



LOWCOUNTRY
Community Emergency Response Team (CERT)

STANDARD OPERATIONS GUIDE
&
INCIDENT COMMAND CHECKLIST

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&
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Copies of this guide and CERT Incident Command Forms
Are available on-line on the CERT Member's page at:

www.LCERT.org

Lowcountry CERT is coordinated by Emergency Management in Charleston, Berkeley and Dorchester Counties to encourage ALL Hazards preparedness within our communities.

Do The Greatest Good.....For The Greatest Number

LOWCOUNTRY COMMUNITY EMERGENCY RESPONSE TEAM (CERT) STANDARD OPERATING GUIDE

The following will represent the actions that should be taken by members of the Charleston, Dorchester and Berkeley County Community Emergency Response Teams (CERT) in the event of a disaster. Some of these items will vary with the severity and magnitude of the disaster, i.e., a tornado that is generally a small area of high destruction as compared to a hurricane, which may present a large area of destruction.

1. **YOUR FIRST RESPONSIBILITY** is to ensure that you and your family are safe and that your residence is intact and secure.
2. Locate your CERT-issued equipment and keep it with you at all times. All CERT equipment should be stored together in one place so that it can be easily located when an emergency occurs. Remember that most disasters occur without warning. You need to occasionally check and/or restock your CERT equipment (batteries, food, snacks, etc.). If issued, ensure that you have your CERT identification card with you.
3. When a disaster occurs, attempt to contact your designated CERT Team leader. If you cannot contact the CERT leader attempt to contact other CERT members on your team list or respond to your pre-designated rally point.
4. Upon contacting your CERT leader follow the directions provided by him/her. If you are designated to contact other members then do so at that time. Be sure to pass on information to other team members accurately and as it was provided to you by your CERT leader.
5. If you cannot reach your CERT leader and are unable to contact other members of the CERT (phone lines out, power out, etc.) first check to ensure that it is safe to leave your residence. If it is safe to travel then proceed directly to the pre-designated rally point for your team. Each team should have a primary and secondary rally point designated. If the primary point is not usable due to damage, flooding, etc., proceed to the secondary point and await the arrival of other members of the team. Utilize the Incident Command Checklist guidelines to mobilize your team.
6. **DO NOT** start out on your own to perform search and rescue activities. The CERT program is a TEAM effort and is not intended to be performed as an individual skill or activity. Practice the “buddy system” as you were taught in class. This does not prevent using the assistance of a neighbor that is next door or across the street if health and safety is involved. A representative of Law Enforcement or Fire Rescue Departments should eventually be meeting with you at your pre-designated rally points. If this does not occur within one hour of the team’s assembly proceed to #7.
7. After your team is assembled at the rally location follow the Incident Command Checklist guidelines. The CERT leader or designee will complete a ***Personnel Resources Check-in*** for accountability of all CERT personnel that are present. The Team leader will then attempt to contact the County Emergency Operations Center (EOC) via telephone and advise:
 - The name of the CERT Team
 - Name of the team leader and call back number
 - Location where the team has assembled
 - Number of CERT personnel on scene

- Status of personnel on scene (injuries, etc.)
 - Status of utilities
 - Immediate threats to life, safety or significant damage observed in the neighborhood
8. If there is no telephone contact available, attempt to make radio contact with the EOC by amateur radio (if available). If radio contact is not available then two members of the team should be designated by the team leader to make contact with law enforcement or fire-rescue personnel. This should be done only if a law enforcement or fire-rescue representative has not made contact at the rally point. This should also be considered a last resort measure. If this is done it will ALWAYS be done using two able bodied members of the team.
 9. Upon receiving instructions from the designated point of contact for Law Enforcement or Fire-Rescue Department, the CERT will survey the neighborhood or other designated area for damage, fires, gas-leaks, medical emergencies, etc.
 10. The following should be documented in writing using the provided CERT forms and then reported back to the Emergency Operations Center (EOC), The CERT will complete **Damage Assessment Forms** for each assignment. A written record should be kept of all activities. This form should be completed in duplicate to provide both the team and county representative's copies.
 11. If the team is in a response mode (as compared to a damage survey mode) all activity should be documented on a **Briefing Assignment Form**. This form should be completed in duplicate to allow a copy to be kept for the team's records.
 12. All formal messages passed between the CERT team and the Emergency Operations Center (EOC) or any Public Safety Answering Point (PSAP) (911 Communications Center) should be documented on a **Message Form**. This allows for verification and clarification of messages that are passed between the team and the county/municipal EOC or Emergency Response Agencies. Messages may be passed in person or by telephone, cellular, amateur radio, CB radio or any other workable method. CERT teams are highly encouraged to use amateur radio to communicate between CERT teams in the field. Radio Amateurs Civil Emergency Services (RACES) and Amateur Radio Emergency Service (ARES) are groups that have operators positioned at critical points across the county before, during, and after a disaster. RACES/ARES are generally capable of operating on a wide spectrum of radio frequencies including UHF (440-450 MHz), VHF (144-148 MHz) and HF (20, 40, 80 MHz).
If available, use FRS radios for team communications.
 13. It is the responsibility of the CERT leader to keep track of team members at all times.
It is also the responsibility of the CERT leader to ensure that the team takes appropriate rest breaks, receives proper nourishment, and drinks enough fluids to keep hydrated during a disaster operation.

