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HOMELAND SECURITY ADVISORY SYSTEM

EMERGENCY MANAGEMENT RESPONSE GUIDELINES

The purpose of this document is to provide guidelines and general actions for emergency response by the City of Agoura Hills and the Emergency Operations Center (EOC) to each specific Threat Condition in the Homeland Security Advisory System (HSAS). This document provides city departments and agencies a clear picture of City actions at a given HSAS level, and provides data to allow them to develop their own response actions to the HSAS threat levels for their agency.

The recommended actions listed in this document are considered a minimum level of response action for each condition level. At their discretion, departments and/or agencies may institute a different threat condition from the HSAS based on a local assessment of the threat. Nothing in this document is intended to usurp the authority or prerogatives of department heads, city administrators, and/or agency executives.

This document is based on:

The White House, Homeland Security Presidential Directive-3, March 2002.

U.S. Department of Homeland Security, *Fire and Emergency Services Preparedness Guide for the Homeland Security Advisory System*, January 2004.

GREEN (Low condition).

This condition is declared when there is a **low risk of terrorist attacks.** The City EOC is not activated at this level.

DEPT.	ACTIONS
OEM	Coordinate with Sheriff's Intelligence to obtain an assessment of the impact the condition has on the City.
OEM	Log receipt of Advisory into Emergency Management Information System (EMIS).
Fire/ Sheriff	Notify Sheriff Command Staff, Watch Commanders and (EOC Management) of the condition.
Sheriff	Notify City departments and Facilities Management of the condition.
Sheriff	Notify any special districts of the condition.
PIO	Coordinate PIO coverage of the HSAS condition.
All Depts.	Refine and exercise planned Protective Measures.
All Depts.	Ensure personnel receive training on HSAS, departmental or agency-specific protective measures.
All Depts.	Regularly assess facilities for vulnerabilities and take measures to reduce them.
All Depts.	Review existing Emergency Operations Plans, Terrorism Plan, Standard Operating Procedures and other applicable response procedures.
All Depts.	Continue to train personnel in counter-terrorism.
All Depts.	Maintain routine liaison with the media.
All Depts.	Prepare to immediately implement the Guarded (Blue) Threat Condition measures.

BLUE (Guarded condition).

This condition is declared when there is a <u>general risk of terrorist attacks.</u> In addition to the protective measures taken in the previous Threat Condition, departments, and agencies should consider the following general measures in addition to the department/agency specific protective measures that they have developed and implemented. The City EOC is not activated at this level.

DEPT.	ACTIONS
OEM	Coordinate with Sheriff Intelligence to obtain an assessment of the impact the condition has on the City.
Fire, Sheriff, OEM	Coordinate receipt of HSAS change.
OEM	Log receipt of Advisory into EMIS.
Fire/Sheriff	Notify Command Staff and Watch Commanders.
Sheriff	Notify City departments and Facilities Management.
Sheriff	Notify any special districts of the condition.
OEM	Conduct routine communication checks with departments, districts, and Los Angeles County Operational Area, Office of Emergency Management.
PIO	Coordinate PIO coverage of the HSAS condition.
All Depts.	Check communications with designated emergency response or command locations.
All Depts.	Review and update emergency response procedures.
All Depts.	Provide the public with necessary information that will strengthen their ability to act appropriately.
All Depts.	Review and update Emergency Operations Plans, Terrorism Plan, Standard Operating Procedures and other applicable response procedures.
All Depts.	Prepare to immediately implement the Elevated (Yellow) Threat Condition measures.

YELLOW (Elevated Condition).

An Elevated Condition is declared when there is a <u>significant risk of terrorist attacks</u>. In addition to the protective measures taken in the previous Threat Conditions, departments and agencies should consider the following general measures in addition to the department/agency specific protective measures that they have developed and implemented. This condition may or may not activate the City's EOC depending on a local assessment.

DEPT.	ACTIONS
OEM	Coordinate with Sheriff Intelligence to obtain an assessment of the impact the condition has on the City.
Fire, Sheriff, OEM	Coordinate receipt of HSAS change.
OEM	Log receipt of Advisory into EMIS.
Fire/Sheriff	Activate the EOC to Low Level if required by a specific threat in the City based on coordination with the Sheriff Intelligence. Fire and Sheriff may monitor events from the EOC or from the office as a minimum measure
Sheriff	Notify City departments and EOC Team of the condition level.
Sheriff	Notify any special districts of the condition.
OEM	Maintain the ability to rapidly communicate with City departments, special districts, and Los Angeles Operational Area.
OEM	Maintain the ability to rapidly communicate with adjacent cities.
OEM	Maintain the ability to rapidly communicate with American Red Cross and Disaster Communication Services Coordinator and other necessary volunteer groups or organizations that fulfill a role in the City EOC.
PIO	Coordinate PIO coverage of the HSAS condition.
All Depts.	Increase surveillance of critical locations.
All Depts.	Coordinate emergency plans with nearby jurisdictions, special districts and related private sector agencies.
All Depts.	Assess protective measures within the context of the current threat information.
All Depts.	Implement as appropriate, contingency and Emergency Operations Plans.
All Depts.	Prepare to immediately implement the High (Orange) Threat Condition measures.

ORANGE (High Condition).

A High Condition is declared when there is a <u>high risk of terrorist attacks.</u> In addition to the protective measures taken in the previous Threat Conditions, departments and agencies should consider the following general measures in addition to the department/agency specific protective measures that they have developed and implemented. This condition may or may not activate the City EOC depending on a local assessment.

DEPTS.	ACTIONS
OEM	Coordinate with Sheriff Intelligence to obtain an assessment of the impact the condition has on the City.
Fire, OEM	Coordinate receipt of HSAS change.
OEM	Log receipt of Advisory into EMIS.
Sheriff Chief, C.M.	Activate the EOC to an appropriate level (Low, Mid or Full) if required by a specific threat in the City (based on coordination with the Sheriff Intelligence and EOC Management Staff.
Sheriff, Fire, OEM	Notify City departments of the HSAS status.
Sheriff	Notify any special districts of the condition.
OEM	Assess EOC Staff availability and alert personnel as necessary.
EOC MGMT.	Conduct "Pre-Event Briefing" of EOC Staff members as appropriate.
OEM	Test all critical communication systems. Maintain the ability to rapidly communicate with Los Angeles Operational Area, special districts and adjacent cities.
OEM	Maintain communications with related private sector agencies for status changes.
PIO	Coordinate PIO coverage of the condition in HSAS.
PIO	Provide Emergency Digital Information Service alert as needed.
All Depts.	Coordinate necessary security efforts with law enforcement agencies.
All Depts.	Review building evacuation plans.
All Depts.	Review mail handling/package delivery procedures.

City of Agoura Hills Operations

DEPTS.	ACTIONS
All Depts.	Review information system security issues including remote access capabilities.
All Depts.	Review emergency reporting procedures.
All Depts.	Track apparatus and equipment availability.
All Depts.	Test rapid employee notification procedures/systems.
All Depts.	Take additional precautions at public events.
All Depts.	Prepare to work at an alternate site or with a dispersed workforce.
All Depts.	Consider restricting access to critical facilities to essential personnel only.
All Depts.	Prepare to immediately implement the Severe (Red) Threat Condition measures.

RED (Severe Condition).

A Severe Condition reflects a <u>severe risk of terrorist attacks.</u> Under most circumstances, the protective measures for a Severe Condition are not intended to be sustained for substantial periods of time. In addition to the protective measures taken in the previous Threat Conditions, departments and agencies should consider the following general measures in addition to the department/agency specific protective measures that they have developed and implemented. The City EOC will be activated to **Mid** or **Full**, depending on the local assessment.

EOC ACTIONS

DEPT.	ACTIONS
Fire	Coordinate with Sheriff Intelligence to obtain an assessment of the impact the condition has on the City.
Fire, Sheriff, OEM	Coordinate receipt of HSAS change.
OEM	Log receipt of Advisory into EMIS.
Sheriff Chief, C.M	Activate the EOC in accordance with <i>HSAS threat level</i> , <i>with</i> guidance from the EOC Management Staff.
OEM	Activate EMIS for communication with the Los Angeles County Operational Area. Begin with entering information into a Status Report.
Fire, Sheriff, OEM	Test all critical communication systems. Maintain the ability to rapidly communicate with Los Angeles County Operational Area, City departments, and adjacent cities.
OEM	Maintain communications with related private sector agencies.
EOC Mgmt. and PIO	Contact Sheriff Intelligence for appropriate information, prepare press release and have PIOs conduct media briefings.
PIO	Provide EDIS alert.
EOC Mgmt.	Coordinate with FAA regarding air space restrictions.
EOC Mgmt.	Review applicability of proclaiming a local State of Emergency.

DEPT.	ACTIONS
PIO	Coordinate PIO coverage of the HSAS condition.
All Depts.	Alert emergency response personnel and any appropriate specially trained personnel.
All Depts.	Assign emergency response personnel as appropriate, mobilize and pre- position specially trained teams or resources if appropriate.
All Depts.	Monitor transportation systems within your jurisdiction.
All Depts.	Consider closing public and government facilities. Institute 100% identification checks in facilities that are not closed.
All Depts.	Increase or redirect personnel to address critical emergency needs.
All Depts.	Activate your Department Operations Center.
All Depts.	Consider canceling large scale public events if their security cannot be enhanced.
All Depts.	Monitor all communications. (TV, radio, e-mail, EMIS)
All Depts.	Prepare to downgrade back to the High Condition (Orange) when conditions indicate.

CITY OF AGOURA HILLS

LIST OF FACILITIES TO USE AS SHELTERS

Please refer to the Appendix Section of this Plan for this information. Due to the sensitive nature of this information it has been moved to the restricted use section of the Plan.

CITY OF AGOURA HILLS

CRISIS COUNSELING (CISD) FOR EMERGENCY RESPONDERS

Please refer to the Logistics Section – Support Documentation – LS 15 for this information. While the Care and Shelter Unit is in the Operations Section, Crisis Counseling will be managed by the Logistics Personnel UL with subsequent processing and completion by the City Manager's Office, Personnel Services.

RESIDENTIAL CARE AND SKILLED NURSING FACILITIES

Please refer to the Appendix Section of this Plan for this information. Due to the sensitive nature of this information it has been moved to the restricted use section of the Plan.

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SHELTER-IN-PLACE

These instructions are to give you guidelines if the EOC needs to shelter-in-place due to hazardous materials exposure from outside the EOC. These instructions could also be used by the Public Information Officer to disseminate information about how to shelter in place during a hazardous materials incident.

(These instructions could be adapted to earthquake situation.)

-Bring people inside and-

- 1. Close all doors to the outside and close and lock all windows (windows sometimes seal better when locked).
- 2. Use tape and plastic food wrapping, wax paper, or aluminum wrap to cover and seal bathroom exhaust fan grilles, range vents, dryer vents, and other openings to the outside to the extent possible (including any obvious gaps around external windows and doors).
- 3. Where possible, ventilation systems should be turned off. Where this is not possible, building superintendents should set all ventilation systems to 100 percent recirculation so that no outside air is drawn into the structure.
- 4. Turn off all heating systems.
- 5. Turn off all air conditioners and switch inlets to the "closed" position. Seal any gaps around window-type air conditioners with tape and plastic sheeting, wax paper, or aluminum wrap.
- 6. Turn off all exhaust fans in kitchens, bathrooms and other areas.
- 7. Close as many internal doors as possible in your buildings.
- 8. If the gas or vapor is soluble or even partially soluble in water, hold a wet cloth or handkerchief over your nose and mouth if the gases start to bother you. Don't worry about running out of air to breathe. That is highly unlikely in normal buildings.
- 9. In case of an earthquake, after shocks will occur so close drapes, curtains and shades over windows. Stay away from external windows to prevent potential injury from flying glass.
- 10. Minimize the use of elevators in buildings. These tend to "pump" outdoor air in and out of a building as they travel up and down. Elevators can also fail.
- 11. Tune in to your local radio news station.

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DISABILITY AND AGING SPECIFIC NEEDS CONSIDERATIONS

(Based on the National Organization on Disability (NOD) Report on Special Needs Assessment for Katrina Evacuees (SNAKE) Project).

TERMINOLOGY

- "Disability and aging specific" should be used instead of "special needs".
- <u>Shelters</u>
 - General Populations Shelter or Shelter: A facility selected to provide a safe haven equipped to house, feed, provide a first aid level of care, and minimal support services on a short-term basis (e.g. Astrodome).
 - <u>Special Needs Shelter or Medical Needs Shelter</u>: Similar to a general population shelter in service, however, can provide a higher than first aid level of care. There is currently no standard or consistency with these types of shelters.
 - <u>Refuge of Last Resort</u>: This is a facility not equipped with supplies or staff like a shelter. It is a place to go as a "last resort" when there is no alternative left in which one can get out of harm's way. These are often spontaneous.
- **Disaster Recovery Center** (DRC) is a facility established in, or in close proximity to, the community affected by the disaster where persons can meet face-to-face with represented federal, state, local, and volunteer agencies to:
 - Discuss their disaster-related needs
 - Obtain information about disaster assistance programs
 - Teleregister for assistance
 - Update registration information
 - Learn about measures for rebuilding that can eliminate or reduce the risk of future loss
 - Learn how to complete the SBA loan application
 - Request the status of their application for Assistance to Individuals and Households

FINDINGS

- Shelter selections should be conducted prior to need, allowing for an inventory of facilities with the most accessible elements available.
- All people should have a plan in place to shelter with friends and family. A medical needs shelter is a place of last resort.

- Most of the disability and aging specific population have no policies, plans or understand any guidelines for accommodations prior to the disaster.
- Half of the disability and aging specific population don't have any working agreements in place with disability and aging organizations.
- 86% of Community Based groups questioned during Katrina did not know how to link with the local emergency management system.
- Red Cross intake process only minimally identifies people with "special needs".
- The most underserved group were those who are deaf or hard of hearing. Less than 30% of shelters had access to American Sign Language interpreters, 80% did not have TTY's and 60% did not have TVs with open caption capability. Only 56% of shelters had areas where oral announcements were posted so people who were deaf, hard of hearing or out of hearing range could go to a specified area to get or read the content of announcements.

MAJOR ISSUES AND RECOMMENDATIONS

Immediate Issues

I-1: Disability, Activity Limitations and Aging Issues Addressed Through Medical Model

Assistance provided to disability and aging populations often over-emphasizes medicine instead of independent living or advocacy models. This perspective resulted in some people being separated from families and support networks and transferred unnecessarily to medical shelters or nursing homes. Others were not identified because of the lack of trained eyes as well as the lack of or inadequate screening questions. This caused some individuals' conditions to deteriorate to the point that they did require transfer to a hospital, nursing home, or medical shelter. Early response service coordination offered through disability literate organizations could have prevented many of these transfers.

Disability and aging specific populations who need long-term services must have the right to receive such services in the community. The Katrina aftermath must not lead to a reversal of options where people who have been able to live independently with community-based services are forced into institutions in order to receive necessary services.

