



**Homeland Security
and Emergency Services**

**Emergency
Management**

ICS Intermediate – I-300
Student Applied Activity Manual AAM
Flood Scenario

CENTRAL CITY FLOOD SCENARIO

Unit 2: ICS Fundamentals Review

Objective:

To apply key Unified Command principles.

Instructions:

Work in groups to complete the following activity:

1. Review the following:
 - Historical Background
 - Scenario
 - Maps
 - Current Resources
2. Complete the following steps:
 - a. Who has a stake in the incident?
 - b. Who are the assisting and cooperating agencies?
 - c. Is this a Single or Unified Command managed incident?
 - d. If Single Command, who is the Incident Commander and why?
 - e. If Unified Command, who are the members and why?
3. Draw an Organization Chart for your Incident Command or Unified Command.
4. Identify challenges and safety issues.
5. Record your results on chart paper that can be seen by the entire class.
6. Select a spokesperson and be prepared to present in 30 minutes.
7. Emphasize that the spokesperson should be able to explain the rationale for the group's decisions.

Historical Background:

The city has a history of being susceptible to flooding. The geology in the Liberty County consists of nearly level, somewhat poorly drained, expansive soils on flood plains. The topsoil rests on sandy and silty loam. Runoff is very slow, and the soil is subject to flooding. Permeability is moderate.

Frequency of moderate flooding is at least once a year; major flooding is generally limited to once in five years. A severe flood in 1997 killed 28 people, injured 656, and caused the evacuation of 75,000; it also heavily damaged 377 permanent homes, 65 businesses, and completely destroyed 203 mobile homes.

Controllability of flood damage is limited to land-use management and elevation criteria. Clearance of debris along stream ways can also affect flooding. Snow runoff and ice damming are not considered to be major contributors to flooding in Columbia.

Duration of actual onslaught is from several hours to several days.

Scope of damage ranges with the severity of the flood and damages from minimal to nearly total destruction of community facilities, business, or residences.

Intensity of impact ranges from a few houses to several hundred houses involved and may include road and utility washouts and bridge damage.

Dam Break Flooding from East Lake Dam and all of the other dams in Columbia could threaten areas that have not historically had flooding problems. Catastrophic failure of East Lake Dam could impact Liberty County and Central City. Floods from the East Lake River, Roaring River, Swatera Creek, and Turtle River could impact the communities along their banks following the failure of the East Lake Dam. If the failure occurs during a period of heavy rains, all four waterways could be impacted, and flooding could occur along their banks. The following three maps show the flood zones in Liberty County and in Central City.

Flood Inundation Maps of Liberty County show elevation contours and the 2, 10, 25, 50, 100, and 500 year flood zones for Central City and northern and southern Liberty County. Also shown on the South Liberty County Map are the areas of expected flooding during a hurricane.

Scenario:

For the past three days, it has been raining heavily in Central City and Liberty County, averaging 2.5 inches of rain each 24-hour period. Central City is divided by the banks of the Roaring River and Swatera Creek is a tributary through the northwest part of the city. In an effort to avoid some of the damage and loss of life caused by previous incidents, the newly elected mayor of Central City has taken an active interest in planning for and responding to flooding disasters. The mayor has asked you to prepare a staffing plan for the response to anticipated flooding, in the event that the rains do not abate.