CERT team leaders should monitor their members for signs of critical incident stress and should report the first indications of it to the EOC representative, if possible. If a member of the CERT team exhibits signs of Critical Incident Stress Syndrome, the team member should be relocated to a calmer environment and encouraged to relax. This member should not be placed back into action until evaluated by a Critical Incident Stress Management (CISM) team member.

**LOWCOUNTRY
COMMUNITY EMERGENCY RESPONSE TEAM (CERT)
PROGRAM RULES AND REGULATIONS**

- 1. YOU ARE NOT A POLICE OFFICER, FIREFIGHTER, PARAMEDIC, EMT, or RESCUE SQUAD MEMBER.** You are trained to function as an extension of the fire-rescue, EMS and local law enforcement's response to catastrophic disasters when such circumstances exist or when directed by emergency services officials.
- 2. YOU ARE FORBIDDEN TO CARRY GUNS, KNIVES, OR OTHER WEAPONS.** You have been trained for immediate emergency response and there is no need, place or legal authorization for you to carry or use any of the above. To do so will jeopardize your own safety and the continued existence of the CERT program.
- 3. YOUR FIRST RESPONSIBILITY IS TO YOURSELF AND YOU'RE FAMILY.** During or following a disaster or major emergency, your first responsibility is to ensure your own safety and the safety of your family. You should not venture out on your own to start search & rescue operations without your team members.
- 4. CONTACT YOUR CERT LEADER.** During or following a disaster or major emergency and after ensuring that you and your family are safe, you should assemble with your CERT leader and group for additional instructions and direction. Your CERT leader is your point of contact for the emergency services. Do not attempt to contact emergency services directly unless a life-threatening emergency exists.
- 5. IF YOU CANNOT REACH YOUR CERT LEADER.** If unable to contact the CERT leader due to downed phone lines, loss of power, etc., you should respond to your pre-designated rally point for your neighborhood or community CERT. Follow the Incident Command Checklist guidelines to mobilize your teams. Do this only when you're sure it is safe to do so. Do not leave a place of safety unless you are sure it is safe to do so.
- 6. BRING ALL OF YOUR ISSUED CERT GEAR.** When functioning as a member of a CERT team you should always have your issued CERT equipment with you and if issued display your CERT identification card on the outside of your clothing.
- 7. STAY WITHIN THE SCOPE OF YOUR TRAINING.** You have been trained under the curriculum of FEMA's Community Emergency Response Team program. Confine your actions to those guidelines and stay within the scope of your training and certification.
- 8. STAY WITHIN YOUR LIMITATIONS.** You must confine your actions to your physical and resource limitations when responding as a member of a CERT. Such limitations may be determined by, but not limited to, equipment available, physical abilities, knowledge, authority, hazards, etc.

INCIDENT COMMAND CHECKLIST

CERT INCIDENT COMMANDER

OVERALL GOAL OF INCIDENT COMMANDER

Identify scope of the crisis – what’s the problem?

Determine the overall strategy – what can we do and how will we do it?

Can it be done safely?

Deploy resources – who’s going to do what?

Communicate situation and status to the Emergency Operations Center (EOC) on a regular basis.