Recommendations:

- Utilize the skill sets and expertise of disability specific and aging organizations to help prevent deterioration, expensive hospitalizations, or nursing home placements for some evacuees.
- Assist people in quickly replacing critical durable medical equipment (DME) and essential medications to speed a return of their level of functioning, allowing them to manage independently in a general population shelter and in temporary housing.

- Continue to provide the services, support benefits and programs, including Medicaid, to maintain the integrity of the family unit and to allow individuals to live in the community as they rebuild their lives.
- Add questions during all intake processes (shelter, American Red Cross or FEMA applications, and/or other services) that help to identify needs and/or issues of disability and aging individuals. This will allow for more appropriate assistance, referrals, and long-term solutions.
- Ensure that disaster relief services include Federal financing to provide *medically necessary* long-term services in community settings.

I-2: Fiscal Impact on Disability and Aging Specific Organizations Involved In Response

Disability and aging specific organizations who are heavily involved in the Katrina response effort are reporting that their budgets are being depleted.

Recommendation:

- Provide these organizations with supplemental government funding to continue their critical role in the response effort.
- Like after 9/11, philanthropic organizations wishing to contribute need to know about the unintended disaster consequences to front line service organizations that are providing necessary services at the risk of financial damage to the long-term health of their own organization. There is a clear need and a gap to be filled. A cautionary lesson from 9/11 addressed by the Disability Funders Network is that these well intentioned givers need to enlist subject matter experts to assess their giving decisions to be sure that funds are appropriately donated and distributed to organizations providing value-added services in concert with the overall response and recovery system.

I-3: No Use and Under-Use Of Disability and Aging Organizations

The immediate Katrina response reflected no use or, under-use of and sometimes just ignored offers of help from disability and aging specific organizations. There is often no designated entity or individual to "own" and coordinate disability and aging issues.

Each community based organization that was interviewed reported difficulty in gaining access to emergency management authorities to coordinate response and service delivery. This leads to sometimes well intentioned but misguided actions only adding to the management difficulties on the ground.

Recommendation:

• Create a team that mirrors the management structure of the National Response Plan to be put in place to support disability and senior issues. The federal level must have a designated person for these issues who reports directly to the Principal Federal Officer (PFO). This person must have the operational emergency management experience as they become apparent during the response and recovery operation. He/she must be vested with the responsibility,

authority, and resources for providing overall day-to-day leadership, guidance and coordination of all emergency preparedness, disaster relief and recovery operations of the federal government on behalf of disability and senior populations. He/she should be in regular contact with other members of the U.S. Department of Homeland Security (DHS) senior staff, including the Director of FEMA as well as the members of the Interagency Coordinating Council on Emergency Preparedness for People with Disabilities, state and local authorities.¹ He/she should work directly with an Assistant Field Command Officer (FCO), at each established Joint Field Office (JFO), someone who is focused on special needs issues with an operational background, as well as an expertise in the subject matter. This allows for a means and mechanism for issues to be brought up the command chain for resolution. This Assistant FCO would then be supported by a multi-jurisdictional team of similarly qualified experts in the field. Teams should consist of federal, state, and local (or regional) representatives who are knowledgeable in emergency management and disability and aging services.

The teams will oversee information dissemination, resource allocation, and service coordination among disability and aging organizations and address issues such as accessible transportation, essential durable medical needs, enrolling of students in temporary special education classes and employment, etc.

The team on the ground would include people with expertise/advocacy backgrounds in the state and local communities (and services available in such communities) to which these individuals should have access, and be present in shelters, temporary housing and other assistance centers. The team would institute information systems for people with disabilities and seniors, identify their support/service needs, and their access to needed supports services.

The teams must be skilled in assessing the general health, well-being and access to support and services needed by the disability and aging populations found in shelters and temporary settings.

They must also be able to orient quickly shelter personnel and emergency managers regarding these needs. This is not unprecedented, as this is exactly what was done after 9/11 in the DASC and the DFO so that service agencies and people working face-to-face in the communities had this awareness training.

While there were numerous government and non-profit agencies doing assessments in the field (e.g. Louisiana Department of Health and Hospitals), it is apparent that there is

¹ The response to Katrina was coordinated on many levels of government. As such, while the SNAKE Teams were conducting the research and analysis for this report, several efforts within the disability community were able to become reality. One of these efforts was the agreement of US Homeland Security Secretary Chertoff to send a special needs expert to act as liaison with the PFO located in Baton Rouge and Houston to address the Katrina and Rita response and recovery issues for the special needs population. The Interagency Coordinating Council on Emergency Preparedness and People with Disabilities was able to see this effort through and it is our hope that a qualified special needs expert becomes a permanent part of the PFO team for disaster response.

no unified approach for coordinating this work. The above structure would help to coordinate the many resources that can be placed in the field.

I-4: Disaster Recovery Centers

FEMA officials reported a plan to open a disaster recovery center ("mega DRC") in Houston sometime during the week of September 19th. They are planning to include agencies from all levels of government as well as not-for-profit and community based organizations but must ensure that disability and senior organizations are represented.

Recommendations:

- FEMA, in coordination with local and state authorities, should invite disability and senior groups to participate in the planning, and secure space in the facility. These centers must incorporate local, state, and Federal disability and aging organizations and services into their service delivery process in order to assist with transitioning from shelters to temporary and/or permanent housing, and accessing an array of other services.
- These organizations must develop mechanisms to coordinate with each other to maximize resources and eliminate duplication of effort. One such effort that can be modeled in a DRC is the system established by the 9/11 United Services Group in New York City. Multiple service organizations came together to coordinate casework, service delivery, and to identify and resolve gaps in services. This allowed for the most appropriate assignments while eliminating duplicative efforts and resources.
- Allow opportunities for cross-training so that organizations become familiar with existing programs and can make appropriate referrals.
- Recognizing that not all individuals go to the disaster centers, descriptions of services should be disseminated using multiple communication arteries (radio, TV, internet, fax sheets, posters, etc.).

I-5: Emergency Information Needed In an Accessible Format

Broadcasters and public emergency management agencies continue to fall short in their responsibilities to modify their information procedures. The FCC's rules require that accessible information be made available to members of the disability community in times of emergency. Section 79.2 of the FCC's rules require that emergency information be provided in an accessible format. The rules further require that all critical details must be made accessible. Critical details include, but are not limited to, specific details regarding the areas that will be affected by the emergency, evacuation orders, detailed descriptions of areas to be evacuated, specific evacuation routes, approved shelters or the way to take shelter in one's home, instructions on how to secure personal property, road closures, and how to obtain relief assistance.

Recommendations:

• The FCC must immediately issue strong statements that remind video programming distributors, including broadcasters, cable operators, and satellite

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television services that they must comply with their obligation to make emergency information accessible to people with hearing and vision disabilities.

• The FCC needs to acknowledge that these requirements (given the scope of Hurricane Katrina) need to continue in the recovery phase because information is still just as crucial in the aftermath as it is during the response and recovery phases. Communication should include impacted states and areas taking in the evacuees.

Long-Term Issues:

LT-6: Service Coordination

Many people need assistance with activities of daily living (i.e. dressing, feeding, toileting, and for some, assistance with activities requiring judgment, decision-making, and planning), as well as, in some cases, primary medical care. Individuals frequently require assistance in arranging services and coordinating among multiple providers. The aftermath of Hurricane Katrina has led to large-scale displacement that has interrupted the networks of support that individuals with disabilities have. People will need knowledgeable help in arranging essential services in new environments with limited contacts and little knowledge of local resources. At the same time individuals seek assistance in arranging and coordinating services while they are scrambling to meet other essential needs such as housing and access to food.

Recommendation: See Issue #4 Recommendations to address this issue.

LT-7: Accessible transportation

To start the recovery process, accessible transportation is critical for some people with disabilities. In many cases, accessible transportation did not appear to be available.

Recommendations:

- Ensure locations selected are serviced by accessible transportation.
- Public transit agencies should ensure that all transportation between shelters, housing and disaster relief centers is accessible.

LT-8: Cross Training

Disability and aging specific advocates and service providers need to strengthen their understanding of emergency management local and state systems. In order to improve effectiveness, they need a quick orientation to emergency management organizations and structure, as well as to the roles of traditional recovery organizations such as FEMA, the American Red Cross, and other Voluntary Agencies Active in Disaster (VOAD).

Likewise, emergency managers need to strength their understanding of disability and aging populations. This falls into many different areas including donations management, sheltering, feeding, service delivery, etc.

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The misguided impression that aging and disability issues is not of concern to general shelter managers was a stated assumption expressed by several shelter managers. There must be a realization that all shelters, emergency managers and disaster relief centers, serve disability and aging populations even if not specifically articulated in their task assignment or mission statement. People with disabilities do have various disability-specific needs (e.g., transferring from wheelchair to cot, providing guidance to a blind person through crowds to the restroom) that are not burdensome and that shelter staff can be trained to perform. Many of these people do not need medical shelters or segregated services. However, many of these people are in need of a variety of complex, and sometimes not well understood, community services to reestablish and piece segments of their lives back together.

Recommendation:

- Both emergency managers and disability and aging specific organization should engage in some quick cross orientation/training meetings.
- Emergency management staff should acquire basic knowledge of the emergency management local and state systems.
- Use disability and aging specific organizations to strengthen responders understanding of:
 - Which organizations can offer what services under what conditions.
 - People with disabilities are not a homogenous group but rather have differing capabilities, opinions, needs, and circumstances, and no one individual or organization speaks for all people with disabilities.

LT-9: Durable Medical Equipment (DME)

People with disabilities were sometimes forced to leave expensive DME (augmentative communication devices, wheelchairs, walkers, respirators, etc.) at airports, bus loading areas, shelters, etc. Customized power chairs can cost up \$30,000 - \$40,000.

Recommendations

- When transporting individuals, make every effort not to separate users from their DME's.
- Tag with the owner's name all DME not easily replaced or that must be left behind.
- Attempt to return a DME to an owner as soon as possible. Use systems similar to posting missing children's photos on specific web sites.
- Vendors and responders should look to the National Emergency Resource Registry that was recently expanded as a direct result of the impact of Hurricanes Katrina and Rita.
- Consider creation of a national stockpile of DME or add to the Centers For Disease Control Strategic National Stockpile to ensure readily available supplies of durable medical goods would be available to communities.

LT-10: Finding Accessible, Affordable, Safe Housing and Communities

Finding accessible, affordable, safe housing and communities has never been easy for people who live with mobility and activity limitations. Even before Katrina, there was a serious shortage of housing options for people with disabilities. Post Katrina, the task of finding temporary and permanent housing and communities will be even more difficult.

The immediate and long-term rebuilding process offers a unique opportunity to build, on an unprecedented scale, accessible communities and accessible and adaptable housing. This will help thousands of people with disabilities maintain or improve their ability to live independently and will enable hundreds of thousands of people, regardless of disability, to age-in-place as they acquire activity limitations. This includes the wave of baby boomers that begin turning 65 in 2006.

Lack of accessible housing opportunities for individuals with disabilities does and will continue to result in unnecessary and expensive institutionalization. Available data discloses that the costs of providing appropriate housing options for people with disabilities is well worth the investment because of the significant savings that results from enabling people with disabilities to live in the community, find employment, and pay taxes.

Recommendations:

- As a rebuilding measure in the Gulf Coast States, government should make all funding requests contingent on changes in building codes to stress accessibility for persons with disabilities, including:
 - The US Access Board's new construction and alterations guidelines ADA Accessibility Guidelines (ADAAG) for Recreation Facilities. The guidelines will ensure that newly constructed and altered recreation facilities meet the requirements of the ADA and are readily accessible to and usable by individuals with disabilities.
 - ADA and ABA Accessibility Guidelines (5/7/14) that update access requirements for a wide range of facilities in the public and private sectors as covered by the law.
 - The US Access Board's draft guidelines regarding public rights-of-way which cover pedestrian access to sidewalks and streets, including crosswalks, curb ramps, street furnishings, pedestrian signals, parking, and other components of public rights-of-way.
- Offer significant tax incentives for the design and construction of housing and other buildings and facilities that adopt visitability standards.
- Establish regulations that incorporate a basic level of universal access with at least one, zero-step entrance and wide interior doors in every new home and multi-family dwelling units financed in whole or part by Federal funding.

- Facilitate immediate collaboration between disability design experts familiar with universal design concepts and contracting Federal officers who will promulgate and enforce regulations involved in construction of temporary and permanent housing.
- Create significant tax incentives for the design and construction of universally accessible or adaptable temporary and permanent housing GOING BEYOND the minimum requirements found in the Fair Housing Act Amendments of 1988.

Policy Issues:

P-11: Gulf Opportunity Zone

President Bush has proposed the creation of a Gulf Opportunity Zone, encompassing the disaster region in Louisiana, Mississippi and Alabama. Within this zone, incentives for jobcreation, tax relief for small businesses, and loans and loan guarantees for small businesses, including minority-owned enterprises would assist in getting the region up and running again.

Recommendation:

• When the Enterprise Zone is created ensure that the interest of people with disabilities and seniors is specifically included in the criteria for funding.

P-12: Medicaid Is a Critical Benefit

Medicaid is a critical benefit for a significant number of people with disabilities including individuals with physical or sensory impairments, mental illness, mental retardation, autism and other developmental disabilities, cerebral palsy, epilepsy, traumatic brain injury, HIV/AIDS, diabetes and other chronic conditions. Because Medicaid and its comprehensive benefits package is the predominant provider of disability-related services, it has a unique capacity to meet the needs of people with disabilities in the aftermath of Hurricane Katrina.

Many people with disabilities will need to reestablish support networks in the areas where they have been relocated. This is especially important for people with serious mental illness, many of whom rely on a therapeutic regimen that creates stability in their lives. Given the emotional trauma and toll following Hurricane Katrina, it is wise to anticipate new mental health needs resulting from post traumatic stress disorder, increased incidence or increased severity of anxiety disorders, depression, alcohol and substance abuse. The variation in Medicaid coverage limits for mental health services from state to state presents additional challenges.

Recommendations:

- Legislation is proposed to provide disaster relief Medicaid to all affected survivors. This approach is critical to people with disabilities. A streamlined application process with self-certification must be included in order to direct Medicaid resources to providing services and not to administering a complex eligibility determination process.
- Federal policy must ensure that broad access is available for current recommended treatments, including access to needed medications and treatment for alcohol and substance abuse. Coverage for these services must be available to survivors even in cases where the need for services is in excess of typical benefit limits.

FEDERAL

FAMILY ASSISTANCE PLAN FOR AVIATION DISASTERS



PREPARED BY THE NATIONAL TRANSPORTATION SAFETY BOARD

OFFICE OF TRANSPORTATION DISASTER ASSISTANCE

REVISED

December 2008

City of Agoura Hills

Operations Support Documentation

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PURPOSE

This plan, which is designed to serve as guidance, assigns responsibilities and describes how air carriers and Federal agencies should respond to an aviation accident involving a significant number of passenger fatalities and/or injuries. Organizations given authority or responsibility by legislation should develop procedures specific to their role. Supporting legislation is located in appendix A.

IMPLEMENTATION

This plan shall be executed in full or part by the Director, Office of Transportation Disaster Assistance (TDA), under the direction of the Chairman, National Transportation Safety Board (NTSB).

