cities east i.e. Bothell, Woodinville, or eastside cities

(d) **Parties involved in planning and conducting an evacuation**

(i) City Manager, Emergency Management Coordinator, Police Chief, Fire Chief, and Public Works Director

(ii) Zone 1 Emergency Coordinator (Z1EC)

(iii) King County Emergency Coordination Center (KCEOC)

(iv) State Emergency Operations Center

(v) City of Seattle

(vi) Town of Woodway

(vii) City of Edmonds

(viii) City of Mountlake Terrace

(ix) City of Lake Forest Park

(x) King County Sherriff's Office (KCSO)

(xi) Washington State Patrol (WSP)

(xii) Washington State Department of Transportation (WSDOT)

(xiii) Shoreline Community College (SCC)

(xiv) City of Shoreline Departments

(xv) City of Shoreline Police Department (PD)

(xvi) City of Shoreline Public Works Department (PWD)

(xvii) City of Shoreline Fire Department (FD)

(xviii) City of Shoreline Emergency Operations Center (EOC)

(xix) Transportation and transit providers including King County Metro North Base, and the Shoreline School District Transportation Department.

(xx) Organizations and private-sector companies that may support an evacuation, including private bus companies, if available during evacuation.

(e) **Coordination with other plans and guidance**

(i) King County (KC) UASI Evacuation Template Project

(ii) City of Bothell Comprehensive Emergency Management Plan (CEMP) Support Annex # 4 Evacuation

(iii) Seattle Disaster Readiness and Response Plan (SDRRP) Evacuation Annex

(iv) City of Lake Forest Park Evacuation Annex

(v) City of Shoreline Continuity of Operations/ Continuity of Government Plan (COOP/COG)

(vi) City of Shoreline Multijurisdictional Hazards Mitigation Plan (HMP)

(vii) City of Shoreline Comprehensive Emergency Management Plan (CEMP)

(viii) National Response Framework (NRF)

(ix) Washington State Comprehensive Emergency Management Plan (WA CEMP)

(x) King County Regional Disaster Plan (RDP)

(xi) Incident Command System (ICS)

(xii) National Incident Management System (NIMS)

(f) **Limitations of Plan**

(i) Evacuation plan is designed to support preservation of life in response to imminent threat.

(ii) The City will do everything within its capabilities to support preservation of life, but there is no guarantee that the City will be able to ensure the absolute safety of all people affected by the threat.

(iii) Numerous circumstances can limit the response capabilities of the City, or create situations that are beyond the capabilities of the jurisdiction.

(iv) This plan is heavily dependent on roads, bridges, and assets that are not owned or operated by the City and therefore are heavily dependent on the ability for other agencies to provide the necessary infrastructure and support to conduct a small and/or large scale evacuation. For instance, although the Shoreline School District and King County Metro have buses within the City, they may not have the necessary staffing to operate them in an evacuation.

(g) **Potential Evacuation Populations**

(i) Nighttime

1) The City has slightly more than 53,000 residents living in our community that would presumably make up most of our night time population. We do not have any major businesses that have a significant population that work at night other than perhaps some small warehouses. According to the Emergency Management Plan (EMP) Housing.mxd map that utilized 2000 census data, the majority of the Living Units that are occupied are along both sides of State Route 99 (SR 99) and 15th Avenue NE. For the purposes of EMP_Housing.mxd map, Living Units is a house, an apartment, a mobile home, a group of rooms, or a single room that is occupied at the time the Census was taken.

(ii) Daytime

1) According to the EMP_Housing.mxd map that utilized 2010 census data, the majority of Employment is concentrated along businesses on SR 99 and 15th Avenue NE. Although there are other pockets of high daytime populations, the majorities of these are reflected in schools and are within reasonable distances to SR 99 and 15th Avenue NE. Shoreline Community College (SCC) has a high daytime population of approximately 7,500 people.

(iii) Homeless

1) Approximately 50 – 75 people at any one time are living on the streets or open areas of the City of Shoreline. While a large portion is transient and therefore difficult to locate, they are often adjacent to drug treatment centers and Park and Ride locations.

(iv) Tourists

1) While having some fairly active community parks, Shoreline does not have a significant tourist population. However, special attention should be considered when there are large scale public events that may require additional resources for evacuation of tourists.

(v) Schools/ Students

1) The City of Shoreline contains 22 schools, 5 of which are private, and 1 of which is a College. The Shoreline Public Schools have approximately 9,000 students. 20% of the students speak a different language at home. Currently their top languages are Spanish, Korean, Chinese, Vietnamese and Tagalog/Filipino. Shoreline Community College has approximately 7,300 students on campus daily. The City also has numerous private schools, including daycares. Currently there are approximately 2,797 students in private schools. Major populations include Kings Schools with

approximately 1,328 students and St. Luke School, The Evergreen School, and Shoreline Christian School with several hundred students each.

(vi) Large Commercial

1) The City of Shoreline has no large commercial areas. The largest facilities as stated above are the schools and community college. Some of the larger retail spaces include Costco, Home Depot and Sears. Large commercial spaces also include, the Washington State Department of Transportation Traffic Hub, the Washington State Public Health Lab, Washington State' Hospital for the profoundly disabled and the King County Metro North Base. Most of the other businesses are located in small strip malls and retail spaces throughout the city.

(vii) Large Residential

1) The City of Shoreline is made up mostly of suburban homes occupied by residents who work in Seattle and adjacent communities. There is a fairly large elderly and disabled population that live on the grounds of Crista Ministries, at nursing facilities, Adult Family Homes, Boarding Homes and in six of the eight King County Public Housing complexes in the City.

(viii) Animals/ Farms

1) Other than household pets, Shoreline does not have farms and livestock in the City.

(ix) Car ownership

1) According to the 2010 census, 3.1% or 437 of Owner Occupied households do not own a vehicle, 14.0% or 929 Renter Occupied households do not own a vehicle. Accordingly, 17.1% or 1,366 occupied households own no vehicle. Furthermore, 96.9% or 13,683, of Owner Occupied households own at least 1 vehicle or more, 85.9% or 5,686 of Renter Occupied households own at least 1 vehicle or more. . Therefore, the majority of people who do not have access to a vehicle live in rented housing, such as Apartment complexes.

(x) Reliance on transit

1) According to the 2010 Census, 82.8% or 21,778 of workers 16 years old and older drive or carpool to work. Accordingly, 10.2% or 2, 692 of workers 16 years old and older rely on public transportation to travel to work, including using taxi services. Of those, 2,642 use the bus. Approximately 1.7% or 450 workers 16 years old and older walk to work.

Approximately, 5,000 people board King County Metro and Community Transit on an average Weekday in Shoreline. Approximately, 1,600 board Metro Route 358.

(xi) Commuting patterns

1) There are several key regional interstates and state routes that flow through the City of Shoreline. There are also several major principal and minor arterials, including those that see in excess of approximately 30,000 vehicles a week. The list below is not a compressive list.

a) Interstate -5 runs through Shoreline and serves as key route in the regional transportation system.

b) HWY 99 (Aurora Avenue N), SR 104 (Ballinger Way NE) Westminster Way N, NE 175th St, and 15th Avenue NE are classified as principal arterials.

c) NE 185th Street, NE 155th Street, NW Richmond Beach Road, NW 195th Street, Dayton Ave North, Meridian Avenue North, 8th Avenue NW, and 5th Avenue NE are classified as Minor Arterials.

d) These roads carry higher amounts of traffic particularly during peak times, including morning and nighttime commutes.

(xii) Populations with special needs

1) Overall Disability according to Census

a) According to the 2010 Census, 901 people from age 5-20 years, have a disability. Furthermore, 5,318 people from age 21-64 have a disability and 2,904 of those 65 years old and older, have a disability. Therefore, in total approximately 9,123 of total residents have a disability. This represents approximately 17.54 % of the total City population. It should be noted that the Census does not currently consider many “hidden” disabilities, such as epilepsy, arthritis, and diabetes to be disabilities and therefore does not collecting information on.

2) Restricted Mobility

a) According to the 2010 Census, 64 of 5 to 15 year olds, 1,985 of 16 to 64 years old, 2,051 of 65 years and older have a physical disability. In total 4,100 or 7.73% of the population have physical disabilities. Furthermore, 1,903 of 16 to 64 years old, 1,463 of 65 years and older find it difficult to go outside the home to shop or visit a doctor. In total 3,366 or 6.34% of the population have find it difficult to go outside the home to shop or visit a doctor due to their disability and therefore might require additional resources to evacuate.

b) A fair percent of these populations live in Group Homes, Adult Care Facilities, and King County Section 8 Housing. These are also mapped using Google Maps.

3) Requiring medical support during transport and sheltering

a) Although many people may need assistance in evacuation, there is not accurate and timely data on the specific location of this population, outside of what is stated in the above section. However, the City will coordinate with the KCECC and the Public Health - Seattle & King County to help identify and assist these citizens.

4) Vision/hearing impairment

a) According to the 2010 Census, 102 of 5 to 15 year olds, 672 of 16 to 64 years old, 1,057 of 65 years and older have a Sensory disability. In total 1,831 or 3.4% of the population have Sensory disabilities.

5) Foreign Languages

a) The Shoreline Public Schools have approximately 9,000 students. 20% of the students speak a different language at home. Currently their top languages are Spanish, Korean, Chinese, Vietnamese and Tagalog. According to the 2010 Census, approximately 1020 residents are linguistically isolated household. See Foreign Languages Appendix for more information

(xiii) Populations in known areas of high risk

1) Flood Plain:

a) 27th Avenue NW and the BNSF railroad tracks. (See Figure 4-8 FEMA 100-Year Floodplain in HMP)

b) Ronald Bog subbasin in the Thornton Creek Basin and the 3rd Avenue NW subbasin in the Boeing Creek Basin.

2) Snow or Ice Hazard:

a) Richmond Beach, Innis Arden, Hillwood, Richmond Highlands, and neighborhoods located on the slopes formed by McAleer Creek

b) See Figure 4-7 Streets with Steeper Slopes and Figure 4-8 FEMA 100-Year Floodplain in HMP

3) Storm Surge:

a) Properties located along 27th Ave NW (See Figure 4-7 Streets with Steeper Slopes in HMP)

4) Earthquake Hazard:

a) Richmond Beach, Innis Arden, Ballinger and Ridgecrest (See Figure 4-4 Shoreline Liquefaction Map in HMP)

5) Landslides:

a) BSF Railroad and Richmond Beach neighborhood (See Figure 4-9 Landslide Hazard Area) and Ballinger steep slopes areas.

6) Wild-land Fire:

a) Innis Arden, the Highlands, and Boeing Creek Canyon have significant slopes and vegetation (See Figure 4-13 Areas where slopes, land cover contribute to increased wild-land fire risks in HMP)

b) Richmond Beach Park

7) Hazardous Materials:

a) Washington State Public Health Laboratories that is located on the Fircrest campus, Tier II Facilities in Shoreline, and 9 Gas Stations (See Table 4-16 Tier II Facilities in Shoreline in HMP)

b) Richmond Beach area, which has the access road leading to Point Wells and the BNSF tracks

## Article II. Authorities

### Section 2.01 Introduction explaining inter-relationships among levels of government

(a) The City of Shoreline provides essential government services to the citizens of the city. It however, contracts for Police Service with the King County Sheriff's office. In addition, Fire Services are provided by the Shoreline Fire Department, a separate, special purpose district, known as King County Fire District 4. The City collaborates with these emergency service providers to ensure emergency situations are mitigated as much as possible and the loss of life and property are minimal, if at all. In the context of evacuation planning, the City's Traffic Engineer, Public Works Roads Division, and the EOC will work with emergency services to ensure effective and efficient planning, operations, and recovery from an event that require mass evacuations of any populations within the city.

## Article III. Situation and Assumptions

### Section 3.01 Situation

(a) A public emergency or other significant event may be of such severity and magnitude as to require City response and recovery assistance to field efforts to save lives and protect property. A threat exists that necessitates conducting evacuations.

### Section 3.02 Assumptions

(a) **Regulatory Issues in State of Washington**

(i) Washington State Emergency Management Division will support the region with carrying out evacuation and coordinate with federal and private agencies.

(ii) Washington State Department of Transportation will support the City with carrying out evacuation planning.

(iii) Washington State Patrol will support the City of Shoreline with carrying out evacuation.

(b) **Local Parameters**

(i) King County Office of Emergency Management will support the City with carrying out evacuation and sheltering activities.

(ii) King County Department of Transportation will support the City with carrying out evacuation planning.

(iii) King County Office of Emergency Management will coordinate with federal, state, volunteer and private agencies.

(iv) Local municipalities will support the City in carrying out evacuation and sheltering activities.

(v) Due to the regional geology, and threats by earthquakes and landslides, it is not always practical to have specific plans, procedures, steps, and resources spelled out in detail throughout the Evacuation Plan. For instance, the State of Florida might be able to reasonably predict the paths of tournedos, and therefore can predict evacuation route and resources required to implement a major evacuation, however, a major earthquake in the Seattle region may cause such severe damage to critical infrastructure that elements of evacuation pre-planning is impractical to determine prior to an actual evacuation.

