

**SUBJECT: MEDICAL / FIRST AID EMERGENCIES**



**Life-threatening:  
Call 911, and then call  
the Security Department**

**at (541) 440-7777 or ext. 7777**

- Life-threatening situations may include:
  - chest pains
  - numbness in limbs
  - unconsciousness
  - severe bleeding



**Non-life-threatening:  
Call**

- **Security Department at (541) 440-7777**
- **Douglas County Dispatch at (541) 440-4471**

Try to stay with the victim and assist based on your level of first-aid training. College employees may not transport ill or injured persons from the college unless a clear and present danger exists, and then only to the closest safe location.

**EMERGENCY ACTION**

1. CALL "911"
2. DO NOT MOVE VICTIM UNLESS SAFETY DICTATES
3. IF TRAINED :
  - APPLY FIRST AID
  - USE PRESSURE TO STOP BLEEDING
  - USE CPR IF NO PULSE OR NOT BREATHING

During a medical emergency good communications is as important as first-aid rendered. From the information passed from the caller, to the EMT's or Security Department Personnel. Each step in the communication process is vital for the victim. When calling the Paramedic's [911]. Be prepared to give the following information:

- A. Description of victim, i.e. bleeding, breathing, ill.
- B. Your name.
- C. Location and extension number of victim.

**IMPORTANT:** Deciding who to call during an emergency is **your** decision. If the situation is serious, immediately call **911**, then Security Department at ext. 7777/541-440-7777.

**Security Department - ext. 7777 (541-440-7777)**

**FIRE  
PARAMEDICS                    "911"  
POLICE  
AMBULANCE**

## **FIRST - AID**

### **First-aid has three objectives;**

- To save a life.
- To prevent worsening injury(s) or condition(s).
- To relieve anxiety, pain and discomfort.

First-aid measures are taken until the arrival of **HELP** or professional assistance.\*\*\*WHAT TO DO IF YOU ARE ALONE?\*\*\*The most important thing to remember in dealing with medical emergencies is that quick and proper actions are extremely important.

1. Call Security Department at ext. 7777 (541-440-7777) or dial **911**. If **911** is called it is important that the Security Department is also notified so they may direct emergency vehicles and support groups.
2. State that medical aid is needed and provide the following information:
  - Address where aid is needed.
  - Location of injured person, i.e. building name, floor, room number or area.
  - Type of injury or problem.
  - The individual's present condition.
  - The events leading to the emergency.
  - Medical history and name of the injured person's doctor if known.
  - The phone number you are calling from.

The person making the call should stay on the phone with the dispatcher and answer any questions possibly regarding the condition(s) of the injured person(s) so information can be radioed to responding units.

### **SEVERE WOUNDS AND BLEEDING**

- Using a clean cloth or hand apply direct pressure on the wound.
- Elevate body part. (**DO NOT** elevate a body part with broken bone(s)!)  
(*The first 2 directions will stop 80%-90% of bleeding wounds*)
- Apply pressure to the pressure point closest to the injury. (arm wounds: brachial artery / leg wounds: femoral artery)
- Add more cloth if blood soaks through.

**CAUTION: To prevent transmission of diseases, wear gloves and protective eye wear.**

### **BROKEN BONES**

- Do not move the victim unless he/she is in immediate danger of further injury.
- Check for:
  - Breathing - give mouth to mouth resuscitation if needed.
  - Bleeding - apply direct pressure to the wound.
  - Shock - keep the victim calm and warm.
- Call for help
- **DO NOT** try to push broken bone(s).
- **DO NOT** try to straighten or move a suspected fractured limb.
- **DO NOT** allow the victim(s) to walk around.
- **DO NOT** move a victim of a suspected back injury unless of an extreme danger.

### **BURNS: [THERMAL & CHEMICAL]**

- Immerse burned area into cool water.
- Flush chemical burn with cool water.
- Cover burn with dry, clean, non-sticky, bandage or cloth
- Keep victim(s) warm and comfortable.

### **CHOKING**

- If the victim(s) is coughing or speaking, **DO NOT** interfere. Encourage the victim to keep coughing.
- If the victim **CAN NOT COUGH, SPEAK, OR BREATHE, GIVE ABDOMINAL THRUSTS.**

### **DROWNING**

- A. Get the victim immediately out of the water.
- B. Turn the victim(s) face downward. Allow a few seconds for water to drain from the lungs.
- C. If the victim coughs / sputters and starts breathing without assistance, he / she will rid self of the remaining water. You need someone to call Security Department (ext. 7777 or 541-440-7777). Stay with the victim to make sure recovery continues.
- D. But, if a victim is not breathing after a few seconds for water to drain from the lungs, turn the victim over on his/ her back and start mouth to mouth resuscitation.
- E. If someone else is around, have them get help. Leave the victim only long enough to either get someone else to call for help or for you to get to a phone and call Security Department (ext. 7777/541-440-7777) or "911".

### **DRUG OVERDOSE / ALCOHOL POISONING**

- A. Call immediately for help.
- B. Check the victim(s) breathing and pulse. If breathing stops or is weak, perform mouth to mouth resuscitation.

**CAUTION: Revived victims of alcohol poisoning can be violent both toward themselves and others. BE CAREFUL!**

- C. While waiting for help;
  - Watch breathing.
  - Cover the victim for warmth with a blanket.
  - Do not throw water in the victim(s) face.
  - Do not give liquor or stimulants.
  - Lie victim on their side to prevent vomiting and choking.

**REMEMBER: Alcohol in combination with other drugs can be deadly.**

### **ELECTRIC SHOCK**

- A. Do not touch the person who has been in contact with electrical current until the electricity has been turned off. This must be done at the plug, circuit breaker or fuse box.
- B. If the victim is in contact with a wire or a downed power line, use a dry stick to move it away.
- C. Check for breathing - if the victim(s) stops breathing or is weak, immediately start mouth-to-mouth resuscitation.
- D. Call for help. While waiting for help to arrive:
- E. Keep the victim warm (cover with a blanket or coat).

- F. Give the victim nothing to eat or drink, until he/ she has seen a doctor.
- G. Give the victim assurance that help is on the way.

### **FAINTING, UNCONSCIOUSNESS AND SHOCK**

- A. Have the victim lie or sit down and rest.
- B. Keep the victim comfortable, not hot or cold, until help arrives.
- C. Treat other injuries.

### **FRACTURES AND SPRAINS**

- A. Keep victim still.
- B. Keep injured area immobile.
- C. CAUTION: for suspected head, neck or back injuries; keep the victim still. Treat for shock and keep warm.

### **HEAD INJURIES**

- A. If there is bleeding from an ear it may mean a skull fracture.
- B. When you suspect an existing skull fracture, special care must be taken to stop any scalp bleeding. Heavy bleeding from the scalp occurs even when injury (ies) are not serious.
- C. Do not press too hard. Be **extremely** careful when applying pressure over the wound so bone chips from a possible fracture will not be pressed into the brain.
- D. Do not bend the victim(s) neck as it may be fractured.
- E. Call for help. Let a professional medical person [paramedic, EMT, doctor or nurse] clean the wound and if necessary stitch it.

### **HEART ATTACK**

- A. If the victim is conscious, he/she may be more comfortable sitting up.
- B. If unconscious, place the victim down on his/her back.
- C. If trained, give resuscitation or CPR, as necessary.
- D. Keep victim comfortable until help arrives.

### **INTERNAL BLEEDING**

- A. If the victim(s) are coughing or vomiting up blood or "coffee ground" material, they may have internal bleeding.
- B. Have the victim(s) lie flat on their back and breath deeply.
- C. Call for help. Do not let the victim(s) take any medication until a professional medical person approves.
- D. Treat for shock.

### **POISONING**

- A. If a child or adult is suspected of swallowing any substance that might be poisonous, assume the worst...."TAKE ACTION"!
- B. Call for help. Call 911 for Paramedics AND Security Department at ext. 7777 (or 541-440-7777). Have suspected item, substance or container available for responding emergency units.
- C. If victim is unconscious:
  - Make sure the victim is breathing. If not, tilt the head back and perform mouth to mouth resuscitation.
  - Do not give anything by mouth.