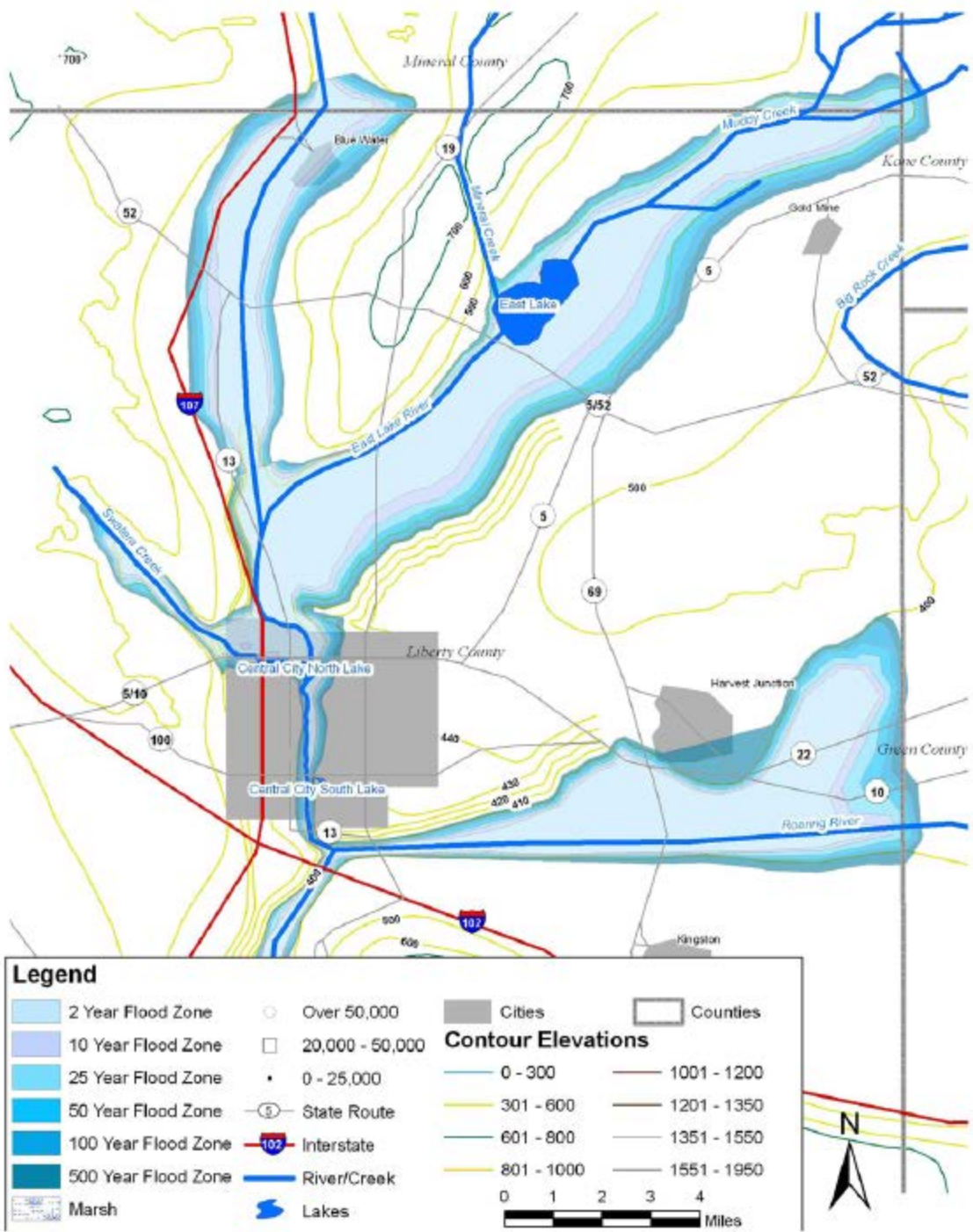


Figure 3.3. North Liberty County Flood Map

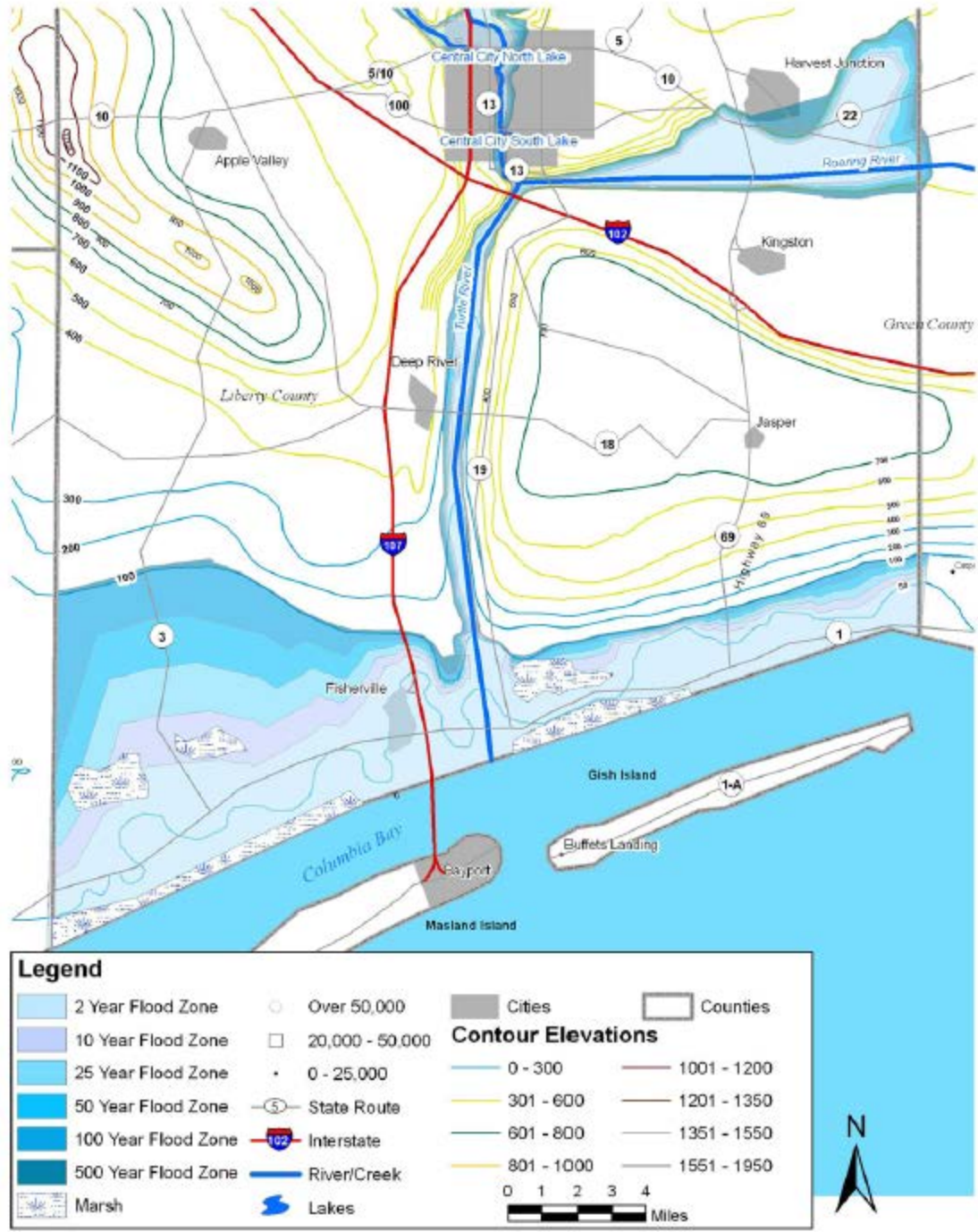


Figure 3.4. South Liberty County Flood Map

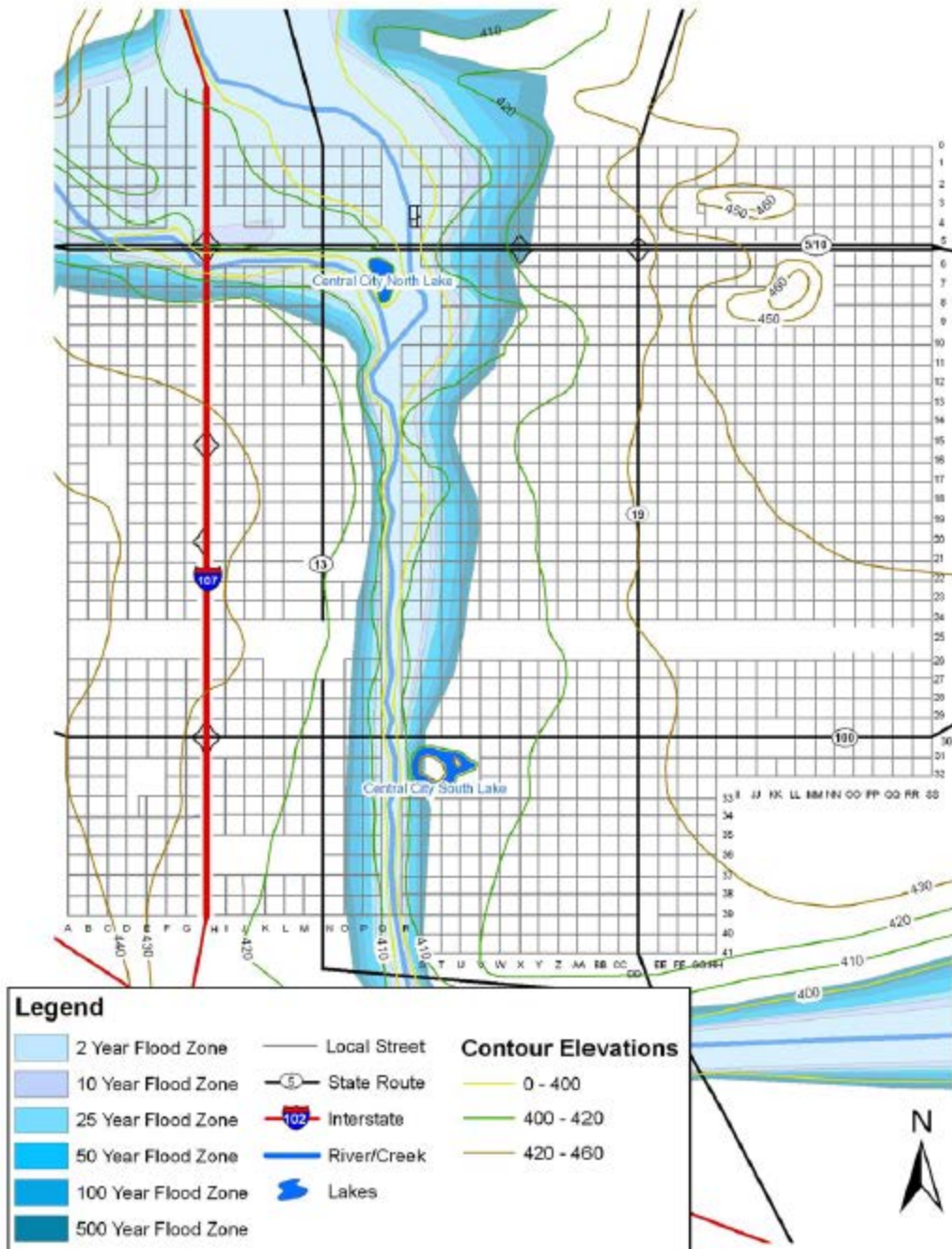


Figure 3.5. Central City Flood Map

Current Resources:

Emergency Management:

- Central City Fire Department Incident Management Team
- Liberty County Department of Emergency Management
- Liberty County/Central City Emergency Operations Center (EOC)
- Liberty County/Central City EOC Joint Information Center (JIC)
- Liberty County/Central City EOC Support Team
- State of Columbia Type II and III Incident Management Teams

Law Enforcement:

- Central City Police Department
- Liberty County Sheriff Department
- Columbia State Police

Fire Department:

- Central City Fire Department
- Central City Emergency Medical Service

Public Works:

- Central City Department of Public Works
- Liberty County Department of Public Works

Liberty County:

- (1) District Conservationist
- (1) Soil Conservation Technician
- (1) Area Engineer

State of Columbia:

- National Guard
- Department of Wildlife and Fisheries
- State of Columbia Department of Transportation
- Department of Agriculture
- Department of Public Safety

STOP

CENTRAL CITY FLOOD SCENARIO

Unit 3: Initial Actions for Unified Command

Objective:

To organize groups into Incident Management Groups; review and complete ICS Form 201, Incident Briefing; and identify issues related to the simulated incident.

Instructions:

work in groups to complete the following activity:

1. Given a partially completed ICS Form 201 and the scenario information, complete the missing elements on the ICS Form 201.
2. Determine what Command and General positions will be staffed and depict on an organizational chart and be prepared to describe and explain.
3. Using the initial objectives from the ICS Form 201, develop incident objectives for the next Operational Period.
4. Document your objectives and organization on chart paper. Make sure your objectives are SMART!
5. Select a spokesperson and be prepared to describe and explain the rationale for your objectives and organization in 30 minutes.