1. The Director shall recommend to the Chairman activation of the plan or portions thereof.

2. Federal agencies that have responsibilities under this plan shall maintain control of their resources while supporting the NTSB in accordance with the above references. (For purposes of this document, the terms "Federal agencies" and "Federal staff" include the American Red Cross.)

3. The NTSB, through its communications center, will initiate notification of Federal agencies to activate planning and will coordinate with the air carrier an appropriate response based on the magnitude of the aviation accident. As factual information about the accident is confirmed, additional resources may be requested to support the overall family assistance response. Upon instruction by the Director, the NTSB communications center will notify any or all of the following operations centers:

- a. American Red Cross
- b. Department of State (DOS)
- c. Department of Health and Human Services (DHHS) Secretary's Operations

Center

- d. Federal Bureau of Investigation Operations Center (FBI–SIOC)
- e. Federal Emergency Management Agency (FEMA)
- f. Department of Defense (DOD)
- g. Department of Homeland Security (DHS)

4. Under the Aviation Disaster Family Assistance Act of 1996, the NTSB serves as the coordinator for the integration of Federal government resources and the resources of other organizations to support efforts of local and State governments and the air carrier to meet the needs of aviation disaster victims and their families. Crisis intervention, victim identification and forensic services, communication with foreign governments, and

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translation services are among Federal government services available to help local authorities and the air carrier respond to a major aviation disaster. Local government emergency services should provide a representative from the Joint Family Support Operations Center (JFSOC) to participate in the local, air carrier, and Federal response. Details of the JFSOC are provided in appendix C. The layout of the JFSOC will depend on the facilities and rooms available near the disaster location.

5. Local authorities maintain the same jurisdictional responsibilities in regard to the initial accident response, recovery, security, site cleanup, and medical examiner operations, and the NTSB leads the aviation accident investigation. If a criminal act is believed to have caused the accident, the FBI becomes the lead investigative agency and is supported by the NTSB.

6. The air carrier has a fundamental responsibility to victims and their families affected by an aviation disaster. The air carrier is primarily responsible for family notification and all aspects of victim and family logistical support. The Aviation Disaster Family Assistance Act of 1996 (appendix A) and the Foreign Air Carrier Family Support Act (appendix A) place the air carrier, as well as other support organizations, in a collaborative relationship with families.

7. All personnel involved in providing services to assist victims and their family members should be trained in crisis response and must demonstrate compassion, technical expertise, and professionalism. Personal information provided by family members and victims through discussions, interviews, counseling, or any other form of information exchange should remain confidential and shall not be used for future litigation purposes.

SCOPE

This plan pertains to any domestic or foreign commercial aviation accidents occurring within the United States, its territories, possessions, and territorial seas.

ASSUMPTIONS

- 1. The Chairman of the NTSB will request Federal agencies to support the NTSB in accordance with the references included in appendix A.
- 2. Pursuant to the Aviation Disaster Family Assistance Act of 1996, the NTSB has the primary Federal responsibility for facilitating victim recovery and identification. It is understood that the presiding medical examiner or coroner is legally responsible for victim recovery and identification. (It is noted that there are differences between a medical examiner and coroner. For the purposes of this document, the term "medical examiner" is used interchangeably with "coroner.") To ensure adequate resources for medical examiners to accomplish their jurisdictional responsibilities, the NTSB coordinates the resources of various Federal agencies to effect victim recovery and identification. The NTSB supports the use of State and local mass fatality teams and other trained experience personnel under the direction of the medical examiner.
- 3. For purposes of this document, the terms "family," "family members," "friends," and "relatives" are used to refer to those people who have a relationship to a person involved in the accident. Although these terms have slightly different meanings, they are used interchangeably throughout the document.
- 4. Large numbers of family members of those killed in the accident will travel to the city closest to the accident and will utilize the accommodations provided by the air carrier. Other family members will remain at their local residences.
- 5. Most, if not all, families of those seriously injured will travel to where the injured are hospitalized; once the injured are released from the hospital, these family members and the injured will return home.
- 6. Implementation of this plan assumes that the accident will occur in a geographical area where the resources described above are available. Air carriers operating equipment over remote areas (for instance, Alaska) should contact NTSB TDA about modifications needed for accident response in those locations.

GENERAL MISSION TASKS

The family assistance mission tasks following an aviation accident are as follows:

- 1. Notify family members of victims involved in the aviation accident based on manifest documents and other available information.
- 2. Monitor search and recovery operations, and offer assistance as needed.
- 3. Determine the status and location of injured victims.
- 4. Obtain approval of the local medical examiner for Federal assistance (for instance, the Disaster Mortuary Operational Response Team [DMORT]) to assist in the identification of fatalities and the notification of their families.
- 5. Provide crisis intervention, logistical support, and services to victims and their family members.
- 6. Provide daily briefings to families on the progress of recovery efforts, identification of victims, the investigation, and other areas of concern.
- 7. Arrange for a memorial service, if desired by families.
- 8. Provide for the return of personal effects.
- 9. Maintain contact with victims and their families to provide continuous updates regarding the progress of the investigation and other related matters, both at the accident location and once the families have returned home.

RESPONSIBILITIES

Seven Victim Support Tasks (VSTs) identify the response requirements assigned to participating organizations. The organizations responsible for each of the seven VSTs are as follows:

VST 1–NTSB

VST 2–Air Carrier

- VST 3– American Red Cross (Family Care and Mental Health)
- VST 4– DHHS/ASPR and DOD (Victim Identification Services)
- VST 5–DOS (Assisting Families of Foreign Victims)
- VST 6–DHS/FEMA (Communications)
- VST 7–DOJ (Assisting Victims of Crime)

Because each aviation accident is unique, the following responsibilities may be employed fully, partially, or not at all.

VICTIM SUPPORT TASK 1–National Transportation Safety Board

- 1. Coordinate Federal assistance and serve as a liaison between the air carrier and family members.
- 2. Provide an NTSB toll-free number and e-mail address (800) 683-9369 &assistance@ntsb.gov) to family members for obtaining information on the victim recovery and identification effort, accident investigation, and other concerns. This number will normally be provided to families during the final family briefing. The NTSB will coordinate with the air carrier to provide, through the air carrier's family representatives, this contact information to families who do not travel to the accident city.
- 3. Request a copy of the passenger manifest from the air carrier.
- 4. Review with the air carrier the logistical needs of the families, giving special consideration to security, quality of hotel rooms and facilities, and privacy for family members.
- 5. Integrate local and Federal government officials and air carrier staff to form a JFSOC to coordinate services and activities for families.
- 6. Coordinate assistance efforts with local and State authorities, including the medical examiner, local/county/State law enforcement, emergency management agency, hospitals, and other emergency support personnel.
- 7. Maintain communications with the air carrier to receive updates regarding the notification status of victims' families.
- 8. Conduct daily coordination meetings with the air carrier and local and Federal government representatives to review daily activities, resolve problems, and synchronize future family support operations and activities. See appendix D for an example of information required for the daily coordination meeting.
- 9. Provide and coordinate family briefings both with families at the accident city and with families who remain at home.
- 10. Discuss with the medical examiner the capabilities of his or her staff to conduct victim identification. Examine the capabilities of local/State mass fatality teams and procedures to use the team in the identification process. Discuss strategies for collecting antemortem information and other factors influencing victim identification. Discuss the use of DMORT and standard procedures DMORT uses that support NTSB efforts.
- 11. Discuss with the medical examiner the subject of victim identification, in particular the use of DNA analysis. Explain that the NTSB typically coordinates with the Armed Forces DNA Identification Laboratory for DNA identification.
- 12. At the discretion of the NTSB Investigator in Charge (IIC), coordinate a visit to the accident site for family members. Planning for such a visit will begin only after the IIC agrees that such a visit will not impede the investigation and is believed to be safe for family members.

- 13. Provide information releases to the media, in coordination with the NTSB Office of Public Affairs, pertaining to the types of Federal support available to assist family members.
- 14. Maintain contact with family members to keep them informed about the victim recovery and identification effort, accident investigation, and other accident-related concerns.
 - a. Approximately 6 to 8 months after the date of the accident, factual reports written by the NTSB investigators are made available in a public docket. Families should be informed prior to the factual report being made public that they may request a copy of the report from the NTSB. The report will be provided to them at no cost.
 - b. If the NTSB decides a public hearing is necessary for the purpose of the investigation, families will be notified of the date, time, and location. Such a hearing is designed to gather additional facts from individuals selected to testify. Travel and lodging for the hearing is at the family's expense. Families will be provided seating and copies of official exhibits discussed at the hearing. NTSB public hearings are broadcast via the Internet through the NTSB website at www.ntsb.gov.

Vision 100 states the following:

An assurance that, in the case of an accident in which the National Transportation Safety Board conducts a public hearing or comparable proceeding at a location greater than 80 miles from the accident site, the air carrier will ensure that the proceeding is made available simultaneously by electronic means at a location open to the public at both the origin city and destination city of the air carrier's flight if that city is located in the United States. [49 USC 41113 (b) (18)] Based on the facts of the accident, location requirements will be reviewed on a case-by-case basis.

c. Families will be informed of the date, time, and location of any Board meeting to be held at the NTSB, Washington, D.C., headquarters (travel will be at the families' expense). At the meeting, the NTSB investigative staff will present to the Board a draft accident report for member discussion and approval. This report will document the NTSB's findings, determination of the probable cause of the accident and recommendations to prevent future aviation disasters. Board meetings are broadcast via the Internet through the NTSB website (www.ntsb.gov). See VST 2 "Air Carrier", number 30, and to the Vision 100 legislation [49 USC 41113 (b) (18)] for additional information.

- 15. If the accident is determined to be the result of a criminal act, the NTSB TDA staff may assist the FBI Office for Victim Assistance (OVA) in family assistance support.
- 16. Consolidate and review After Action Reports (AARs) to resolve problem areas and update operating plans and procedures.

VICTIM SUPPORT TASK 2–Air Carrier

- 1. In addition to accident notification required by Title 49 Code of Federal Regulations (CFR) 830.5, notify the NTSB communications center immediately upon knowledge of an accident. The following information must be provided:
 - Place (or general vicinity) of accident, number of passengers and crew (based on preliminary departure information), and number of injuries and fatalities (if known).
 - Flight number, origination, connection points, final destination, demographics of passengers (if known), and whether the flight was domestic or international.
 - Name and telephone number of the person/persons in charge of the air carrier's humanitarian response, passenger manifest reconciliation, and family notification process.
 - Name, telephone number, and location of the facility designated as the Family Assistance Center (FAC) and JFSOC.
- 2. Provide the NTSB, upon request, the most current reconciled copy of the passenger manifest. Each copy should be numbered or annotated indicating the date and time so that it is distinguishable from previous copies.
- 3. Provide a reliable publicized toll-free telephone number with sufficient capacity to handle the anticipated call volume. Although not required, consider providing teletypewriter (TTY) capability.
- 4. When disseminating the toll-free number, ask the media to request that the tollfree number be used only by those who have reason to believe a family member or friend was a passenger on the accident flight.
- 5. Emphasize in the media notice that, upon initial contact with the air carrier, family members will receive basic accident flight and point-of-contact information as the first steps of air carrier humanitarian support.
- 6. Ask the media to reemphasize the name of the carrier(s) involved, the accident flight number, airport of origination, connection, and final destination.

7. Provide the media with continuous updates on the progress of the notification process, such as providing the number of victims' families notified as of a certain time and the number

Modify your carrier's normal "on-hold" messages during an accident to eliminate music, sales information, and similar non-accident related messages.

- 9. Provide timely notification to family members of passengers. As required by AIR 21, at a family member's request, inform the family if the passenger's name appears on a preliminary manifest for the accident flight. Updated information on passengers will be provided to family members as it becomes available. (AIR 21 states the following: "...upon request of the family of a passenger, the air carrier will inform the family of whether the passenger's name appeared on a preliminary passenger manifest for the flight involved in the accident.")
- 10. Provide notification to family members prior to releasing passenger names to the public. Give family members adequate time to notify other family members and friends prior to public release of the victim's name. Although it may be necessary for some families to have more than one contact point with the air carrier, your carrier may request that families designate one primary contact point for purposes of sharing information. This will allow your carrier to use its personnel in a more efficient manner. The carrier is under no obligation to release the victim's name if family members request otherwise.
- 11. Inform family members at the time of notification or soon thereafter of American Red Cross family care and crisis assistance available at the FAC and after families return home. Relay requests for crisis assistance to the American Red Cross representative, who will coordinate on-scene or home area contacts for family members. For family members who do not travel to the accident location, the American Red Cross personnel on-scene can coordinate personnel at the family member's location to provide assistance.
- 12. Secure facilities at departure, arrival, and connecting airports for family members and friends who may be gathering. This facility is designed to allow family members to grieve in private, shielding them from the media and solicitors; it serves as a secure location where families can receive continuous updates regarding the reconciliation of the passenger manifest and other accident information. Be prepared to provide the necessary assistance to special needs populations per the American with Disabilities Act (ADA). Arrange for one of your carrier's employees or agents who has been trained in crisis response to meet privately with family members once they have arrived at the facility secured. Employees or agents should be prepared to inform family members that their loved ones were aboard a plane that crashed.
- 13. Secure a facility to be used as the FAC. Factors to consider in selecting a facility are quality of rooms and size of facility, privacy for family members, ability to secure the facility, and proximity to the accident site and medical treatment facilities. See appendix B.
- 14. Make provisions for a JFSOC to include space, communication, and logistical support for the local and Federal staff. Details of the JFSOC are provided in appendix C

- 15. Provide logistical support to family members who desire to travel to the accident city (or to a hospital location) that includes, but is not limited to, transportation, lodging, meals, security, communications, and incidental expenditures.
- 16. Assist family members as they travel to and from the city by informing flight crews and airport personnel about family members aboard particular flights. At departure, connecting, and arrival airports, family members should have air carrier personnel meet and assist them while on airport grounds. If necessary, seek assistance from other carriers with a larger presence at the airport. Assist family members as they depart the accident city and provide a contact person who will continue to be the air carrier's interface with family members following their return to their residence.
- 17. Provide a contact person to meet family members as they arrive and accompany them at the accident city. This person will be responsible for assisting the family while in the accident city and should continue to be the air carrier interface with the family until the family returns to their residence. At that time the air carrier may decide to designate a single contact person for all family members. This point of contact should be available through a toll-free phone number.
- 18. Maintain daily contact with family members who do not travel to the accident city by providing a contact person from the air carrier until the on-site investigation has concluded.
- 19. Designate an individual who will be the air carrier's representative to the Director of NTSB TDA. This individual will travel to various locations, such as the accident site, morgue, JFSOC, and FAC with the Director of NTSB TDA. The designated individual should have the authority, or ready access to those who have sufficient authority, to make decisions on behalf of the air carrier.
- 20. Establish an exclusive badge system to identify family members. In unique cases, the NTSB, in coordination with the air carrier, will decide on the specifications of the badging system.
- 21. Participate and provide operational updates during daily coordination meetings to review daily activities, resolve problems, and synchronize future family support operations and activities at the FAC. This information is helpful in planning logistical support (such as meals, lodging, and transportation) and allows for an update of current and future support operations. The type of information typically discussed during the daily coordination meetings is located in appendix D.
- 22. Make provisions for private areas within the hotel for medical examiner personnel and the DMORT FAC Team to collect antemortem information and DNA reference samples from families. Provide quiet space and communications for DMORT and medical examiner personnel to telephonically collect antemortem information from family members who are not at the FAC. Secure a sufficient number of rooms for DMORT/crisis counseling use. Based on NTSB experience, the number of rooms required ranges from 4 to 12, depending on the number of fatalities.