(c) **Local Limitations and Assumptions**

(i) The City is heavily dependent on King County and Washington State transportation infrastructure to support a major evacuation. This plan depends on the ability for those infrastructures to be operational.

(ii) Schools, hospitals, adult care facilities, group homes, and King County Housing Authority will have their own plans in place to coordinate sheltering and evacuation.

(iii) The Red Cross will not staff special needs shelters, but they may assist with training staff on shelter operations.

(iv) Pet friendly shelters will be coordinated through King County ECC.

(v) The Police Department is very limited in the number of personnel who are on duty at any one time. This may limit their ability to conduct a large scale evacuation, until the City's EOC can be active and additional resources are available.

(vi) The Police Department may be limited in its ability to request additional King County Sherriff's Office resources due services being contracted through the King County Sheriff's Office having other jurisdictional responsibilities.

(vii) The ability to evacuate the medically fragile will be limited to the availability of

ambulances and cabulances that are available at the time. The majority of private ambulance services would not be available to provide assistance in the City of Shoreline, due in part to their commitments to areas with higher populations like the City of Seattle.

(viii) There is not adequate and accurate information on the specific locations of people who are medical fragile, but who do not live in a registered care facility. Furthermore, although census data includes information on people with disabilities and language barriers, there is little information on the specific location of these populations. Therefore, these people should have a personal plan on how they will be evacuate and shelter their residence.

(ix) Although the City may be able to provide information in multiple languages, targeting the specific areas with language barriers may be difficult or not practical with emergency staffing levels and available resources.

(d) **All-Hazard Planning**

(i) It is assumed that the City will have enough accurate and adequate notice to implement an evacuation successfully. There may be times were there is too little or too late of notice to successfully evacuate all or certain parts of the population.

(ii) It is assumed that citizens have the proper resources to shelter in place and the City has accurate information to implement shelter in place.

(iii) It is assumed that the City has accurate and timely information on hazards throughout the City and has the capability to communicate these hazards and what is needed to the community.

**Section 3.03 Policies**

(a) All activities within ESF 16 – Evacuation will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) Primary emergency evacuation responsibilities will be coordinated by the Police Department. The Police Department is the lead agency for the coordination of evacuation activities within the City. The Police Department has pre-designated individuals to be assigned to the EOC to facilitate the coordination of ESF 16 operations.

(c) In accordance with RCW 38.52.110, (1) in carrying out the provisions of this chapter, the governor and the executive heads of the political subdivisions of the state are directed to utilize the services, equipment, supplies, and facilities of existing

departments, offices, and agencies of the state, political subdivisions, and all other municipal corporations thereof including but not limited to districts and quasi municipal corporations organized under the laws of the state of Washington to the maximum extent practicable, and the officers and personnel of all such departments, offices, and agencies are directed to cooperate with and extend such services and facilities to the governor and to the emergency management organizations of the state upon request notwithstanding any other provision of law.

(d) As a signatory to the King County Regional Disaster Framework, the City will conduct activities in accordance with the Framework whenever possible.

(e) All City owned vehicles (not otherwise involved in emergency response) will be made available for use by the Evacuation Coordinator.

(f) It is an approved Policy that people with disabilities should be allowed to travel with their Family and/or Services Animals. Metro, Community Transit Services and School Buses should be directed to allow people with disabilities to travel with their Family and/or Services Animals.

(g) As a signatory of the King County Regional Disaster Framework, through the use of the Washington State Mutual Aid System, (WAMAS), and through local mutual aid agreements, the City and Fire Department will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible. The City will utilize those same systems when requesting assistance.

## Article IV. Definitions

| Word | Definition |
|---|---|
| Evacuation | Evacuation can be defined as the removal of persons from the area at risk prior to, during, or after an emergency's impact. |

## Article V. Concept of Operations

### Section 5.01 General

(a) All operations conducted within the scope of ESF 16 - Evacuation, will utilize the ICS in accordance with the NIMS and the NRF.

(b) In the event of an incident requiring the evacuation of a part or all of Shoreline, the

evacuation order may be issued by the Mayor, City Manager, Emergency Management Coordinator, Police Chief or Fire Chief. On-scene incident commanders may issue evacuation orders to mitigate dangers and/or life threatening situations. Except when an immediate life-threatening situation exists, evacuation efforts should be coordinated through the Emergency Operations Center (EOC).

(c) The individual ordering an evacuation shall notify the Emergency Management Coordinator who shall notify the King County Emergency Coordination Center and City Manager any time there is a need to evacuate individuals to public shelters or across jurisdictional boundaries.

(d) The Police Department is responsible for the coordination of the evacuation of the City. In the event all City and mutual aid resources have been expended, the Police Department will notify the City's EOC that additional assistance is needed. The EOC will request outside assistance through the Z1 ECC or the KC ECC. Every effort will be made to make initial requests through the Z1 ECC. In the event the Z1 ECC and KC ECC are not available, the EOC will submit requests for assistance directly to the State Emergency Operations Center.

(e) Public Works staff will coordinate with the Police Department to provide direction and control for the movement of people within the City. Coordination with other jurisdictions and authorities involved in the evacuation and/or acceptance of victims shall be through the EOC and King County Emergency Management.

(f) The City will coordinate, as appropriate, with jurisdictions within Zone 1 though the Zone 1 Emergency Coordinator (Z1 EC); King County Emergency Coordination Center and Snohomish County Emergency Operations Center; and the Washington State Emergency Operations Center to insure expeditious resolutions to issues resulting from an emergency or disaster.

(g) For purposes of this plan, an evacuation is the removal of persons from the area at risk prior to an emergency's impact. Physical removal of victims from an area impacted by the emergency is considered a rescue and is covered in ESF Annex 9 (Rescue).

(h) Requests for resources through existing mutual aid agreements and/or contracts through private contractors will be coordinated through the EOC.

(i) In the event of an evacuation in which the size of it would impact the traffic flow of the major arterials, Interstate 5, and/or HWY 99 and in which the impact would not only be to the traffic, but to the surrounding communities as well, every effort will be made to include in the planning process representatives of those impacted areas. The Washington State Department of Transportation and the Washington State

Patrol may be able to give input so as produce an integrated plan for the evacuation. Neighboring cities should be notified of any route that may include their cities.

**Section 5.02 Acknowledgment of the State and Local Response Levels to Disasters and Events:**

(a) **Proclamations**

(i) Per Section 2.50.060 H of the Shoreline Municipal Code (SMC), the Director of Emergency Management may issue a proclamation of emergency and it must be sustained by the City Council, when practical.

(b) **Declarations of Authority from the Governor**

(i) In accordance with RCW 38.52.110, (1) in carrying out the provisions of this chapter, the governor and the executive heads of the political subdivisions of the state are directed to utilize the services, equipment, supplies, and facilities of existing departments, offices, and agencies of the state, political subdivisions, and all other municipal corporations thereof including but not limited to districts and quasi municipal corporations organized under the laws of the state of Washington to the maximum extent practicable, and the officers and personnel of all such departments, offices, and agencies are directed to cooperate with and extend such services and facilities to the governor and to the emergency management organizations of the state upon request notwithstanding any other provision of law.

(c) **Authority to issue Evacuation Order**

(i) In the event of an incident requiring the evacuation of a part or all of Shoreline, the evacuation order may be issued by the City Manager, Emergency Management Coordinator, Police Chief or Fire Chief.

(ii) On-scene incident commanders may issue evacuation orders to mitigate dangers and/or life threatening situations.

(iii) Except when an immediate life-threatening situation exists, evacuation efforts should be coordinated through the Emergency Operations Center (EOC).

**Section 5.03 Inter-agency communications systems and procedures**

(a) **Notification**

(i) The individual ordering an evacuation shall notify the Mayor, City Manager, Emergency Management Coordinator

(ii) The Emergency Management Coordinator shall notify the King County

Emergency Coordination Center and City Manager any time there is a need to evacuate individuals to public shelters or across jurisdictional boundaries.

(iii) All avenues available will be utilized to notify the targeted population to include but not limited to: the City of Shorelines Alert and Warning system, Reverse 911 through NORCOM Communications Center, TV and Radio Media, NOAA Radio, utilizing King County's MyStateUSA emergency notification system, Emergency Activation System (EAS) through the King County 911 Communications Center, City's WEB Site, Social Media Sites, posting on the Regional Public Information System (RPIN), Police and Fire driving the impacted areas giving voice commands over their Public Announcement systems.

(b) **Institutional interoperability**

(i) The City operates an 800 MHz radio system that is integrated with Police Department and Fire Department dispatch.

(c) **Systems Integration**

(i) The city owns satellite phones, Nextel cell phones with radio functionality, and has an active Ham Radio communications group. Furthermore, the KCECC ha access to My State USA for additional staffing and communications needs.

(d) **Clear Protocols**

(i) All staff are trained to operate equipment that is issued to them, including communications equipment.

**Section 5.04 Public communications**

(a) The City shall incorporate evacuation preparation into its General education and public awareness programs.

(b) **Notification**

(i) Initial Notification should include

1) Evacuate or shelter-in-place

2) Areas that need to be evacuated, with reference to known geographic features

3) Why and when residents should evacuate

4) Time required for evacuation efforts

5) Assembly point locations

6) Shelter locations, including availability

7) Where to pick up children (for when an evacuation happens during the weekday and school children are evacuated)

8) The designated transportation and evacuation points and evacuation routes

9) Available transportation options (start/end time, transportation point locations, frequency of pick-ups, travel destinations)

10) What residents should take from their homes

11) How long the evacuation is expected to last

12) How pets will be accommodated

13) Security plans that are in place to protect residential property

14) When informational updates will be made available

15) Other information deemed appropriate and required before residents evacuate

(ii) Information Updates should include

1) Location of assembly points and shelters

2) Current evacuation routes

3) Current road and area closures

4) Availability of hotels, food, fuel, medical and other essential services

5) Current traffic conditions

6) Updated shelter capacities

7) Security measures being implemented

8) Weather conditions, if applicable

9) Changes to the original evacuation order

(c) **Ongoing situational awareness**

(i) As the situation changes, the EOC will regularly provide information to those sheltering and/or evacuees

(d) **Diverse Communications Strategy**

| Medium | Description | Strengths | Weaknesses |
|---|---|---|---|
| **Broadcast Media** | Use of radio and television to provide general, large scale travel update messages to a general audience, either through commercial media reports or the Emergency Broadcast System | Widespread coverage and accessibility; Available pre-evacuation and en-route; high degree of familiarity | Not able to provide detailed, pinpointed information tailored to a user's specific needs |
| **Traveler Information Websites** | Websites operated by transportation agencies (e.g. KC, WSDOT) that provide traveler information bulletins to the public | Ability to provide access to significant amounts of traveler information, including evacuation alerts and instructions, traffic speed information, and video images | Not available to many users while en-route or those without internet access |
| **511 Telephone Traveler Information System** | Automated telephone system operated by WSDOT that provides detailed route-specific information by telephone as part of a national system | Provides detailed information tailored to traveler's requests; available en-route during an evacuation; has the capability to provide "floodgate" general evacuation instructions to callers | Call volume capability is limited, and large-scale events may overwhelm its ability to accommodate all incoming calls |
| **Reverse 911** | Automated system that calls households in an affected region to provide pre-recorded emergency instructions | System 'pushes' information out to the public; messages can provide instructions to be followed | Information typically limited to high-level emergency instructions; not suited for dissemination of real-time updates to travelers en route |

| | | | |
|---|---|---|---|
| **Fixed and Portable Dynamic Message Signs** | Fixed or trailer-mounted electronic signs that can provide brief messages to travelers on the road or at key transit locations | Able to reach travelers en-route with specific information relevant to certain roadways or conditions; mobile signs can be deployed to evacuation traffic management hotspots | Limited number of fixed and mobile signs; limited reach based upon where DMS signs are located; cannot provide detailed information |

**Section 5.05 Actions**

(a) **Preparedness**:

(i) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(ii) Maintain a list of City and Police Department assets that can be deployed during an emergency; refer to the NIMS Resource Typing in organizing these resources, if applicable,

(iii) Assign and schedule sufficient personnel to implement indentified tasks for an extended period of time,

(iv) Ensure lead agency personnel are trained in their responsibilities and duties,

(v) Develop and implement emergency response strategies relating to Evacuation

(vi) Maintain liaison with support agencies,

(vii) Conduct All Hazards exercises involving Evacuation

(b) **Respons**e:

(i) See ESF 16 Appendix B for Evacuation Standard Operating Procedures (SOP's)

(c) **Recovery**

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

(d) **Mitigation**

(i) Mitigation activities for this ESF are covered in the Multijurdictional Hazard Mitigation.

## Article VI. Responsibilities

### Section 6.01 Lead Agency

(a) **Police Department**

(i) Provide direction and control for evacuation efforts.

(ii) Coordinate ESF 16 activities with appropriate agencies and jurisdictions.

(iii) Provide internal and perimeter security of evacuation zone.

(iv) Communications shall be through normal established channels. (See ESF #2 – Information Systems, Communications and Warning)

### Section 6.02 Support Agency

(a) **Public Works Department (PW)**

(i) Provide assessment of transportation routes, identify alternate routes, and provide temporary traffic control measures/devices and operational control of traffic signals.