Incident Briefing (ICS Form 201)

Scenario Update:

Weather reports from the National Weather Service indicate that the weather system will move slowly through the area on Thursday that could produce 2-3 inches of rainfall over a 24 hour period. Current temperatures remain in the low to mid 40s during the day with nighttime lows in the high 30s.

At 1200 on August 4th, Liberty County Department of Emergency Management is preparing for a response to a possible flood situation in Central City. It has now been raining heavily for the past 3 days, averaging 1.3 inches of rain each 24-hour period.

The National Weather Service has just informed the Liberty County Department of Emergency Management that the flooding is expected to crest at 1800 today. It is expected that this flood crest will cause flooding as indicated on the projected floodplain map.

Residents in Zone A are being asked to evacuate their homes in anticipation that the rising floodwaters may cut off access to and egress from their homes. Basement flooding to the first-floor level is anticipated. Liberty County Department of Emergency Management is in contact with business owners in the industrial park to determine if any of their stored chemicals will be affected by the flooding, causing possible contamination downstream.

Community members are starting to ask questions about the situation, and small groups of people are self-deploying close to the Roaring River to monitor rising water levels and post information on social media.

Residents are questioning the rising river levels and asking if they will need to leave their homes.

Critical Issues:

- Ensure the safety of all responders and citizens.

- Provide for the safety of affected residents through warning, evacuation, and sheltering.

- Monitor critical infrastructure for damage from rising floodwaters.

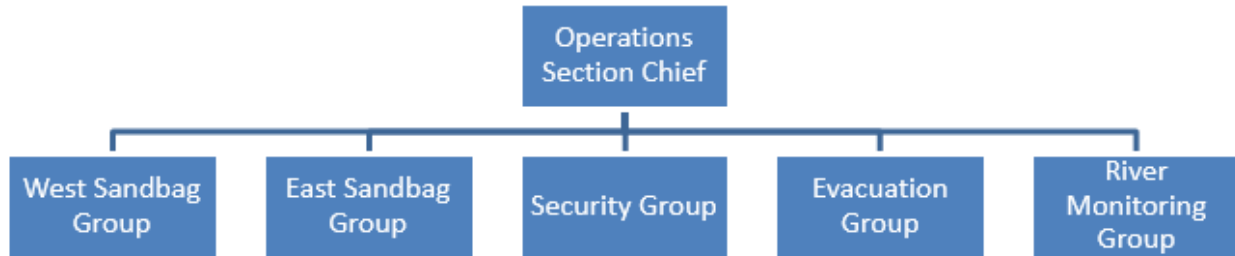
- Ensure that timely and accurate public information is disseminated.

- Continue to provide safe utility services and transportation routes.

Incident Objectives:

- Provide for the safety responders and the public.
- Monitor river level and communicate if the level will threaten critical infrastructure.
- Ensure that timely and accurate public information is disseminated.
- Deny entry of unauthorized individuals to the identified evacuation zone.
- Continue to limit the flooding effects on both sides of the river.

Section Organizational Chart:



INCIDENT BRIEFING (ICS 201)

1. Incident Name: Central City Flood	2. Incident Number: CC-13	3. Date/Time Initiated: Date: 8/4/20xx Time: 1000
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4. Map/Sketch (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, overflight results, trajectories, impacted shorelines, or other graphics depicting situational status and resource assignment):

Image of an elevation map of Central City North Lake and Central City South Lake with 2, 10, 25, 50, 100, and 500 year Flood Zones depicted.

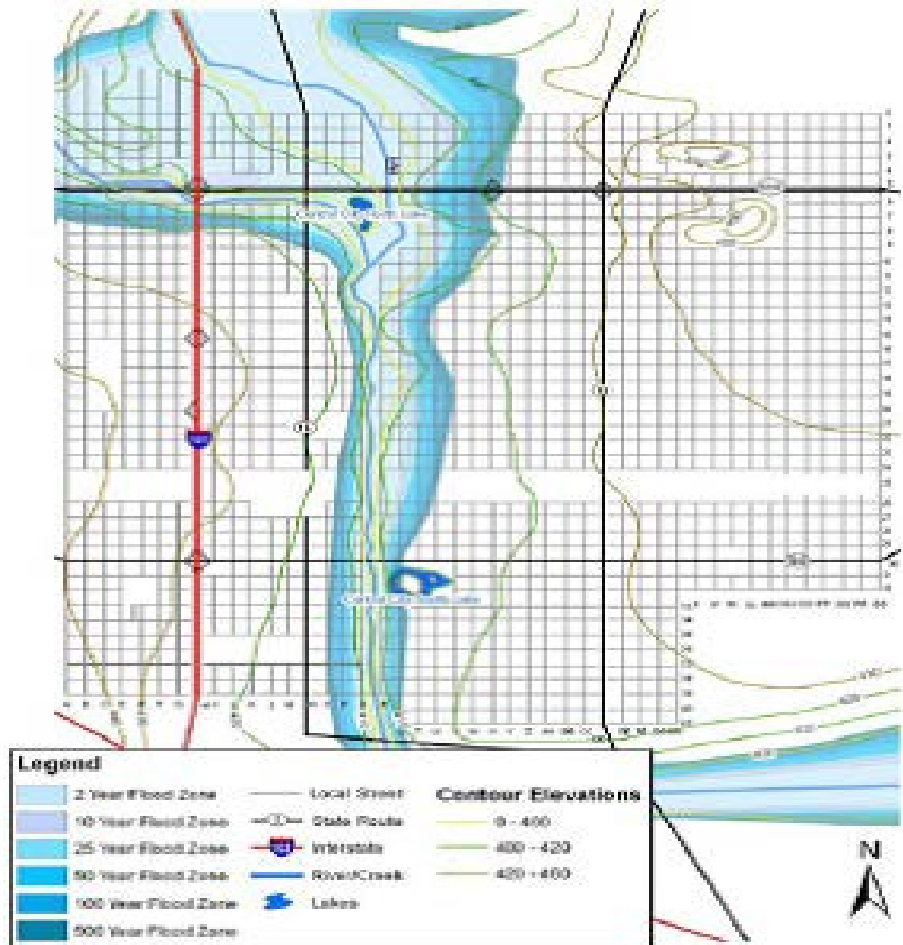


Figure 3.6. Central City Flood Map

5. Situation Summary and Health and Safety Briefing (for briefings or transfer of command): Recognize potential incident Health and Safety Hazards and develop necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards.

- Personnel operating in the area will work in buddy teams and wear personal flotation devices (PDFs)
- A spotter will be assigned to monitor increasing flood water levels.
- Monitor weather forecasts and advisories.

6. Prepared by: Name: Ralph Wilkins Position/Title: IC Signature: _____

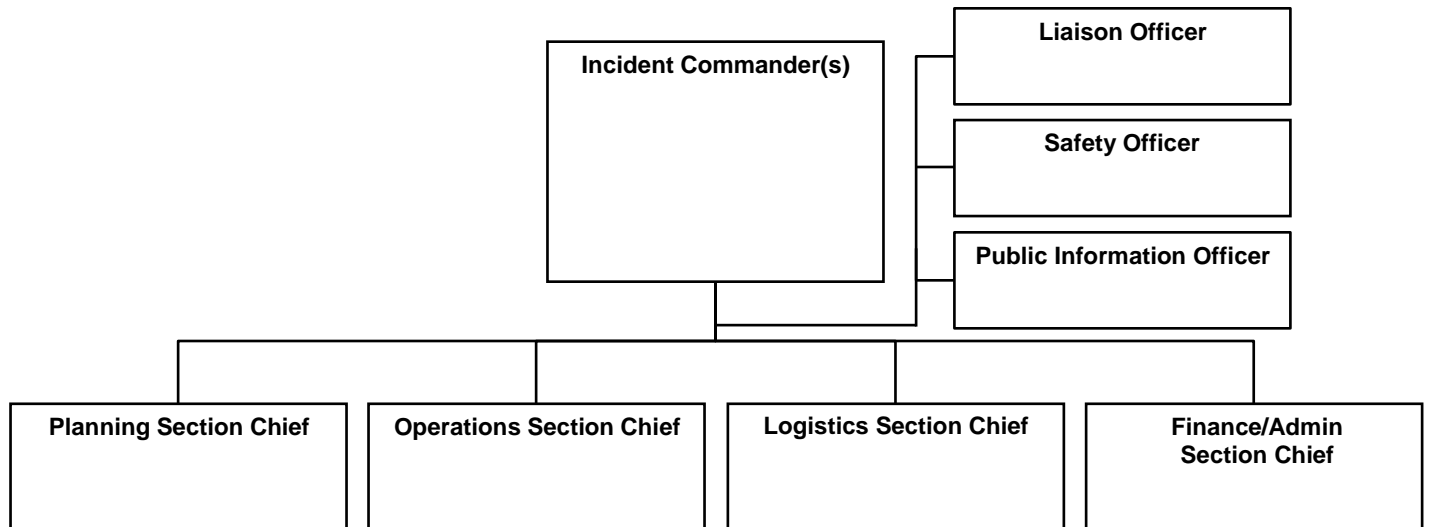
INCIDENT BRIEFING (ICS 201)