WHAT MAKES AN INCIDENT COMMANDER SUCCESSFUL?

Ability to adapt to changing circumstances.

Ability to make decisions based on available information and input from others.

SET UP COMMAND POST

Choose a safe area.

If utilizing a building ensure the building is stable. Be aware of after shocks in the event of an earthquake.

If possible, have a table and chairs and be out of the elements.

Think about organization and room to grow.

Set up a staging area (*Logistics / Staging*) where new first responders and volunteers report and where resources & supplies are kept, etc.

ASSIGN OTHER POSITION(S) AT COMMAND POST

Need at least one other person to record messages, help keep track of paperwork, etc. (*Admin*) and a ham radio operator (**Communications Officer**) if at all possible. Maintain span of control. Initially, Incident Commander starts with this checklist, but if situation grows may need to appoint a **Safety Officer** and **Section Chiefs** to deal with **Operations, Logistics / Staging, Planning / Intelligence and Admin / Finance**.

FIND OR CREATE FORMS (*ADMIN*) Damage Assessment, Personnel Resources Check In, Equipment Resources, Assignment Tracking, Incident Briefing, etc.

COLLECT INFORMATION ON RESOURCES (*LOGISTICS / STAGING*) – Have all volunteers sign in (including yourself!), indicate primary training and skills, and document the extra supplies brought to Command Post/ Staging area.

COLLECT DAMAGE REPORTS (*PLANNING / INTELL*) Record incidents as they are reported. Send out damage assessment teams if necessary. Interview neighbors.

COMMUNICATE WITH EOC – Give them your first status report (number of victims, any known moderate to heavy damage, status of Command Post, status of utilities, number of volunteers, etc.)

ASSESS AND PRIORITIZE INCIDENTS– Remember life safety and greatest-good first.

ORGANIZE PEOPLE INTO TEAMS (*LOGISTIC / STAGING*) depending on incidents and number of people available. (Search/Triage and Medical Treatment Area teams if victims reported, Search & Rescue if trapped victims found, Fire suppression if necessary, etc.) Assign a radio person to each team if possible. Teams generally should be no smaller than three, no larger than seven people. If possible, match volunteers’ skills and interests with needed teams.

SELECT A LEADER FOR EACH TEAM (*LOGISTICS / STAGING*) and record the names of all team members on an *Assignment Tracking Log*.

WHEN SENDING OUT TEAM (OPERATIONS):

- Give team leader a written description of the mission you want them to deal with (*Briefing Assignment Form*) and a checklist of their duties if available
- If team has a radio, write “Functional Call Sign” for radio communication on *Briefing Assignment* and *Assignment Tracking Log*, and be sure radio person is aware of call sign
- Specify a time frame to report back within and any specific information you want.
- Specify what to do when they complete the task (radio in, come back, etc.).
- Be sure team leader has paper, pen, clipboard, and appropriate supplies
- Tell them to radio or send a message to Command Post if they need more supplies
- Tell them to document their actions and findings as best they can

Record the Date/Time you sent them out on the *Assignment Tracking Log*, along with specific instructions you gave them as to when to check in, etc.

WHEN A TEAM COMPLETES THEIR ASSIGNMENT (OPERATIONS) and checks back in, document their arrival time on the *Assignment Tracking Log* and collect their documentation.

Review the team’s record – do they need a break? Do they need to eat, sleep, or receive any medical treatment? Do not send a team directly from a very stressful environment to doing nothing – give them a less stressful job to do before they are relieved from duty.

DOCUMENT SITUATION STATUS

Keep track of each incident – be able to pass on information on how many victims, number still trapped, extent of damage, utility problems, access routes, other hazards, etc.

Document each decision and all messages sent.

Be sure to document any purchases or items obtained during crisis (*ADMIN / FINANCE or LOGISTICS*).

REPORT SITUATION STATUS AND IMMEDIATE NEEDS (To EOC or whoever reporting to) on a routine basis.

BEGIN PLANNING FOR FUTURE NEEDS (PLANNING and LOGISTICS)

- Think about which supplies you are likely to need (more medical, cribbing, etc.)
- Think about food, shelter, lights, and sanitary needs of CERT members.
- Plan for replacement teams if likely to be necessary.
- Plan for batteries or other needs to maintain communication links.