- 23. Be aware that crisis counseling and DMORT facilities are also used as venues to inform families when positive identification has been made. By having the medical examiner or DMORT team representative located within the FAC, transportation of victim's remains and other logistical considerations can be better coordinated. Support requirements for planning purposes are in appendix C.
- 24. Provide DOS representatives the necessary information regarding foreign passengers to facilitate interaction with appropriate foreign government embassies.
- 25. Establish a liaison with the American Red Cross at each medical treatment facility to monitor the status of injured victims and to provide assistance to their families.
- 26. Develop procedures for the handling of personal effects released by the NTSB or the FBI if the aviation disaster is declared a criminal act. Consider utilizing a third party that has experience in the return of personal effects associated with aviation disasters. As required by law, provisions will be made for unclaimed possessions to be retained for at least 18 months from the date of the accident. NTSB has developed guidelines for the on-scene search for personal effects.
- 27. Consult with family members about any air carrier–sponsored monument, including any inscriptions.
- 28. As required by the Aviation Disaster Family Assistance Act of 1996, provide reasonable reimbursement to the American Red Cross for the services provided to the family, air carrier, and supporting personnel.
- 29. Provide the same support and treatment to families of non-revenue passengers or any other victim of the accident (for instance, ground fatalities) as is provided for revenue passengers.
- 30. If the NTSB conducts a public hearing or comparable proceeding at a location more than 80 miles from the accident site, ensure that a simultaneous transmission of the proceeding is available to family members at a location open to the public at both the origin city and destination city of the accident flight.
- 31. In the event of an accident outside the United States, AIR 21 legislation requires "...in the event that the air carrier volunteers assistance to United States citizens within the United States with respect to an aircraft accident outside the United States involving major loss of life, the air carrier will consult with the Board and the Department of State on the provision of the assistance."
- 32. In the event the investigation determines the accident is the result of a criminal act, coordinate with the FBI OVA in arranging meetings with family members to explain their rights as victims of a Federal crime.

VICTIM SUPPORT TASK 3–American Red Cross–Family Care and Mental Health

- 1. An American Red Cross Critical Response Team (CRT) is deployed from the American Red Cross National Headquarters Disaster Operations Center (DOC) and serves as the functional leadership of family care and crisis intervention during the aviation accident. The CRT will support the local American Red Cross response and manage any spontaneous volunteers.
- 2. Assign a representative to the JFSOC to coordinate and address American Red Cross–related issues and family requests for assistance.
- 3. Coordinate and manage the numerous organizations and personnel offering counseling, religious and other support services to the operation. Create a staff processing center, operated away from the FAC, to screen, monitor, and manage personnel (employee and volunteer staff). The staff processing center will also be responsible for developing an exclusive badge system for personnel, matching staff skills with organizational needs, assigning work schedules, briefing and debriefing of support staff, and planning for future activities.

a. Qualified local resources should be integrated with American Red Cross personnel for crisis and grief counseling, food services, administrative assistance, and other support services to family members and support organizations.

b. Crisis and grief counseling for family members who travel to the accident city should be coordinated with air carrier personnel.

- 4. Employ an accounting system to accurately record cost data in specific cost categories for reimbursement by the air carrier.
- 5. Assess the needs and available resources of other crisis support agencies, coordinate with them to ensure ongoing emotional support for workers during the operation, and provide exit interviews before departure.
- 6. Establish a liaison with the air carrier at each supporting medical treatment facility to monitor the status of injured victims and to provide assistance to their families.
- 7. Coordinate with the air carrier to establish areas in the FAC for families to grieve privately.
- 8. If deemed necessary, deploy a Critical Response Childcare Team (CRC) to coordinate on-site childcare services for families who arrive with young children. Ensure the CRC Team is equipped with the necessary supplies to operate a childcare center along with specially trained staff qualified to attend to children in the aftermath of a traumatic disaster.
- 9. If deemed necessary, deploy a Spiritual Care Response Team (SRT) to coordinate on-site spiritual care. The SRT is trained to provide spiritual care to an array of faiths and will manage spiritual care for the victims and their families. If desired by the families, the SRT will coordinate the planning for a suitable interfaith memorial service within the first few days following the accident. The SRT deploys an events manager to begin planning the

memorial service upon a request from the family members. The American Red Cross Events Manager will work closely with the NTSB, the air carrier, and local, county, and State governments to plan a suitable memorial site. The American Red Cross will also deploy a Life Safety and Asset Protection manager to the JFSOC to manage safety and security concerns related to the memorial.

- 10. If deemed necessary, arrange a memorial service for any future burial of unidentified remains.
- 11. Provide families, at their request, with referrals to mental health professionals and support groups in the family member's local area.
- 12. Provide additional support to affected special needs or other demographically or culturally diverse populations as deemed necessary.

VICTIM SUPPORT TASK 4–Department of Health and Human Services, Assistant Secretary for Preparedness and Response–Victim Identification Services

- 1. At the time of an accident and following notification by the NTSB, activate the National Disaster Medical System (NDMS) and the appropriate DMORT team personnel, supplies, and equipment to assist in the management of victim identification.
- 2. Assign a representative to the JFSOC to address DMORT-related issues.
- 3. Assign the necessary DMORT team members to assist the medical examiner with victim identification and mortuary services. The configuration of team and skills required will be determined by the details of the accident and the capabilities of the local medical examiner.
- 4. Follow the "DMORT Standard Operating Procedures for National Transportation Safety Board Activations."
- 5. Provide, if necessary, a morgue facility, a DMORT Portable Morgue Unit (DPMU), and the necessary equipment and supplies to augment the local medical examiner's capabilities.
- 6. Monitor the status of all incoming antemortem records to include dental, medical, and DNA data to ensure that all records have been received. If not, take steps to obtain the records and radiographs.
- 7. Employ a standard antemortem questionnaire and disposition of remains form that can be adapted to meet local medical examiner and State requirements. The disposition of remains form will be used to obtain directions from the lawfully authorized next of kin (NOK) regarding what he or he desires the medical examiner to do with remains that may later be identified as those of his or her family member. Information collected from family members is strictly confidential and is ultimately under the control of the medical examiner.

- 8. Using a specially trained FAC team, interview family members who are both on and off site for information regarding antemortem identification and disposition of remains.
- 9. Coordinate with the medical examiner to integrate qualified personnel who are providing assistance to the medical examiner's office into the morgue operation.
- 10. If necessary, assist the medical examiner in notifying family members of positive identification, including an explanation of how identification was determined.
- 11.Ensure the accuracy of the chain of custody by performing a check of documentation and remains prior to their release to the designated funeral director.
- 12. Assist the medical examiner with the re-association of remains following the identification process. This may occur weeks or months after the accident.
- 13. Using information gathered from the antemortem interview, provide the NTSB with contact information for the NOK (addresses, telephone numbers, e-mail addresses) and the NOK's relationship to the victim.

Support of VST 4–Department of Defense–Victim Identification Services (As required)

- 1. Provide the use of a military installation, such as the Charles C. Carson Center for Mortuary Affairs located at the Dover Air Force Base, to support mortuary operations.
- 2. Provide resources from the Office of the Armed Forces Medical Examiner (OAFME) and Armed Forces DNA Identification Laboratory (AFDIL) to assist in the identification effort and to conduct appropriate DNA comparison testing on specimens submitted by the medical examiner. OAFME and AFDIL personnel may be asked to travel to the accident site to assist with victim identification.
- 3. Provide available medical and dental records and DNA reference samples of fatally injured passengers who may have antemortem records based on prior or current military service.

VICTIM SUPPORT TASK 5–Department of State–Assisting Families of Foreign Victims (As required)

 Assign a representative to the JFSOC to coordinate DOS-related issues with other members of the operations center staff. Assist in obtaining dental and medical records and DNA reference samples from foreign families. Respond to family member requests for information and assistance as appropriate. Provide additional personnel as needed for accidents involving significant numbers of foreign passengers, particularly those involving international flights.

- 2. Provide official notification to foreign governments of citizens involved in the accident. Such notifications will take place after obtaining necessary information on foreign passengers from the air carrier.
- 3. Assist the air carrier in notifying US citizens who may reside or are traveling outside the United States that a member of their family has been involved in an aviation accident.
- 4. Provide interpretation/translation services (via DOS staff or a contracted provider) to facilitate communications with the victim's family and all interested parties. For family briefings held at the FAC or similar location or activity, provide simultaneous interpretation/translation services in multiple languages as needed.
- 5. Provide logistical and communications support to the extent practicable, in establishing contact with foreign authorities and individuals abroad to aid the air carrier and Federal support staff in fulfilling their duties under the laws referenced above.
- 6. Assist foreign air carrier employees and families of foreign victims with entry into the United States and with the extension or granting of visas to eligible applicants.
- 7. Facilitate necessary consulate and customs services for the return of remains and personal effects to the country of destination.
- 8. Assist the medical examiner in acquiring the necessary information to facilitate the identification of foreign victims and to complete death certificates.

VICTIM SUPPORT TASK 6–Department of Homeland Security/ Federal Emergency Management Agency–Communications (As required)

- 1. Assign a representative to the JFSOC to coordinate with local and State officials concerning emergency management–related issues.
- 2. Provide voice and data communication assets to facilitate communication from the accident site to the NTSB Communications Center.
- 3. Upon the request of the NTSB Office of Public Affairs, provide personnel to assist in public information dissemination, to include assistance in establishing and staffing external media support centers at the accident site, wreckage hangar, FAC, airport, and other areas that may attract media interest.

VICTIM SUPPORT TASK 7–Department of Justice–Assisting Victims of Crime (As required)

- 1. Provide to the NTSB, upon request, an FBI Disaster Squad with sufficient personnel to obtain fingerprint identification of accident fatalities. This team will work with the medical examiner and the DMORT personnel at the morgue location.
- 2. Provide to the NTSB, upon request, an FBI Evidence Response Team (ERT) and other FBI Laboratory assets to assist with victim recovery operations under the direction of the medical examiner.
- 3. Provide to the NTSB, upon request, FBI Office for Victim Assistance Rapid Deployment Team (VARDT) members to assist the NTSB TDA in unique circumstances, such as simultaneous accident responses.
- 4. Perform the following responsibilities only if the air carrier disaster is officially declared a criminal act:
 - a. Coordinate Federal assistance and serve as the liaison between the air carrier and family members.
 - b. Provide an FBI toll-free number for family members to obtain information on the victim recovery and identification effort, investigation, and other concerns. This number will normally be provided to families on site during the initial family briefing and repeated in subsequent briefings. Coordinate with the air carrier to have air carrier family representatives provide the tollfree number to the families who do not travel to the accident city.
 - c. Establish a special web page for the victims' families for the purpose of sharing updated information and maintaining ongoing communication with victims and families throughout the duration of the investigation.
 - d. Review with the air carrier logistical family support with special consideration toward security, quality of rooms and facilities, and privacy for family members.
 - e. Oversee the establishment and management of the JFSOC and the FAC. Information on FAC operations can be found in appendix B.
 - f. Integrate local and Federal government officials and air carrier staff to form a JFSOC to facilitate close coordination of services and activities.
 - g. Assist the air carrier, if requested, with finding NOK that have not been notified of their family member's involvement.
 - h. Conduct daily coordination meetings with the air carrier and local and Federal government representatives to review daily activities, resolve problem areas, and

to synchronize future family support operations and activities. Examples of information needed at the daily coordination meeting are in appendix D.

- i. Provide and coordinate family briefings for family members at the accident city and for those who remain at home. Conduct in-person family briefings at the FAC. Conduct briefings for off-site families via telephone conference bridges.
- j. Provide information to victims and families regarding their rights and available services related to their status as victims of a Federal crime.
- k. Maintain contact with family members to keep them informed about the progress of the investigation and to continue to meet their future needs.

COORDINATING INSTRUCTIONS

- 1. The point of contact for this plan is the Director, Transportation Disaster Assistance, NTSB. The telephone number is (202) 314-6185. The office fax number is (202) 459-9402.. The e-mail address is assistance@ntsb.gov.
- 2. Upon implementation and until NTSB TDA staff is present at the JFSOC, calls should be directed to the NTSB communications center. The Communications center will pass any information or messages to the appropriate NTSB TDA staff member.
- 3. Supporting agencies should appoint the same individual or individuals to the JFSOC for each aviation accident. The focused efforts of a group of experienced personnel who understand the complex issues of an aviation disaster response will lead to improved delivery of services to victims and their families. Agencies are not precluded from designating and training alternate personnel as long as inexperienced personnel are partnered with experienced personnel during the response.
- 4. It is recommended that all Federal personnel involved at the accident site wear clothing (e.g. hats, shirts, and/or jackets) identifying their agency or group. This is helpful for families and those involved in supporting the operation.
- 5. Agencies providing support to victims and their family members under this plan are requested to submit an AAR to the Director, NTSB TDA, within 60 days of completion of their tasks. The report is critical for capturing lessons learned, taking corrective actions, and updating plans. A sample format is provided in appendix E.
- 6. Other than media releases by the air carrier regarding the progress of family notification and the release of passengers' names as described in VST 2, item 9, all media inquiries and releases pertaining to the NTSB TDA operation will be referred to the NTSB Office of Public Affairs. The NTSB will advise and assist the local medical examiner regarding any media affairs related to his or her area of responsibility. Support organizations may provide press releases or briefings on their specific mission/actions during the accident response. There are no restrictions on victims or family members meeting with the media if they so desire.
- 7. Due to differences among air carriers and air carrier underwriter policies, as well as differences among aviation accidents, consideration for reimbursement of costs associated with an agency's participation in an aviation disaster response will be made after discussions with the air carrier and its insurance underwriter.

LIST OF APPENDICES

Appendix A–Aviation Disaster Family Assistance Act of 1996, Foreign Air Carrier Family Support Act of 1997, AIR 21, and Vision 100

- Appendix B–Family Assistance Center Operations
- Appendix C–Joint Family Support Operations Center
- Appendix D–Joint Family Support Operations Center Daily Status Report Information
- Appendix E–Sample After Action Report Format
- Appendix F–Victim Identification Information
- Appendix G–Victim Support Tasks–Checklists
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Appendix J–References

Appendix K–List of Acronyms

APPENDIX A

Aviation Disaster Family Assistance Act of 1996

SEC. 701. SHORT TITLE.

This title may be cited as the "Aviation Disaster Family Assistance Act of 1996."

SEC. 702. ASSISTANCE BY NATIONAL TRANSPORTATION SAFETY BOARD TO FAMILIES OF PASSENGERS INVOLVED IN AIRCRAFT ACCIDENTS.