- Do not attempt to stimulate the victim.
- D. If victim is vomiting;
  - Roll the victim over on his/her left side to prevent choking.
  - Keep the victim calm and warm.
- E. Be prepared, keep all emergency phone numbers near the phone and often review first aid procedures.

### **MOUTH TO MOUTH RESUSCITATION:**

- A. Place victim on his/her side and remove foreign matter from the mouth with your finger.
- B. Place victim on his / her back.
- C. Tilt victim(s) head back to open the air-way.
- D. Close victim(s) nostrils with your fingers.
- E. Inhale and close your mouth.
- F. Exhale until victim(s) chest expands.
- G. Repeat every five [5] seconds.
- H. Continue until help arrives.
- I. If a problem exists, check the victim(s) for air-way obstruction(s).

### **SEIZURES:**

1. During the seizure:
  - Let the seizure run its course.
  - Help the victim lie down to avoid injury.
  - Move items away from the victim that might cause injury.
  - Loosen restrictive clothing.
  - Do not try to restrain the victim **AND DO NOT PUT ANYTHING IN THEIR MOUTH!**
  - Have someone immediately call Security Department (ext. 7777/541-440-7777) or dial "911."
2. After the seizure:
  - Check to see if the victim(s) is breathing. If he / she is not, give mouth to mouth resuscitation.
  - Check to see if the victim(s) is wearing a medical emergency alert or similar communication of medical emergency requirement.
  - Check to see if the victim(s) has any burns around the mouth; this might indicate poison.
  - Stay with the victim as he/she may be conscious, but not talkative when the intense movement stops.
  - Send for help as soon as possible.

**SUBJECT: EARTHQUAKE**



1. **Drop**
2. **Cover**
3. **Hold on**

Stay indoors and seek shelter under a desk or table, or stand in a corner and keep away from shelving.

Stay inside until the shaking is over and then evacuate the building while watching for falling debris or glass.

During an earthquake, **REMAIN CALM** and quickly follow the steps below:

***If you are inside a building***

1. Seek refuge in a doorway, under a desk or table, or against an interior wall. Stay away from glass windows, hanging plants, shelves, and/or heavy equipment.
2. After the earthquake has stopped, calmly evacuate the buildings and move to a clear area a safe distance away from the affected buildings.
  - Take all personal belongings with you (backpacks, books, etc.), as you will not be permitted to re-enter the premises without proper authorization.
  - Assist disabled and injured persons who can move.
  - Note location of the seriously injured who can not move.
  - Do not use elevators, as they are unsafe during and after an earthquake.
  - Keep streets and walkways clear for emergency vehicle and personnel.
3. Move to an assembly location..
  - Immediately register with authorities at your location. (This provides information to those looking for you. Also advise authorities when you leave this location and of your destination.)
  - Report the injured that can not be moved, damages and/or gas and water leaks along with locations.
4. Do not return to an evacuated area unless directed to do so by authorities.
5. Do not use telephones except for extreme emergencies.
6. Do not leave site until checking with authorities on road conditions. If you must leave, please advise authorities the reason for leaving and course of travel.

***If you are outdoors***

1. Move away from buildings, trees, fires, fallen power lines or utility poles and other hazards.
2. Seek cover and protect your head and neck with your arms.
3. After the tremor has stopped, follow step 3 through 6 listed above.

***If you are in a vehicle***

1. Pull off to the side of the road or other safe place, set the brakes and turn off the ignition.
2. Wait until the earthquake is over. Do not leave the car unless unsafe conditions warrant. Never leave the car if power lines are down or have fallen over the car.
3. Check the road and surrounding terrain, and proceed when it is safe.

***After the earthquake***

If you have access to a battery operated radio, tune to a local Emergency Alert System station for information and instruction.

***950 AM***

***91.5 FM***

Listen to radio reports to learn magnitude of earthquake, epicenter of earthquake, estimated amount of damage, radio/highway accessibility. Before returning to your work area, look to your family needs. If you are a member designated to become an Emergency Responder, follow Emergency Response procedures, or as directed by the Security Department.

## **SUBJECT: FIRES / EXPLOSION / GAS / HAZARDOUS MATERIALS**

### **Fire Safety**

#### **Be Calm and Be Quick!**

- To properly use a portable fire extinguisher, know how to detach extinguishers from their mountings, stand 6 to 8 feet from the fire and then follow these steps:
- **Pull** the safety pin to unlock the lever for discharge.
- **Aim** the extinguisher nozzle or hose at the base of the fire.
- **Squeeze** the lever below the handle (or press the button) to discharge the extinguishing agent.
- **Sweep** the nozzle back and forth across the base of the fire, discharging all of the agent to assure the fire is out.

Notice the key letters above to easily recall what to do:

#### **PASS – Pull, Aim, Squeeze, and Sweep!**

If the fire doesn't begin to go out right away, leave the area, and call Security Department immediately.

When it comes to fire, what you don't know can hurt you. Take the time now to find out what you can do about preventing and fighting fire on your job. If you have any questions about fire safety or would like to arrange a training session, please contact the Security Department.

### **Structure Fires**

**NOTE:** It is suggested that individuals who use wheelchairs or have a mobility impairment prepare for an emergency ahead of time by instructing coworkers or fellow students on how to assist in an emergency.

- Upon discovering a fire, close the door to the room where the fire is located and immediately sound the building fire alarm.
- **Call the Security Department immediately.**
- Give your name and the location of the fire. Do not hang up until the dispatcher tells you to do so.
- If the fire is small, you may wish to fight it with a fire extinguisher or building fire hose. Be sure you are using the proper extinguisher for the type of fire you are fighting. If you are not sure, read the instructions on the extinguisher.
- If the fire is large, very smoky, or spreading rapidly, sound the building fire alarm and leave the building immediately.
- Inform others in the building who may not have responded to the alarm to leave immediately.
- The alarm may not sound continuously. If the alarm stops, continue to evacuate the building and warn others who may attempt to enter the building.
- **ALWAYS EVACUATE A BUILDING IF THE ALARM IS SOUNDING.**
- If time permits, turn off computers, unplug electrical equipment, take your purse or wallet, and close windows and doors before leaving.



- If you have a mobility impairment, request assistance from those nearest you. If no one is there to render assistance, proceed to the nearest stairway landing, and shout for help. Consultation about these procedures is available from the Security Department.
- When fire alarms sound, do not use the elevators. An elevator may become a trap. Assist (help carry, if necessary) all disabled persons in using the stairs.
- If there is a closed door in your exit path, touch the door lightly with the back of your hand to ensure it is not warm. If it is not warm, open slowly. Be prepared to close the door quickly if smoke or flames are present.
- If there is smoke in your only exit path, crawl on hands and knees, keeping your head as close to the ground as possible to avoid inhaling toxic fumes.
- Relocate to a nearby parking lot and stay out of the way of emergency personnel.

#### **If a chemical fire occurs:**

- Remain calm.
- If time permits, close windows in the room where the fire is located. Close the door behind you as you leave.
- **Call the Security Department immediately.**
- Try to give responders information as to the chemicals involved or stored in the affected areas.
- If the fire is large, very smoky, or spreading rapidly, sound the building fire alarm and leave the building immediately.
- Inform others in the building who may not have responded to the alarm to evacuate immediately.
- The alarm may not sound continuously. If the alarm stops, continue to evacuate.
- Warn others who may attempt to enter the building after the alarm stops.
- **ALWAYS EVACUATE A BUILDING IF THE ALARM IS SOUNDING.**
- When fire alarms sound, do not use the elevators. An elevator may become a trap. Give assistance to (help carry, if necessary) all disabled persons in using the stairs.
- Relocate to a parking lot which should be a distance of at least 500 feet from the building.
- Stay out of the way of emergency personnel.
- Do not return to the building until instructed to do so by the Security Department or Fire Department personnel.
- Notify either the Security Department or firefighters on the scene if you suspect that someone may be trapped inside the building.
- **Unless you have been trained specifically in fighting hazardous material fires, do not attempt to extinguish the fire.**

#### **Brush Fires**

- **Call the Security Department immediately.**
- Give your name and the location of the fire.
- Do not hang up until the dispatcher tells you to do so.
- If you are outdoors, seek shelter in a safe nearby area.
- If you are indoors, close all windows and doors; open all curtains and blinds.
- Relocate all combustibles away from windows.
- Turn off and unplug all electrical equipment.
- Because of road closures, traffic congestion, and the possibility that the fire may outrun you, be prepared to “shelter-in-place.”