HOLD REGULAR BRIEFING MEETINGS WITH LEADERSHIP STAFF AT COMMAND POST

As new information is received, priorities change. Be sure CERT teams do not overextend their resources or supplies. Safety is first priority. Include Law Enforcement and Fire/Rescue Liaisons. Use Incident Briefing form to brief arriving emergency services or for transfer of command.

MEDICAL TREATMENT AREA (MTA) CHECKLIST

CERT MEDICAL LEADER

SELECT TREATMENT AREA

If incident site has only light damage and not many victims, treat in place. If moderate damage or many victims, find another location that is:

- Safe, free of hazards and debris – not too far from incident site.
- Able to protect victims from the elements if necessary.
- Flow-through access for transport vehicles (ambulances, trucks, helicopters, etc.).
- Large enough, and room to expand if necessary.
- Upwind and uphill from hazards.

SET UP TREATMENT AREA

- Immediate (Red) closest to transport.
- Delayed (Yellows) close by (but not so close that Red area can't expand).
- Tag and leave deceased (Blacks) in the incident area where they are found and document.
- If a Morgue is needed (victims who die after being moved to the MTA) it must be a secure area, not in sight of victims.
- Label Treatment Areas as clearly and noticeably as possible.
- Separate the treatment areas with something so it's clear where each area begins and ends (could be triage tape, tarps, furniture, wood, etc.).
- Place medical supplies near the Red and Yellow treatment areas.
- Place biohazard medical waste disposal sites in each area.
- Get or create Medical Treatment Documentation forms.
- Contact Command Post if more supplies needed.

SELECT & BRIEF TREATMENT LEADERS FOR EACH AREA

- One person in charge of each treatment area (Red, Yellow, Green). One person may be in charge of more than one area if very few victims expected.
- Give Treatment Leaders Medical Treatment Documentation forms or paper.
- Explain to Treatment Leaders that their duties are:
 1. Ensure orderly patient placement in their area(s)
 2. Ensure each victim has a Triage Tag/Medical Treatment Form that stays with the patient at all times
 3. Ensure that all victims brought to their area get checked again for the 3-killers and upon arrival a head-to-toe assessment is done ASAP (and at least hourly after that for reds and yellows).
 4. Maintain a calm and organized area – quiet voices, no stepping over victims, conduct conversations about patients out of earshot of patients.
 5. Contact you if they have questions or need supplies or more help.

SELECT A TRIAGE FUNNEL POINT AND A TRIAGE LEADER

(May be you or another person – having a second person to help record information is helpful)

- Ensure Triage Leader has a marker (to write on foreheads), a clipboard, pen and Triage Form (or paper) to record triage number, sex and status of victim, Immediate, Delayed, Minor or Dead.
- Instruct Triage Leader that all victims MUST come through funnel point and have a triage number assigned, documented and written on their forehead/tag, and then Triage Leader should direct the transporters/victims to the appropriate treatment area.

ANCILLARY ITEMS

- Decide where latrine will be, think about bedpans and where human waste will be stored.
- Think about lighting – notify command post if more lighting will be needed.
- Think about clean water to drink and for washing wounds.

BEFORE VICTIMS ARRIVE (if you have time), REVIEW THE FOLLOWING WITH MTA STAFF:

Documentation must include:

1. Identification: Name, age, address **OR** full description (race, approximate age, sex, hair & eye color, height, weight, clothing, jewelry, where found or other identifiers).
2. Description of injuries and status, Immediate, delayed or Minor.
3. Treatment (document date/time of each head-to-toe, what actions taken, any change in status).
4. When transported and to where.

Review biohazard protection – protect yourself, wash hands frequently, wear gloves, mask and goggles, change gloves between patients if possible, if not, dip in bleach solution.

Bag medical waste and mark ‘BIO HAZARD’, designate biohazard waste storage site.

Review how to do a head-to-toe assessment – ask permission first, be alert for signs of shock or head injury, check their breathing, do head-to-toe the same every time, all victims (including greens) are assessed and documented, remember to check gloves after each body part. Be sure to talk to victims, ask them about any injuries, pain, and other symptoms, and explain everything you are going to do. Remove shoes, tight clothing, watches, jewelry, etc. from injured area to prevent acting as a tourniquet if swelling occurs. Make sure all personal effects stay with the victim.