(a) Authority To Provide Assistance.--

(1) In general.--Subchapter III of chapter 11 is amended by adding at the end the following:

"Sec. 1136. Assistance to families of passengers involved in aircraft accidents

"(a) In General.--As soon as practicable after being notified of an aircraft accident within the United States involving an air carrier or foreign air carrier and resulting in a major loss of life, the Chairman of the National Transportation Safety Board shall-

"(1) designate and publicize the name and phone number of a director of family support services who shall be an employee of the Board and shall be responsible for acting as a point of contact within the Federal Government for the families of passengers involved in the accident and a liaison between the air carrier or foreign air carrier and the families; and

"(2) designate an independent nonprofit organization, with experience in disasters and post trauma communication with families, which shall have primary responsibility for coordinating the emotional care and support of the families of passengers involved in the accident.

"(b) Responsibilities of the Board.--The Board shall have primary Federal responsibility for facilitating the recovery and identification of fatally-injured passengers involved in an accident described in subsection (a).

"(c) Responsibilities of Designated Organization.--The organization designated for an accident under subsection (a)(2) shall have the following responsibilities with respect to the families of passengers involved in the accident:

"(1) To provide mental health and counseling services, in coordination with the disaster response team of the air carrier or foreign air carrier involved.

"(2) To take such actions as may be necessary to provide an environment in which the families may grieve in private.

"(3) To meet with the families who have traveled to the location of the accident, to contact the families unable to travel to such location, and to contact all affected families periodically thereafter until such time as the organization, in consultation with the director of family support services designated for the accident under subsection (a)(1), determines that further assistance is no longer needed.

"(4) To communicate with the families as to the roles of the organization, government agencies, and the air carrier or foreign air carrier involved with respect to the accident and the post-accident activities.

"(5) To arrange a suitable memorial service, in consultation with the families.

"(d) Passenger Lists .--

"(1) Requests for passenger lists.--

"(A) Requests by director of family support services.--It shall be the responsibility of the

director of family support services designated for an accident under subsection (a)(1) to request, as soon as practicable, from the air carrier or foreign air carrier involved in the accident a list, which is based on the best available information at the time of the request, of the names of the passengers that were aboard the aircraft involved in the

accident.

"(B) Requests by designated organization.—The organization designated for an accident under subsection (a)(2) may request from the air carrier or foreign air carrier involved in the accident a list described in subparagraph (A).

"(2) Use of information.--The director of family support services and the organization may not release to any person information on a list obtained under paragraph (1) but may

provide information on the list about a passenger to the family of the passenger to the extent that the director of family support services or the organization considers appropriate.

"(e) Continuing Responsibilities of the Board.--In the course of its investigation of an accident described in subsection (a), the Board shall, to the maximum extent practicable, ensure that the families of passengers involved in the accident--

"(1) are briefed, prior to any public briefing, about the accident, its causes, and any other findings from the investigation; and

"(2) are individually informed of and allowed to attend any public hearings and meetings of the Board about the accident.

"(f) Use of Air Carrier Resources.--To the extent practicable, the organization designated for an accident under subsection (a)(2) shall coordinate its activities with the air carrier or foreign air carrier involved in the accident so that the resources of the carrier can be used to the greatest extent possible to carry out the organization's responsibilities under this section.

"(g) Prohibited Actions.--

"(1) Actions to impede the board.--No person (including a State or political subdivision) may impede the ability of the Board (including the director of family support services designated for an accident under subsection (a)(1)), or an

organization designated for an accident under subsection (a)(2), to carry out its responsibilities under this section or the ability of the families of passengers involved in the accident to have contact with one another.

"(2) Unsolicited communications.--In the event of an accident involving an air carrier providing interstate or foreign air transportation, no unsolicited communication concerning a potential action for personal injury or wrongful

death may be made by an attorney or any potential party to the litigation to an individual injured in the accident, or to a relative of an individual involved in the accident, before the 30th day following the date of the accident.

"(h) Definitions.--In this section, the following definitions apply:

"(1) Aircraft accident.--The term `aircraft accident' means any aviation disaster regardless of its cause or suspected cause.

"(2) Passenger.--The term `passenger' includes an employee of an air carrier aboard an aircraft.."

(2) Conforming amendment.--The table of sections for such chapter is amended by inserting after the item relating to section 1135 the following:

"1136. Assistance to families of passengers involved in aircraft accidents."

(b) Penalties.--Section 1155(a)(1) of such title is amended--(1) by striking "or 1134(b) or (f)(1)" and inserting ",section 1134(b), section 1134(f)(1), or section 1136(g)"; and (2) by striking "either of" and inserting "any of."

SEC. 703. AIR CARRIER PLANS TO ADDRESS NEEDS OF FAMILIES OF PASSENGERS INVOLVED IN AIRCRAFT ACCIDENTS.

(a) In General.--Chapter 411 is amended by adding at the end the

following:

"Sec. 41113. Plans to address needs of families of passengers involved

in aircraft accidents

"(a) Submission of Plans.--Not later than 6 months after the date of the enactment of this section, each air carrier holding a certificate of public convenience and necessity under section 41102 of this title shall submit to the Secretary and the Chairman of the National Transportation Safety Board a plan for addressing the needs of the families of passengers involved in any aircraft accident involving an

aircraft of the air carrier and resulting in a major loss of life.

"(b) Contents of Plans.--A plan to be submitted by an air carrier under subsection (a) shall include, at a minimum, the following:

"(1) A plan for publicizing a reliable, toll-free telephone number, and for providing staff, to handle calls from the families of the passengers.

"(2) A process for notifying the families of the passengers, before providing any public notice of the names of the passengers, either by utilizing the services of the

organization designated for the accident under section 1136(a)(2) of this title or the services of other suitably trained individuals.

"(3) An assurance that the notice described in paragraph (2) will be provided to the family of a passenger as soon as the air carrier has verified that the passenger was aboard the aircraft (whether or not the names of all of the passengers have

been verified) and, to the extent practicable, in person.

"(4) An assurance that the air carrier will provide to the director of family support services designated for the accident under section 1136(a)(1) of this title, and to the organization designated for the accident under section 1136(a)(2) of this

title, immediately upon request, a list (which is based on the best available information at the time of the request) of the names of the passengers aboard the aircraft (whether or not such names have been verified), and will periodically update the list.

"(5) An assurance that the family of each passenger will be consulted about the disposition of all remains and personal effects of the passenger within the control of the air carrier.

"(6) An assurance that if requested by the family of a passenger, any possession of the passenger within the control of the air carrier (regardless of its condition) will be returned to the family unless the possession is needed for the accident investigation or any criminal investigation.

"(7) An assurance that any unclaimed possession of a passenger within the control of the air carrier will be retained by the air carrier for at least 18 months.

"(8) An assurance that the family of each passenger will be consulted about construction by the air carrier of any monument to the passengers, including any inscription on the monument.

"(9) An assurance that the treatment of the families of nonrevenue passengers (and any other victim of the accident) will be the same as the treatment of the families of revenue passengers.

"(10) An assurance that the air carrier will work with any organization designated under section 1136(a)(2) of this title on an ongoing basis to ensure that families of passengers receive an appropriate level of services and assistance following each accident.

"(11) An assurance that the air carrier will provide reasonable compensation to any organization designated under section 1136(a)(2) of this title for services provided by the organization.

"(12) An assurance that the air carrier will assist the family of a passenger in traveling to the location of the accident and provide for the physical care of the family while the family is staying at such location.

"(13) An assurance that the air carrier will commit sufficient resources to carry out the plan.

"(c) Certificate Requirement.--After the date that is 6 months after the date of the enactment of this section, the Secretary may not approve an application for a certificate of public convenience and necessity under section 41102 of this title unless the applicant has included as part of such application a plan that meets the requirements of subsection (b).

"(d) Limitation on Liability.--An air carrier shall not be liable for damages in any action brought in a Federal or State court arising out of the performance of the air carrier in preparing or providing a passenger list pursuant to a plan submitted by the air carrier under subsection (b), unless such liability was caused by conduct of the air carrier which was grossly negligent or which constituted intentional

misconduct.

"(e) Aircraft Accident and Passenger Defined.--In this section, the terms `aircraft accident' and `passenger' have the meanings such terms have in section 1136 of this title.."

(b) Conforming Amendment.--The table of sections for such chapter is

amended by adding at the end the following:

"41113. Plans to address needs of families of passengers involved in

aircraft accidents."

SEC. 704. ESTABLISHMENT OF TASK FORCE.

(a) Establishment.--The Secretary of Transportation, in cooperation

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with the National Transportation Safety Board, the Federal Emergency

Management Agency, the American Red Cross, air carriers, and families

which have been involved in aircraft accidents shall establish a task

force consisting of representatives of such entities and families,

representatives of air carrier employees, and representatives of such

other entities as the Secretary considers appropriate.

(b) Guidelines and Recommendations.--The task force established

pursuant to subsection (a) shall develop--

(1) guidelines to assist air carriers in responding to aircraft accidents;

(2) recommendations on methods to ensure that attorneys and representatives of media organizations do not intrude on the privacy of families of passengers involved in an aircraft accident;

(3) recommendations on methods to ensure that the families of passengers involved in an aircraft accident who are not citizens of the United States receive appropriate assistance;

(4) recommendations on methods to ensure that State mental health licensing laws do not act to prevent out-of-state mental health workers from working at the site of an aircraft accident or other related sites;

(5) recommendations on the extent to which military experts and facilities can be used to aid in the identification of the remains of passengers involved in an aircraft accident; and

(6) recommendations on methods to improve the timeliness of the notification provided by air carriers to the families of passengers involved in an aircraft accident, including--

(A) an analysis of the steps that air carriers would have to take to ensure that an accurate list of passengers on board the aircraft would be available within 1 hour of the accident and an analysis of such steps to ensure that such list would be available within 3 hours of the accident;

(B) an analysis of the added costs to air carriers and travel agents that would result if air carriers were required to take the steps described in subparagraph (A);

(C) an analysis of any inconvenience to passengers, including flight delays, that would result if air carriers were required to take the steps described in

subparagraph (A); and

(D) an analysis of the implications for personal privacy that would result if air carriers were required to take the steps described in subparagraph (A).

(c) Report.--Not later than 1 year after the date of the enactment of this Act, the Secretary shall transmit to Congress a report containing the model plan and recommendations developed by the task force under subsection (b).

Foreign Air Carrier Family Support Act of 1997

Public Law 105-148, 105th Congress

To amend title 49, United States Code, to require the National Transportation Safety Board and individual foreign air carriers to address the needs of families of passengers involved in aircraft accidents involving foreign air carriers.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. PLANS TO ADDRESS NEEDS OF FAMILIES OF PASSENGERS INVOLVED IN FOREIGN AIR CARRIER ACCIDENTS.

(a) In General.--Chapter 413 of title 49, United States Code, is amended by adding at the end the following:

"Sec. 41313. Plans to address needs of families of passengers involved

in foreign air carrier accidents

"(a) Definitions.--In this section, the following definitions apply:

"(1) Aircraft accident.--The term `aircraft accident' means any aviation disaster, regardless of its cause or suspected cause, that occurs within the United States; and

"(2) Passenger.--The term `passenger' includes an employee of a foreign air carrier or air carrier aboard an aircraft.

"(b) Submission of Plans.--A foreign air carrier providing foreign

air transportation under this chapter shall transmit to the Secretary of Transportation and the Chairman of the National Transportation Safety Board a plan for addressing the needs of the families of passengers involved in an aircraft accident that involves an aircraft under the control of the foreign air carrier and results in a significant loss of life.

"(c) Contents of Plans.--To the extent permitted by foreign law which was in effect on the date of the enactment of this section, a plan submitted by a foreign air carrier under subsection (b) shall include the following:

"(1) Telephone number.--A plan for publicizing a reliable, toll-free telephone number and staff to take calls to such number from families of passengers involved in an aircraft accident that involves an aircraft under the control of the foreign air carrier and results in a significant loss of life.

"(2) Notification of families.--A process for notifying, in person to the extent practicable, the families of passengers involved in an aircraft accident that involves an aircraft under the control of the foreign air carrier and results in a

significant loss of life before providing any public notice of the names of such passengers. Such notice shall be provided by using the services of--

"(A) the organization designated for the accident under section 1136(a)(2); or

"(B) other suitably trained individuals.

"(3) Notice provided as soon as possible.--An assurance that the notice required by paragraph (2) shall be provided as soon as practicable after the foreign air carrier has verified the identity of a passenger on the foreign aircraft, whether or

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not the names of all of the passengers have been verified.

"(4) List of passengers.--An assurance that the foreign air carrier shall provide, immediately upon request, and update a list (based on the best available information at the time of the request) of the names of the passengers aboard the aircraft (whether or not such names have been verified), to--

"(A) the director of family support services designated for the accident under section 1136(a)(1); and

"(B) the organization designated for the accident under section 1136(a)(2).

"(5) Consultation regarding disposition of remains and effects.--An assurance that the family of each passenger will be consulted about the disposition of any remains and personal effects of the passenger that are within the control of the

foreign air carrier.

"(6) Return of possessions.--An assurance that, if requested by the family of a passenger, any possession (regardless of its condition) of that passenger that is within the control of the foreign air carrier will be returned to the family unless the possession is needed for the accident investigation or a criminal investigation.

"(7) Unclaimed possessions retained.--An assurance that any unclaimed possession of a passenger within the control of the foreign air carrier will be retained by the foreign air carrier for not less than 18 months after the date of the accident.

"(8) Monuments.--An assurance that the family of each passenger will be consulted about construction by the foreign air carrier of any monument to the passengers built in the United States, including any inscription on the monument.

"(9) Equal treatment of passengers.--An assurance that the treatment of the families of nonrevenue passengers will be the same as the treatment of the families of revenue passengers.

"(10) Service and assistance to families of passengers. --An assurance that the foreign air carrier will work with any organization designated under section 1136(a)(2) on an ongoing basis to ensure that families of passengers receive an

appropriate level of services and assistance following an accident.

"(11) Compensation to service organizations.--An assurance that the foreign air carrier will provide reasonable compensation to any organization designated under section 1136(a)(2) for services and assistance provided by the organization.

"(12) Travel and care expenses.--An assurance that the foreign air carrier will assist the family of any passenger in traveling to the location of the accident and provide for the physical care of the family while the family is staying at such

location.

"(13) Resources for plan.--An assurance that the foreign air carrier will commit sufficient resources to carry out the plan.

"(14) Substitute measures.--If a foreign air carrier does not wish to comply with paragraph (10), (11), or (12), a description of proposed adequate substitute measures for the requirements of each paragraph with which the foreign air

carrier does not wish to comply.

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"(d) Permit and Exemption Requirement.--The Secretary shall not approve an application for a permit under section 41302 unless the applicant has included as part of the application or request for exemption a plan that meets the requirements of subsection (c).

"(e) Limitation on Liability.--A foreign air carrier shall not be liable for damages in any action brought in a Federal or State court arising out of the performance of the foreign air carrier in preparing or providing a passenger list pursuant to a plan submitted by the foreign air carrier under subsection (c), unless the liability was

caused by conduct of the foreign air carrier which was grossly negligent

or which constituted intentional misconduct."