- If instructed to relocate, do not return to the vacated location until instructed to do so by the Security Department or Fire Department personnel.

### **Explosion or Similair Incident**

- Immediately take cover under tables, desks or other objects that give protection from broken glass or debris.
- After the effects of the explosion have subsided, **call the Security Department immediately.**
- Give your name; describe the location and nature of the emergency.
- Evacuate the immediate area of the explosion by quickly walking to the nearest exit, alerting people as you go.
- Be aware of structural damage. Stay away from glass doors and windows.
- Do not touch or move any suspicious object.
- Assist others, especially the injured and disabled to evacuate the building.
- Once outside, move to a clear area at least 300 feet away or to the closest parking lot from the affected building.
- Keep the walkways clear for emergency vehicles.
- To the best of your ability, and without re-entering the building, assist the Security Department and emergency personnel in their attempt to determine that everyone has evacuated safely.
- **Do not** return to a building until told to do so.

### **Gas Leak**

- If there is a gas leak.
- Quickly evacuate the affected area.
- Leave doors & windows open as you exit.
- Do not attempt to shut any electrical power off including light switches.
- Move a safe distance away from the affected areas. Keep streets and walkways clear for emergency vehicles and personnel.
- From a safe location, call the Security Department and report the location of the gas leak.
- **Do not** return to a building until told to do so.

### **Hazardous Materials Release**

**If a hazardous material release occurs:**

- **Call the Security Department immediately.**
- Provide the name and quantity of the released material.
- Provide the appearance of the released material – solid, liquid, odor, color, etc.
- Provide time of release.
- Provide information regarding area of contamination.
- Provide information regarding hazards to humans or to the environment inside or outside the room or building.
- Try to give responders information as to the materials involved or stored in the affected area.
- If you are contaminated with a material, make sure you get medical assistance immediately and avoid contact with others.
- If toxic materials come in contact with your skin, immediately flush the affected area with clear water for at least 15 minutes. Use chemical showers if available.
- If there is any possible danger, **evacuate your area immediately.**

- The Security Department will make the decision to evacuate the building.
- Do not return to the building until told do to so by the Security Department.

NOTE: Hazardous Materials are anything flammable, toxic, corrosive, reactive, oxygenic, cryogenic, or radioactive.

## **SUBJECT: FLOODING**

### **BACKGROUND**

This procedure applies whenever storm water or other sources of water flood or threaten to flood college grounds or buildings. Flooding may occur as a result of prolonged periods of rainfall, where the site would not have sufficient time to prepare. Alternatively, flooding may occur without warning, as a result of damage to water distribution systems, or a failure of a nearby man-made dam.

### **Administrative Staff:**

- Initiate appropriate response actions, which may include In-Place Sheltering, On-Site Evacuation, or Off-Site Evacuation.
- Call the Security Department and describe the nature and extent of the flooding.
- Supervise On-Site Evacuation; ensure staff and students evacuate affected buildings using prescribed routes or other safe routes to the assembly/evacuation area.
- Check with staff to ensure accountability for all students/staff.
- Coordinate with facilities to limit damage.

**SUBJECT: SEVERE WINDS**

- Windstorms severe enough to cause damage may occur at infrequent intervals and may be accompanied by torrential rains.
- At the time of warning of impending severe winds, property and equipment not properly anchored should be moved inside a building or tied down. Close windows.
- The best protection in severe winds is in permanent buildings. As a result, steps will be taken to ensure the safety of students/personnel within buildings rather than to evacuate.
- Time permitting, students in temporary structures will be moved to a permanent structure.
- Immediately after the cessation of severe winds, Facilities Management and Security Department will inspect the campus for damage and safety hazards.

## **SUBJECT: UTILITY FAILURE**

### **If a power outage occurs during daylight hours:**

- **Call the Security Department immediately.**
- Give your name, location, and telephone number. Advise the dispatcher of the situation and of any additional locations that are without power. The dispatcher will immediately notify Facilities of the outage.
- Provide assistance to other individuals in your immediate area.
- Secure files, turn off computers, unplug electronic equipment, and lock windows and doors as you leave your office.
- Evacuate students to an area with lights. If campus is completely without power, classes will be dismissed temporarily depending on the problem that caused the power outage.
- If you are in an unlit area, proceed cautiously to an area that has emergency lights or sun light.
- If you are trapped in an elevator, remain calm. Use the emergency call box located below the selection panel. The Security Department or Facilities will be dispatched to your location for assistance.
- Stand by for instruction from your supervisor or the Security Department.
- All special events, performances, and indoor athletic events will be stopped and evacuated if impacted by a power outage.

### **If a power outage occurs during evening hours:**

- **Call the Security Department immediately.**
- Every building that has a power outage will be evacuated and classes will be cancelled.
- The Security Department and Facilities staff will assist with the evacuation.
- Students and non-maintenance employees will be directed to the parking lot and asked to leave.
- The Security Department and Facilities staff will check every stairwell, restroom, class room, office, lounge and elevator for occupants. Once the building has been deemed empty, the building will be secured and will be off limits to foot traffic.
- If the campus is without power, all buildings and open areas will be evacuated.
- The Security Department and Facilities will physically deem all buildings and open areas vacated and secure the campus.
- The campus will be closed for the rest of the evening.
- Students waiting for rides will be asked to wait in their pre-arranged pick-up locations.

## **SUBJECT: SUICIDE AND ATTEMPT SUICIDE RESPONSE**

- **Call Security Department immediately.**
- Give your name, location, and description of person in crisis.
- Describe the type of action the person in crisis has taken or may take.
- If the person is talking about suicide, try to keep the person in one location until the Security Department arrives on scene.
- If the person has overdosed, try to keep this person awake.
- If the person has a weapon, stay away from this person and warn others to do the same.
- If this person is contemplating jumping from a building, keep a safe distance and let the person know that help is on the way.
- Try to warn those below to keep the area clear of foot traffic.
- If a person is successful, the area will be treated as a crime scene and those in the area will be asked to cooperate as witnesses.
- If you believe another subject was involved with the person's suicide or attempt, inform the Security Department immediately.

NOTE: "Suicide by Cop" is another common form of suicide that one may try to utilize. "Suicide by cop" is a colloquial term used to describe an incident in which a suicidal individual consciously engages in life-threatening behavior(s) to the degree that it compels a police officer to respond with deadly force.

### **Guidelines for dealing with potential suicide:**

- **Call Security Department immediately.**
- Don't try to minimize the situation by telling the person how well off he/she is compared to others.
- Don't argue with the person.
- Don't be judgmental or moralizing about the situation.
- Don't deal with the person alone.
- Don't leave the person alone.
- Try to make sure the person doesn't have access to any harmful objects or substances.

### **Warning signs of suicide:**

- Ideation (thinking, talking or wishing about suicide).
- Substance use or abuse (increased use or change in substance).
- Purposelessness (no sense of purpose or belonging).
- Anger.
- Trapped (feeling like there is no way out).
- Withdrawal (from family, friends, work, school, activities, & hobbies).
- Anxiety (restlessness, irritability, & agitation).
- Recklessness (high risk-taking behavior).
- Mood disturbance (dramatic changes in mood).

### **Additional warning signs of suicide:**

- Talking about suicide.

- Looking for ways to die (internet searches on how to commit suicide, looking for guns, pills, etc).
- Preoccupation with death.
- Loss of interest in things one cares about.
- Visiting or calling people one cares about.
- Making arrangements; setting one's affairs in order.
- Giving things away, such as prized possessions.

Remember that the person who is in distress is asking for help from you in the only way possible for him/her at the time. You are not betraying the person by providing this help. It is best to have the person hospitalize himself/herself if necessary. It is important to know that the person can only be hospitalized in two ways: a) by choice, or b) by police if he/she is dangerous to himself/herself or others.



## **SUBJECT: TERRORIST INCIDENT**

NOTE: There is usually little or no warning for a terrorist incident. An individual must use his/her own discretion during a terrorist incident as to how to respond. However, best practices for a terrorist incident are listed below:

### **At all times:**

- Be aware of your surroundings.
- Note suspicious items, packages, or vehicles that seem out of place and report them to the Security Department.
- Note suspicious activities or behaviors and report them to the Security Department.