AFTER VICTIMS ARRIVE

- Ensure that Treatment Area Leaders have enough help and supplies. Contact Command Post if you need anything.
- The Command Post will send you more volunteers as they become available – assign them to help with one of the treatment areas or other duties as needed.
- Assign someone to fill in name or other identifiers on *The Victim Treatment Area Record* – the list of all victims by triage number, triage color (may change if patient status changes) and space to record transport location. Be sure to include Greens on the list.
- If a morgue is needed, assign someone to ensure security of morgue area.

TRANSPORTING PATIENTS TO HOSPITALS OR OTHER LOCATIONS

- When ready to transport victims away from MTA, assign a Transportation Officer.
- Ensure Transportation Officer has Victim Treatment Area Record, a clipboard and pen. Instruct Transportation Officer to document :
 1. Who is transporting the patient (agency, unit number)
 2. Intended destination
 3. Date and time of transport

Victims may want to leave if not severely injured (Greens and some Yellows). Be sure to document all details if you cannot convince them to stay until professionals arrive.

CERT SEARCH/TRIAGE LEADER CHECKLIST

ORGANIZE TEAM

- Assign team members and assign an identifier (Team A, B, etc.) and document who's who – minimum of three per search team, may need the 3rd to maintain voice contact, serve as a runner, get supplies, etc.
- Decide on signals – 3 sharp blasts means get out of the building, etc.
- Do equipment checks – safety gear on, enough triage supplies (gloves, triangle bandages, 4x4's), flashlights working & backup available, rope for searching large rooms, wrench to turn off utilities, fire extinguishers etc.

DO A THOROUGH SIZE-UP BEFORE ENTERING

- Remember – Rescuer Safety First!
- Gather information – anyone reported missing? Are people likely to be in there?
- Look carefully for any visible danger from the outside – building already tagged, electrical lines down, dangers overhead or underfoot, hazardous chemicals, gas, etc.
- Have team do a complete walk-around to look for and secure utilities, any hazards and determine exits and entry points. Be careful of chimneys.
- Document findings - contact Command Post if unexpected hazards encountered.

DETERMINE & COMMUNICATE THE PLAN

- Decide how many people to send in based on circumstances.
 - If moderate damage present and victims likely, send only a few volunteers into building. Stabilize and evacuate victims as soon as possible.
 - **If heavy damage, or evidence of hazardous materials do not enter!** Secure perimeter and utilities if safe to do so. Gather information about potential of trapped victims and notify Command Post.
- Decide on search pattern – be consistent!
 - Bottom up or top down if more than one floor.
 - Right wall or left wall as team enters a room.
 - Any large spaces that need more than one set of searchers?
- Decide if search teams need to mark interior doors – necessary in larger buildings.
- Decide where safety person will be – need to be able to hear each other. In smaller buildings safety person can be outside – larger ones need safety people inside with search teams.
- Decide on a designated location where ambulatory Greens will stay initially.
- Decide how often teams should report back to Team Leader, and how (radio, runner, etc.).
- Be sure each team member understands the plan and the plan can change if new information comes up.

REVIEW OF MARKING DOORS

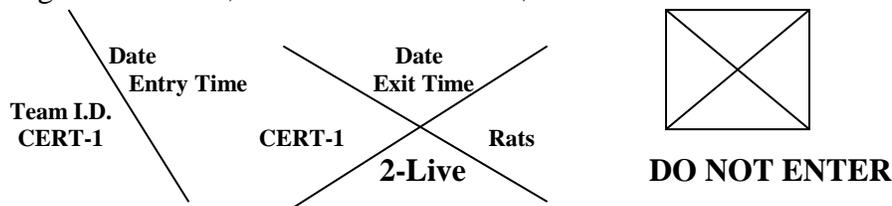
Single slash i.e. \ about 24 inches long with search team identifier (left quadrant), and date & time of entry (top quadrant)

Complete the X when team leaves area, document time out (top quadrant) any hazards or areas searched (right quadrant), number of each type of victim (bottom quadrant).

If any information needs to be updated, cross off older info and write in new.

If you have trapped victims (especially if difficult to see) try to mark location inside room.