(b) Conforming Amendment.--The table of sections for such chapter is amended by adding at the end the following:

"41313. Plans to address needs of families of passengers involved in

foreign air carrier accidents."

(c) Effective Date.--The amendments made by this section shall take effect on the 180th day following the date of the enactment of this Act.

"AIR 21"

Public Law 106-181, 106th Congress

To amend title 49, United States Code, to reauthorize programs of the

Federal Aviation Administration, and for other purposes.

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) Short note. Title.--This Act may be cited as the "Wendell H. Ford Aviation Investment and Reform Act for the 21st Century."

TITLE IV--FAMILY ASSISTANCE

SEC. 401. RESPONSIBILITIES OF NATIONAL TRANSPORTATION SAFETY BOARD.

(a) Prohibition on Unsolicited Communications.-- (1) In general.--Section 1136(g)(2) is amended—

(A) by striking "transportation," and inserting "transportation and in the event of an accident involving a foreign air carrier that occurs within the

United States,";

(B) by inserting after "attorney" the following:

"(including any associate, agent, employee, or other representative of an attorney)"; and

(C) by striking "30th day" and inserting "45th day."

(2) Enforcement.--Section 1151 is amended by inserting "1136(g)(2)," before "or 1155(a)" each place it appears.

(b) Prohibition on Actions To Prevent Mental Health and Counseling Services.--Section 1136(g) is amended by adding at the end the following:

"(3) Prohibition on actions to prevent mental health and counseling services.--No State or political subdivision thereof may prevent the employees, agents, or volunteers of an organization designated for an accident under subsection (a)(2)

from providing mental health and counseling services under subsection (c)(1) in the 30-day period beginning on the date of the accident. The director of family support services designated for the accident under subsection (a)(1) may extend such period for not to exceed an additional 30 days if the director determines that the extension is necessary to meet the needs of the families and if State and local authorities are notified of the determination."

(c) Inclusion of Nonrevenue Passengers in Family Assistance Coverage.--Section 1136(h)(2) is amended to read as follows:

"(2) Passenger.--The term `passenger' includes--

"(A) an employee of an air carrier or foreign air carrier aboard an aircraft; and

"(B) any other person aboard the aircraft without regard to whether the person paid for the transportation, occupied a seat, or held a reservation for the flight."

(d) Statutory Construction.--Section 1136 is amended by adding at the end the following:

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"(i) Statutory Construction.--Nothing in this section may beconstrued as limiting the actions that an air carrier may take, or the obligations that an air carrier may have, in providing assistance to the families of passengers involved in an aircraft accident."

SEC. 402. AIR CARRIER PLANS.

(a) Contents of Plans.--

(1) Flight reservation information.--Section 41113(b) is amended by adding at the end the following:

"(14) An assurance that, upon request of the family of a passenger, the air carrier will inform the family of whether the passenger's name appeared on a preliminary passenger manifest for the flight involved in the accident."

(2) Training of employees and agents.--Section 41113(b) is

further amended by adding at the end the following:

"(15) An assurance that the air carrier will provide

adequate training to the employees and agents of the carrier to

meet the needs of survivors and family members following an accident."

(3) Consultation on carrier response not covered by plan.--

Section 41113(b) is further amended by adding at the end the following:

"(16) An assurance that the air carrier, in the event that the air carrier volunteers assistance to United States citizens within the United States with respect to an aircraft accident outside the United States involving major loss of life, the air carrier will consult with the Board and the Department of State on the provision of the assistance."

(4) Submission <<NOTE: 49 USC 41113 note.>> of updated plans.--The amendments made by paragraphs (1), (2), and (3) shall take effect on the 180th day following the date of the enactment of this Act. On or before such 180th day, each air carrier holding a certificate of public convenience and necessity under section 41102 of title 49, United States Code, shall submit to the Secretary and the Chairman of the National Transportation Safety Board an updated plan under section 41113 of such title that meets the requirements of the amendments made

by paragraphs (1), (2), and (3). (5) Conforming amendments.--Section 41113 is amended--(A) in subsection (a) by striking "Not later than 6 months after the date of the enactment of this section, each air carrier" and inserting "Each air carrier"; and (B) in subsection (c) by striking "After the date that is 6 months after the date of the enactment of this section, the Secretary" and inserting "The Secretary." (b) Limitation on Liability.--Section 41113(d) is amended by inserting ", or in providing information concerning a preliminary passenger manifest," before "pursuant to a plan." (c) Statutory Construction.--Section 41113 is amended by adding at the end the following: "(f) Statutory Construction .-- Nothing in this section may be construed as limiting the actions that an air carrier may take, or the

obligations that an air carrier may have, in providing assistance to the families of passengers involved in an aircraft accident."

SEC. 403. FOREIGN AIR CARRIER PLANS.

(a) Inclusion of Nonrevenue Passengers in Family Assistance Coverage.--Section 41313(a)(2) is amended to read as follows:

"(2) Passenger.--The term `passenger' has the meaning given such term by section 1136."

(b) Accidents for Which Plan Is Required.--Section 41313(b) is amended by striking "significant" and inserting "major."

(c) Contents of Plans.--

(1) In general.--Section 41313(c) is amended by adding at the end the following:

"(15) Training of employees and agents.--An assurance that the foreign air carrier will provide adequate training to the employees and agents of the carrier to meet the needs of

survivors and family members following an accident.

"(16) Consultation on carrier response not covered by plan.--An assurance that the foreign air carrier, in the event that the foreign air carrier volunteers assistance to United States citizens within the United States with respect to an aircraft accident outside the United States involving major loss of life, the foreign air carrier will consult with the Board and the Department of State on the provision of the assistance."

(2) Submission <<NOTE: 49 USC 41313 note.>> of updated plans.--The amendment made by paragraph (1) shall take effect on the 180th day following the date of the enactment of this Act.

On or before such 180th day, each foreign air carrier providing foreign air transportation under chapter 413 of title 49, United States Code, shall submit to the Secretary and the Chairman of the National Transportation Safety Board an updated plan under section 41313 of such title that meets the requirements of the amendment made by paragraph (1).

SEC. 404. DEATH ON THE HIGH SEAS.

(a) Right of Action in Commercial Aviation Accidents.--The first section of the Act of March 30, 1920 (46 U.S.C. App. 761; popularly known as the "Death on the High Seas Act") is amended--

(1) by inserting "(a) subject to subsection (b)," before "whenever"; and

(2) by adding at the end the following:

"(b) In the case of a commercial aviation accident, whenever the death of a person shall be caused by wrongful act, neglect, or default occurring on the high seas 12 nautical miles or closer to the shore of any State, or the District of Columbia, or the Territories or

dependencies of the United States, this Act shall not apply and the rules applicable under Federal, State, and other appropriate law shall apply.."

(b) Compensation in Commercial Aviation Accidents .--

Section 2 of such Act (46 U.S.C. App. 762) is amended--

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(1) by inserting "(a)" before "the recovery"; and

(2) by adding at the end the following:

"(b)(1) If the death resulted from a commercial aviation accident

occurring on the high seas beyond 12 nautical miles from the shore of

any State, or the District of Columbia, or the Territories or dependencies of the United States, additional compensation for nonpecuniary damages for wrongful death of a decedent is recoverable. Punitive damages are not recoverable.

"(2) In this subsection, the term `nonpecuniary damages' means damages for loss of care, comfort, and companionship.."

(c) Effective <<NOTE: 46 USC app. 761 note.>> Date.--The amendments made by subsections (a) and (b) shall apply to any death occurring after July 16, 1996.

"Vision 100"

SEC. 809. AVAILABILITY OF AIRCRAFT ACCIDENT SITE INFORMATION.

(a) DOMESTIC AIR TRANSPORTATION.—Section 41113(b) is

amended-

(1) in paragraph (16) by striking "the air carrier" the third

place it appears; and

(2) by adding at the end the following:

"(17)(A) An assurance that, in the case of an accident that results in significant damage to a manmade structure or other property on the ground that is not government-owned,

the air carrier will promptly provide notice, in writing, to the extent practicable, directly to the owner of the structure or other property about liability for any property damage and

means for obtaining compensation.

"(B) At a minimum, the written notice shall advise an owner (i) to contact the insurer of the property as the authoritative source for information about coverage and compensation;

(ii) to not rely on unofficial information offered by air carrier representatives about compensation by the air carrier for accident-site property damage; and (iii) to obtain photographic or other detailed evidence of property damage as soon as possible

after the accident, consistent with restrictions on access to the accident site.

"(18) An assurance that, in the case of an accident in which the National Transportation Safety Board conducts a public hearing or comparable proceeding at a location greater

than 80 miles from the accident site, the air carrier will ensure that the proceeding is made available simultaneously by electronic means at a location open to the public at both the

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origin city and destination city of the air carrier's flight if that city is located in the United States.."

(b) FOREIGN AIR TRANSPORTATION.—Section 41313(c) is amended by adding at the end the following:

"(17) NOTICE CONCERNING LIABILITY FOR MANMADE STRUCTURES.—

"(A) IN GENERAL.—An assurance that, in the case of an accident that results in significant damage to a manmade structure or other property on the ground that is not government-owned, the foreign air carrier will promptly provide notice, in writing, to the extent practicable, directly to the owner of the structure or other property about liability for any property damage and means for obtaining compensation.

"(B) MINIMUM CONTENTS.—At a minimum, the written notice shall advise an owner (i) to contact the insurer of the property as the authoritative source for information

about coverage and compensation; (ii) to not rely on unofficial information offered by foreign air carrier representatives about compensation by the foreign air carrier for

accident-site property damage; and (iii) to obtain photographic or other detailed evidence of property damage as soon as possible after the accident, consistent with restrictions

on access to the accident site.

"(18) SIMULTANEOUS ELECTRONIC TRANSMISSION OF NTSB HEARING.— An assurance that, in the case of an accident in which the National Transportation Safety Board conducts a public hearing or comparable proceeding at a location greater

than 80 miles from the accident site, the foreign air carrier will ensure that the proceeding is made available simultaneously by electronic means at a location open to the public

at both the origin city and destination city of the foreign air carrier's flight if that city is located in the United States.."

(c) UPDATE PLANS.—Air carriers and foreign air carriers shall update their plans under sections 41113 and 41313 of title 49, United States Code, respectively, to reflect the amendments made by subsections (a) and (b) of this section not later than 90 days

after the date of enactment of this Act.

APPENDIX B

Family Assistance Center Operations

The Family Assistance Center (FAC) is the focus of services for family members when they travel to the accident location. FACs are designed to meet the immediate and short-term needs of family

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members: safety, security, physiological needs (food, sleep), information (about the victim recovery and identification process, and the investigation), and crisis/grief counseling. In addition, family members may be interviewed to gather antemortem information about the victims and to submit DNA samples to facilitate victim identification. The air carrier is required to provide the FAC location. Most FACs are established at hotels or similar facilities. Consideration should be given to a facility that has multiple meeting rooms, a large ballroom, up-to-date information technology infrastructure, and food services. Arrangements are coordinated by the air carrier and the NTSB.

The NTSB TDA Director manages FAC operations or assigns a designee in her/his absence.

Staff present at the FAC should include the following:

- 1. Air carrier support team personnel and their associated management team
- 2. NTSB TDA staff
- 3. Local law enforcement

4. American Red Cross personnel, including approved child care providers, spiritual care staff, health professionals and crisis counselors

- 5. Medical examiner staff
- 6. Personnel designated by the medical examiner to conduct antemortem interviews
- 7. Personal effects management contractors working for the air carrier
- 8. Local support agency personnel

A number of critical functions will take place at the FAC and must be closely coordinated; they include the following:

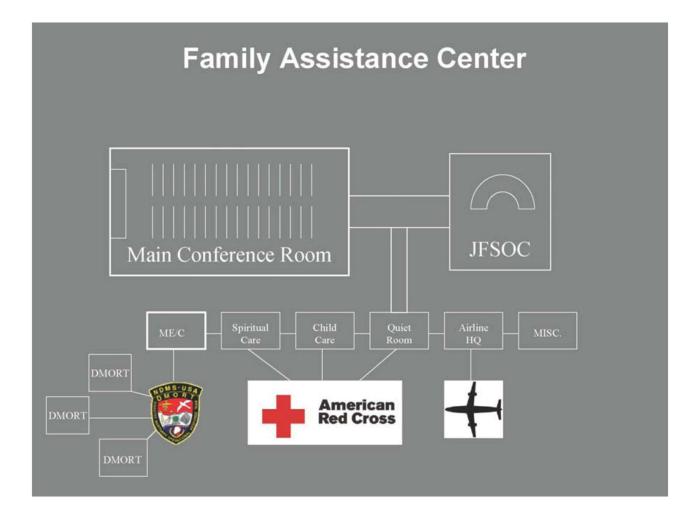
- 1. Safety and security, including badging of staff and family members
- 2. NTSB daily briefings, typically held twice daily
- 3. Antemortem interviews conducted by the medical examiner personnel or their designee
- 4. Childcare, spiritual care, and crisis counseling (conducted by the American Red Cross)
- 5. Death notifications by the medical examiner

Typically, the FAC will remain operational until the decedents have been identified, or until families are notified that the identification process will continue for an extended period of time. If this should occur, families will be contacted at home regarding positive identifications.

It is essential that each agency in the FAC understand its role in the support of families.

Not all family members will travel to the FAC. If there are family members already residing in the accident city, they will most likely visit the FAC to receive updates at the briefings and then return home. Other family members will participate in the briefings via a telephone conference bridge.

Schematic of a Family Assistance Center



APPENDIX C

Joint Family Support Operations Center

The Joint Family Support Operations Center (JFSOC) is an important element in the control and coordination of the responses and resources of supporting organizations involved in an aviation accident.

The JFSOC is a central location where participating organizations are brought together to monitor, plan, coordinate, and execute a response operation maximizing the utilization of all available resources. Communication and sharing of information continue to be challenges to a successful emergency response. The JFSOC is designed to address these challenges.

Organizations normally involved in the JFSOC are the following: NTSB, air carrier, the American Red Cross, local government and law enforcement, and supporting Federal agencies. Depending on the extent of the disaster, other organizations may also be involved in the JFSOC.

The JFSOC and one or more of the organizations involved (listed above) provide the following:

1. Serve as the central point for coordination and sharing of information among participating organizations.

2. Monitor ongoing family support activities and tracks mission activities of each organization, such as the status of the available resources.

3. Maintain a current list of locations and key telephone numbers of participating organizations and personnel.

- 4. Manage and coordinate requests for services.
- 5. Maintain a daily journal of organizational activities and responses.

Agency representatives assigned to the JFSOC are responsible for the following tasks:

- 1. Maintain current status of family support activities.
- 2. Prepare information for the NTSB family website.
- 3. Provide information for the daily family briefing/conference bridge.
- 4. Brief participating agencies daily about activities concerning family support.
- 5. Coordinate and share information among all organizational representatives.
- 6.Maintain locations and telephone numbers of organizational entities along with key personnel (for instance, FAC, medical examiner, staff processing center, NTSB investigators, air carrier, accident site, supporting organizations, local law enforcement, and local government).
- 7. Maintain and update daily plans, incident action plans, and plans for future operations.
- 8. Maintain the status and location of injured victims.
- 9. Maintain the status of victim identification effort, utilizing information provided by medical examiner personnel or their designee.
- 10. Update information on numbers of families at the accident city and projected departures/arrivals (24/48 hours).
- 11. Track the progress of antemortem interviews and antemortem data collection.