### **Potential targets recognized by the U.S. Government:**

- Airports, seaports, and harbors.
- Major cities or landmarks.
- Large crowds.
- Infrastructure such as power plants, transportation centers, or communication centers.
- Businesses, industrial centers and large sporting events.

### **Types of terrorist attacks**

- **Explosive** devices cause detonations which throw debris into the air and start fires. Explosive devices can be left in place and detonated remotely or carried by a vehicle or even an individual. Explosive devices are used in most terrorist attacks.
- **Biological** agents such as bacteria, viruses, and toxins typically make people sick.
- **Chemical** agents are toxic to people, plants, or animals, and are found in the form of solids, liquids, vapors, or aerosols.
- **Radioactive** attacks include nuclear explosions and “dirty bombs.” A “dirty bomb” is designed to spread radioactive material over a region.

### **Protective measures to implement following a terrorist incident:**

- Distance yourself from the location of the incident and seek shelter as soon as possible.
- Follow instructions from Security Department or emergency personnel.
- If exposed to a chemical agent or if you have trouble breathing, use your clothing as a simple filter by covering your face and breathing through your clothing.
- If exposed to a chemical, biological, or radioactive agent, change out of any contaminated clothing, shower, put on clean clothing, and seek medical attention as soon as possible.
- Seek medical attention as soon as possible for any injuries, if you have trouble breathing, or believe you were exposed to a contaminating agent.

## **Chemical or Bio-Terrorism**

The covert release of a chemical or biological agent will almost certainly go initially undetected in most areas of the country. Infected persons begin to be present at doctor's offices, managed care clinics, and hospital emergency rooms days, and perhaps weeks after the release of the chemical or

biological agent.

In an overt release, officials will have advanced notice of the outbreak, but most local public health systems will be overwhelmed by community requests for information and treatment as soon as the threat is made public.

Campus response to confirmed incidents of this nature will probably be limited to the following possibilities, depending on circumstances:

- Act as an information source, passing on information from Center of Disease Control (CDC), and other government agencies, to students and staff via existing information channels. Information might include infection control precautions and treatment facilities, etc.
- Potential evacuation and closure of facilities.
- Cooperate with the use of college facilities, if requested, by local agencies.
- Use of universal precautions in the handling of victims to prevent the further infection or contamination of students and staff.

### **Suspicious Mail**

- If a Radiological, Biological, or Chemical threat is identified in any letter, parcel, or package:
- Do not handle the mail piece or package suspected of contamination.
- **Call Security Department immediately.**
- Make sure that damaged or suspicious packages are isolated and the immediate area cordoned off.
- Ensure that all persons who have touched the mail piece wash their hands with soap and water.
- List all persons who have touched the mail piece or package.
- Include contact information and have this information available for the Security Department.
- Place all items worn when in contact with the suspected mail piece in plastic bags and have them available for law enforcement agents.
- As soon as practical, shower with soap and water.

## **SUBJECT: BIOLOGICAL EMERGENCY**

### **BACKGROUND**

A Biological Emergency is an incident involving the release of, exposure to, toxins that are capable of causing bodily harm or death. A biological agent can come in the form of a solid, powder, liquid, or gaseous state.

#### **A biological agent can be introduced through the following:**

- By mail, via contaminated letter or package.
- Using a small explosive device to help it become airborne.
- Through a building's ventilation system.
- Using a contaminated item, such as a backpack, book bag, or other parcel left unattended.
- By intentionally contaminating a food or water supply.
- By aerosol release into the air.
- By a missile warhead.

#### **The following indicators may suggest the release of a biological substance:**

Multiple victims suffering from watery eyes, twitching, choking or loss of coordination, or having trouble breathing, severe vomiting, diarrhea, abdominal cramping (if food borne or waterborne). Also, severe skin reactions for certain other agents. Other indicators may include the presence of distressed animals or dead birds.

### **Anthrax**

Anthrax is the most common of biological agents. Anthrax is a disease-causing organism, which can reproduce and keep spreading long after its release. Anthrax has a low mortality rate when properly treated. Anthrax is usually sent to individuals by letters or packages.

#### **The following steps will assist to identify suspicious letters or packages:**

- The mail is unexpected or from someone you do not know.
- It is addressed to a title, but no name.
- It is addressed to someone no longer at your address.
- It is handwritten and has no return address or bears one that you cannot confirm its legitimacy.
- The return address does not match the postmark.
- Common words are misspelled.
- It is lopsided or lumpy in appearance.
- It has wires or tinfoil protruding from the envelope/package.
- It is sealed with excessive amounts of tape or string.
- It is marked with restrictive delivery instructions, such as "Personal" or "Confidential".
- It has excessive postage.
- It has oily stains, discoloration, crystallization, or a strange odor.
- It is leaking a powdery substance.

#### **The following steps should be taken after a suspicious letter/package is identified:**

- Stay calm. Do not get excited. Most threats are, in fact, hoaxes. Regardless, you must treat each incident seriously.
- Do not shake or empty the contents of any suspicious envelope/package.
- Place the envelope/package in a plastic bag or other type of container to prevent leakage of contents.

- If a container is unavailable, cover with anything (e.g. clothing, paper, trash can) and do not remove cover.
- Leave room and close door, or section off area to prevent others from entering. Everyone who touched the letter should wash hands. Wash hands with soap and water to prevent spreading any powder to face, other persons, or other objects.
- Have the colleges ventilation system, heating system, or air conditioning system shut down, if possible, and turn off any blowers to the room.
- Report incident to administration staff.
- Administration staff should contact the Security Department. Give specific location of suspicious envelope/package and what makes it suspicious. List all the people in the room or area when the envelope/package was recognized. Give list to the Security Department and health authorities for follow-up investigations and advice.

**The following steps should be taken in the event an envelope/package with powder spills/leaks out onto a surface:**

- Stay calm. Do not get excited. Most threats are, in fact, hoaxes. Regardless, you must treat each incident seriously.
- Do not clean up the powder. Cover spilled contents immediately with anything and do not remove cover.
- Leave the room, close and lock the door or section off the area to prevent others from entering.
- Wash hands with soap and water to prevent spreading powder to face, other persons, or other objects.
- Have the colleges ventilation system, heating system, or air conditioning system shut down, if possible, and turn off any blowers to the room.
- Remove heavily contaminated clothing as soon as possible and place in a sealable plastic bag. Give sealed bag to the emergency responders for proper disposal.
- Shower with soap and water as soon as possible. Do not use bleach or other disinfectant on skin.
- Report incident to administrative staff.
- Administrative staff should contact the Security Department. Give specific location and type of spilled contents. List all the people in the room or area when envelope/package with powder spilled/leaked.
- If a site or building receives a biological threat by phone alleging a contaminated package, backpack, or book bag, administration staff should follow the appropriate procedures.

## **SUBJECT: ACTIVE SHOOTER**

### **PROFILE OF AN ACTIVE SHOOTER**

An Active Shooter is an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearms(s) and there is no pattern or method to their selection of victims.

Active shooter situations are unpredictable and evolve quickly. Typically, the immediate deployment of law enforcement is required to stop the shooting and mitigate harm to victims.

Because active shooter situations are often over within 10 to 15 minutes, before law enforcement arrives on the scene, individuals must be prepared both mentally and physically to deal with an active shooter situation.

Good practices for coping with an active shooter situation

- Be aware of your environment and any possible dangers.
- Take note of the two nearest exits in any facility you visit.
- If you are in an office, stay there and secure the door.

### **HOW TO RESPOND WHEN AN ACTIVE SHOOTER IS IN YOUR VICINITY**

Quickly determine the most reasonable way to protect your own life. Remember, students and visitors are likely to follow the lead of staff and managers during an active shooter situation.

#### 1. Evacuate (Run)

If there is an accessible escape path, attempt to evacuate the premises. Be sure to:

- Have an escape route and plan in mind.
- Evacuate regardless of whether others agree to follow.
- Leave your belongings behind.
- Help others escape, if possible.
- Prevent individuals from entering an area where the active shooter may be.
- Keep your hands visible.
- Follow the instructions of any law enforcement.
- Do not attempt to move wounded people.
- Call 911 when you are safe.