If space is too dangerous to enter, can use box around X, but also write "Do Not Enter"



REMIND TEAM MEMBERS OF THEIR MISSION

- Be Safe! Check overhead, under foot and around before moving forward. Number one rescuer problem is breathing dust – wear mask.
- Feel doors for heat, starting at bottom, use back of hand. If hot, there is fire behind door
- If you smell gas don't move any switches, notify other searchers and exit building.
- Stay with buddy at all times. Use whistle if help is needed. If dark or smoky stay connected to buddy with rope.
- If in doubt, get out.
- Mark doors – interior doors also if large building.
- Always know the closest way out, have two possible exits. Most common cause of rescuer death is disorientation and secondary collapse.
- Be sure to call out frequently and listen for tapping sounds, movement or voices. Triangulate to find victim if necessary.
- If you can't get into an area, knock, shout and ID yourself, listen for a response.
- Check closets, elevators, under stable debris.
- May only be able to see a small part of the victim – hand, foot or face.

TRIAGE BASICS WHEN VICTIM IS FOUND:

- Goal is to do most good for highest number of people – don't get sucked into treatment or rescuing trapped victims before triage is done.
- Do voice triage first – Evacuate walking wounded, tag Minor (Green). All victims must get a tag, even if they seem fine. Ask them about location of other possible victims, and tell them where to wait.
- Remove sharp debris so you don't kneel on it.
- Check Airway – Look, Listen, Feel -- if not breathing, head-tilt chin-lift twice. If they respond tag Immediate (Red), support neck with something, or get a Green to help maintain airway. If victim does not breath after 2 attempts, tag Deceased (Black) and move on to the next victim.
- Treat major bleeding – direct pressure, pressure bandage, raise above the heart, use flat of hand (not fingertips) on pressure point if necessary. Tourniquets are last resort. Do not treat minor bleeding at this time. Use a Green to maintain direct pressure for 10-20 minutes. Tag Immediate (Red)
- Check - RPM – if any of these are true, Tag Immediate, (Red), and treat for shock:
 - **Respirations greater than 30/minute**
 - **Radial pulse not present or capillary refill more than two seconds (except children)**
 - **Does not obey direct command**
- Treating for shock – if possible, lay on back, maintain airway, elevate feet 6-10 inches, cross arms over chest and cover with something to maintain body temperature, avoid rough or excessive handling.
- Victims without any of the above, tag Delayed (Yellow).
- Leave Deceased (Blacks) where they are unless impeding rescue – then move them carefully out of the way. Keep track of how many of each color

MONITOR PROGRESS OF SEARCH TEAMS

Keep alert for new information or changes, revise plans if necessary.

If teams get tired, send in back-up teams. Be sure team members are eating and drinking.

REPORT FINDINGS TO COMMAND POST

Check in at requested intervals – give updates as to the current situation (current list of victims, whether supplies are holding up, need for more help or replacements, etc.)

CERT TRANSPORT LEADER

GET INFORMATION

- Be sure you know where the Medical Treatment Area is that you'll be transporting victims to, and where the triage funnel point will be.
- Check in with Search & Triage Team Leader at incident site -- find out building condition, number and type of victims, most critical Red's to deal with first, any known hazards.
- Find out where Greens and people with minor injuries are waiting.
- Evaluate resources – number, strength and ability of people (team members and Greens), supplies available (blankets, chairs, etc.)

ORGANIZE TEAM

- Do equipment check – safety gear on, flashlights working & backup available, transport supplies available (blankets, chairs, etc.), first aid supplies available (splints, triangle bandages, etc.).

DETERMINE THE PLAN BASED ON CONDITIONS

Plan is determined by the condition of the building, victim status, number of transporters and other resources available.

• **Lightly Damaged Buildings**

Do a head-to-toe before moving victims.

Treat or splint injuries before moving victims.

Be alert for severe head, neck or spine injuries by symptoms as follows:

- Unconscious, dizzy or confused, seizures
- Inability to move one or more body parts, or tingling or numbness in extremities
- Severe pain, pressure or bleeding from head, neck or back.
- Blood or fluid in nose or ears
- Bruising behind ears or around eyes (“raccoon” eyes)
- Deformity (bump or depression) on head or spine

If severe head, neck or spine injury present, use in-line stabilization or leave them in place for professional responders **if safe to do so** – do no further harm!