1. Incident Name: Central City Flood	2. Incident Number: CC-13	3. Date/Time Initiated: Date: 8/4/20xx Time: 1000
7. Current and Planned Objectives:		
<ul style="list-style-type: none"> • Address safety of all responders and citizens. • Monitoring critical infrastructure. • Releasing accurate public information. • Provide basic services to the public as best as possible. <p>Planned:</p>		
8. Current and Planned Actions, Strategies, and Tactics:		
Time:	Actions:	
0800	Liberty County Emergency Management Office has activated the Emergency Operations Center (EOC).	
0815	The Incident Command Post (ICP) requested an All-Hazard Incident Management Team (IMT)	
	from the State of Columbia	
0820	Notification received from the National Weather Service the flooding is expected to crest at 1800 today.	
	It is expected that this flood crest will cause flooding as indicated on the projected floodplain map.	
0825	The Staging Area was established at Avenue NN and 12th Street	
0830	The EOC has contacted the school bus service for buses and requested that the American Red Cross	
	open a shelter for evacuees.	
0830	EOC has activated the local emergency notification system announcing the evacuation to the	
	affected area.	
0830	Residents along the Roaring River and Swatera Creek within Zone A are being asked to evacuate	
	their homes.	
0900	The Department of Public Works has begun sandbagging and continues to monitor river levels	
0900	The Incident Commander orders a full Command Staff and General Staff are required by the next	
	operations period beginning at 1800. The State IMT Notified.	
0912	Business owners in the industrial park are being contacted by the Fire Department to determine if any	
	of their stored chemicals will be affected by the flooding.	
0920	Police vehicles are patrolling the evacuation area announcing the evacuation via PA systems and	
	staffing traffic control points.	
6. Prepared by: Name: <u>Ralph Wilkins</u> Position/Title: <u>IC</u> Signature: _____		
ICS 201, Page 2	Date/Time: 8-4-20xx 1000	

INCIDENT BRIEFING (ICS 201)

1. Incident Name: Central City Flood	2. Incident Number: CC-13	3. Date/Time Initiated: Date: 8/4/20xx Time: 1000
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9. Current Organization (fill in additional organization as appropriate):



6. Prepared by: Name: <u>Ralph Wilkins</u> Position/Title: <u>IC</u> Signature: _____	
ICS 201, Page 3	Date/Time: <u>8/4/20xx 1000</u>

INCIDENT BRIEFING (ICS 201)

1. Incident Name: Central City Flood	2. Incident Number: CC-13	3. Date/Time Initiated: Date: 8/4/20xx Time: 1000
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10. Resource Summary:					
Resource	Resource Identifier	Date/Time Ordered	ETA	Arrived	Notes (location/assignment/status)
Police Patrol Vehicle	CM-241			<input checked="" type="checkbox"/>	Evacuation Group
Police Patrol Vehicle	CM-242			<input checked="" type="checkbox"/>	Evacuation Group
Police Patrol Vehicle	CM-243			<input checked="" type="checkbox"/>	Evacuation Group
Police Patrol Vehicle	CM-244			<input checked="" type="checkbox"/>	Evacuation Group
Police Patrol Vehicle	CM-245			<input checked="" type="checkbox"/>	Evacuation Group
Police Patrol Vehicle	CM-241			<input checked="" type="checkbox"/>	Evacuation Group
Police Patrol Vehicle	CM-242			<input checked="" type="checkbox"/>	Evacuation Group
Engine	CC E-1			<input checked="" type="checkbox"/>	Evacuation Group
Engine	CC E-6			<input checked="" type="checkbox"/>	Evacuation Group
Engine	CC E-7			<input checked="" type="checkbox"/>	Evacuation Group
Engine	CC E-8			<input checked="" type="checkbox"/>	Evacuation Group
DIVS	CCBC-8			<input checked="" type="checkbox"/>	BC Kane, River Level Monitoring Group Supervisor
DIVS	CCPD CL24			<input checked="" type="checkbox"/>	STG Brown, Evacuation Group Supervisor
DIVS	CCPDW			<input checked="" type="checkbox"/>	Forman Williams, Sandbagging Group Supervisor
Sandbagging Crew	CCPDW-1			<input checked="" type="checkbox"/>	Sandbagging Group
Sandbagging Crew	CCPDW-2			<input checked="" type="checkbox"/>	Sandbagging Group
Sandbagging Crew	CCPDW-3			<input checked="" type="checkbox"/>	Sandbagging Group

6. Prepared by: Name: Ralp Wilkins Position/Title: IC Signature: _____

ICS 201, Page 4	Date/Time: 8/4/20xx 1000
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ICS 201 Incident Briefing

Purpose. The Incident Briefing (ICS 201) provides the Incident Commander (and the Command and General Staffs) with basic information regarding the incident situation and the resources allocated to the incident. In addition to a briefing document, the ICS 201 also serves as an initial action worksheet. It serves as a permanent record of the initial response to the incident.

Preparation. The briefing form is prepared by the Incident Commander for presentation to the incoming Incident Commander along with a more detailed oral briefing.

Distribution. Ideally, the ICS 201 is duplicated and distributed before the initial briefing of the Command and General Staffs or other responders as appropriate. The “Map/Sketch” and “Current and Planned Actions, Strategies, and Tactics” sections (pages 1–2) of the briefing form are given to the Situation Unit, while the “Current Organization” and “Resource Summary” sections (pages 3–4) are given to the Resources Unit.

Notes:

- The ICS 201 can serve as part of the initial Incident Action Plan (IAP).
- If additional pages are needed for any form page, use a blank ICS 201 and repaginate as needed.

Block Number	Block Title	Instructions
1	Incident Name	Enter the name assigned to the incident.
2	Incident Number	Enter the number assigned to the incident.
3	Date/Time Initiated <ul style="list-style-type: none"> • Date, Time 	Enter date initiated (month/day/year) and time initiated (using the 24-hour clock).
4	Map/Sketch (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, overflight results, trajectories, impacted shorelines, or other graphics depicting situational status and resource assignment)	Show perimeter and other graphics depicting situational status, resource assignments, incident facilities, and other special information on a map/sketch or with attached maps. Utilize commonly accepted ICS map symbology. If specific geospatial reference points are needed about the incident's location or area outside the ICS organization at the incident, that information should be submitted on the Incident Status Summary (ICS 209). North should be at the top of page unless noted otherwise.
5	Situation Summary and Health and Safety Briefing (for briefings or transfer of command): Recognize potential incident Health and Safety Hazards and develop necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards.	Self-explanatory.
6	Prepared by <ul style="list-style-type: none"> • Name • Position/Title • Signature • Date/Time 	Enter the name, ICS position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).
7	Current and Planned Objectives	Enter the objectives used on the incident and note any specific problem areas.