(ii) Coordinate public transportation resources planned for use in an evacuation and coordinate with outside resources

(iii) Provide for the removal of debris and vehicles abandoned or having mechanical problems from evacuation routes as requested.

(iv) Provide for the relocation of essential resources to staging areas when requested.

(v) Coordinate receiving and sheltering evacuees from other local and regional localities.

(b) **Emergency Operations Center**

(i) Activate, when necessary, to provide for coordination of resources with all agencies involved.

(ii) Notify Z1 EC, KC ECC and/or State Emergency Operations Center regarding the evacuation efforts within the City.

(iii) Coordinate evacuation information between various departments within the City

to ensure efficient and accurate communication.

(iv) Submit requests for additional resources to the Z1 EC, KC ECC, or State Emergency Operations Center.

(v) Provide information on emergency services including evacuation information and routes, staging areas and public shelters.

(c) **Fire Department**

(i) Provide support to the EOC in dissemination of evacuation information to the public.

(ii) Provide assistance, as possible, during the evacuation efforts.

(iii) Assist with direction and control of evacuation notification.

(iv) Assist with identification of vulnerable populations and the resources to assist in evacuating and communicating with them.

(d) **All Departments**

(i) Assist in evacuation information to the public.

(ii) Provide support in evacuation efforts affecting the city.

(e) **Zone 1 Emergency Coordinator**

(i) Communicate and coordinate with jurisdictions within Zone 1 and KC ECC regarding the status of evacuation activities within the area.

(ii) Coordinate with Zone 1 jurisdictions and KC ECC to ensure proper distribution of resources.

(f) **King County Emergency Coordination Center (KCECC)**

(i) Communicate with Zone 1, 3, and 5 ECCs and cities, Snohomish County, State Emergency Operations Center and all related agencies regarding evacuation efforts within the area and associated activities.

(ii) Coordinate requests for resources with the above entities and facilitate the equitable distribution of available resources.

(iii) Coordinate activities of the KC Department of Transportation (DOT).

(g) **State Emergency Operations Center**

(i) Provide coordination of State resources to provide support to local jurisdictions,

as appropriate, when all local, regional and county resources have been expended.

(ii) Facilitate the requisition of resources from other states through the Emergency Management Assistance Compact (EMAC).

(iii) Request and coordinate Federal resources through the Federal Emergency Management Agency (FEMA).

(h) **Washington State Department of Transportation (WSDOT)**

(i) Provide damage assessment, emergency repairs and periodic status reports of state highways and bridges, as appropriate to ensure efficient and effective evacuation activities.

(ii) Coordinate emergency transportation resources, as appropriate.

## Article VII. Administration, Plan Review, and Maintenance

### Section 7.01 Types of Resources Needed

(a) These will be determined by the Incident Commander in consultation with the EOC.

### Section 7.02 Resource Inventory

(a) This will be determined by city inventory and available resources.

### Section 7.03 Supply Chain Management

(a) Sources for resources and delivery methods will be coordinated through the EOC, in consultation with the EM Coordinator.

### Section 7.04 Identification of remaining gaps

(a) Tracked regularly as part of EM Coordinator duties and EOC staff if available.

### Section 7.05 Method for tracking location/deployment of resources

(a) This will be tracked regularly as part of EM Coordinator duties and EOC staff if available. This includes tracking on a daily basis and during an evacuation.

### Section 7.01 Supportive agreements

(a) Communicate with neighboring jurisdictions (local and county) regarding resource sharing and gaps will be done as needed by EM Coordinator as part of regular duties.

(b) Identify opportunities to address gaps with other jurisdictions' resources will be done as needed by EM Coordinator as part of regular duties.

(c) Preparation of MOUs, mutual aid agreements, and other agreements are already in place and will be evaluated as part of the ongoing duties of the EM Coordinator, Police Department leadership and EM Committee.

**Section 7.02 Emergency funding mechanisms**

(a) This will be done by Finance / Administration Section as part of ICS structure and approved city procedures.

**Section 7.03 Post-evacuation reimbursement claims**

(a) This will be done by Finance / Administration Section as part of ICS structure and approved city procedures.

**Section 7.04 Post-evacuation after-action reports**

(a) The Post Evacuation AAR will be done in consultation and coordination with the EM Coordinator utilizing standard AAR practices and procedures.

**Section 7.05 Plan Review and Maintenance**

(a) The Police Department, in collaboration and consultation with the EM Coordinator and Emergency Management Committee, is responsible for providing recommended changes and keeping the plan updated as needed in accordance with the CEMP maintenance plan.

## Article VIII. Appendices

(a) Evacuation Routes and Maps

(b) Standard Operation Procedures (SOP's)

## Article IX. References

**Section 9.01 Federal statutes / regulations**

(a) Code of Federal Regulations Title 44, Part 205 and 205.16.

(b) Public Law 920, Federal Civil Defense Act of 1950, as amended.

(c) Public Law 100-707, Robert T. Stafford Disaster Relief and Emergency Assistance Act.

(d) Public Law 93-288, Disaster Relief Act of 1974, as amended.

(e) Public Law 96-342, Improved Civil Defense 1980.

(f) Public Law 99-499, Superfund Amendments and Reauthorization Act (SARA) of 1986,

Title III, Emergency Planning Community Right-to-Know Act (EPCRA).

(g) Public Law 105-19, Volunteer Protection Act of 1997.

(h) Homeland Security Act of 2002.

(i) Homeland Security Presidential Directive/HSPD-5.

(j) Homeland Security Presidential Directive/HSPD-8.

(k) National Response Plan of 2004, with Notice of Change amendments from 2006.

(l) Pets Evacuation and Transportation Standards Act of 2006.

**Section 9.02 State of Washington statutes / regulations**

(a) Chapter 38.52, Revised Code of Washington (RCW), Emergency Management.

(b) Chapter 38.08, RCW, Powers and Duties of Governor.

(c) Chapter 38.12, RCW, Militia Officers.

(d) Chapter 38.54, RCW, Fire Mobilization.

(e) Chapter 35.33.081 and 35.33.101, RCW, as amended.

(f) Chapter 34.05, RCW, Administrative Procedures Act.

(g) Chapter 43.06, RCW, Governor's Emergency Powers.

(h) Chapter 43.105, RCW, Washington State Information Services Board (ISB).

(i) Chapter 118-04, Washington Administrative Code (WAC), Emergency Worker Program.

(j) Title 118, WAC, Military Department, Emergency Management.

(k) Washington State CEMP.

**Section 9.03 Local statutes / regulations**

(a) Shoreline Municipal Code (SMC) 2.50

**Section 9.04 Plans and Agreements**

(a) City of Shoreline Comprehensive Emergency Management Plan (CEMP)

(b) City of Shoreline and Shoreline Fire Department Hazard Mitigation Plan

(c) City of Shoreline Continuity of Operations/ Continuity of Government Plan

(COOP/COG)

(d) City of Shoreline Emergency Management Council Mutual Aid Agreements

(e) King County Regional Disaster Framework

(f) King County Emergency Comprehensive Emergency Management Plan

**Note:** EMS Routes are reserved for EMS and First Responders and should only be used as Evacuation Route for citizens as a last resort. If Primary EMS Routes are available for use, consider using Secondary EMS Routes for citizen evacuation.

**Note:** EMS Routes are linked to a Google Map for each route.

## Daytime / Nighttime Routes Leaving City Evacuation

- **Primary Regional Routes Leaving City**
  - North
    - Interstate 5 (I-5)
    - Highway 99 (Aurora Avenue North)
  - South
    - Interstate 5 (I-5)
    - Highway 99 (Aurora Avenue North)
  - East
    - NE 175th Street
  - West
    - NE 185th Street

- **Secondary Regional Routes Leaving City**
  - North
    - Meridian Avenue N
    - NE 145th to Bothell Way NE (Highway 522)
  - South
    - Dayton Ave. N
  - East
    - NE 185th Street
  - West
    - NE 175th Street

**EMS Routes**

- **Primary**
  - **North/ South**
    - 5th Avenue NE
      - Northbound to Stevens Hospital
      - Southbound to Northwest Hospital and Medical Center
      - Southbound to Harborview Medical Center
      - Southbound to Virginia Mason Medical Center (Via Eastlake Ave. East)
      - Southbound to Swedish
        - Cherry Hill Campus
        - Ballard Campus
        - First Hill Campus
  - **East/ West**
    - NE 145 Street
      - Eastbound to University of Washington Medical Center (Via 15th Ave NE)
      - Eastbound to Evergreen Medical Center (Via SR 522)
      - Eastbound to Children's Medical Center (Via 15th Ave NE)
- **Secondary**
  - **North/ South**
    - 15th Avenue NE
      - Northbound to Stevens Hospital
      - Southbound to Virginia Mason Medical Center
      - Southbound to Northwest Hospital and Medical Center
      - Southbound to Harborview Medical Center
      - Southbound to Swedish
        - Cherry Hill Campus
        - Ballard Campus
        - First Hill Campus
  - **East/ West**
    - North 155th Street
      - Eastbound to University of Washington Medical Center (Via 15th Ave NE)
      - Eastbound to Evergreen Medical Center (Via SR 522)
      - Eastbound to Children's Medical Center (Via 15th Ave NE)

## Key Addresses for Medical Evacuation

- **Northwest Hospital and Medical Center**
  1550 North 115th Street
  Seattle, WA
  (206) 368-6440

- **Swedish Edmonds Hospital**
  21601 76th Avenue West
  Edmonds, WA
  (425) 640-4404

- **UW Medical Center**
  1959 NE Pacific
  Seattle, WA 98195
  206.598.3300

- **Harborview Medical Center**
  325 Ninth Ave.
  Seattle, WA 98104
  206.744.3000

- **Evergreen Medical Center**
  12040 NE 128th Street
  Kirkland, WA 98034

- **Seattle Children's**
  4800 Sand Point Way NE
  SeattleWA98105

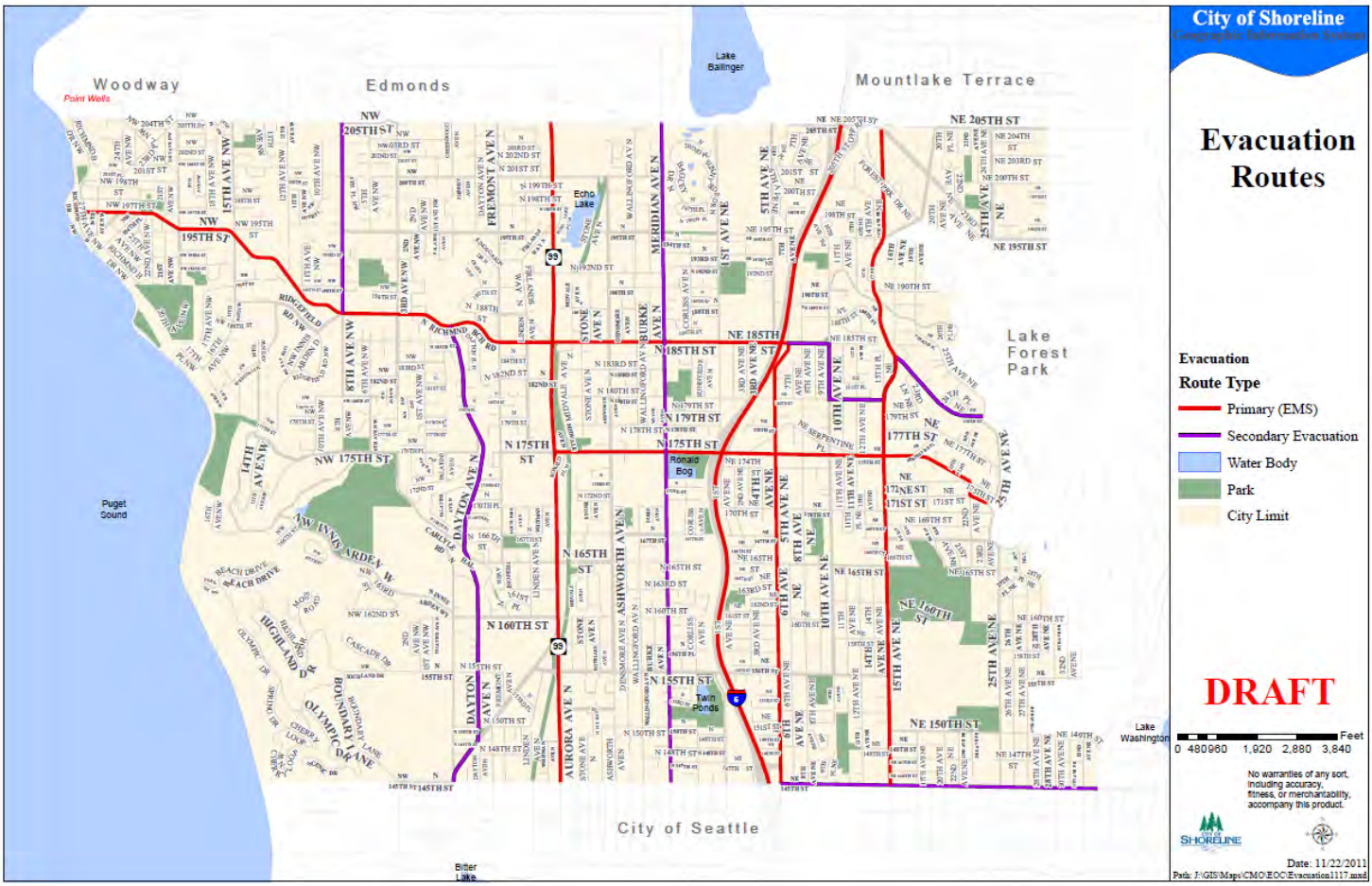
- **Swedish Medical Center**
  **Cherry Hill Campus**
  500 17th Ave.
  Seattle, WA 98122
  Phone: 206-320-2000