• **Moderately Damaged Buildings**

Send in minimum number of transporters. Transport victims after quick check while minimizing additional injury (be alert for head, neck or spine injuries as described above).

REMIND TEAM MEMBERS OF THEIR MISSION

- Be Safe! Check overhead, under foot and around before moving forward. Number one rescuer problem is breathing dust – wear mask.
- Use safe lifting procedures – bend your knees and squat, keep the load close to your body, keep your back straight, and push up with your legs.
- When lifting, have a lift leader coordinate timing of lifts. Say “Ready to lift on count of three: one, two, three, *lift*” and same when lowering victims. (*The lift leader should be at the victim's head when applicable*)
- Recognize personal limitations - more likely to be injured if tired.
- Ensure everyone knows where medical treatment area is, and that they must go through triage funnel point for victim to be assigned a triage number (including Greens).
- Review the plan – light or moderately damaged buildings (see above).
- Transport Red victims first if possible.
- Be organized – clear each room and document changes on door markings if present. Don't leave anyone behind.

- Greens can be used as extra manpower to perform lifts and carries.
- Evaluate situation – do appropriate lift or carry based on victim condition and number of people available to transport victim (6-person blanket carry, 2 person chair lift, etc).
- Victims with severe head, neck or spinal injury should not be moved except by professional rescuers. Leave in place unless an immediate life threatening danger exists (fire, collapse, etc.) Use in-line immobilization if they must be moved.(head immobilized on a back board)
- Rescue lightly trapped victims, but leave difficult rescues to USAR team.
- Do not transport deceased (Blacks). Leave them where they are unless they are impeding rescue – then move them carefully out of the way.

REVIEW SOME POSSIBLE LIFTS AND CARRIES

One Person Pack Strap Carry – Victims behind you, arms over your shoulders and hands clasped at your chest. Lean forward and hoist victim until their feet just leave the floor.

Two-Person Lift – Victim sitting up with arms crossed in front, one rescuer squats behind and grasps around midsection, under the arms and holds the victims forearms. Second rescuer squats between victims knees, facing either toward or away from victim, and grasps the outside of the legs at the knees.

Chair Carry – Place victim in chair. One rescuer faces the back of the chair and grabs the back uprights about seat level. Second rescuer has back to victim’s knees, reaches back and grabs two front legs of chair. Tilt chair back and lift, keeping the chair tilted back slightly.

6-Person Blanket Carry – Tuck blanket next to victim. Roll victim on their side, shove blanket underneath, then pull out other side when lay victim back down. Get victim to center of blanket. Roll up blanket edges toward victim. Three rescuers per side, arranged by height, facing victim’s feet. Carry victim feet first.

Drags – stabilize victim’s head with your elbows when pulling from shoulders. Alternately, pull the feet with victim’s arms stretched over head, or drag victim on a blanket. Make sure to not injure victim by pulling over debris.

MONITOR PROGRESS OF TRANSPORT TEAMS

- Keep alert for new information or changes, revise plans if necessary.
- If teams get tired, send in back-up teams. Be sure team members are eating and drinking.

REPORT STATUS TO COMMAND POST

- Check in at requested intervals – give updates as to the current situation.
- When all transports complete, check in to ensure that all reported victims have been accounted for.
- If Triage tally doesn’t match with original reported number of victims, Command Post may request that Transport Team search incident site again for any missed victims.

CERT SAFETY OFFICER

ASSESS THE SITUATION BEFORE BEGINNING YOUR OPERATION

Develop and Implement a Safety / Security plan and keep the peace

DEVELOP A PLAN TO SECURE THE SAFETY OF:

- Personnel
- The Incident Command Post
- Communications
- Medical Operations Area
- Morgue Area
- Equipment/ Staging Areas
- Transportation

OBTAIN RESOURCES

- Personnel
- Equipment

MAINTAIN TEAM STATUS FORM

- Recruit scribe if necessary

ORGANIZE YOUR TEAMS

- Inform your personnel of their responsibilities
- Give your teams their assignments

DOCUMENT

- Safety hazards
- Complaints
- Suspicious occurrences
- Any injury to CERT Members