Block Number	Block Title	Instructions
8	Current and Planned Actions, Strategies, and Tactics <ul style="list-style-type: none"> • Time • Actions 	Enter the current and planned actions, strategies, and tactics and time they may or did occur to attain the objectives. If additional pages are needed, use a blank sheet or another ICS 201 (Page 2), and adjust page numbers accordingly.
9	Current Organization (fill in additional organization as appropriate) <ul style="list-style-type: none"> • Incident Commander(s) • Liaison Officer • Safety Officer • Public Information Officer • Planning Section Chief • Operations Section Chief • Finance/Administration Section Chief • Logistics Section Chief 	<ul style="list-style-type: none"> • Enter on the organization chart the names of the individuals assigned to each position. • Modify the chart as necessary, and add any lines/spaces needed for Command Staff Assistants, Agency Representatives, and the organization of each of the General Staff Sections. • If Unified Command is being used, split the Incident Commander box. • Indicate agency for each of the Incident Commanders listed if Unified Command is being used.
10	Resource Summary	Enter the following information about the resources allocated to the incident. If additional pages are needed, use a blank sheet or another ICS 201 (Page 4), and adjust page numbers accordingly.
	<ul style="list-style-type: none"> • Resource 	Enter the number and appropriate category, kind, or type of resource ordered.
	<ul style="list-style-type: none"> • Resource Identifier 	Enter the relevant agency designator and/or resource designator (if any).
	<ul style="list-style-type: none"> • Date/Time Ordered 	Enter the date (month/day/year) and time (24-hour clock) the resource was ordered.
	<ul style="list-style-type: none"> • ETA 	Enter the estimated time of arrival (ETA) to the incident (use 24-hour clock).
	<ul style="list-style-type: none"> • Arrived 	Enter an "X" or a checkmark upon arrival to the incident.
	<ul style="list-style-type: none"> • Notes (location/assignment/status) 	Enter notes such as the assigned location of the resource and/or the actual assignment and status.

STOP

CENTRAL CITY FLOOD SCENARIO

Unit 4: Implementing an Operational Planning Process

Objective:

To select tactics and conduct safety analysis for the next Operational Period resulting in the completion of ICS Forms 215 and 215A. Students may use the tactics meeting agenda as a template when conducting their group discussions.

Instructions:

Work in groups to complete the following activity:

1. Review the following in your handouts:
 - Partially completed ICS Form 215
 - Blank ICS Form 215A
2. Complete the ICS Form 215 using the available information.

The Operational Planning Worksheet (ICS Form 215) has the information needed to complete tactical direction for the incident.
3. Based on the tactics selected on the ICS Form 215, complete the Safety Analysis (ICS Form 215A).
4. Be prepared to present in 60 minutes.

Scenario Update:

The National Weather Service reports indicate continued rain for the Central City area and areas north of the city. The Roaring River is predicted to crest at 12 feet above flood level around 2100 hours this evening.

Public Works crews monitoring the flood levels report increased debris piling up area bridges, and State highway engineers on the scene are recommending closing the bridge to all traffic due to its weakened condition. The Evacuation Group is reporting that homeowners in Zone A are beginning to move their families out of the area. The American Red Cross has opened two shelters, one at the Central City Senior High School and one at the Central City Junior High School.

The Old Soldier Nursing Home is attempting to move 55 patients from their skilled nursing care facility and is asking for assistance from Central City Emergency Medical Services, the Fire Department, and the Liberty County School Bus Davison. Acme Chemical, located on the banks of the Roaring River, is reporting first-floor flooding of their chemical processing plant. They are not reporting any chemical release but are closely monitoring their facility.

Resources are beginning to arrive at the Staging Area.

Several media trucks have arrived in the area to film the incident and ongoing operations. While the media are being staged at City Hall, the Staging Area Manager reports that press personnel are beginning to congregate in the Staging Area to film the resources located there.

Calls are coming from concerned citizens wondering about the safety of the municipal drinking water.

After receiving the report from the National Weather Service, Command determines that additional resources are needed for evacuation, sheltering, sandbagging, water level and chemical monitoring, traffic control, and scene security. Also, several media helicopters arrive in the area to film the incident and ongoing operations. Command has determined that the operational period will be 12 hours.

The next operational period will begin at 1800 tonight and end at 0600 August 5.

Critical Issues:

Implement required safety measures to protect responding personnel and the public.

Take measures to ensure the evacuation of all households in the projected flood area before the beginning of the next operational period.

Implement temporary shelter plan to provide housing for all displaced residents prior to flooding.

Evacuate and relocate nursing home residents before the onset of flooding.

Monitor water intakes at the water treatment plant for chemical contamination until notified to cease operations.

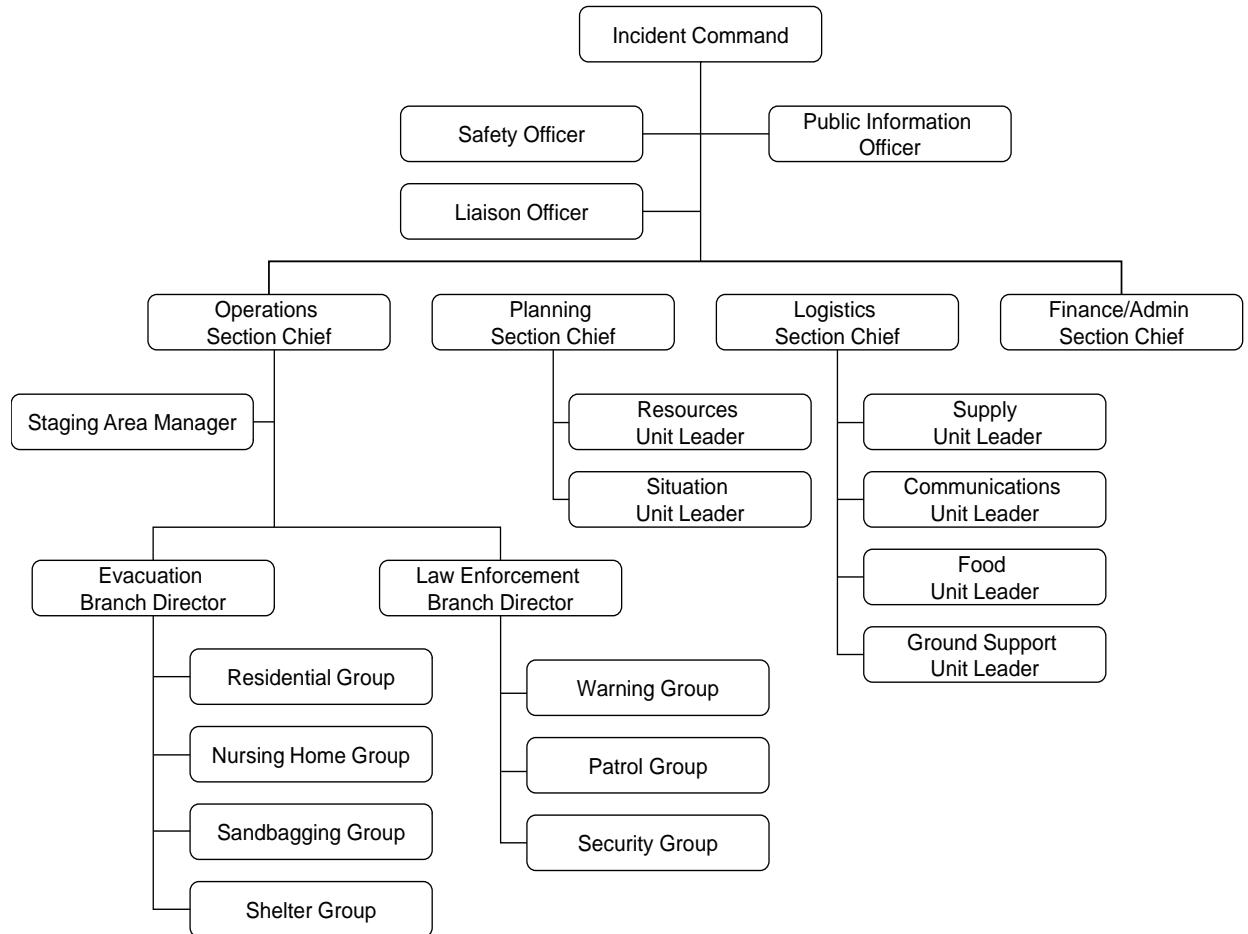
Provide timely and accurate weather and safety information to the public through the Joint Information Center.

Strategies/Tactics:

The Old Soldier Nursing Home has an emergency plan that calls for relocating patients to the hospital. This plan utilizes the Central City Emergency Medical Services, the Fire Department, and the Liberty County School Buses to transport patients from the nursing home to the hospital. The American Red Cross, in collaboration with the Salvation Army, will manage the shelters and provide food for displaced residents.