- **Ballard Campus**
  5300 Tallman Ave. N.W.
  Seattle, WA 98107-3932
  Phone: 206-782-2700

- **First Hill Campus**
  747 Broadway
  Seattle, WA 98122
  Phone: 206-386-6000

- **Virginia Mason Medical Center**
  1100 Ninth Ave.
  Seattle, WA 98101
  Main Line: (206) 223-6600

## Shoreline Evacuation Routes

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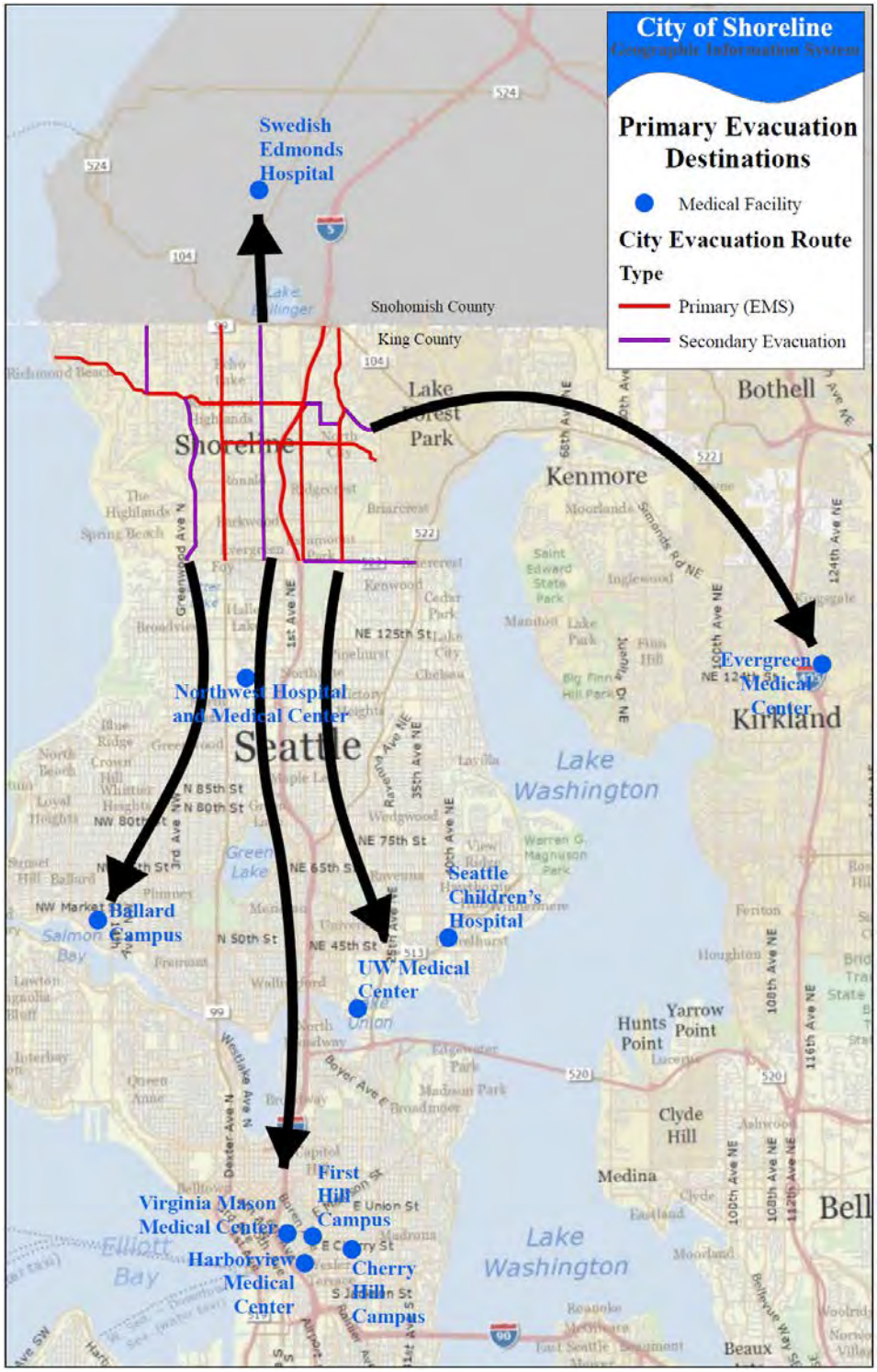
**Shoreline Medical Evacuation Key Addresses**

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(1) INCIDENT ANALYSIS
(2) WARNING
(3) PREPERATIN TO MOVE
(4) MOVEMENT & EN-ROUTE SUPPORT
(5) RECEPTION AND SUPPORT
(6) RETURN
(7) SHELTER-IN-PLACE PROS AND CONS
(8) 48-HOUR RESPONSE QUICK REFERENCE/ CHECKLIST FOR INCIDENT COMMANDER
(9) FIRE FIGHTER/ POLICE OFFICER/ DISPATCH EVACUATION INSTRUCTIONS
(10) CITIZEN'S PRE-PRINTED EVACUATION INSTRUCTIONS
(11) CITIZEN'S PRE-PRENTD SHELTER-IN-PLACE INSTRUCTIONS
(12) FOREIGN LANGUAGES LIST AND PRE-PRINTED MATERIAL
(13) SAMPLE CITIZEN'S NOTIFICAITON AND INFORMATION UPDATE CONTENT LIST
(14) CITY MANAGER EVACUATION ORDER FORM

The speed and effectiveness of an evacuation will be determined by how thoroughly the following operations are carried out:

**NOTE:** Due to the limited amount of time available in many evacuation situations it is understood that each of the below steps may not be followed to the letter. Again, it is important to plan ahead.

**Types of Evacuations:**

**Evacuation Alert Level I**

This evacuation is issued when it is believed that a hazard has a high probability of posing a significant threat to people living in the areas at risk. Citizens are encouraged to leave the danger area; however the decision to evacuate will be theirs. It will be issued when the probability of impact by the hazards is high and the vulnerability of the residents is great.

Sample Message to Citizens:

"There is a threat or injury or property damage due to the (incident) nearby. You are encouraged to consider evacuation and should prepare in any case to move to a safe area away from this (incident)"

**Evacuation Alert Level II**

This evacuation order is issued to person who may be at risk. The decision to

heed an Evacuation Alert Level II is solely that of the resident at risk. It will be issued in instances when it is believed that although the possibility of a hazard impacting an area is real, that the probability of impact is not high. For example, such an order may be issued to residents or businesses in floodplains or areas prone to landslides when moderate amounts of rain are forecasted.

Sample Message to Citizens:

"There is a good possibility that the (incident) will limit the ability to provide public safety services. It is recommended that you evacuation yourself and others."

**Evacuation Alert Level III**

This evacuation order is issued when it is believed that a hazard is almost certain to adversely impact an area. After an Evacuation Alert Level III has been issued all persons MUST LEAVE the danger zone. There will be no choice in the decision to evacuate. In the event of an evacuation, the Incident Commander will determine the extent of resources that may be needed and will notify the appropriate personnel to report. They will also deem the appropriateness of activating the City's EOC.

Sample Message to Citizens:

"Conditions caused by the (incident) make the situation one of clear and present danger. Evacuate now. Emergency services may not be available. If you call 9-1-1, help may not come"

**Command and Control**

1. Notify the Emergency Management Coordinator, Fire Chief, and Police Chief of Evacuation.

2. Notify the King County Emergency Coordination Center and City Manager any time there is a need to evacuate individuals to public shelters or across jurisdictional boundaries. Notify the King County Emergency Coordination Center of the Evacuation Alert Level from Incident Analysis in Section B-1 of this document.

3. Establish the perimeter of area(s) to be evacuated. Use street names/highway numbers/ geographic separations (rivers, streams, etc.) to define perimeter. Draw on map.

4. Determine the number of dwelling units to be evacuated.

5. Determine time allotted for evacuation.

6. Determine resources necessary to accomplish evacuation.

7. Determine assignment of personnel to divisions based on safety, protective equipment required, and personnel resources. Define areas of responsibility -- what agency (police, fire, public works, or SAR volunteers) will evacuate what sectors.

8. Establish evacuation routes and develop an evacuation traffic management plan. What routes are people going to use to evacuate? Are they clear? Do you need to alter traffic flow (turn streets into one-way)? Have Public Works done a damage assessment of bridges, if applicable? Are the roads structurally sound to be used? Hopefully, you have a generic and/or site specific evacuation plan already prepared; if so, use it.

9. Establish ingress/egress routes for emergency response. Should be separate from evacuation routes when available. If there is only one road in and out of an area, develop a traffic control plan to be able to control traffic on the route.

10. Establish control points along ingress/egress routes to block unwanted traffic and to facilitate rapid movement out of the affected area.

11. Identify special needs of population to be evacuated. Do they require transportation? Do they understand English? If not, do you need an interpreter and for what language(s)? Do you have disabled or non-ambulatory persons?

12. Arrange for buses to transport those persons who do not have their own transportation.

13. Provide transporters with the number of persons who will or could require transportation.

14. Provide transporters with routes they are to use.

15. Where is the public going to evacuate to? People need to know where you want them to go. Just sending them out of an area will cause confusion and traffic congestion.

16. Requested shelters are established. This can be requested of the Parks Department Staff who will coordinate with the Red Cross if they are available.

**NOTE:** Many evacuees will not require long term shelter as they can find shelter with friends and relatives. The number of self-sheltering persons is difficult to determine initially so plan to shelter your total estimated number of evacuees.

17. If there is no time to establish a sheltered area prior to evacuation, establish an evacuation staging area; a large well-lighted parking lot will do. This will enable citizens to leave the hazard area and provide for some orderly transition to a shelter once it is established.

18. Make arrangements for pets and livestock. Coordinate with Humane Society.

**Planning Section**

1. Data collection effort (sources and methods)
2. NOAA Watch (http://www.noaawatch.gov/) can provide information on weather prediction, including plume exposure predictions.
3. Seattle Fire Department can provide information on Hazardous Material response.

**Operations Section**

1. Data collection activities
    a. Field-based
        i. Police, Fire, EMS, and Public Works (to include CRT and Park Maintenance Staff), can provide initial assessment of structural damage to evacuation and emergency routes using windshield surveys and other methods.
        ii. Building Inspectors can provide damage assessment of structural damage to evacuation and emergency routes.
        iii. The City may be able to use registered Emergency Management Volunteers, such as Auxiliary Communications Service Amateur Radio Team and CERT Volunteers.
    b. Data system-based
        i. Information will be entered into Web EOC after Rapid Damage Assessment and other necessary assessments are completed.

**Logistics Section**

1. Identification of resources available for conducting and evacuation

a. Staff
    i. Police Department personnel
    ii. Fire Department personnel
    iii. Public Works personnel
    iv. School District Bus Drivers (If needed)
    v. Registered Volunteer Disaster Workers (CERT)
b. Assets
    i. Traffic Signs
    ii. Traffic Cones
    iii. Traffic Barriers
    iv. Mobile variable message signs
    v. Debris removal equipment
    vi. Vehicles
    vii. Materials

**Finance Section**

**1.** Tracking and recording of all expenses associated with response to incident shall be the responsibility of the Finance and Administration Section.

## APPENDIX B (2)
## WARNING

**Command and Control**

1. The Operations Section Chief (or appropriate ICS personnel) shall strive to review the situation every hour (for the first 12-24 hours), to ensure proper areas are being evacuated based on risk analysis and situational changes.
2. Consider assigning PIO
3. Consider assigning Evacuation Division under Police Branch of ICS
4. Approve message and methods of notification:
    a. **NOTE:** Public messages regarding evacuation and personal protection measures should be consistent. Evacuation plans may need to be altered to meet unexpected conditions. However, inconsistent alert information can lead to great confusion among evacuees.
5. The Evacuation Branch Director in consultation with a law enforcement liaison(s) will determine the rules of the evacuation route.
6. Rules that govern **non-evacuees** should also be communicated (e.g., prohibition from evacuation routes, prohibition from the evacuated area).

**Planning Section**

1. The following organizations should be notified ahead of evacuation (If, possible):
    a. Shoreline School District
    b. Shoreline Community College
    c. Hospitals
    d. Convalescent/long term care facilities.