If suspect is outside your classroom/office

- Stay inside the classroom/office.
- If possible, close and lock the outside door to the room.
- Close the blinds, turn off the lights, remain quiet and move behind available cover.  
Stay on the floor, away from doors or windows, and do not peek out to see what may be happening.
- If possible and safe to do so, report the location of the assailant.

## 2. Hide out (Hide)

- If evacuation is not possible, find a place to hide where the active shooter is less likely to find you.
- Call 911 when safe to do so.

Your hiding place should:

- Be out of the active shooter's view.
- Provide protection if shots are fired in your direction and locked door.
- Not trap you or restrict your options for movement (i.e., an office with a closed and locked door).

To prevent an active shooter from entering your hiding place:

- Lock the door.
- Blockade the door with heavy furniture.

If the active shooter is nearby:

- Lock the door.
- Silence your cellular phone.
- Turn off any source of noise (i.e., radios, televisions).
- Hide behind large items (i.e., cabinets, desks).
- Remain quiet.

If evacuation and hiding out are not possible:

- Remain calm.
- Dial 911, if possible and safe to do so, to alert police to the active shooter's location.
- If you cannot speak, leave the line open and allow the dispatcher to listen.

## 3. Take action against the active shooter (Fight)

As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter by:

- Acting as aggressively as possible against him/her.
- Throwing items and improvising weapons.
- Yelling.
- Committing to your actions.

## **HOW TO RESPOND WHEN LAW ENFORCEMENT ARRIVES**

Law enforcement's purpose is to stop the active shooter as soon as possible. Officers will proceed directly to the area in which the last shots were heard.

- Officers usually arrive in teams.
- Officers may wear regular patrol uniforms or external bulletproof vests, Kevlar helmets, and other tactical equipment .
- Officers may be armed with rifles, shotguns, handguns.
- Officers may use pepper spray or tear gas to control the situation.
- Officers may shout commands, and may push individuals to the ground for their safety.

How to react when law enforcement arrives:

- Remain calm, and follow officers' instructions.

- Put down any items in your hands (i.e., bags, jackets).
- Immediately raise hands and spread fingers.
- Keep hands visible at all times.
- Avoid making quick movements toward officers such as holding on to them for safety.
- Avoid pointing, screaming and/or yelling.
- Do not stop to ask officers for help or direction when evacuating, just proceed in the direction from which officers are entering the premises.

Information to provide to law enforcement or 911 operator:

- Location of the active shooter.
- Number of shooters, if more than one.
- Physical description of shooter(s).
- Number and type of weapons held by the shooter(s).
- Number of potential victims at the location .

The first officers to arrive to the scene will not stop to help injured persons. Expect rescue teams comprised of additional officers and emergency medical personnel to follow the initial officers. These rescue teams will treat and remove any injured persons. They may also call upon able-bodied individuals to assist in removing the wounded from the premises.

Once you have reached a safe location or an assembly point, you will likely be held in that area by law enforcement until the situation is under control, and all witnesses have been identified and questioned. Do not leave until law enforcement authorities have instructed you to do so.

### **Reactions of Managers During an Active Shooter Situation**

Students, staff and visitors are likely to follow the lead of managers during an emergency situation. During an emergency, managers should be familiar with their Emergency Operations Plan and be prepared to:

- Take immediate action.
- Remain calm.
- Lock and barricade doors.
- Evacuate staff and customers via a preplanned evacuation route to a safe area.

Assisting Individuals with Special Needs and/or Disabilities

- Refer to the Evacuation Section for guidelines in evacuating persons with disabilities.

Your building should be handicap-accessible, in compliance with ADA requirements.

### **MANAGING THE CONSEQUENCES OF AN ACTIVE SHOOTER SITUATION**

After the active shooter has been incapacitated and is no longer a threat, human resources and/or management should engage in post-event assessments and activities, including:

- An accounting of all individuals at a designated assembly point to determine who, if anyone, is missing and potentially injured.
- Determining a method for notifying families of individuals affected by the active shooter, including notification of any casualties.
- Assessing the psychological state of individuals at the scene, and referring them to health

care specialists accordingly.

- Identifying and filling any critical personnel or operational gaps left in the organization as a result of the active shooter.

## **LESSONS LEARNED**

To facilitate effective planning for future emergencies, it is important to analyze the recent active shooter situation and create an after-action report. The analysis and reporting contained in this report is useful for:

- Serving as documentation for response activities
- Identifying successes and failures that occurred during the event
- Providing an analysis of the effectiveness of the existing Emergency Operations Plan
- Describing and defining a plan for making improvements to the Emergency Operations Plan

### **Additional Ways to Prepare for and Prevent an Active Shooter Situation**

- Preparedness
  - Ensure that your facility has at least two evacuation routes.
  - Post evacuation routes in conspicuous locations throughout your facility.
  - Include local law enforcement and first responders during training exercises.
  - Encourage law enforcement, emergency responders, SWAT teams, K-9 teams, and bomb squads to train for an active shooter scenario at your location.
- Prevention
  - Foster a respectful workplace.
  - Be aware of indications of workplace violence and take remedial actions accordingly.

## **PREPARING FOR AND MANAGING AN ACTIVE SHOOTER SITUATION**

### **RECOGNIZING POTENTIAL WORKPLACE VIOLENCE**

An active shooter in your workplace may be a current or former student, employee, or an acquaintance thereof. Intuitive faculty, staff and managers may notice characteristics of potentially violent behavior. Alert your Human Resources Department if you believe anyone exhibits potentially violent behavior.

#### **Indicators of Potential Violence**

People typically do not just “snap,” but display indicators of potentially violent behavior over time. If these behaviors are recognized, they can often be managed and treated. Potentially violent behaviors may include one or more of the following (this list of behaviors is not comprehensive, nor is it intended as a mechanism for diagnosing violent tendencies):

- Increased use of alcohol and/or illegal drugs.
- Unexplained increase in absenteeism; vague physical complaints.
- Noticeable decrease in attention to appearance and hygiene.
- Depression / withdrawal.
- Resistance and overreaction to changes in policy and procedures.
- Repeated violations of company policies.
- Increased severe mood swings.
- Noticeably unstable, emotional responses.



- Explosive outbursts of anger or rage without provocation.
- Suicidal; comments about “putting things in order.”
- Behavior which is suspect of paranoia, (“everybody is against me”).
- Increasingly talks of problems at home.
- Escalation of domestic problems into the workplace; talk of severe financial problems.
- Talk of previous incidents of violence.
- Empathy with individuals committing violence.
- Increase in unsolicited comments about firearms, other dangerous weapons and violent crimes.

**SUBJECT: VIOLENT OR CRIMINAL BEHAVIOR / CIVIL DEFENSE / WMD**

1. Assist in making the campus a safe place by being alert to suspicious situations and by reporting them as outlined below.

**Do not take any unnecessary chances**

2. If you are the victim or are involved in any on-campus violation of the law such as assault, robbery, theft, unwanted sexual behavior, etc.:

Call the Security Department as soon as possible and supply them with the following information:

- a. Nature of the incident.
- b. Campus location of incident.
- c. Description of person(s) involved.
- d. Description of property involved.
- e. Your name.
- f. Your current location.
- g. Your contact telephone number.
- h. Any injuries including how many and extent of injury (if known).

3. If you witness an on-campus violation of the law, immediately call the Security Department and give them the information outlined in number 2 above.

4. Report to your departmental office anyone loitering or soliciting on campus. These people may be asked to leave if they do not have permission or a proper reason for being on campus. Call the Security Department if they refuse to leave when asked.

5. Call the Security Department for an escort to and from class or your workstation if you are concerned about your safety.

6. If in a room or building and you hear gunfire, lock your door(s) from the inside, if the door(s) can be locked. Call 911 and the Security Department to describe what you heard and give them your building name and room number, turn off room lights (whether day or night), and then take shelter so that you are not visible through a window to anyone outside of the window.

7. Remain sheltered in place until the Security Department notifies you to take other action.

**Civil Defense Procedures / WMD (Weapons of Mass Destruction)**

**Signal**

In all likelihood, there will be NO advanced warning for a WMD. If there is, tune radio to Emergency Alert Systems:

**950 AM**

**91.5 FM**

**Action**

1. Remain calm.
2. Evacuate.
3. Stay clear of glass windows.
4. Tune radio to Emergency Alert Systems:  
**950 AM**  
**91.5 FM**
5. Stay in evacuation area until directed by authorities to leave.