The Central City Department of Public Works, along with the Liberty County Health Department, will monitor the water intake at the Water Treatment Plant for signs of chemical contamination. Additional crews will monitor water levels at strategic points in the flood area, including but not limited to Schools, the Blue Water Nuclear Power Plant, Fire Stations, and the Police Stations. The city engineer, along with representatives from the State of Columbia Department of Transportation, will monitor the structural integrity of bridges. Central City Public Works crews will place sandbags to protect the water treatment plant. Individual homeowners will be able to get free sandbags and sand from the Central City Department of Public Works by calling the Department's 24-hour number.

Organizational Structure for the Next Operational Period:



Resources Ordered After Initial Assessment:

6. Resources Summary				
Resources Ordered	Resource Identification	ETA	On Scene	Location/Assignment
Police/marked vehicles (8)	CC 247, CC 248, CC 249, CM 243, CM 244, CM 245, CP 1, & CP 2		X	Traffic Control Points
Mutual Aid Police Units (10)	LC -222, LC -223, LC -224, LC -226, LC -227, LC -229, LC -326, LC -333, LC -415, & LC -420,	2000		
HazMat Team	CC Hazmat 1		X	Staging
State HazMat Team	C HazMat 101	2300		
State All-Hazards Incident Management Team (Type 3)	Columbia IMT-3	0600		
School Buses (10)	LCPS-11, LCPS-13, LCPS-14, LCPS-17, LCPS-21, LCPS-25, LCPS-26, LCPS-33, LCPS-34, & LCPS-36,	1500		
Engines (4)	CC E-2, E-3, E-4, & E-11		X	Residential Division
Aerial (3)	CC A-1, A-3, & A5		X	Nursing Home Division
Front Loaders (2)	CCDPW FL-1, & CCDPW FL-12		X	Sandbagging Group, City gravel pit
Pickup trucks (4)	CCDPW PU-1, CCDPW PU-3, CCDPW UP-4, & CCDPW PU-5		X	Sandbagging Group, City gravel pit
Dump trucks (4)	CCDPW DT-1, CCDPW DT-2, CCDPW DT-3, & CCDPW FL-4		X	Sandbagging Group, City gravel pit
Pickup trucks (2)	CCDPW UP-2 & CCDPW PU-6		X	Bridge Monitoring Team
American Red Cross Canteen	CC ERV-1	1800		

OPERATIONAL PLANNING WORKSHEET (ICS 215)

1. Incident Name: Central City Flood		2. Operational Period: Date From: 8/4/20xx Date To: 8/5/20xx Time From: 1800 Time To: 0600																		
3. Branch	4. Division, Group, or Other	5. Work Assignment & Special Instructions	6. Resources			Patrol Unit	Engine	Front End Loader	Dump Truck	Backhoe	Hydrologist	Ambulance Strike Team	Bus - 45 Passenger	Sandbag Crew (10)	LE Resource Team (11)	7. Overhead (Position(s))	8. Special Equipment & Supplies	9. Reporting Location	10. Requested Arrival Time	
	River Monitoring GP	Monitor river at 25,19,16,12 St. hourly report to ICP/EOC.	Req.							6						DIVS		Base	0500	
	Evacuation GP	Patrol security, Buses transport evacuees, Ambulances treat	Req.	2						6	2	4	4			DIVS		Base	0500	
	East Sandbag GP	Get sandbags at DPW Yard and place on E. Side of River	Req.	3			4	1	1					2		DIVS		Base	0500	
	Security GP	Staff checkpoints and restrict entry by unauthorized	Req.		3										2	DIVS	Electronic Message Boards (3)	Base	0500	
	West Sandbag GP	Get sandbags at DPW Yard and place on W. Side of River	Req.	3			3	1	1					4		DIVS		Base	0500	
			Req.																	
			Have																	
			Need																	
			Req.	6	5		7	2	2	6	2	4	6	2	2					
			Have																	
			Need																	
			11. Total Resources Required																	
			Req.	0	0		0	0	0	0	0	0	0	0	0					
			Have																	
			Need																	
			Req.	6	5		7	2	2	6	2	4	6	2	2					
			Have																	
			Need																	
			12. Total Resources Have on Hand																	
			Req.	6	5		7	2	2	6	2	4	6	2	2					
			Have																	
			Need																	
			13. Total Resources Need To Order																	
			Req.	6	5		7	2	2	6	2	4	6	2	2					
			Have																	
			Need																	
			14. Prepared by:																	
			Name: _____																	
			Position/Title: _____																	
			Signature: _____																	
			Date/Time: _____																	

STOP

CENTRAL CITY FLOOD SCENARIO

Unit 5: Planning Process, IAP, and Operations Brief

Objective:

To complete the planning cycle by developing a written IAP, developing the Operations Briefing agenda, and conducting an Operations Briefing for a simulated incident.

This activity is divided into two components. In Part 1, students will prepare an Incident Action Plan (IAP). **STOP HERE AND WAIT FOR INSTRUCTOR**

In Part 2, students will develop the Operations Briefing agenda and then outbrief the IAP (developed in Part 1) in an Operations Briefing.

Instructions for Part 1:

Work in groups to complete the following activity:

1. Prepare an Incident Action Plan, using (at a minimum) ICS Forms 202, 203, 204(s), 205, 206, 207, and 208.
2. Be prepared to finish in 45 minutes.

Instructions for Part 2:

Work in groups to complete the following activity:

1. Outline the agenda for the Operations Briefing.
2. Select a spokesperson to present your IAP as a concise 5- to 10-minute Operations Briefing. Be prepared to present in 15 minutes.
3. Blank copies of the ICS Forms are located in the back of the Appendix.

STOP

CENTRAL CITY FLOOD SCENARIO

Unit 6: Incident Resource Management

Objective:

To describe how resources are ordered and to identify the challenges and strategies for managing resources during an incident.

Instructions:

Work in groups to complete the following activity, given your scenario:

1. Review the Operational Planning Worksheet (ICS Form 215) and Safety Analysis (ICS Form 215A) completed in the previous unit.
2. Describe how resources will be ordered (single point or multipoint) for this incident, from what sources resources will be acquired, and how long they will need to be deployed.
3. Identify the top challenges and strategies for managing resources during this incident.
4. Describe the method for evaluating resource effectiveness.
5. Select a spokesperson and be prepared to present your work in 30 minutes.

STOP

CENTRAL CITY FLOOD SCENARIO

Unit 7: Demobilization, Transfer of Command, Closeout, & Transition to Recovery

Instructor Notes

Objective:

To identify demobilization considerations, given the threaded scenario.

Instructions:

Work in groups to complete the following activity:

1. Review the information you developed in the previous activities, the scenario update and the 5 elements of a Demobilization Plan.
2. Write 5 considerations for demobilization for your scenario on an easel chart.
3. Based on your scenario, are there any unique demobilization release priorities?
4. Select a spokesperson and be prepared to present your work in 15 minutes.

Scenario Update:

It is now August 7th, at 0700 hours, 2 days after the river has crested. The river levels are steadily receding and residential property owners are anxious and attempting to return to their properties.

City officials have asked the City Building Inspection Department to inspect evacuated homes for safety and structural integrity before allowing residents to move back in.

Crews from the Central City Utilities are assisting City Building Inspection crews.

The bridges remains closed to traffic pending a complete inspection by Highway Engineers. The State Department of Transportation is doing a thorough inspection bridges.

Drinking water qualities are being monitored and cleanup and damage assessment activities are beginning.

The American Red Cross and Salvation Army report very few evacuees remain in their shelters and will be closing their shelters on August 8th. They will continue to provide meals for disaster workers and displaced residents.

Representatives from State Emergency Management is beginning the damage assessment process to determine whether there is a need to request a Presidential Disaster Declaration for the State of Columbia.

Liberty County Health Department personnel, along with representatives from the State Health Departments, are monitoring the water intakes and the city drinking water for any signs of contamination. Nothing significant has been noted so far. The County Health Department is also monitoring private wells in the area north of the city as requested by the landowners.