**Operations Section**

1. Broadcast of message(s)

**Logistics Section**

1. Emergency Alert System (EAS)
    a. As the primary means for alert of a large area, in conjunction with Cable Interrupt, PA systems, door-to-door notification, telephone notification, or web and social media, depending on the needs of the incident. Consider using either the City's Alert and Warning system or going through King County OEM to use their system

b. **Procedure**

i. Activate the EAS through King County OEM (206) 577-3130 or (206) 577-3090 (24 hour).

ii. Consult with the OEM Duty Officer (contact through King County 9-1-1 if necessary).

iii. **NOTE:** EAS use is restricted to situations where other warning messages would be ineffective and where time is critical.

iv. **NOTE:** It is the choice of each media outlet as to whether they want to broadcast the alert.

**2. Media Outlets -- Primarily Radio and Television**

a. For the evacuation of larger areas.

b. Hospitals, convalescent/long term care facilities.

c. Large office buildings, plants.

d. Schools.

e. For less urgent situations.

f. As a follow-up to an EAS broadcast.

g. To provide more detailed information than an EAS alert.

h. Procedure

**i.** Assign a Public Information Officer to ensure that news conferences, press releases, and interviews include correct and consistent information about the evacuation.

3. **Door to Door Notification**

a. As the primary method for evacuating a small area.

b. For evacuation of population with special needs (e.g., elderly, handicapped, foreign language speakers).

c. **Procedure**

i. Specific divisions or sectors should be developed; i.e., the Fire Department would be responsible for evacuation of those areas where special equipment and/or protective clothing would be needed or in areas where rescue, decontamination, or medical services may be needed on a large scale.

ii. Law enforcement can be responsible for notification in non-hazardous sectors.

iii. Provide a system for keeping a detailed record of the addresses of the residences that have been contacted and of any special conditions or needs that exist in specific residences or neighborhoods.

iv. Prepared instructions for citizens on evacuation speeds up notification.

v. NOTE: There is no Washington law allowing forced or mandatory evacuation. However, the Incident Commander should make every reasonable effort to insure that every resident has been fully appraised of the threat to their safety.

**4. Vehicle Mounted and Portable Public Address Systems**

a. When there is not sufficient time for a door to door evacuation.

b. For notification of evacuees in large open areas, e.g., parks, large businesses, concert halls, clubs, and pedestrian areas.

c. PA systems should be used as a last resort because this is not an efficient means of providing detailed alert information.

d. Utilize Fixed and Portable Dynamic Message Signs through Public Works Department, WSDOT, and KCDOT.

**5. Web and Social Media**

a. Utilize during large scale evacuation, when time permits.

b. Emergency Management Coordinator and/or Communications Unit should send out message using Social Media tools. City of Shoreline and Shoreline Emergency Management have Facebook Pages and Twitter accounts.

c. Emergency Management Coordinator and/or Communications Unit should send out message using City Website tools.

d. Utilize Traveler Information Websites though King County ECC and WA State DOT.

e. Utilize the City's Alert and Warning system.

f. Utilize City Channel (Channel 21)

**6. Telephone Notification**

a. Utilize during large scale evacuation, when time permits.

b. Utilize 511 Telephone Traveler Information System

c. Utilize the City's Alert and Warning system.

**Finance Section**

1. Tracking and recording of all expenses associated with response to incident shall be the responsibility of the Finance and Administration Section.

## APPENDIX B (3)
## PREPARATION TO MOVE

### Command and Control

1. The Operations Section Chief (or appropriate ICS personnel) shall strive to review the situation every hour (for the first 12-24 hours), to ensure proper areas are being evacuated based on risk analysis and situational changes.
2. Consider assigning School Evacuation Group under the Evacuation Division
3. Consider assigning Nursing Home Evacuation Group under the Evacuation Division.
4. The evacuation, if needed, of the Fircrest Hospital for the profoundly disabled non-ambulatory population would be a complex evacuation that would need to be coordinated with Public Health Seattle King County, ambulance services, the State of Washington DSHS, and the end destination facility. The need to be able to shelter-in-place is the preferred method for this population.
5. Coordinate with logistics and operations to ensure that the evacuation routes do not interfere with routes that may be used for other functions related to the incident, e.g., abatement, emergency medical services, routes used by SAR or other emergency personnel and equipment.
6. The Evacuation Branch Director in consultation with a law enforcement liaison(s) will determine the rules of the evacuation route.
    - Consider the amounts and types of property that evacuees can bring with them (e.g., RVs, trailers, farm machinery, etc.).
    - Consider the prohibition of evacuees from return roads into the evacuation area.
    - **NOTE:** What types of vehicles/equipment will be allowed on evacuation routes? For example, will commercial machinery, semis, RVs, trailers, etc., be allowed on the transportation route?
    - **NOTE:** The Evacuation Branch Director should decide whether non-evacuation traffic should be allowed on the evacuation and emergency service transportation routes.
7. **NOTE:** It should be clear that evacuation cannot be forced.

### Planning Section

1. Final determination of areas/populations to be evacuated based on risk assessment.
2. Assessment of integrity of transportation and communications infrastructure. Consider the quality of road surfaces and the potential for any damage to transportation routes that may have occurred during the disaster. Public Works is responsible for assessing damage to roads.

3. Selection of rally points to be used if small scale evacuation is needed:
    - Consider Park and Ride Locations
    - Consider Costco, Sears, Shoreline Community College and/or major parking lots like Park and Ride lots.
4. Selection of destinations (safe areas) to be used:
    - Consider opening shelters (coordinate with King County ECC or Sno County)
    - Ensure that there are pet friendly shelters available that can accommodate pets and service animals to comply with the PETS Act.
    - If evacuees cannot provide shelter for themselves, e.g., staying with family, friends, neighbors, etc.
    - Note: The King/Kitsap County Red Cross can assist with coordinating the majority of Shelter Operations. This includes identification and inventory of shelters, opening and closing of shelters, registration, medical care, feeding and the accountability of personnel occupying shelters. If there are not available this function will be provided by the City of Shoreline Parks Department if resources are available.
        - Provide either agency with the following information:
            - Number of people needing shelter.
            - Expected length of evacuation.
            - Special needs of evacuees.

**Operations Section**

1. Decisions about tactical approach to evacuation
    - **Evacuation stages (e.g., walk to mustering location, then buses, etc.)**
        - Consider those at highest risk first (i.e. hospitals, elderly, nursing homes, etc.)
    - **Transportation modes**
        - Consider metro bus routes, including Park and Rides
        - Consider trains, (i.e. bus to train station in Edmonds or get permission from BNSF to stop at rail spur down at Richmond Beach Park.)
        - Consider using Public School buses for pick up at schools and/or parks. (Use Metro and/or Community Transit Services and/or School Buses). When requesting this resource it is important to also include the request for qualified bus drivers.

- For transportation of elderly or handicapped populations.
- For transportation of school children in the event that school buses cannot be activated easily for emergency use.
- For evacuees who do not have ready access to transportation.
- **Metro and/or Community Transit Services Procedure**
    - There is informal agreement that Metro may provide emergency transportation services.
    - Notify EOC of the need to activate Metro.
    - Provide the Police with:

        a. Pickup location.
        b. Number of evacuees to be transported.
        c. Shelter location.
        d. Route to shelter location.
        e. Name of person in charge of pickup place (and phone number if available)
        f. Phone number or other means of communication to be used for follow-up.

- **School Bus Procedure**
    - When time allows for long-range planning of an evacuation.
    - For transportation of students when drivers are available.
    - Contact school district superintendent or transportation office. If the EOC is activated, this resource **must** be ordered through the EOC.

**NOTE:** In King County, school buses are unavailable for emergency use for most of the normal workday, on weekends, and holidays. As a rule, Evacuation Division Commanders should exclude school buses as a choice in the event of an immediate evacuation.

School buses may be an option in situations where time allows long range planning of an evacuation.

The primary use of school buses in a disaster will be for the implementation of the school or school district's emergency plan.

Be aware that Metro Transit, Community Transit, and/or Shoreline school district buses may be used as back up for Emergency Medical Services, temporary shelter, or decontamination. This may limit the number and availability of buses.

In major evacuations car-pooling should be encouraged to alleviate traffic congestion.

- Evacuation routes
  - See ESF #16 EVACUATIONAPPENDIX A
  - Coordinate with the Washington State Patrol and WSDOT in the event that evacuation routes will affect state highways and roads.
  - Mark the evacuation routes (Public Works).
- Traffic management tactics
  - Control points should be set up to regulate and direct evacuation traffic.

| Tactic | Description |
|---|---|
| No changes to normal roadway operations | No implementation of any specialized traffic management tactics. |
| Phased releases of outbound vehicles, through timed control of major parking centers | Coordinated release of parking facilities would theoretically reduce congestion on evacuation routes. To accomplish implementation of this tactic, parking facilities would be inventoried and categorized according to size, location, or other relevant factors. A phased release protocol would be developed that would provide for gradual release of privately owned vehicles (POVs) from downtown parking facilities. This would theoretically modulate vehicular congestion on designated evacuation routes. |
| Reduction of outbound vehicles, through closure of major parking centers (i.e., forcing car owners to evacuate via walking transit) | Long-term closure of major parking facilities during an evacuation would reduce the number of POVs on evacuation routes and thus theoretically improve travel times on these routes during an evacuation. |
| Closure of inbound lanes on selected roads and highways | Closure of inbound lanes on highways utilized for evacuation routes would prevent motorists on these routes from entering the city while the evacuation is underway. |
| Closure of outbound off-ramps on limited-access roads and highways | Closure of outbound off-ramps on highways utilized for evacuation routes would keep evacuees on these routes until they reached planned evacuation destinations. |
| Closure of outbound on-ramps on limited-access roads and highways | Closure of outbound onramps on designated evacuation routes would reduce congestion on these roadways due to traffic originating at intermediate locations between evacuation origins and destinations. |
| Limited contra flow on selected limited-access roads | Reversal of one or more lanes of highway to accommodate an increased flow of traffic in one direction. Contra flow has |

| | |
|---|---|
| and highways: e.g., one lane for bus convoys, etc. | been implemented as a component of hurricane evacuation planning in certain southern and southeastern states, but is not a common feature of many disaster evacuation plans because of the need for a long lead time prior to the evacuation during which the contra flow can be established. |
| Unlimited contra flow on selected limited-access roads and highways- all normally inbound lanes used for outbound traffic | Redirection of all lanes of a designated evacuation route to accommodate rapid evacuation from a city or region. This is a tactic that lends itself primarily to limited access roadways. |
| Limited/unlimited contra flow on selected unlimited-access arterials | Temporary closure of inbound travel lanes on selected unlimited-access arterial roadways (such as parkways and boulevards) and allowing outbound traffic to utilize these lanes during an evacuation. |
| Traffic Control Points | Locations along designated evacuation routes which are staffed by emergency management personnel and utilized to maintain a greater degree of evacuation management. TCPs can enhance the efficiency of an evacuation, reduce public confusion during an evacuation, and allow increased operational flexibility during an evacuation.<br>**Procedure**<br>1. Establish control points safely outside of any exclusion zone that requires protective equipment or clothing, yet close enough to provide maximum coverage and control.<br>2. Appoint non-law enforcement personnel to control points to hand out information and provide other non-law enforcement related duties. This will free up law enforcement resources.<br>3. Update control points with up to the minute information about the incident, information about evacuation routes and alternate evacuation routes, and printed materials.<br>4. Check identification in the event that re-entry is allowed to residents of an evacuated area. |

| | |
|---|---|
| | 5. Have control points provide access passes to allow entry into restricted roads and areas.<br><br>6. Check identification in the event that evacuation routes are restricted to residents of the evacuated area. |
| Segregation of Pedestrian and Vehicle Traffic | Certain urban roadways would be designated for use by pedestrians. This would provide separation between vehicles and pedestrians during an evacuation, thus reducing confusion and increasing the efficiency of evacuation from densely populated areas. |

- Public Works is responsible for placing the signs that will show evacuation routes.
- Identification of critical intersections and other points (e.g., railroad crossings, bridges, potential bottlenecks) along evacuation routes to be monitored and/or staffed by response personnel
- Consider sending Police Officers and/or Public Works/City Operations personnel to staff key intersections.

2. Initial activation of rally points to be used
    - Consider Parks
    - Consider Park and Rides
    - Consider Schools
3. Initial activation of destinations (incl. shelters) to be used
    - Coordinate with Hume Services and King County ECC.
4. Identification and activation of communications systems to be used among responders
    - Coordinate with Communications Unit in the EOC.
5. Selection and deployment of measures for assisting special needs populations
    - Coordinate with Hospital/ Nursing Home Evacuation Group
6. Broadcast of routing and destination information to general public
    - Broadcasts should be as frequent as possible, with information updates at least every 4 hours.

**Logistics Section**

1. Tracking of vehicles being used to support evacuation movement

2. Deployment of traffic management and sheltering staff and assets
3. Identification of addition vehicles and resources to assist in evacuation

**Finance Section**

1. Tracking and recording of all expenses associated with response to incident shall be the responsibility of the Finance and Administration Section.

## APPENDIX B (4)
## MOVEMENT & EN-ROUTE SUPPORT

**Command and Control Section**

1. The Operations Section Chief (or appropriate ICS personnel) shall strive to review the situation every hour (for the first 12-24 hours), to ensure proper areas are being evacuated based on risk analysis and situational changes.