**Surprise Attack**

1. Take cover instantly.
2. Lie behind a solid object or in a ditch.
3. Assume the civil defense protective position:
  - Lie on your side and curl up.
  - Cover your head and close your eyes.

## **SUBJECT: DISTURBANCES AND DEMONSTRATIONS**

### **BACKGROUND**

Site administrators may be confronted with disturbances or demonstrations adjacent to a college site or on a college site.

The courts have held that demonstrations are lawful as long as the demonstrators' conduct does not materially disrupt class work, involve substantial disorder, or invade the rights of others. However, any demonstration on campus may interfere with college activities and, therefore, could be unlawful.

Site administrators and police officers are empowered to order persons whose presence interferes with the peaceful conduct of the college, or disrupts the college or its students or college activities, to leave campus. Persons who fail to comply with such instructions are subject to arrest.

### **DISTURBANCE OR DEMONSTRATION (STUDENTS)**

- Site Administration should carefully assess the situation. Designated free speech areas should be considered prior to any demonstration.
- With assistance from the Security Department, determine the urgency of the situation, type of assistance needed, and if the crowd really needs to be dispersed.
- If Demonstrators are participating in an unlawful assembly on campus, or causing class disruptions, it is recommended the site administrator:
  - o ***Consult with law enforcement officers to establish the best plan of action.***

### **DISTURBANCE OR DEMONSTRATION (NON-STUDENT)**

- Politely inform the individual(s) they are disrupting the college, its students and/or activities and tell them to leave.
- If the individual(s) refuse to comply, notify the Security Department. An officer(s) will be dispatched to your location. If a physical assault begins, call "911."
- The officer and site administrator will devise a plan of action. The situation will dictate whether additional officers will be needed and/or if the Emergency Operations Center needs to be activated.

### **OTHER CONSIDERATIONS**

- Consider placing staff to answer telephone calls from concerned.
- Try to determine the issues causing the disturbance and attempt to communicate with the participants.
- With assistance from the Security Department, try to meet with authorized representatives or leaders who can present their issues and possibly respond to your needs.

## **SUBJECT: BOMB THREAT**

### **BOMB THREAT:**

- DO NOT open drawers or cabinets, or turn lights off or on.
- **NOTE: Turn off any portable electronic communication device. This includes College provided emergency cell phones, if applicable. DO NOT transmit under any circumstance; this may activate a bomb.**
- Call 911 using a landline/hard line phone.
- DO NOT disconnect from the dispatcher until told to do so.
- DO NOT activate fire alarms.
- Evacuate or assist in evacuation when instructed to do so by Administration or College officials.
- DO NOT return to an evacuated building until told to do so by Administration or College officials.

### **SUSPICIOUS PACKAGE:**

- If you observe a suspicious package, DO NOT handle it.
- If you receive a suspicious package, gently place it in a stationary location near where you first picked it up; secure and leave the area.
- **NOTE: Turn off any portable electronic communication device. This includes College provided emergency cell phones, if applicable. DO NOT transmit under any circumstance; this may activate a bomb.**
- Call 911 using a landline/hard line phone.
- DO NOT disconnect from the dispatcher until told to do so.
- DO NOT activate fire alarms.
- Evacuate or assist in evacuation when instructed to do so by Administration or College officials.
- DO NOT return to an evacuated building until told to do so by Administration or College officials.

### **If you observe a suspicious object or potential bomb:**

- **Call the Security Department immediately.**
- Give your name, location and description of the object.
- Warn others in the area to stay away from the object until the Security Department arrives on scene.
- If the object is found outside, move to a clear area at least 300 feet away.
- If the object is found inside, leave the room, office, or building.

### **If you receive a phone call indicating a bomb or explosive device has been placed on campus, keep the caller on the phone and ask the following:**

- When is the bomb going to explode?
- Where is the bomb located?
- What kind of bomb is it?
- What does it look like?
- Why did you place the bomb?
- What is your name?

- Note the time the call was received.
- Note the sex, age, and emotional state of caller.
- Note any background noises.
- Note caller ID phone number.
- Call the Security Department immediately with the above information.
- Save your notes for the Security Department.

**The Security Department will conduct a detailed bomb search and requests the following:**

- Make a cursory inspection of your work area for suspicious objects and report the location to the Security Department.
- If an object is found, do not handle it.
- Leave the room, office, or building.
- The Security Department will make the decision to evacuate the building.
- Move to a clear area outside at least 300 feet away.
- Do not return to the building until advised by the Security Department.

**If you receive suspicious mail:**

- Do not handle or move the letter or parcel.
- **Call the Security Department immediately.**
- Document the manner in which the mail arrived.
- Note the time the mail was received.
- If possible, note down information that is observed on the mail.
- Give the information to the Security Department upon their arrival.

**What constitutes a suspicious letter or parcel?**

Some typical characteristics which ought to trigger suspicion include letters or parcels that:

- Have any powdery substance on the outside.
- Are unexpected or from someone unfamiliar to you.
- Have excessive postage, handwritten or poorly typed address, incorrect titles or titles with no name, or misspellings of common words.
- Are addressed to someone no longer with your organization or are otherwise outdated.
- Have no return address, or have one that can't be verified as legitimate.
- Are of unusual weight, given their size, or are lopsided or oddly shaped.
- Have an unusual amount of tape.
- Are marked with restrictive endorsements, such as "Personal" or "Confidential."
- Have strange odors or stains.

## **SUBJECT: FACTS AND GOVERNMENTAL RESPONSE TO PANDEMIC FLU**

### **A. Introduction**

The purpose of this Influenza Pandemic Response Plan is to lessen the impact of an influenza pandemic on the residents by providing a guide for health care providers for detection and response to an influenza pandemic event.

### **B. Background/Threat**

The worst natural disaster in modern times was the infamous "Spanish flu" of 1918-1919, which caused 20 million deaths worldwide and over 500,000 deaths in the U.S. Although the Asian influenza pandemic of 1957 and the Hong Kong influenza pandemic of 1968 were not as deadly as the Spanish influenza pandemic, both were associated with high rates of illness and social disruption.

Influenza is a highly contagious viral disease. Pandemics occur because of the ability of the influenza virus to change into new types, or strains. People may be immune to some strains of the disease either because they have had that strain of influenza in the past or because they have recently received influenza vaccine. However, depending on how much the virus has changed, people may have little or no immunity to the new strain. Small changes can result in localized epidemics. But, if a novel and highly contagious strain of the influenza virus emerges, an influenza pandemic can occur and affect populations around the world.

The West Coast of the United States has major ports of entry for flights and shipping from Asia (a likely location for the development of a novel virus), would likely be among the first U.S. locations for an influenza pandemic to establish a foothold.

An influenza pandemic is unlike any other public health emergency or community disaster:

- Many experts consider influenza pandemics to be inevitable, yet no one knows when the next one will occur.
- There may be very little warning. Most experts believe that we will have between one and six months between the time that a novel influenza strain is identified and the time that outbreaks begin to occur in the U.S.
- Outbreaks are expected to occur simultaneously throughout much of the U.S., preventing sharing of human and material resources that normally occur with other natural disasters.
- The effect of influenza on individual communities will be relatively prolonged -- weeks to months -- when compared to minutes-to-hours observed in most other natural disasters.
- Because of the substantial lead times required for vaccine production once a novel strain has been identified, it is likely that vaccine shortages will exist, especially during the early phases of the pandemic. Effective preventive and therapeutic measures --including antiviral agents -- will likely be in short supply, as may some antibiotics to treat secondary infections.
- When vaccine becomes available, it is expected that individuals will need an initial priming dose followed by a second dose approximately 30 days later to achieve optimal antibody responses and clinical protection.
- Health-care workers and other first responders will likely be at even higher risk of exposure and

illness than the general population, further impeding the care of victims.

- Widespread illness in the community will also increase the likelihood of sudden and potentially significant shortages of personnel in other sectors who provide critical community services: military personnel, police, firefighters, utility workers, and transportation workers, just to name a few.

**Benefits of pre-event planning**

In addition to preparing to respond to an actual pandemic, increasing awareness among the public health, medical, and emergency response communities will foster greater concern about “routine”, annual influenza epidemics, which kill an average of 20,000 Americans every winter.