The Old Soldier Nursing Home reports that water has receded from their building and they are beginning cleanup procedures. They expect to finish their cleanup, including mandatory inspections by the State Health Department, within a week to 10 days.

Because the activities are shifting from response to recovery, the mayor of Central City has asked the IC to prepare to demobilize and transfer command of the incident to a Unified Command consisting of Emergency Management, the Health Department, and the Central City Department of Public Works.

The newly formed Unified Command will focus on restoring essential services, providing a safe re-entry for displaced residents, and completing a thorough damage assessment.

The transfer of command will take place at 1800 hours on August 7th.

New Incident Objectives:

Incident Command determined that the incident priorities will now be restructured to focus on restoration of services, re-entry, and recovery rather than response. The incident objectives include:

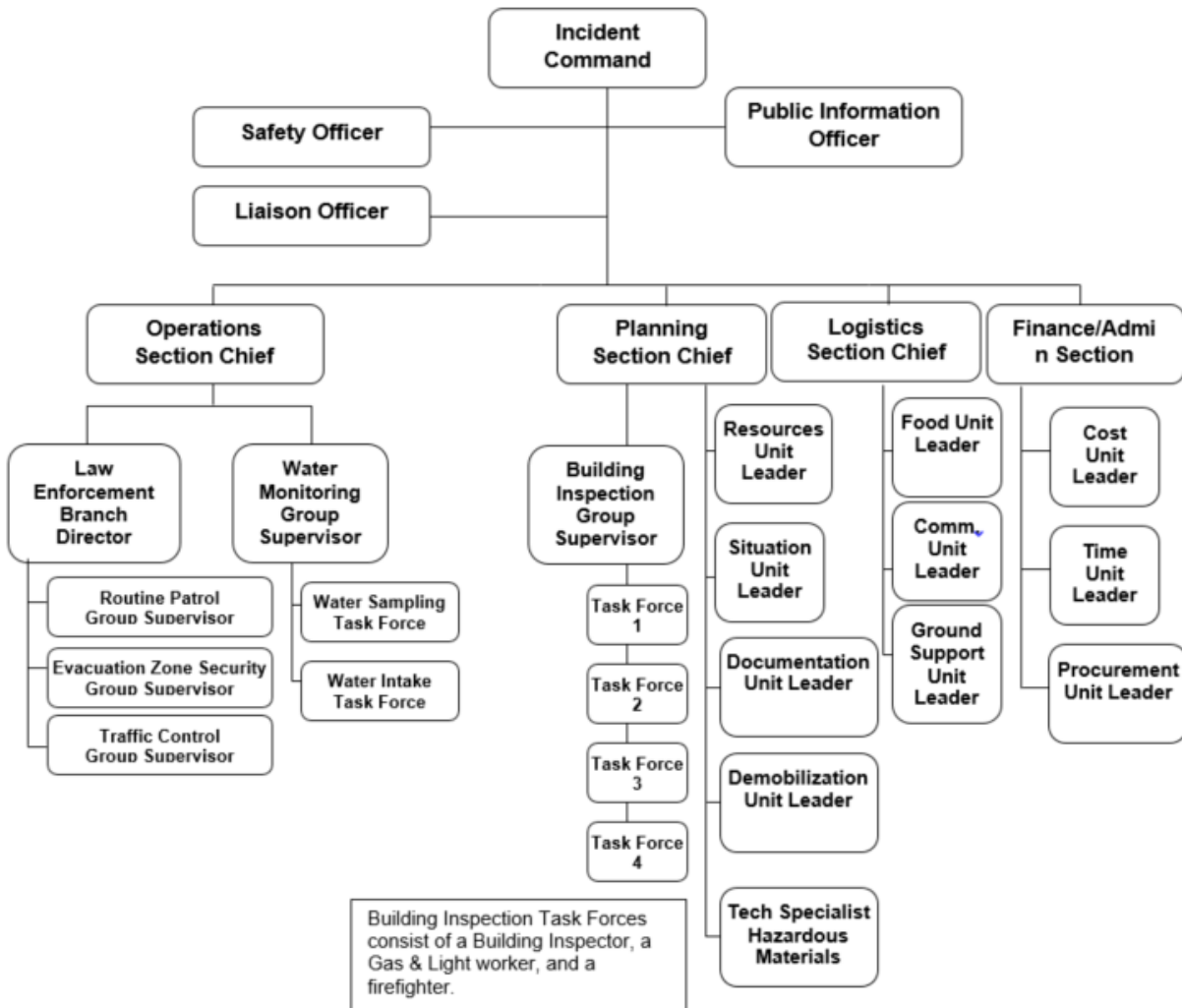
Publish information regarding hazards and how to avoid them for the returning evacuees by 0700 on August 8th.

Conduct water sampling to determine the extent of chemical contamination. The target completion for all samples is within 48 hours.

Begin conducting inspections by 0700 on August 8th to ensure the structural integrity and safety of buildings affected by the flood. All inspections must be completed before evacuees are allowed to return home.

Develop and implement a demobilization plan to ensure that surplus personnel and equipment are released in a timely manner.

Current Organizational Chart:



INCIDENT BRIEFING (ICS 201)

1. Incident Name:	2. Incident Number:	3. Date/Time Initiated: Date: _____ Time: _____
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4. Map/Sketch (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, overflight results, trajectories, impacted shorelines, or other graphics depicting situational status and resource assignment):

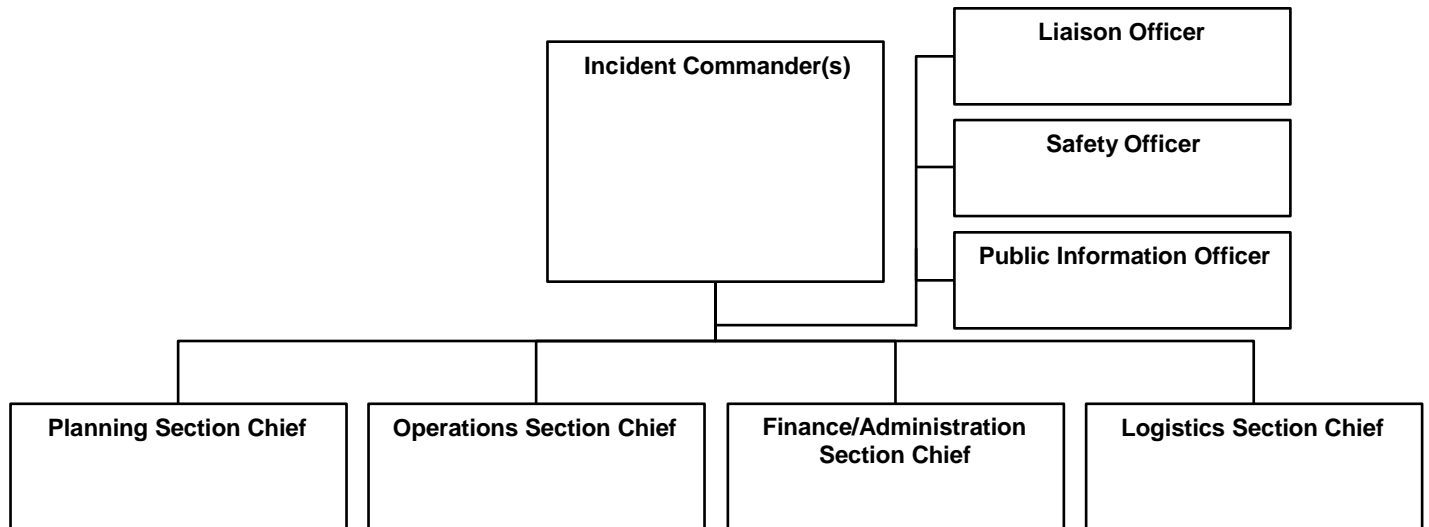
5. Situation Summary and Health and Safety Briefing (for briefings or transfer of command): Recognize potential incident Health and Safety Hazards and develop necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards.