**Planning Section**

1. Identification and resolution of real-time contingencies/obstacles on the routes as they arise
2. Plan for additional staff and resources

**Operations Section**

**1.** Traffic management and monitoring in affected areas and along evacuation routes in coordination with Police and Public Works.

**2.** Establishment of dedicated inbound/outbound routes for emergency response vehicles

- See Evacuation Route Map.

3. Full activation and staffing of rally points
4. Sweeping of area being evacuated to encourage people to leave and identify/aid those who need assistance shall be coordinated by Evacuation Division.
5. Broadcast of ongoing information updates to evacuees (media, variable message signs (VMS), EAS, City's Shoreline Alert, NOAA Emergency Radio, County's MyStateUSA, Highway Advisory Radio (HAR) if available, driving streets reading the evacuation notification over PA systems, and door to door is applicable.
6. Consider Law enforcement presence in evacuated area and along evacuation routes (and at ingress/egress points) to maintain order
7. Pre-transportation quarantine and decontamination activities, if needed (based on nature of incident) Fire Branch shall coordinate.

**Logistics Section**

1. Implementation of transit support (public and private) for people without personal vehicles
2. Implementation of para-transit support (public and private) for vulnerable populations
3. Deployment of measures, interpreters and assistance communication to the deaf, deaf and muted, and sight limited. for assisting vulnerable and special needs populations

4. Activation of assistance locations (fuel, water, medical support) at designated points along evacuation routes in coordination with KCECC and State EOC.

**Finance Section**

1. Tracking and recording of all expenses associated with response to incident shall be the responsibility of the Finance and Administration Section.

## APPENDIX B (5)
## RECEPTION AND SUPPORT

**Command and Control Section**

1. The Operations Section Chief (or appropriate ICS personnel) shall strive to review the situation every hour (for the first 12-24 hours), to ensure proper areas are being evacuated based on risk analysis and situational changes.

**Planning Section**

1. Prediction of size of evacuation populations traveling to shelter and support locations. (See: Shoreline Transportation Analysis Zones Map created May 2010 for Daytime and Nighttime Populations Estimates based on 2010 Census)
2. Based on predicted populations, estimates of needed resources at locations

**Operations Section**

1. Full activation of sheltering destinations (general population dormitory, pet shelters, medically fragile shelters) and special needs populations (pets, etc.)
2. Selection and deployment of measures for assisting vulnerable and special needs populations in coordination with KCECC and State EOC.
3. Information updates to evacuees regarding status of overall evacuation and sheltering effort (See Section4.5 Public Communications of this plan)
4. Evacuee identification and registration activities, to track shelter populations and assist communications among evacuees and loved ones utilizing EOC Software, if available and in consultation with KCECC and State EOC.

**Logistics Section**

1. Resource management activities to ensure sufficient supplies, facilities, and resources at sheltering destinations
2. Deployment of medical staff and supplies distributed among sheltering destinations as needed and in consultation with KCECC and State EOC.

**Finance Section**

1. Tracking and recording of all expenses associated with response to incident shall be the responsibility of the Finance and Administration Section.

## APPENDIX B (5)
## RETURN

**Command and Control Section**

1. Decision to end evacuation and allow re-entry into affected area shall be only given by the Operations Section Chief and Incident Commander.
2. De-activation of command structure
3. **NOTE:** Safety of the public and emergency personnel is the primary concern when making decisions on re-entry. Once the re-entry process begins it is often difficult to stop or turn around.
4. **NOTE:** Authorities can restrict entry back into an evacuated area. Personnel staffing control points restricting access to the evacuated area will be faced with an onslaught of persons requesting to be allowed back into the area.
5. **NOTE:** The determination must be made if it is safe to allow anyone to return into the area, based on the incident.

**Planning Section**

1. Criteria for decision to end evacuation and initiate "Return" phase
2. Determination of timing for vacating shelters and conducting "Return" activities
3. Selection of transportation options for evacuees without personal transport
    - Do not forget about persons requiring transportation from their shelter location back to their homes or drop-off points near their homes.
4. Responsible for Demobilization Plan
5. **NOTE:** Pre-printed Closed Area Access Passes are helpful to identify individuals who have permission to be in the closed area.

**Operations Section**

1. Notification to emergency management, transportation and support agencies that "Return" phase to be implemented

- **NOTE:** Everyone must know that re-entry is being allowed and under what circumstances.

2. Notification to evacuee populations regarding timing and method of transportation
   - It is important to advise evacuees that the danger is over and that their neighborhood has been evaluated and determined safe for them to re-enter.
   - **NOTE:** The public must be made aware of the re-entry policy and procedure including what qualifications must be met for re-entry, number of people per vehicle, identification requirements, length of time allowed in the evacuation area, and any escort requirements.
3. Transportation of evacuees
4. Selection and deployment of measures for assisting vulnerable and special needs populations in consultation with KCECC and State EOC.
5. Law enforcement presence in evacuated area and along re-entry routes to maintain calm and order
6. De-activation and return to readiness activities for sheltering facilities

**Logistics Section**

1. Staging of assets to be used for transportation of evacuees back to affected area

**Finance Section**

1. Tracking and recording of all expenses associated with response to incident

**APPENDIX B (7)**
**SHELTER-IN-PLACE PROS AND CONS**

| PRO | CON |
|---|---|
| **1. Immediate Protection.** Protection can be provided immediately with little or no time required after warning. | **1. Public Training Needed.** The general public needs to be trained on shelter-in-place actions and acceptance, as this action may be contrary to normal human nature to run from danger. |
| **2. Short Warning Message.** The public warning message is short since it is only necessary to identify the danger, describe the area affected, describe expedients to reduce air infiltration to the home or building, etc. | **2. Indoor Air Uncertainties.** Uncertainties may exist about whether indoor air concentrations will remain sufficiently low for a sufficiently long time period. |
| **3. Little Preparation Time.** Little or no preparation time is necessary for shelter (only possible to "sealing" of room by expedient improvements). | **3. Explosive/Flammable Materials.** Inappropriate where releases of explosive or flammable gases could enter structures and be ignited by furnace and water heater ignitions. |
| **4. Ideal Life Support System.** The home is an ideal life support system with food, water, sanitation, medicines, bedding, clear air, communications (TV, radio, telephone), and familiar surroundings. | **4. Long-term Exposures.** May be very inappropriate for long-term exposures ("plume" potential) of 92 hours or more. |
| **5. Short-term Exposures.** May be very appropriate for short-term exposures (particularly "puff" releases) of 2-4 hours duration. | **5. Need To Air Out.** Infiltration of contaminated air into the structure over a period of time could result in high cumulative inhalation exposures unless the structure is vacated and "aired out" after the plume outdoors has passed on or dispersed. |
| **6. Little Staff Support.** Requires considerably less emergency staff support than evacuation, as public shelter, traffic control, special transportation, and security personnel are not needed. | **6. Transients.** Those in parks, marinas, campgrounds, and outdoor sporting events may not have suitable shelter available and would have to travel to such. |

| | |
|---|---|
| **7.** **<u>Reduced Liability.</u>** An in-place public protection action issued for a chemical leak may not be as liable as an evacuation order if the protective action decision was made using a sound decision-making process with good faith effort. | |

**APPENDIX B (8)**
**CITIZEN'S PRE-PRINTED**
**SHELTER-IN-PLACE INSTRUCTIONS**

1. Go inside your home or other building. If possible, choose a room with few or no windows.

2. Close all doors and windows. Use duct tape, wet rags or similar materials to seal air leaks around doors and windows.

3. Close fireplace dampers.

4. Turn off and cover all exhaust fans: i.e., bathrooms, kitchen.

5. Turn off all HVAC systems and air conditioners. If applicable, place vents in the closed position, set the ventilation system to 100% recirculation.

2. School children will be with school officials who are prepared to take special care of them. DO NOT go to the school to pick up your children.

3. Do not use telephone lines. They will be needed for official business.

4. Stay inside until your TV or radio announces that you may safely leave. If the emergency involves hazardous materials, authorities will notify you when to open windows and doors to ventilate the building.

## APPENDIX B (9)
## 48-HOUR RESPONSE QUICK REFERENCE/ CHECKLIST FOR INCIDENT COMMANDER

### QUICK REFERENCE RESPONSE ISSUES

**1. Directions and Control / Incident Command**

- Set up Incident Command/Unified Command, Span of Control and Unity of Command.

**2. Size Up and Damage Assessment**

- Determined the size and the area affected population characteristics, and economic profile of the area.
- Activate Damage Assessment / Windshield Surveys.
- Damage Assessment is important to secure state and federal assistance.

**3. Search and Rescue**

- Prioritize emergency response – Life, Property, Environment.
- Search the damaged area, rescue the injured, and recover the bodies.

**4. Public Information**

- Designate people to provide information to the media.
- Establish a location to meet with the media away from the ECC/ICP.
- Inform citizens of the status of the response and recovery.
- Inform and update public officials.

**5. Track Citizen's Needs**

- Designate someone to keep track of requests for assistance and the delivery of that assistance.

**6. Track Offers of Assistance**

- Be prepared to deal with voluntary help
- Designate someone to keep track of offers of assistance.
- Discourage shipments of donated goods.
- Set up a location for financial donations. (Bank accounts, etc.)
- Identify locations to store donated goods.

**7. Debris Clean Up and Disposal**

- Work with the Public Works on proper disposal of debris.
- Inform the public of proper separation and disposal of debris.

**8. Determine Outside Needs**

- Activate Mutual Aid Agreements as situation warrants.

- Contact Zone 1, King County and/or State ECCs.

**9. Determine Public Health Issues**

- Address health issues such as safe water and food, disease, and mental health, for victims and responders.

**10. Site Security / Pass System**

- Implement a pass/ID system for access to the affected area.
- Relates to security, and orderly clean up and repair of the affected area.

| 0-2 Hours | |
|---|---|
| | Establish Incident Command System. |
| | Activate the ECC. |
| | Notify all of the agencies with a role in your plan. |
| | Determine the size and nature of people, buildings and businesses affected by the incident. |
| | Conduct search and rescue as needed. |
| | Open shelters as needed. |
| | Determine if the area needs access control and set up roadblocks. |
| | Begin clearing roads and streets. |
| | Begin to determine the types and amounts of outside assistance you may need. |
| | Notify Zone 1 and King County ECCs, if necessary. |
| | Begin public information activities and issue protective actions for the public, if necessary. |
| | Hold one or more command staff briefings. |
| | Consult your agency's Response Checklist. |
| | Activate mutual aid agreements. |
| | Consider the need to declare a State of Emergency. |

| 2 – 4 Hours | |
|---|---|
| | Continue search and rescue operations, if necessary. |
| | Continue public information activities and determine the need for establishing a JIC. |

| | |
|---|---|
| | Consider the need for 24-hour operations and the establishment of 12 hour shifts. |
| | Continue shelter operations as needed. |
| | Inform the hospital(s) of potential casualties. |
| | Begin preparations for establishing a pass/ID system for access to the affected area. |
| | Activate damage assessment teams. |
| | Assign people to handle request for assistance and to track the needs of special populations. |
| | Assign people to track requests for information on disaster victims. |
| | Assign people to track offers of assistance and donations. |
| | Continue clearing roads and streets. |
| | Determine how debris will be disposed of. |
| | Begin to determine the public health effects of the disaster. |
| | Begin to consider the needs of the special populations. |
| | Begin to take care of the needs of the responders. |
| | Consult your agency's Response Checklist. |
| | Hold one or more Command Staff briefings. |

| **4-12 Hours** | |
|---|---|
| | Continue search and rescue operations, if necessary. |
| | Continue public information activities. |
| | Prepare for the next shift to take over. |
| | Consider the need for ongoing mutual aid. |
| | If necessary, activate a pass/ID system for access to the affected area. |
| | Continue to inform the hospital(s) of potential casualties. |
| | Continue damage assessment activities, compile the information collected and report to King County ECC. |
| | Continue clearing roads and streets. |
| | Take debris to an appropriate land fill. |
| | Prepare a prioritized list of repairs to critical facilities and transportation routes. |
| | Begin cleanup activities on public and private property. |

| | |
|---|---|
| | Continue to track the requests for assistance and the needs of special populations. |
| | Continue to track requests for information on disaster victims. |
| | Continue to track offers of assistance and donations. |
| | Continue shelter operations, as needed. |
| | Address the public health needs of the disaster victims and responders. |
| | Take care of the personal needs of the responders. |
| | Conduct several command staff briefings. |
| | Consult your agency's Response Checklist. |
| | Brief the next shift. |
| | Coordinate with utilities in the restoration of service(s). |
| | Anticipate and address public health issues. |