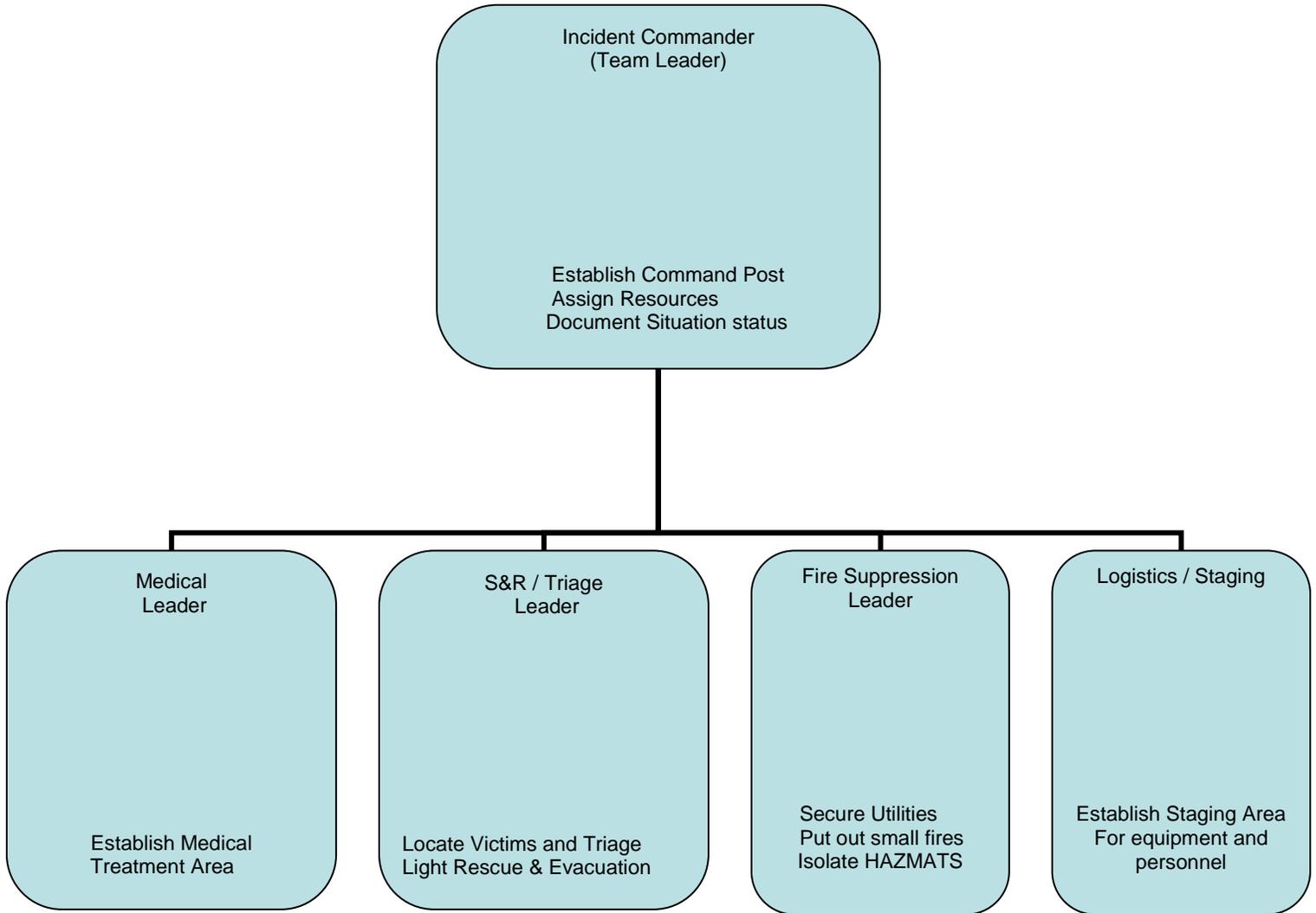
REPORT STATUS TO COMMAND POST

- Conduct safety briefings
- Check in at requested intervals – give updates as to the current situation.

CONSIDERATIONS

- Be aware of hazards
- Keep the peace, prevent assaults, and settle disputes.
- Prevent theft if possible

Basic CERT ICS Organization



Expanded CERT ICS Organization