6. Prepared by: Name: _____	Position/Title: _____	Signature: _____
ICS 201, Page 1	Date/Time: _	

INCIDENT BRIEFING (ICS 201)

1. Incident Name:	2. Incident Number:	3. Date/Time Initiated: Date: _____ Time: _____
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9. Current Organization (fill in additional organization as appropriate):



6. Prepared by: Name: _____ Position/Title: _____ Signature: _____

ICS 201, Page 3 Date/Time: _____

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Incident Commander(s) and Command Staff:		7. Operations Section:	
IC/UCs		Chief	
		Deputy	
Deputy		Staging Area	
Safety Officer		Branch	
Public Info. Officer		Branch Director	
Liaison Officer		Deputy	
4. Agency/Organization Representatives:		Division/Group	
Agency/Organization	Name	Division/Group	
		Division/Group	
		Division/Group	
		Division/Group	
		Branch	
		Branch Director	
		Deputy	
5. Planning Section:		Division/Group	
Chief		Division/Group	
Deputy		Division/Group	
Resources Unit		Division/Group	
Situation Unit		Division/Group	
Documentation Unit		Branch	
Demobilization Unit		Branch Director	
Technical Specialists		Deputy	
		Division/Group	
		Division/Group	
		Division/Group	
6. Logistics Section:		Division/Group	
Chief		Division/Group	
Deputy		Air Operations Branch	
Support Branch		Air Ops Branch Dir.	
Director			
Supply Unit			
Facilities Unit		8. Finance/Administration Section:	
Ground Support Unit		Chief	
Service Branch		Deputy	
Director		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Comp/Claims Unit	
Food Unit		Cost Unit	
9. Prepared by: Name: _____ Position/Title: _____ Signature: _____			
ICS 203	IAP Page _____	Date/Time: _____	

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Incident Commander(s) and Command Staff:		7. Operations Section:	
IC/UCs		Chief	
		Deputy	
Deputy		Staging Area	
Safety Officer		Branch	
Public Info. Officer		Branch Director	
Liaison Officer		Deputy	
4. Agency/Organization Representatives:		Division/Group	
Agency/Organization	Name	Division/Group	
		Division/Group	
		Division/Group	
		Division/Group	
		Branch	
		Branch Director	
		Deputy	
5. Planning Section:		Division/Group	
Chief		Division/Group	
Deputy		Division/Group	
Resources Unit		Division/Group	
Situation Unit		Division/Group	
Documentation Unit		Branch	
Demobilization Unit		Branch Director	
Technical Specialists		Deputy	
		Division/Group	
		Division/Group	
		Division/Group	
6. Logistics Section:		Division/Group	
Chief		Division/Group	
Deputy		Air Operations Branch	
Support Branch		Air Ops Branch Dir.	
Director			
Supply Unit			
Facilities Unit		8. Finance/Administration Section:	
Ground Support Unit		Chief	
Service Branch		Deputy	
Director		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Comp/Claims Unit	
Food Unit		Cost Unit	
9. Prepared by: Name: _____ Position/Title: _____ Signature: _____			
ICS 203	IAP Page _____	Date/Time: _____	

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Incident Commander(s) and Command Staff:		7. Operations Section:	
IC/UCs		Chief	
		Deputy	
Deputy		Staging Area	
Safety Officer		Branch	
Public Info. Officer		Branch Director	
Liaison Officer		Deputy	
4. Agency/Organization Representatives:		Division/Group	
Agency/Organization	Name	Division/Group	
		Division/Group	
		Division/Group	
		Division/Group	
		Branch	
		Branch Director	
		Deputy	
5. Planning Section:		Division/Group	
Chief		Division/Group	
Deputy		Division/Group	
Resources Unit		Division/Group	
Situation Unit		Division/Group	
Documentation Unit		Branch	
Demobilization Unit		Branch Director	
Technical Specialists		Deputy	
		Division/Group	
		Division/Group	
		Division/Group	
6. Logistics Section:		Division/Group	
Chief		Division/Group	
Deputy		Air Operations Branch	
Support Branch		Air Ops Branch Dir.	
Director			
Supply Unit			
Facilities Unit		8. Finance/Administration Section:	
Ground Support Unit		Chief	
Service Branch		Deputy	
Director		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Comp/Claims Unit	
Food Unit		Cost Unit	
9. Prepared by: Name: _____ Position/Title: _____ Signature: _____			
ICS 203	IAP Page _____	Date/Time: _____	

MEDICAL PLAN (ICS 206)

1. Incident Name:	2. Operational Period: Date From: _____ Time From: _____	Date To: _____ Time To: _____
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3. Medical Aid Stations:			
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Transportation (indicate air or ground):			
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS

5. Hospitals:							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

6. Special Medical Emergency Procedures: <input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

7. Prepared by (Medical Unit Leader): Name: _____	Signature: _____
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8. Approved by (Safety Officer): Name: _____	Signature: _____
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ICS 206	IAP Page _____	Date/Time: _____
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MEDICAL PLAN (ICS 206)

1. Incident Name:	2. Operational Period: Date From: _____ Time From: _____	Date To: _____ Time To: _____
--------------------------	--	----------------------------------

3. Medical Aid Stations:			
Name	Location	Contact Number(s)/Frequency	Paramedics on Site?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Transportation (indicate air or ground):			
Ambulance Service	Location	Contact Number(s)/Frequency	Level of Service
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS
			<input type="checkbox"/> ALS <input type="checkbox"/> BLS

5. Hospitals:							
Hospital Name	Address, Latitude & Longitude if Helipad	Contact Number(s)/Frequency	Travel Time		Trauma Center	Burn Center	Helipad
			Air	Ground			
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes Level: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

6. Special Medical Emergency Procedures: <input type="checkbox"/> Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

7. Prepared by (Medical Unit Leader): Name: _____ Signature: _____

8. Approved by (Safety Officer): Name: _____ Signature: _____
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ICS 206	IAP Page _____	Date/Time: _____
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INCIDENT ORGANIZATION CHART (ICS 207)

1. Incident Name: _____	2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Organization Chart		
<pre> graph TD IC[Incident Commander(s)] --- OS[Operations Section Chief] IC --- LI[Liaison Officer] IC --- SO[Safety Officer] IC --- PIO[Public Information Officer] OS --- SAM[Staging Area Manager] OS --- P[Planning Section Chief] OS --- L[Logistics Section Chief] OS --- F[Finance/Admin Section Chief] P --- RU[Resources Unit Ldr.] P --- SU[Situation Unit Ldr.] P --- DU[Documentation Unit Ldr.] P --- DM[Demobilization Unit Ldr.] L --- SB[Support Branch Dir.] L --- SUD[Supply Unit Ldr.] L --- FUL[Facilities Unit Ldr.] L --- GSU[Ground Spt. Unit Ldr.] L --- SBD[Service Branch Dir.] F --- TUL[Time Unit Ldr.] F --- PUL[Procurement Unit Ldr.] F --- CCUL[Comp./Claims Unit Ldr.] F --- CUL[Cost Unit Ldr.] SBD --- CULdr[Comms Unit Ldr.] SBD --- MULdr[Medical Unit Ldr.] SBD --- FULdr[Food Unit Ldr.] </pre>		
ICS 207	4. Prepared by: Name: _____ Position/Title: _____ Signature: _____	Date/Time: _____

INCIDENT ORGANIZATION CHART (ICS 207)

1. Incident Name: _____	2. Operational Period: Date From: _____ Date To: _____ Time From: _____ Time To: _____	
3. Organization Chart		
<p>The diagram shows the Incident Command structure. At the top is the Incident Commander(s). Reporting to the Incident Commander are the Liaison Officer, Safety Officer, and Public Information Officer. Below them are the Operations Section Chief and the Staging Area Manager. The Operations Section Chief oversees several units. The Staging Area Manager oversees several units. The Planning Section Chief oversees the Resources Unit Ldr., Situation Unit Ldr., Documentation Unit Ldr., Demobilization Unit Ldr., and a Service Branch Dir. The Logistics Section Chief oversees the Support Branch Dir., Supply Unit Ldr., Facilities Unit Ldr., Ground Spt. Unit Ldr., and another Service Branch Dir. The Finance/Admin Section Chief oversees the Time Unit Ldr., Procurement Unit Ldr., Comp./Claims Unit Ldr., and Cost Unit Ldr. The Comms Unit Ldr., Medical Unit Ldr., and Food Unit Ldr. report to the Logistics Section Chief.</p>		
ICS 207	4. Prepared by: Name: _____ Position/Title: _____ Signature: _____	Date/Time: _____