| **12 - 24 Hours** | |
|---|---|
| | Continue search and rescue operations, if necessary. |
| | Continue public information activities. |
| | Continue operation of the pass/ID system for access to the affected area. |
| | Continue damage assessment activities and submit a Situation Report to the Zone, County and/or State. |
| | Continue repairs to critical facilities. |
| | Consider the need for ongoing mutual aid. |
| | Inform the hospital(s) of casualties, as necessary. |
| | Continue cleanup activities on public and private property. |
| | Take debris to an appropriate land fill. |
| | Coordinate the utilities in the restoration of service. |
| **12 - 24 Hours, Cont'd.** | |
| | Continue shelter operations as needed. |
| | Keep records of agency expenses. |
| | Anticipate and address public health needs. |
| | Track the requests for assistance and the needs of the special populations. |

| | |
|---|---|
| | Continue to track requests for information on disaster victims. |
| | Conduct several Command Staff briefings during each shift brief next shift. |

| **24 - 48 Hours** | |
|---|---|
| | Continue search and rescue operations, if necessary. |
| | Continue public information activities. |
| | Continue operation of the pass/ID system, if necessary. |
| | Continue damage assessment activities and submit Situation Report. |
| | Continue repairs to critical facilities. |
| | Consider the need for ongoing mutual aid. |
| | Continue cleanup activities on public and private property. |
| | Take the debris to an appropriate landfill. |
| | Coordinate with utilities in the restoration of service. |
| | Continue shelter operations, if necessary. |
| | Keep records of agency expenses. |
| | Anticipate and address public health needs. |
| | Continue to track the request for assistance and the needs of special populations. |
| | Continue to track requests for information on disaster victims. |
| | Coordinate activities of volunteers assisting with clean up efforts. |
| | Begin planning for re-entry and long term recovery. |
| | Conduct several Command Staff briefings during each shift. |
| | Brief the next shift. |

| **48 and On-Going** | |
|---|---|
| | Continue public information activities. |
| | Continue operation of the pass/ID system, if necessary. |
| | Continue damage assessment activities and submit Situation Report. |
| | Provide updated estimates to Zone 1, County and/or State. |

| | |
|---|---|
| | Consider the need for ongoing mutual aid. |
| | Inform the hospital(s) of casualties as necessary. |
| | Continue cleanup activities on public and private property. |
| **48 and On-Going, Cont'd.** | |
| | Take debris to an appropriate land fill. |
| | Coordinate with utilities in the restoration of services. |
| | Continue shelter operations as needed. |
| | Keep records of agency expenses. |
| | Anticipate and address public health needs. |
| | Continue to track the request for assistance and the needs of special populations. |
| | Continue to track the requests for information on disaster victims. |
| | Coordinate planning for re-entry and long term recovery. |
| | Provide people to participate in the Preliminary Damage Assessment, if applicable. |
| | Conduct several Command Staff briefings during each shift. |
| | Brief the next shift. |

## APPENDIX B (10)
## FIRE/LAW/ DISPATCH ENFORCEMENT EVACUATION INSTRUCTIONS

**Command and Control**

- First Responders
    - Notify dispatch of the following:
        - Hazard that might cause evacuation
        - Rough estimate of number of Residential/ Commercial Units and/or number of blocks to evacuate
        - Estimated wind direction, if hazardous material is presence.
- Police Patrol Sgt/Incident Commander
    - Determine if immediate evacuation order is needed to mitigate dangers and/or life threatening situations, in consultation with Fire Department as it pertains to hazmat.

      Yes:
        - Establish Incident Command Post, if necessary
        - Notify City of Shoreline Emergency Management and request EOC Activation, if needed,
        - Notifies City Manager, EM Coordinator, Police and Fire Chief's of evacuation order.

      No:
        - Notify City of Shoreline Emergency Management and request EOC Activation, if needed,
- Police Dispatch, if requested.
    - Request permission for activation of EOC from one of the following. (If needed)
        - Notify City Manager

- Notify Emergency Management Coordinator
- Notify Police and Fire Chiefs

**Fire Fighter and Police Officer Directions to Citizens**

Fire Fighter and Police Officer Instructions:

1. Drive slowly on all streets and roads in assigned areas using high\low siren.
2. Stop frequently, turn off siren and use the public address systems. Announce in a calm, clear voice the evacuation message.
3. Direct residents to use the designated evacuation routes to the nearest reception center.
4. Do not use force to ensure evacuation.
5. Log name and address of persons who will not evacuate.
6. Continue to travel your designated area until all residents have been notified to evacuate.
7. Upon completion of evacuation and confirmation of your assigned area, notify King County Communications Center and relocate your vehicle to staging area.

**Evacuation Message from Fire Fighters and Police Officers:**

"The City Manager has issued an Evacuation Order. Conditions caused by the (incident) _____ make the situation one of clear and present danger. Evacuate now to (insert destination) _____. If you do not have a car, go to (insert destination) _____ _____.
**Emergency services may not be available. If you call 9-1-1 help may not come"**

Note: Evacuation Alert Level III is used for the above message. For Level I or II messages, see Appendix B – 1 of this document.

## APPENDIX B (11)
## CITIZEN'S PRE-PRINTED EVACUATION INSTRUCTIONS

INSERT "Sample Message to Citizens" From Appendix B 1 Incident Analysis

Whenever an emergency has the possibility of becoming life threatening you may be asked or ordered to prepare for an evacuation.

When you are directed to evacuate, take the following steps:

1. Stay calm -- gather your family.

2. Gather only what you need:

    a) Special dietary food, snacks or comfort food.

    b) Toiletry items

    c) Oxygen supplies or arrange with your oxygen company to deliver to the designated PSN oxygen shelter.

    d) Pets (No exotic or farm animals)

    e) Extra clothing, blankets

    f) Eyeglasses, dentures, prescriptions, other medicines, and a first aid kit

    g) Baby supplies

    h) Portable radio or TV, flashlight, fresh batteries

    i) Checkbook, credit cards, cash

    j) Drivers license, other identification

3. Your children in school will be taken to the evacuation center/shelter for their school area.

4. Lock your house; turn off lights and household appliances.

5. Do not use more than one car for your family. Take neighbors who need a ride. Keep

car windows and vents closed. Listen to your car radio for information.

6. Police/Traffic Officers may be stationed along emergency routes to direct you to an evacuation center.

7. If you only have minutes to pack, grab these items:

   a. Medical supplies: prescription medications, eyeglasses, and dentures.

   b. Disaster supplies: flashlight, batteries, radio, first aid kit, bottled water

   c. Clothing and bedding: a change of clothes and a sleeping bag or bedroll and pillow for each household member

   d. Car keys and keys to the place you may be going (friend's or relative's home)

8. Items to take to Pet Shelters:

**Don't forget your pet when preparing a family disaster plan. Assemble a portable pet disaster supplies kit.**

Keep items in an accessible place and store them in sturdy containers that can be easily carried. Your pet disaster supplies kit should include:

1. Medications, immunization records and a first aid kit.
2. Sturdy leashes, muzzles, harnesses, carriers or cages to transport pets safely. Carriers should be large enough for the pet to stand comfortably, turn around and lie down. Include blankets or towels for bedding and warmth.
3. Current photos of your pets in case they get lost.
4. Food, drinking water, bowls, cat litter/pan and can opener.
5. Information on feeding schedules, medical conditions, behavior problems and the name and number of your veterinarian.
6. Pet beds and toys, if easily transportable.

## APPENDIX B (12)
## FOREIGN LANGUAGES LIST AND PREPRINTED MATERIAL

The Shoreline Public Schools have approximately 9,000 students. 20% of the students speak a different language at home. Currently their top languages are Spanish, Korean, Chinese, Vietnamese and Tagalog. Coordinate with the PIO and ESF 15 Appendix D for information on how to get warning notices translated.

**APPENDIX B(13)**
**SAMPLE CITIZEN'S NOTIFICAITON AND INFORMATION UPDATE CONTENT LIST**

- Notification should include:
  - (INSERT) Citizens Pre-Printed Evacuation Instructions OR Shelter In-Place Instructions
  - Areas that need to be evacuated, with reference to known geographic features
  - Why and when residents should evacuate
  - Time required for evacuation efforts
  - Assembly point locations
  - Shelter locations, including availability
  - Where to pick up children (for when an evacuation happens during the weekday and school children are evacuated)
  - The designated transportation and evacuation points and evacuation routes
  - Available transportation options (start/end time, transportation point locations, frequency of pick-ups, travel destinations)
  - What residents should take from their homes
  - How long the evacuation is expected to last
  - How pets will be accommodated
  - Security plans that are in place to protect residential property
  - When informational updates will be made available
  - Other information deemed appropriate and required before residents evacuate

- Information Updates should include:
  - Location of assembly points and shelters

- Current evacuation routes
- Current road and area closures
- Availability of hotels, food, fuel, medical and other essential services
- Current traffic conditions
- Updated shelter capacities
- Security measures being implemented
- Weather conditions, if applicable
- Changes to the original evacuation order

**APPENDIX B(14)**
**CITY MANAGER EVACUATION ORDER FORM**

WHEREAS, the Emergency Management Coordinator/ Incident Commander has reported to the City Manager of the City of Shoreline, that beginning (date) _____, (time) _____, (type of event)_____

has/will cause (type of damage)_____

_____

in the City of Shoreline, and, (incident description)_____

_____

and, these problems have created a threat to life, property, or the environment, and

WHEREAS, Shoreline Municipal Code 2.50.060 authorizes the City Manager, acting as the Senior Advisor, to make rules and regulations reasonably needed to protect life, property, and the environment and,

Therefore, this event constitutes a need for an Evacuation Order as defined by the City of Shoreline Emergency Operations Plan and necessitates the implementation of the City of Shoreline Evacuation Plan and Therefore,

IT IS PROCLAIMED BY THE CITY MANAGER OF THE CITY OF SHORELINE:

A local emergency exists within the City of Shoreline due to (type of event)_____ and an Evacuation Alert Level (type of alert level from Appendix B (1) Incident Analysis) _____ is given:

ADOPTED: _____

CITY MANAGER OF THE CITY OF SHORELINE

_____
Signature

Dated this _____ day of _____, _____.

ESF COORDINATOR: Information Systems Manager

LEAD AGENCIES: Administrative Services Department

SUPPORT AGENCIES: Shoreline Police Department
All City Departments
Emergency Operations Center
King County Emergency Coordination Center
Washington State Emergency Management Division

## Introduction

### Section 1.01 Purpose

(a) This annex discusses policies, organization, actions, and responsibilities for a coordinated, multidisciplinary, broad-based approach to prepare for, respond to, and recover from cyber-related "Incidents of City Significance" impacting critical City processes and the City economy. To accomplish this, this annex establishes a structure for a systematic, coordinated, unified, timely and effective investigative response to threats or acts of Cyber Attack within the City.

### Section 1.02 Scope

(a) This annex is a strategic document that provides planning guidance and outlines operational concepts for the implementation of investigative response to a threatened or actual Cyber Attack incident within the City.

(b) This document applies to all threats or acts of Cyber Attack that require response and recovery actions within the City of Shoreline.

(c) This annex describes the framework for City cyber incident response coordination among City departments and agencies.

(d) This framework may be utilized in any Incident of City Significance with cyber-related issues, including significant cyber threats and disruptions; crippling cyber attacks against the Internet or critical infrastructure information systems; technological emergencies; or City declared disasters.

(e) This annex describes the specialized application of the City's CEMP to cyber-related Incidents of City Significance. Cyber-related Incidents of City Significance may result in activation of both ESF #2 – Communications, the Cyber Incident Annex, and Terrorism Incident Annex.

(f) The City contracts with the King County Sheriff's Office to provide the City with police services. This department operates and maintains their information technology systems.

### Section 1.03 Situation

(a) An information security event usually results from man-made technological cyber attack that produces damage and results in a large number of requests for services to mitigate the cyber attack. The City, when notified of an emergency situation at the City level, will monitor the situation and provide assistance as resources allow.

(b) Until such time as an incident is determined to be an act of terrorism, response operations will be implemented under the City of Shoreline CEMP.

**Section 1.04 Assumptions**

(a) The Information Systems Manager, will advise and provide guidance to the City Manager or designee regarding the City's response to a potential threat or actual occurrence of a Cyber Attack incident.

(b) The City may be heavily dependent on outside agencies and vendor assistance in order to adequately respond to Cyber Attack's.

(c) The Cyber security Preparedness and the National Cyber Alert System will provide regular updates to the City on Cyber threats and may provide assistance with response and recovery, as appropriate.

(d) The occurrence or threat of multiple cyber incidents may significantly hamper the ability of responders to adequately manage the cyber incident.

(e) A debilitating infrastructure attack could impede communications needed for coordinating response and recovery efforts.

(f) Cyberspace is largely owned and operated by the private sector; therefore, the authority of the City Government to exert control over activities in cyberspace is limited.

(g) The Police Department will be notified of all cyber incidents that may be a criminal act.

**Section 1.05 Policies**

(a) All activities within the Cyber Attack Annex will be conducted in accordance with the National Incident Management System (NIMS) and the National Response Framework (NRF) and will utilize the Incident Command System (ICS).

(b) As a signatory of the King County Regional Disaster Plan and through local mutual aid agreements, the City will make resources available to other jurisdictions through the Zone 1 Emergency Coordinator, and King County Emergency Coordination Center (KC ECC), whenever possible.