Prompt improvements in infrastructure to address the major elements of pandemic preparedness can have immediate and lasting benefits and can also mitigate the effect of the next pandemic. For example, increasing routine, annual influenza vaccination coverage levels in high-risk patients will not only reduce their risk of dying or being hospitalized during the prepandemic period, but will also facilitate access to such patients -- through greater confidence in the benefits of influenza vaccination and expanded programs to access those patients -- when the next pandemic occurs. Similarly, increasing the coverage of pneumococcal vaccine in such patients could have a significant impact on the incidence and severity of secondary bacterial pneumonia.

**C. Concept of Operations**

**1. Stages of Alert**

For purposes of consistency, comparability, and coordination of the national, state, and local response, identification and proclamation of the following “stages” will be done at the national level:

<b>Pandemic Phase</b>	<b>Definition</b>
<b>Novel Virus Alert</b>	<ul style="list-style-type: none"> <li>• Novel virus detected in one or more humans</li> <li>• Little or no immunity in the general population</li> <li>• Potential, but not inevitable precursor to pandemic</li> </ul>
<b>Pandemic Alert</b>	<ul style="list-style-type: none"> <li>• Novel virus demonstrates sustained person-to-person transmission and causes multiple cases in the same geographic area</li> </ul>
<b>Pandemic Imminent</b>	<ul style="list-style-type: none"> <li>• Novel virus causing unusually high rates of morbidity and/or mortality in multiple, widespread geographic areas</li> </ul>
<b>Pandemic</b>	<ul style="list-style-type: none"> <li>• Further spread with involvement of multiple continents; formal proclamation made</li> </ul>
<b>Second Wave</b>	<ul style="list-style-type: none"> <li>• Reoccurrence of epidemic activity within several months following the initial wave of infection</li> </ul>
<b>Pandemic over</b>	<ul style="list-style-type: none"> <li>• Cessation of successive pandemic “waves,” accompanied by return (in the U.S.) of more typical wintertime “epidemic” cycle</li> </ul>

As the pandemic develops, the World Health Organization (WHO) will notify the Centers for Disease Control and Prevention (CDC) and other national health agencies of progress of the



pandemic from one stage to the next. CDC will communicate with other state agencies about pandemic stages, vaccine availability, virus laboratory findings, and national response coordination. The State will communicate with local health agencies.

## **2. The Federal Role**

The Federal government has assumed primary responsibility for a number of key elements of the national plan, including:

- Vaccine research and development.
- Coordinating national and international surveillance.
- Assessing and potentially enhancing the coordination of vaccine and antiviral capacity, and coordinating public-sector procurement.
- Assessing the need for and scope of a suitable liability program for vaccine manufacturers and persons administering the vaccine.
- Developing a national “clearinghouse” for vaccine availability information, vaccine distribution, and redistribution.
- Developing an adverse events surveillance system at the national level.
- Developing a central (national) information database/exchange/clearinghouse on the Internet.

## **3. The State Role**

### **Novel Virus Alert Stage**

During this stage, the Oregon Public Health Division (OPHD) activities will be limited to monitoring reports of progress of the disease and surveillance to detect the arrival of disease caused by the novel virus in Oregon. Novel virus detection will be carried out by WHO and CDC.

### **Pandemic Alert Stage**

During this stage, OPHD will monitor reports of disease spread and meet with surveillance partners to activate and augment surveillance systems.

The OPHD will maintain close contact with CDC and the Food and Drug Administration to obtain information on plans for vaccine delivery. They will work with local health departments (LHDs) and representatives of the private medical sector to plan delivery and administration of vaccines when they are available.

The OPHD will provide technical information, public information, and press releases. Public information will include travel alerts, guidelines on limiting the spread of the disease, and information about when and where to obtain medical care. They will ensure communication among epidemiology efforts, laboratory surveillance, and emergency management agencies (EMAs).

### **Pandemic Imminent Stage**

In the pandemic imminent stage, the pandemic alert activities will continue at an intensified level. Surveillance efforts will be increased for both influenza illness and the circulation of the influenza virus. If vaccine is available, the distribution system will be implemented and security measures will be put in

place to ensure that vaccine will be given first to groups with highest priority for receiving them. The OPHD will step up information flow to LHDs, medical providers and all other stakeholders.

Local coroners and funeral directors will be advised to prepare for increases in the number of dead they will have to handle.

### **Pandemic Stage**

Surveillance efforts will be overwhelmed. Emphasis will be shifted from detecting cases caused by the influenza virus to monitoring demographic characteristics that may indicate a need to revise priority groups for receiving vaccine and antiviral medications if available supplies are limited. Vaccine delivery will be at its highest level, and the system to detect possible adverse reactions to the vaccine will be closely monitored. EMAs will establish alternative treatment sites since hospitals will be overwhelmed.

### **Second Wave**

All agencies and health care providers must make use of the interim period to prepare for a resurgence of disease. This includes addressing shortfalls in supplies and personnel.

Although there are likely to be medical resources and technical assistance available from state and federal agencies, local counties should expect to manage the local response at the time of the pandemic, including temporary redirection of personnel and financial resources from other programs.

## **D. Public Health Response Procedures**

In the early stages of a pandemic, there may be no vaccine at all. The federal Planning Guide indicates that a minimum of six to eight months would elapse before the tens of millions of doses needed could be produced for distribution. When vaccine first becomes available the demand will likely exceed the supply.

Pharmaceutical delivery will become an important issue during a pandemic. While antiviral agents will play a role in both prophylaxis and treatment of influenza, the existing supplies would certainly fall short of the need. As the pandemic progresses, there may not be sufficient supplies of antibiotics for treating persons with complications of influenza. In addition to supply problems, other difficulties are associated with use of antiviral agents. Priorities for target groups and the use of limited supplies for prophylaxis versus therapy have not yet been established. Widespread use of antivirals and antibiotics could lead to emergence of drug-resistant viral strains. Adverse antiviral reactions and liability issues will also be of concern. |

### **1. Novel Virus Alert Stage**

Novel virus detected in one or more humans. Little or no immunity in the general population. Potential, but not inevitable, precursor to a pandemic.

#### **a. Surveillance**

- Monitor bulletins from the OPHD regarding virologic, epidemiologic, and clinical findings associated with new variants isolated within or outside the U.S.
- Meet with appropriate partners and stakeholders and review major elements of enhanced surveillance activities; modify and update plan as needed.
- Activate enhanced local surveillance to detect importation and local spread.

- Obtain appropriate reagent, if appropriate, to detect and identify the novel strain.

**b. Vaccine and Pharmaceutical Delivery**

- Meet with hospitals, health care providers, and other partners and stakeholders to review major elements of the vaccine distribution plan, including plans for storage, transport, and administration of vaccines and antivirals.
- Modify plan as needed to account for updates, if any, on recommended target groups and projected vaccine supply.

**c. Emergency Response and Communications**

- Test local communication systems to ensure that local and statewide communications are functional.
- Notify hospitals, health care providers, and other partners and stakeholders of the novel virus alert.
- Modify communications plan (and written materials) as needed (in collaboration with state officials) to account for updates, if any, on projected effects of the novel virus.
- Implement contingency plans, if any, for obtaining critical hardware, software, or personnel to expand communications systems if needed for a pandemic.
- Ensure ongoing coordination among surveillance, epidemiology, laboratory, EMS, and other local response efforts.
- Develop and/or update press release templates. Develop materials for responding to questions that may come from the media.

**2. Pandemic Alert Stage**

Novel virus demonstrates sustained person-to-person transmission and causes multiple cases in the same geographic area.

Novel virus alert activities will be continued at a more advanced level and other activities will be added.

**a. Surveillance**

- Fully activate enhanced surveillance activities. Assess functionality, timeliness, and completeness of data entry and dissemination, data links, and feedback mechanisms throughout the local the system.
- Monitor daily CDC and state reports
- Meet with surveillance partners to increase the amount of patient demographic information collected, in order to identify groups with increased risk.
- Inform surveillance partners of the need to increase specimen collection for detection of novel virus and alert laboratories to prepare for increased numbers of specimens.
- Recruit pharmacies to participate in reporting antiviral prescriptions filled.
- Assess inventory of laboratory equipment and supplies, noting what is needed.
- Assess inventory of medical equipment and supplies, noting what is needed.
- Develop contingency plans for procurement of laboratory equipment and supplies, and also for possible redirection and hiring of additional laboratory employees, including clerical/data entry personnel.