An aviation accident may take place anywhere. Therefore, it is necessary to remain flexible in planning the location of the JFSOC, taking into consideration the location and the severity of the

accident. The location of the JFSOC will be determined on the basis of available space, in such places as hotels, local government buildings, or mobile command posts.

The air carrier is responsible for securing space to accommodate family members, the FAC, and the JFSOC. The involved air carrier should plan on securing a hotel area that can accommodate the people, equipment, and activities in the JFSOC. Although hotel space for family members and the FAC will be at a premium, the JFSOC should be located in the same hotel. A small ballroom or large conference room is appropriate. Should the air carrier have difficulty securing space, the NTSB will contact local authorities to determine the availability of suitable space.

The following is a general description of the duties and responsibilities of agency representatives assigned to the JFSOC:

1. **Coordinator:** The JFSOC Coordinator represents the NTSB and is charged with managing the day-to-day activities of the JFSOC. The coordinator may do any of the following tasks: assign responsibilities to JFSOC members, facilitate the exchange of information among the JFSOC participants, ensure that critical information is kept current, inform other participants of significant developments, collect information that may be used for family briefings, ensure that individual logs are kept current, coordinate with NTSB headquarters regarding information to be placed on the Board's special family website, and perform other duties relating to the specific requirements of the accident response.

2. **Deputy Coordinator:** A Deputy Coordinator may be designated to assist the Coordinator. The Deputy Coordinator may be from the air carrier or from the local emergency management agency.

3. Administrative Officer: An Administrative Officer will assist the Coordinator with administrative functions, such as preparing drafts of documents, collecting and posting logs, assembling clips of media coverage of the accident, providing supplies, and performing other duties relating to the specific requirements of the accident response.

4. **Air carrier representative:** The air carrier representative serves primarily in a coordinating role for the carrier. Responsibilities include passing along information to the carrier's command center regarding positively identified passengers (after families have been notified); addressing questions related to current and future support provided to families by the air carrier; providing updates regarding other agencies' current and future plans and developments; scheduling meetings and related agendas; maintaining a daily log; monitoring status of injured victims and numbers of family members on and off site; providing information for daily briefings to family members; and updating other JFSOC participants on the carrier's activities and developments.

5. Local government representative: The local government representative is the coordinating point for JFSOC participants on issues of security of the morgue, FAC, hotels for family members, and other designated sensitive areas. The representative is also responsible for keeping his or her organization informed of family affairs activities and meetings, updating other JFSOC participants on the local government's activities and developments, maintaining a daily log, providing information for daily briefings to family members, identifying local assets and resources that can be utilized to support the operation, and assisting other participants in their understanding of the local community and their leaders.

6. **Medical examiner representative:** The medical examiner representative serves as a liaison between the victim identification activities at the morgue, the antemortem interview process at the FAC, and the DMORT FAC team. They may also provide information on the victim identification process at the family briefings.

7. **American Red Cross representative**: The American Red Cross representative assigned to the JFSOC coordinates the American Red Cross' operations in the FAC and the staff processing

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center. Responsibilities include responding to questions that relate to current and future support provided to families and support workers, answering questions related to persons and organizations who want to volunteer services or support, informing the American Red Cross of scheduled meetings, maintaining a daily log, monitoring status of support personnel in the FAC and other sites, answering or redirecting calls from family members who may be off site, providing information for daily briefings to family members, and updating other JFSOC participants regarding operational activities and developments.

8. **DOS representative (if required):** The DOS representative serves in a coordinating role between the JFSOC and the DOS. The representative will coordinate issues involving foreign passengers and the support they will need from DOS, the victim's embassy/consulate, and other participants of the JFSOC. Other tasks include maintaining a daily log, monitoring status of foreign victims and their families, providing advice on cultural issues, answering or redirecting calls from foreign government officials, providing information for daily briefings to family members, and updating other JFSOC participants on the organization's activities and developments. If foreign consulate officials participate in the activities of the JFSOC, the DOS representative will serve as their sponsor.

9. **DOJ/FBI OVA representative (if required):** DOJ/FBI OVA will only be involved in the JFSOC when the cause of the disaster is suspected to be of criminal intent. The representative serves primarily in a coordinating and informational role for DOJ/FBI.

10. **FEMA representative (if required):** The FEMA representative is not normally involved in the JFSOC, unless the disaster requires substantial Federal government assistance. For example, a disaster that occurs in a highly populated area causing severe structural damage and a substantial number of ground casualties will require a FEMA representative at the JFSOC. The representative will be primarily responsible for coordinating the local and State emergency management agency efforts with the family support operation.

APPENDIX E

Sample Format for an After Action Report

National Transportation Safety Board Director, Office of Transportation Disaster Assistance 490 L'Enfant Plaza East, S.W. Washington, D.C. 20594-2000

Attn: Transportation Disaster Assistance

SUBJECT: (AVIATION ACCIDENT) AFTER-ACTION REPORT

Describe such items as how the organization was organized, relationships to other organizations, what the organization's mission was, how many of the organization's personnel were involved, what other resources were provided, transportation and equipment requirements, date arrived/departed, daily activities, and any other information the organization feels important to add to this document. This outline is not intended to limit the content of the report.

Attach as separate enclosures discussion of specific aspects of the operation that were either successful or problematic.

The following format is provided:

Topic:

Discussion:

Recommendations:

Enclose any programs, associated ceremonial material, or video documentation.

APPENDIX F

Victim Identification Information

The local medical examiner or coroner has the legal responsibility to identify the victims of an aviation disaster. In addition, he or she is legally responsible for determining cause and manner of death and completing death certification. Medical examiner and coroner offices vary greatly in terms of staff and facility size. Some offices may be able to handle an aviation disaster with existing staff and facilities, while other offices, particularly those in rural areas, may require assistance. The medical examiner or coroner should have a written mass fatality plan that will give a basic framework for a response and whether assistance will be required.

The Aviation Disaster Family Assistance Act of 1996 designates the NTSB to coordinate Federal assistance in response to aviation accidents. The responsibilities of the NTSB transfer to the FBI if the cause of the disaster is officially declared a criminal act.

The NTSB or the FBI can, at the request of the medical examiner or coroner, request the services of the DMORT to assist with fatality management and identification of victims. The NTSB or FBI can also request the delivery of the DMORT portable morgue. In addition, the Office of the Armed Forces Medical Examiner (OAFME) can provide assistance to the FBI for medicolegal investigation issues.

The process of victim identification in a transportation disaster is thorough, deliberate, and based on proven scientific methods. As a rule, personal effects removed from the remains are considered to be a presumptive method of identification used to suggest who the deceased may be. Positive victim identification requires comparison of antemortem (before death) records and samples, such as dental and medical radiographs, with similar information collected from the remains. Exact matches of unique biological characteristics found in both the antemortem and postmortem records leads to a positive identification. Such methods include comparison of dental records and radiographs, comparison of fingerprints, comparison of bone structure in radiographs, comparison of healed fractures in radiographs, unique medical features (such as implants/prosthetics), and comparison of DNA.

In aviation disasters involving fragmented remains, identification is followed by the process of reassociating remains. Reassociation takes more time and is more complex than identification. Although a victim may be identified quickly using a single tooth, the ability to bring together the disassociated remains of victims relies primarily on DNA. DNA identification involves comparing DNA samples of the deceased to antemortem samples from relatives or a sample of DNA from the deceased obtained from clothing, a hairbrush, or a similar item containing skin or hair cells.

Once a positive identification has been made, the medical examiner office or a designee will notify the victim's legal NOK. At this point, the NOK decides on how and when the remains will be returned for burial/final disposition. Crisis support care and other support mechanisms will be available to the family during this process.

APPENDIX G

Victim Support Tasks–Checklists

Victim Support Tasks National Transportation Safety Board Tasks

- □ Coordinate Federal assistance and serve as a liaison between the air carrier and family members.
- Provide an NTSB toll-free number and e-mail address ((800) 683-9369 & <u>www.assistance@ntsb.gov</u>) to family members for obtaining information on the victim recovery and identification effort, accident investigation, and other concerns.
- □ Request a copy of the passenger manifest from the air carrier.
- Review with the air carrier the logistical needs of families, giving special consideration to security, quality of hotel rooms and facilities, and privacy for family members.
- Integrate local and Federal government officials and air carrier staff to form a JFSOC to coordinate services and activities for families.
- Coordinate assistance efforts with local and State authorities, including the medical examiner, local/county/State law enforcement, emergency management agency, hospitals, and other emergency support personnel.
- Maintain communications with the air carrier to receive updates regarding the notification status of the victims' families.
- Conduct daily coordination meetings with the air carrier and local and Federal government representatives to review daily activities, resolve problems, and synchronize future family support operations and activities.
- □ Provide and coordinate family briefings both with families at the accident city and with families who remain at home.
- Discuss with the medical examiner the subject of victim identification, in particular the use of DNA analysis. Explain that the NTSB typically uses the Armed Forces DNA Identification Laboratory for DNA identification.
- Discuss with the medical examiner the capabilities of his or her office staff to conduct victim identification. Discuss the use of DMORT and the standard procedures used by DMORT in its work in support of NTSB responses.
- □ At the discretion of the NTSB IIC, coordinate a visit to the accident site for family members.
- Provide information releases to the media, in coordination with NTSB Office of Public Affairs, pertaining to the types of Federal support available to assist family members.
- □ Maintain contact with family members to keep them informed about the victim recovery and identification effort, accident investigation, and other accident-related concerns.
 - o Inform family members of the release dates for preliminary, factual, and probable cause statements.
 - o Inform family members of the date, time, and location of the public hearing, if applicable.
 - o Inform family members of the date, time, and location of the Board meeting, if applicable.
- □ If the accident is determined to be the result of a criminal act, the NTSB TDA staff may assist the FBI OVA in family assistance support.
- □ Consolidate and review the AAR to resolve problem areas and to update operating plans and procedures.

Victim Support Tasks

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Air Carrier Tasks

- □ Complete required accident notification as detailed in 49 CFR 830.5
- □ Notify the NTSB Communications Center of the accident and provide the following:
 - o Location or general vicinity of the accident
 - o Number of passengers on board
 - o Number of crew on board
 - o Number of injuries and fatalities (if known)
 - o Flight number
 - o Flight origination
 - o Flight connection points
 - o Flight's final destination
 - o Demographics of passengers (if known)
 - o Flight's designation as domestic or international
 - o Name and telephone number of the carrier's representative in charge of
 - *f* Carrier's humanitarian response
 - *f* Passenger manifest reconciliation
 - *f* Family notification process
 - o Name, telephone number and location of the facility designated for use as the FAC and JFSOC
 - Provide a reliable publicized toll free telephone number with sufficient capacity to handle the anticipated call volume from victims' families and friends.
 - Coordinate public notification of the toll-free number with various media (television, radio, Internet) emphasizing the following:

o The number should only be used by people who have a reason to believe a family member or friend was a passenger on the accident flight.

o Initial calls to the air carrier will provide basic accident information and establish point of contact information for affected family members and friends in order to initiate humanitarian support.

o When referring to the toll-free telephone number, the following information should always be provided:

- Name of the carrier(s) involved
- The accident flight number(s)
- The flight's airport of origination
- The flight's connection point(s)
- The flight's final destination
- Modify normal "on-hold" messages. Eliminate music, sales information and similar non-accident-related messages.
- Provide timely notification to family members and friends prior to releasing passenger names to the public. Refer to AIR 21.
 - o Request family members to designate one primary point of contact for information sharing.
 - o Remember that the air carrier is under no obligation to release the names of victims if family members request otherwise.
- Ensure notification of family members and friends of American Red Cross family care and crisis assistance available at the FAC

- □ Ensure notification of family members and friends of American Red Cross family care and crisis assistance available after their return home (if applicable).
- Ensure that requests for crisis assistance are forwarded to the American Red Cross representative at the FAC.
- □ Provide media representatives with continuous updates regarding the following:
 - o Progress of the notification process
 - The number of victims' family members notified as of a certain time
 - The number of families remaining to be notified
 - o This process continues until all victims' families have been notified
- Provide the NTSB, upon request, with the most current reconciled copy of the passenger manifest.

o Each copy of the manifest should be numbered or annotated indicating the date and time so that it is distinguishable from previous copies

- □ Secure facilities at departure, arrival, and connecting airports for family members and/or
 - friends who may be gathering.
 - o This facility is designed to allow family members to grieve in private, shielding them from the media and solicitors; it serves as a secure location where families can receive continuous updates regarding the reconciliation of the passenger manifest and other accident information.
- Ensure all facilities chosen for use as the Friends and Relatives Reception Center, FAC, and JFSOC are ADA accessible.
- □ Secure a venue for use as the FAC (see appendix B)
 - o Consider the quality of the rooms, size of the facility, privacy for the family members and/or friends, ability to secure the facility, proximity to the accident site, and proximity to medical treatment facilities.
- □ Secure a venue for the JFSOC.
- □ Make provisions for the JFSOC including, but not limited to, the following:
 - o Space
 - o Communications
 - o Logistical support
 - o Details of the set-up of the JFSOC are provided in appendix C.
- Provide logistical support to family members who desire to travel to the accident city (or to a hospital location) that includes, but is not limited to, transportation, lodging, meals, security, communications and incidental expenditures.
- □ Assist family members as they travel to and from the accident city by informing flight crews and airport personnel about family members aboard particular flights.
 - o At departure, connecting, and arrival airports, family members should have air carrier personnel meet and assist them while on airport grounds.

- o If necessary, seek assistance from other carriers with a larger presence at the airport.
- o Assist family members as they depart the accident city and provide a contact person who will continue to be the air carrier's interface with them after they return home.
- Provide a contact person to meet family members as they arrive and accompany them at the accident city.
- □ Should have the authority or ready access to those who have sufficient authority to make decisions on behalf of the airline.

(21) Consult with family members about any airline-sponsored monument, including any inscriptions.

(22) Provide reasonable reimbursement to the ARC for the services provided to the family, airline, and supporting personnel.

(23) Coordinate with DOJ in arranging meetings with family members to explain their rights under the victims of crime legislation, if the crash is declared a crime.

(24) Provide the same support and treatment of families of non-revenue passengers (and any other victim of the accident) as for revenue passengers.

(25) Participate in daily coordination meetings to review daily activities, resolve problem areas, and to synchronize future family support operations and activities. Information that may be needed at the daily coordination meeting is at Appendix B. This information is helpful to plan logistical requirements, such as food, lodging, and transportation, as well as providing everyone with an update of current and future support operations.

c. ARC: VST 3, "Family Care and Mental Health".

(1) Provide a representative to the JFSOC to coordinate with other members of the operations center staff ARC related issues and family requests for assistance. Additional personnel may be needed for crash scale 2 or 3 scenarios.