(c) The Administrative Services Department will coordinate activities within this plan. It is anticipated that the City will relinquish criminal investigative authority to the Federal Bureau of Investigation (FBI) for Terrorism Incidents.

**Article II. Definitions**

| Word | Definition |
|---|---|
| Terrorism | Terrorism is the systematic use of terror (imposing fear), especially as a means of coercion. At present, there is no internationally agreed definition of terrorism. Common definitions of terrorism refer only to those acts which are (1) intended to create fear (terror), (2) are perpetrated for an ideological goal (as opposed to a materialistic goal or a lone attack), and (3) deliberately target (or disregard the safety of) non-combatants. Some definitions also include acts of unlawful violence or war. A person who practices terrorism is a terrorist. Acts of terrorism are criminal acts according to United Nations Security Council Resolution 1373 and the domestic jurisprudence of almost all nations. |
| FBI – Joint Operations Center (JOC) | A centralized operations center established by the FBI Field Office/Resident Agent during terrorism-related incidents to provide a single point of direction, control, and coordination for emergency response operations. The JOC resolves conflicts in prioritization of resource allocations involving Federal assets.<br><br>The location of the JOC will be based upon the location of the incident and current threat specific information. |
| Joint Information Center (JIC) | A combined public information center that serves two or more levels of government or Federal, State, and local agencies. During a terrorist incident, the FBI will establish and maintain this facility. |
| Cyber Incident | A disruption, intrusion, or compromise resulting from an adverse event whose actions results in harm or significant threat of harm to the availability, integrity, and confidentiality of an organization's data or computing assets. |

| | |
|---|---|
| Viruses | Self-replicating code that makes copies of itself and distributes it to other computers, files or programs. |
| Spyware or Trojans | Programs that appear to be benign, but have hidden functions or purposes once introduced into a system or network. |
| Worms | Self-replicating programs that do not require a host program to infect. |
| Mobile Code | Software that is transmitted from a remote to local system. |
| Blended Attacks | Code that has multiple methods to spread, such as the Nimda "worm". The Nimba worm used: email, Windows shares, web servers, and web clients. |
| Spam | Email spam is not usually elevated to the severity of a computer incident unless it is determined to carry a malicious payload or be part of a reconnaissance effort. |
| Denial of Service (DoS) | In a denial-of-service (DoS) attack, an attacker attempts to prevent legitimate users from accessing information or services. By targeting your computer and its network connection, or the computers and network of the sites you are trying to use, an attacker may be able to prevent you from accessing email, websites, online accounts (banking, etc.), or other services that rely on the affected computer. |

## Article III. Concept of Operations

### Section 3.01 General

(a) The Administrative Services Department is the lead agency for the coordination of activities within this Cyber Attack Annex with federal, state, and county law enforcement agencies and IT departments.

(b) Cyber security incidents are identified and reported by the City Departments. In response to an incident, the City Departments involved in the response will assess the situation to identify any needs and requirements, in consultation with the Information Technology Manager.

(c) A cyber-related Incident of City Significance may take many forms: an organized cyber attack, an uncontrolled exploit such as a virus or worm, a natural disaster with significant cyber consequences, or other incidents capable of causing extensive damage to critical infrastructure or key assets.

(d) Large-scale cyber incidents may overwhelm government and private-sector resources by disrupting the Internet and/or taxing critical infrastructure information systems. Complications from disruptions of this magnitude may threaten lives, property, the economy, and national security. Rapid identification, information exchange, investigation, and coordinated response and remediation often can mitigate the damage caused by this type of malicious cyberspace activity.

(e) The FBI has authority for the criminal investigation of all potential or actual terrorist incidents within the United State.

(f) An incident command post will be established for the coordination of field operations. The unified command structure will be used when multiple departments/agencies are responding to an event.

**(g) Warning**

(i) Every incident is different. There may or may not be warning of a potential cyber attack. Factors involved range from intelligence gathered from various law enforcement or intelligence agency sources to an actual notification from the terrorist organization or individual.

(ii) The warning or notification of a potential cyber attack incident could come from many sources; therefore, open but secure communication among local, State, and Federal law enforcement agencies and emergency response officials is essential.

(iii) The Information Technology Manger notifies the City Manager, Emergency Management Coordinator, Police Chief, and other designed officials of cyber-related incidents. The activities described in this annex are implemented when a cyber-related Incident of City Significance is imminent or underway. The Administrative Services Director or Emergency Management Coordinator may determine a cyber-related Incident is of City Significance.

**(h) Notification and Activation**

(i) The City EOC may be fully activated upon the receipt of information from the Cyber security Preparedness and the National Cyber Alert System and that warrants a coordinated response.

(ii) Based upon the information received, the Administrative Services Director or Emergency Management Coordinator will determine the operational level of the EOC and notify the Primary and/or Support Agencies for each of the EOC sections, as appropriate.

**(i) Communications**

(i) Communications and alerts will be made utilizing standard communications methods outlined in ESF 2 Communications.

**(ii) Pre-Incident Phase:**

1) A credible or significant threat may be presented in verbal, written, intelligence-based or other form.

2) The Administrative Services Department maintains contact listing of local and regional Information Technology partners.

3) City requests for assistance from Regional, State and Federal agencies will be coordinated through the City EOC. During the course of a threat assessment, consequences may become imminent or occur that causes the Administrative Services Director, or delegate, to direct resources to implement in part or in total the actions as described in this Annex.

**(iii) Trans-Incident (Situations involving a transition from a threat to an act of terrorism):**

1) The City Administrative Services Department will contact City agencies, as appropriate, and provides the initial notification to other regional information technology departments, City Departments of the confirmed presence of unusual cyber activity.

2) As the situation warrants, the Administrative Services Director will coordinate with the City Manager and EM Coordinator regarding the need to activate the City's Continuity of Operations (COOP) and/or Emergency Operations plans, as appropriate.

**(iv) Post-Incident**

1) Once an incident has occurred, the Administrative Services Director, or delegate, will provide a Liaison to the respective local EOC and/or the FBI JOC, as needed.

2) The Information Technology Manager will assist in conducting an After Action Report (AAR).

**(v) Deactivation**

1) If an act of Cyber Attack does not occur, the responding elements will deactivate when the Administrative Services Director, in consultation with the EM Coordinator and City Manager, issues a cancellation notification to the appropriate agencies. Agencies will coordinate with the EOC Operations Officer and deactivate according to establish SOPs.

2) If an act of Cyber Attack does occurs, then each EOC section deactivates at the appropriate time according to established SOPs. Following section deactivation, operations by individual City agencies may continue, in order to support the affected local governments.

**Section 3.02 Organization**

(a) The Administrative Services Department is the lead agency for the coordination of Cyber Attack activities within the City.

(b) The Administrative Services Director or his/her designee will designate an Emergency Operations Center (EOC) representative to coordinate field operations and resources with federal agencies.

(c) The Administrative Services Department will follow all departmental policies and procedures relating to chain of command and on-scene management and will utilize the ICS.

(d) A unified command structure will normally be established when law enforcement agencies from outside the City are assisting with operational activities within the City.

(e) The FBI has authority for the criminal investigation, crime scene, and apprehension of those responsible for potential or actual terrorist incidents. The Police Chief or designee will coordinate activities with the FBI.

**Section 3.03 Actions**

**(a) Preparedness:**

(i) Conduct planning with other Information Technology support agencies and other emergency support functions to refine Cyber Attack operations.

(ii) Prepare and maintain emergency operating procedures, resource inventories, personnel rosters and resource mobilization information necessary for implementation of the responsibilities of the lead agency,

(iii) Assign and schedule sufficient personnel to implement mass care tasks for an extended period of time,

(iv) Conduct vulnerability analysis at critical facilities and make recommendation to improve the physical security

(v) Ensure lead agency personnel are trained in their responsibilities and duties,

(vi) Develop and implement emergency response strategies relating to terrorism response

(vii) Develop and present training courses for terrorism response.

(viii) Maintain liaison with support agencies,

(ix) Conduct All Hazards exercises involving Cyber Attack response.

**(b) Response:**

(i) See Section 3.01 Concept of Operations of this plan for additional response information.

(ii) Coordinate operations in the Shoreline EOC and/or at other locations as required,

(iii) Develop, prioritize and implement strategies for the initial response to EOC requests.

(iv) Establish communications with appropriate field personnel to ensure readiness for timely response,

(v) Participate in EOC briefings, development of Incident Action Plans and Situation Reports, and meetings,

(vi) Coordinate with support agencies, as needed, to support emergency activities,

(vii) Obtain other resources through the Law Enforcement State Wide Mobilization and Mutual Aid Plan, Statewide Emergency Management Mutual Aid and Assistance Agreement and/or the Regional Mutual Aid Agreements,

(viii) Coordinate with other jurisdictions to obtain resources and facilitate an effective emergency response among all participating agencies,

(ix) Monitor and direct response activities to include prepositioning for response/relocation due to the potential impacts of the emergency situation.

(x) Pre-position response resources when it is apparent that resources may be necessary.

**(c) Recovery**

(i) Recovery activities for this ESF are covered in the Shoreline Disaster Recovery Plan.

**(d) Mitigation**

(i) Mitigation activities for this ESF are covered in the Multijurdictional Hazard Mitigation.

## Article IV. Responsibilities

### Section 4.01 Lead Agency

**(a) Administrative Services Department**

(i) Provide support to the Emergency Management Coordinator in the dissemination of emergency warning information to the public and in the operation of the EOC.

(ii) Make recommendations concerning area cyber security and cyber incident response.

(iii) Coordinate Cyber Attack response activities with other departments and agencies.

### Section 4.02 Support Agency

**(a) Emergency Operations Center**

(i) Coordinate response activities with the FBI and the Police Department.

(ii) Implement the City's Comprehensive Emergency Management Plan and Cyber Attack Annex.

(iii) Coordinate information between various departments within the City and external agencies to ensure efficient and accurate communication.

(iv) Submit and coordinate requests for additional resources to the Z1 ECC, KC ECC, or Washington Emergency Management Division (WA EMD).

(v) Assist the City Manager to ensure continuity of government in the event of a Cyber Attack incident.

(vi) Activate the Intelligence function within the ICS if applicable and advised to do so by the police department

(vii) Notify the Washington State Fusion Center.

**(b) King County Emergency Coordination Center**

(i) Communicate with Zone 1, 3, and 5 ECCs and cities, WA EMD and all related agencies regarding Cyber Attack response activities.

(ii) Coordinate requests for resources with the above entities and facilitate the equitable distribution of available resources.

**(c) Washington Emergency Management Division**

(i) Provide coordination of State resources to provide support, as appropriate, when all local, regional, and county resources have been expended.

(ii) Facilitate the requisition of resources from other states through the Emergency Management Assistance Compact (EMAC).

(iii) Request and coordinate Federal resources through the Department of Homeland Security.

**(d) All City Departments**

(i) Assist in Cyber Incident response activities, as requested by the Administrative Services Department.

(ii) Report any unusually activity on information technology systems through established communication channels.

**Article V. Appendices**

(a) Cyber Incident Triggers

**Article VI. References**

(a) National Response Framework

(b) Emergency Management Assistance Compact

(c) National Cyber Security Division

**Appendix A – Cyber Incident Triggers**

Severity levels help determine the extent of response to security incidents by individual City Departments or a City-wide incident response team. The different Levels should be one element that it considered, when determining at what level the City should respond.

**MINOR**
**Possible Incursion on critical or non-critical system; detection of precursor to a focused attack; believed threat of an imminent attack. IT responders see potential for citywide problems.**

1. **Is public perception of City government services at risk? If there is imminent danger of** modification of the public's confidence of the City to provide leadership and efficient City services then assign the incident
2. **Is there an incursion on a non-critical system without the threat of attacking others?** If the incident involves an incursion on non-critical system without the threat of attacking others, then assign the incident
3. **Does the City have a security problem that has been identified in a public forum?** If the incident involves an alleged City security problem that has been identified in a public forum such as new vulnerabilities in operating systems or other applications in use in the City, then assign the incident

**MODERATE**
**Threat of a future attack; detection of reconnaissance…some aspects of incident raise concerns for the IT responders.**

1. **Does the incident involve malware that is a known threat?** If the incident involves spam, spyware or other malware that could potentially be a future threat to Citywide systems (either because it is possibly reconnoitering, monitoring or using City equipment as "wartime reserves"), then assign the incident

**MAJOR**
**Incident could have long-term effects on business; incident affects critical systems, impacts entities outside the City of Shoreline, and/or involves multiple City Departmental systems.**

1. **Is there a threat to physical safety?** If the incident involves a threat to any person's physical safety.
2. **Is sensitive data, personally identifiable data, or intellectual property at risk?** If there is imminent danger (the act is in progress) that confidential information can be read, modified, or destroyed by an unauthorized entity or the disclosure or access already occurred, then assign the incident
3. **Is business continuity at risk?** If there is imminent danger of disruption of business due to security issues or malicious acts or the disruption is in progress, then assign the incident
4. **Does the incident harm entities outside the City of Shoreline?** If there is danger of harm to an outside entity from the incident, such as a Denial of Service (DoS) attack, then assign the incident
5. **Are multiple City systems involved?** If the incident includes multiple systems, then assign the incident