- Explore re-certification of non-traditional labor pool and redirection of staff with appropriate skills to alleviate need for additional laboratory personnel.

### **b. Vaccine and Pharmaceutical Delivery**

During the pandemic alert stage, vaccine would not yet be available, and may not be for several months.

- Monitor reports from the CDC, FDA, and OPHD to obtain information on plans for vaccine manufacture.
- Prepare to implement plan for storing and delivering vaccine as it becomes available DHS (vs. private distribution).
- Review elements of plan for vaccine delivery with partners and stakeholders.
- Ensure that human resources, equipment, and plans for mass immunization clinics are in place.
- Obtain latest OPHD recommendations for priority groups for vaccine allocation and modify as necessary based on current surveillance data.
- Meet with local pharmacists and medical association to discuss potential need to:
  - o increase antiviral and antimicrobial supplies.
  - o increase role of pharmacists in vaccine delivery.
- Coordinate with OPHD to receive the state satellite broadcast training/refresher on vaccine administration techniques for persons who do not normally administer vaccines, but will be enlisted to do so in a pandemic:
  - o arrange for viewing by appropriate groups.
  - o provide video copies of the broadcast for local training.

### **c. Emergency Response and Communications**

- Ensure communication among the epidemiology and laboratory surveillance programs and emergency management.
- Alert surveillance groups to increase surveillance activities.
- Identify contact person (and backup person) for communication with OPHD.
- Identify spokesperson (and backup person) for communication with press, public, etc.
- Prepare fact sheets detailing responses to questions coming from the media and the public:
  - o include documents intended for electronic distribution.

- o include telecommuting advice to employers, labor organizations, and others.
- o include travel alert information received from the State and/or CDC.
- Respond to media inquiries regarding outbreak.
- Notify hospitals, health care providers, emergency responders, coroners, and mortuary organizations as needed.
- Increase laboratory surveillance and disease surveillance.
- Alert emergency responders to work with EMS to inventory critical supplies and solve problems arising from high response volumes.
- Identify methods to address personnel and supply shortfalls.
- Plan for implementation of emergency medical treatment sites and temporary infirmary locations, in coordination with local mass-care organizations such as American Red Cross and/or Salvation Army.
- Send bulletins to private providers via local medical association and/or lists acquired from state licensing boards.
- Issue guidelines on influenza precautions for workplaces, emergency departments, airlines, colleges, jails and prisons, public safety agencies, and individuals.

### **3. Pandemic Imminent Stage**

*Novel virus causing unusually high rates of morbidity and mortality in widespread geographic areas.*

In the pandemic imminent stage the pandemic alert activities will continue at an intensified level.

#### **a. Surveillance**

- Outside of normal surveillance season, verify that hospital and health care surveillance has been activated and OPHD is receiving ongoing reports of cases within the county.
- Report the data collected to all participating facilities as well as to OPHD.
- Analyze the inpatient data to determine which population groups are at greatest risk and provide the information to OPHD and to those determining priority groups for vaccine allocation when the supply is limited.
- Maintain increased laboratory surveillance and other activities outlined previously in the pandemic alert section.

#### **b. Vaccine and Pharmaceutical Delivery**

- Continue activities as listed in pandemic alert stage, including meetings with the local phar-

macist and medical associations.

- Increase public information effort designed to keep ill persons at home.
- If vaccine delivery date is predicted by CDC, work with OPHD to:
  - o establish local delivery date.
  - o review distribution plan and update when new information is available.
  - o alert to need for security at immunization sites.
- If vaccine is available, fully activate the immunization program.

#### **4. Pandemic Stage**

Further spread of influenza disease with involvement of multiple continents.

##### **a. Surveillance**

Influenza morbidity and mortality surveillance systems will likely become overwhelmed.

- Use data to establish priority groups for immunization as vaccine availability changes, providing data to OPHD, hospitals, and private providers.
- Continue to monitor reports from WHO, CDC, and OPHD on national and worldwide morbidity and mortality data.
- Laboratory surveillance will focus on detection of antigenic drift variants and resultant viruses that could limit the efficacy of vaccines produced against the original pandemic strain.

##### **b. Vaccine and Pharmaceutical Delivery**

Continue all pandemic imminent activities. Presumably vaccine would be available for a sizable proportion of the population.

- Monitor data for evidence of adverse reactions to the influenza vaccine. Report findings routinely to OPHD.
- Modify recommendations and agreements on priority groups for receiving the vaccine to reflect greater availability of vaccine.
- Review surveillance data for changes in risk factors that could require modification of recommendations for priority groups for receiving vaccine.
- Monitor availability of antivirals and, when appropriate, recommend changes in priority groups for receiving vaccine or antivirals.

##### **c. Emergency Response and Communications**

All of the activities of the pandemic imminent stage and the following:

- Implement emergency medical treatment sites and temporary infirmary locations as needed in coordination with local mass-care organizations, such as American Red Cross and Salvation Army, to respond to the overwhelming caseload.
- Increase public information effort designed to keep ill persons at home, providing translations into Spanish and other major languages.
- Request law enforcement mutual aid, if needed. If law enforcement mutual aid system is overwhelmed, the Governor may issue a waiver to allow National Guard and military to act as law enforcement.
- If the medical/health mutual aid system is overwhelmed, the State may request health care-workers from other states and/or the federal government.
- Obtain data on antiviral and antimicrobial supplies.
- Prepare or update recommendations and plans for allocation of antiviral and antimicrobial supplies.

**c. Emergency Response and Communications**

- Update documents and fact sheets based on current surveillance information.
- Monitor the ability of hospitals and outpatient clinics to cope with increased patient loads.
- Implement health education campaign with emphasis on the following:
  - o hand washing.
  - o stay home rather than be exposed to/spread the influenza virus.
  - o check on family, friends living alone.
  - o vaccination clinic locations.
  - o signs, symptoms.
  - o vaccine safety and storage.
- Work with employers and labor organizations to implement a telecommuting system so more people can stay home.
- Implement mutual aid or other procedures to address supply and personnel shortfalls.
- Conduct inventory of critical supplies/personnel and solve problems: shortage of supplies (gloves, safety needles, ventilators), personnel shortage (how to get nontraditional labor pool re-certified or alternative staff redirected).
- Develop plan for counseling/psychiatric services

## **5. Second Wave**

Typically in a pandemic, the number of new cases of influenza peaks and then declines, giving the impression that the pandemic is over. Then within a few months, influenza incidence once again increases. State and local officials and health care providers need to remain vigilant for a return of the epidemic activity. This is especially difficult given that all personnel and supplies involved in responding to the epidemic will be exhausted by efforts to respond to the pandemic. The perceived “end of the pandemic” may be viewed as an opportunity to relax and recover. However, all essential functions should be restored to return to pandemic imminent status. Public health personnel who provide the data to OPHD will probably still be backlogged with reports, but should be encouraged to maintain extra staffing levels.

All sources of surveillance data will need to be convinced that their contributions are still essential because of the likelihood of a second wave. If the decline in the number of cases occurs outside the normal influenza season, it will be necessary to explain the importance of maintaining vigilance because the second wave could occur at any time.

Immunization efforts in lower risk groups should continue as vaccine becomes available.

Laboratory surveillance should also return to pandemic imminent status while maintaining surveillance for possible antigenic drift.

### **E. Public Information and Risk Communication**

Dissemination and sharing of timely and accurate information with the health care community, the media, and the general public will be one of the most important facets of the pandemic response. Instructing the public in actions they can take to minimize their risk of exposure or actions to take if they have been exposed will reduce the spread of the pandemic and may also serve to reduce panic and unnecessary demands on vital services.

The Public Health PIO in consultation with the Health Officer and Communicable Disease staff will identify public health issues and concerns that will or may need to be addressed through public information messages regarding pandemic influenza and will identify affected target audiences for messages.

Messages will address, but not be limited to, vaccine supply, antiviral use, low-tech prevention methods, and maintenance of essential services. They will also identify appropriate strategies for dissemination of messages including postings to the Public Health website.