(2) Coordinate and manage the numerous organizations and personnel that will offer counseling, religious and other support services to the operation. A staff processing center, away from the Family Assistance Center, should be set up to screen, monitor and manage personnel (paid and volunteer) so that families are not outnumbered and overwhelmed by well-intentioned organizations and individuals. The staff processing center will also be responsible for the badging of personnel, matching volunteer skills with organizational needs, assigning work schedules, briefing and debriefing of support staff, personnel and planning for future activities.

a) Qualified local resources should be integrated with ARC personnel to provide crisis and grief counseling, food services, administrative assistance, and other support services to family members and support organizations.

b) Crisis and grief counseling should be coordinated with the airline to contact and set up an appointment, if appropriate, with family members who do not travel to the site.

(3) Employ an accounting system to accurately record cost data in specific cost categories for later reimbursement.

(4) Activate local, state and national ARC personnel to provide crisis and grief counseling to family members and support personnel. This includes coordinating with the airline to contact and set up an appointment, if appropriate, with family members who do not travel to the site.

(5) Assess the needs and available resources of other agencies and coordinate with them to ensure ongoing emotional support for workers during the operation and provide debriefings before departure.

(6) Establish a joint liaison with the airline at each supporting medical treatment facility to track the status of injured victims and to provide assistance to their families.

(7) Coordinate with the airline to establish areas for families to grieve privately.

(8) Coordinate on site child care services for families who bring young children.

(9) Arrange a suitable inter-faith memorial service days following the crash and a memorial service for any future burial of unidentified remains.

(10) Provide families, at their request with referrals to mental health professionals and support groups that are in the family member's local area.

d. DHHS: VST 4, "Victim Identification, Forensic and Medical Services".

(1) Provide a representative to the JFSOC to coordinate with other members of the operations center staff DHHS related issues and family requests for assistance. Additional personnel may be needed for crash scale 2 or 3 scenarios.

(2) Provide necessary DMORT team members to assist the medical examiner in victim identification and mortuary services. Configuration of team and skills required will be determined by details of the crash, medical examiner's request for assistance, and crash scale 1, 2, or 3 factors.

(3) Provide, if appropriate, a portable morgue facility and the necessary equipment and supplies to augment the local medical examiner's capabilities.

(4) Monitor the status of incoming dental records and x-rays to insure that all records have been received. If not, take steps to obtain the records and x-rays. Request assistance from DOS for acquiring necessary records for foreign passengers and crew.

(5) Develop a standard ante mortem questionnaire and disposition of remains form that can be adapted to meet local medical examiner and state requirements. The disposition of remains form will be used to obtain directions from the lawfully authorized next of kin on what he/she desires the medical examiner to do with remains that may later be identified as those of their family member. Information collected from family members is strictly confidential and will be used only for medical examiner purposes.

(6) Interview family members who are both on site and off site for ante mortem identification information and disposition of remains information.

(7) Coordinate with the medical examiner to integrate non-DMORT personnel who are providing assistance to the medical examiner's office into the morgue operation.

(8) Assist the medical examiner in notifying family members of positive identification and include an explanation of how identification was determined. Notification team may include, if appropriate, ARC crisis counselor, clergy, and airline family escort.

(9) Check remains prior to release to local funeral director. Insure that all documentation is correct and a chain of custody is established.

(10) Provide the NTSB with names of victims and their next of kin (NOK), relationship to victim, and addresses and telephone numbers of NOK. A source for this information is the ante mortem questionnaire.

(11) Assist the airlines, if requested, with finding next of kin to be notified by use of established cooperative relationships with local, state, and Federal law enforcement agencies.

(12) Provide, if requested, professional medical staff and technicians to assist in the care and recovery of injured victims.

(13) Assist the ARC, if requested, with additional trained and experienced crisis counselors.

e. DOD: Supports DHHS in VST 4, "Victim Identification, Forensic and Medical Services". If required:

(1) Provide the use of a military installation, such as Dover Air Force Base, for mortuary support operations.

(2) Provide personnel from the Armed Forces Institute Pathology (AFIP), Office of the Armed Forces Medical Examiner (OAFME), to assist in the identification effort and to conduct appropriate DNA comparison testing on specimens submitted by the medical examiner.

(3) Provide assets from the US Navy's Support Salvage (SUPSALV) for the purposes of offshore search, salvage, and recovery of non-military aircraft wreckage, when these services are not locally available. SUPSALV is delegated the responsibility for technical, and when tasked, operational control of aircraft search, identification, and/or underwater recovery operations. NTSB and SUPSALV will jointly determine if assets should be deployed and SUPSALV will advise the NTSB on alternate search and recovery methods that may be employed.

(4) Provide within 24 hours a trained Graves Registration and Recovery Team to assist in the recovery efforts at the crash site.

(5) Provide within 72 hours available dental records and x-rays of military fatalities that are active duty, retired, veteran, or reserve.

(6) Provide pouches and transfer cases for human remains.

f. DOS: VST 5, "Assisting Families of Foreign Victims". If required:

(1) Provide a representative to the JFSOC to coordinate with other members of the operations center staff DOS related issues, such as obtaining dental records and dental x-rays from foreign families and responding to family requests for assistance. Additional personnel may be needed for crash scale scenarios involving international flights.

(2) Provide official notification to foreign governments that have citizens involved in the aviation incident after obtaining necessary information on foreign passengers from the airline.

(3) Assist the airline in notifying US citizens who may reside or are traveling outside the United States that a member of their family has been involved in an aviation accident.

(4) Provide translation services to facilitate communications with the victim's family and all interested parties.

(5) Assist the airline, the Federal support staff, and others in maintaining daily contact with foreign families who do not travel to the United States.

(6) Assist foreign air carrier's employees and families of foreign victims with entry into the United States and extend or grant visas.

(7) Facilitate necessary consulate and customs services for the return of remains and personal effects into the country of destination.

(8) Assist in the effort to provide the medical examiner the necessary information on foreign victims to complete death certificates.

g. FEMA: VST 6, "Communications". If required:

(1) Provide a representative to the JFSOC to coordinate with other members of the operations center staff and local and state officials emergency management related issues.

Additional personnel may be needed for crash scale scenarios involving a major city emergency response.

(2) Provide personnel, upon request of the NTSB, to assist in public information dissemination, to include assistance in establishing and staffing external media support centers at the crash site, wreckage hanger, family support operations center, airport, and other areas that may attract media interest.

(3) Provide voice and data communication assets to communicate from the incident site to

(4) the NTSB Communications Center.

h. DOJ: VST 7, "Assisting Victims of Crime". If required:

(1) Provide, upon NTSB request, a FBI Disaster Squad with sufficient personnel to obtain fingerprint identification of aviation crash fatalities. This team will work with the medical examiner and the DMORT personnel at the morgue location.

(2) The following responsibilities will only be implemented if the airline disaster is officially declared a criminal act:

a) Provide a representative to the JFSOC to coordinate with other members of the operations center on DOJ-related issues.

b) Provide information to victims and their family members, on site and off site, as required under the Victims of Crime Act of 1984, the Victim and Witness Protection Act of 1982 as amended, other relevant statutes, and the 1995 Attorney General Guidelines for Victim and Witness Assistance.

c) Assist the ARC, if requested, with additional trained and experienced crisis counselors through the Office for Victims of Crimes Community Crisis Response Program.

d) Provide updates to victims and their family members on the progress of the criminal investigation.

8. COORDINATING INSTRUCTIONS.

a. The point of contact for this plan is the Deputy Director, FA, NTSB. The telephone number is (202) 314-6185. The office fax number is (202) 314-6638.

b. Upon implementation and until the NTSB's family affairs staff is situated at the JFSOC, calls should be directed to the NTSB Communications Center at (202) 314-6290 (voice) or (202) 314-6293 (fax). The Communications Center will pass any information or messages to the appropriate NTSB family affairs staff member.

c. It is recommended that supporting agencies make the same individual or individuals available to each aviation crash as their representative to the JFSOC. Major aviation incidents do not occur frequently. When they do occur, however, people and organizations in the past have had very little or no experience dealing with the many sensitive issues of an aviation disaster. By developing a core group of experienced staff, operational procedures will continually improve and individual and group experiential bases will increase, all culminating in the better delivery of support services to victims and their families. Agencies are not precluded from designating and training alternate personnel.

d. It is recommended that Federal personnel involved at the incident site wear clothing articles, such as hats, shirts, and/or jackets that identify the agency or group with which they are associated. This will be helpful for families, as well as for all those involved in supporting the operation.

e. Agencies that participate in supporting victims and their family members under this plan are requested to submit an after action report to the Deputy Director, FA, within 30 days of completion of their tasks. This information must be captured so appropriate lessons can be derived, corrective actions taken, and plans changed accordingly. A sample format is at Appendix C.

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f. Other than the media releases by the airline on the progress of family notification and release of passenger names described in paragraph 7b, all media inquiries and releases that pertain to the family affairs operation will be referred to the NTSB family affairs officer. The NTSB will advise and assist the local medical examiner on any media affairs in his or her area of responsibility. Support organizations may provide press releases or briefings on their specific agency mission/action during this event. There are no restrictions on victims or family members meeting with the media if they so desire.

g. Due to differences in individual airline and airline underwriter policies, as well as the aviation crash itself, reimbursement of costs associated with participation in an aviation disaster will be made after discussions with the airline and their insurance underwriter.

ENCLOSURES

Appendix A Drafted Media Release and Background Papers

Appendix B Joint Family Support Operations Center

Appendix C Suggested After Action Report Format

Appendix D Questions and Answers

APPENDIX A

DRAFT MEDIA RELEASES AND BACKGROUND PAPERS

Media Topic

Federal Agencies Supporting the Victims of (Accident)

National Disaster Mortuary Operational Response Team (DMORT)

Victim Identification Process

Aviation Disaster Family Assistance Act of 1996 (Background Paper)

Return of Personal Effects (Background Paper)

FOR IMMEDIATE RELEASE:

FEDERAL AGENCIES SUPPORTING THE VICTIMS OF (ACCIDENT)

(LOCATION)- The Aviation Disaster Family Assistance Act of 1996 (PL 104-264, Title VII), was passed by the Congress and signed by President Clinton on October 9, 1996. This Act gave the National Transportation Safety Board (NTSB) the additional responsibility of aiding the families of victims of aircraft accidents occurring in U.S. territory. An earlier Presidential Executive Memorandum, dated September 9, 1996, complements the new law, in which President Clinton designated the NTSB as the coordinator of Federal services for families of major transportation disasters.

The NTSB, in a cooperative effort with local, state and (AIRLINE) authorities, is coordinating Federal support to assist (CITY) in meeting the needs of the victims' families of (ACCIDENT). Federal and other agencies that are involved in the family support area are: (American Red Cross (ARC); Department of State (DOS); Department of Health and Human Services (DHHS); Federal Emergency Management Agency (FEMA); Department of Justice (DOJ); and Department of Defense (DOD).

The ARC is providing crisis and grief counseling not only to the families that are here in (CITY), but also for those families who have decided to remain home. The ARC has activated local, state, and national ARC personnel to augment local resources to support the families affected by this tragic disaster. ARC personnel and local volunteers are also at key locations, such as the airport, family assistance center and the morgue, assisting all the support workers who have contributed so much to this operation.

The Department of Health and Human Services (DHHS) is primarily responsible for assisting the **(CITY)** medical examiner in the identification and return of deceased victims to their families.

The National Disaster Mortuary Operational Response Team (DMORT) is currently assisting the city medical examiner. The team is composed of forensic pathologists, odontologists, anthropologists, finger print experts, and other technical personnel. DHHS is also providing a fully equipped mobile mortuary to expand the medical examiner's capabilities.

(Since there are foreign passengers involved in this accident, The Department of State (DOS) is assisting the airline in officially notifying the victim's government and helping those affected foreign families travel to the US. They are also providing translation services to facilitate communication with all interested parties.)

(The NTSB has also called on the Federal Emergency Management Agency (FEMA) to augment NTSB public information efforts with additional staff. This will enable the NTSB to staff additional media support locations, such as XXXXX)

(Now that this tragedy has been officially declared a criminal act by (LAW ENFORCEMENT AGENCY), the Department of Justice (DOJ) is providing information to family members on the services and assistance provided under the Victims of Crime Act of 1984. Such services and

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assistance may include compensation for loss of support, loss of wages, medical and mental health counseling expenses, and funeral costs. DOJ is also responsible for keeping the family members up to date on the progress of the criminal investigation.)

FOR IMMEDIATE RELEASE:

DISASTER MORTUARY OPERATIONAL RESPONSE TEAM (DMORT)

(LOCATION)-Immediately upon being notified of the (ACCIDENT), the National Transportation Safety Board contacted the local **medical examiner (NAME)** to jointly assess the situation to determine if the Federal government can assist in the recovery and identification of fatalities of (ACCIDENT).

(ME's name) requested Federal assistance and the NTSB requested the Office of Emergency Preparedness, United States Public Health Service (USPHS) to activate the Disaster Mortuary Operational Response Team (DMORT). Approximately (**time and date**) the first elements of DMORT arrived on site.

The DMORT members are composed of private citizens each with a particular field of expertise. Their licensure and certification is recognized by all states and they are compensated for their duty time by the Federal government. They will assist the medical examiner with recovery, identification and body preparation of the deceased victims. The team consists of forensic pathologists, medical examiners, odontologists, anthropologists, funeral directors, finger print experts, and other skilled technicians. Many have experience with other aviation disasters, as well as experience involving natural disasters.

The NTSB also requested the delivery of an emergency mobile mortuary. The facility, which is maintained in Rockville, Maryland, contains a complete morgue with the necessary prepackaged equipment and supplies to support each workstation. It (arrived...time/date) (is expected to arrive approximately time/date). It (has been/will be) located in the vicinity of (location) and (is/will be) considered a secure site.

This has been a cooperative effort between local, state, and Federal officials, as well as **(airline)** with the shared goal of recovering, identifying and returning all victims of this disaster to their loved ones as quickly as possible.

FOR IMMEDIATE RELEASE:

VICTIM IDENTIFICATION PROCESS

(LOCATION)-(NAME), the local medical examiner is leading the effort to identify the victims of (ACCIDENT). As the medical examiner, (NAME) is legally responsible and retains jurisdiction on victim identification and cause of death determination.

The Aviation Disaster Family Assistance Act of 1996 designates the National Transportation Safety Board (NTSB) to coordinate Federal assistance in response to aviation accidents, such as the **(ACCIDENT)**. The NTSB, at the request of **(NAME)**, has provided the medical examiner's office the services of the Disaster Mortuary Operational Response Team (DMORT). The team consists of forensic pathologists, medical examiners, odontologists, anthropologists, funeral directors, finger print experts, and other skilled technicians. Many have experience with other aviation disasters, as well as experience involving natural disasters. The NTSB also requested the delivery of an emergency mobile mortuary, which is maintained in Maryland. It contains a complete morgue with the necessary prepackaged equipment and supplies to expand the operational capacity of the medical examiner's office.

The identification process is very deliberate and time consuming. Consequently, family members and the media are cautioned not to expect immediate identifications to be made. In some cases, unfortunately not all victims may be identified. To minimize this possibility, the NTSB has called on this team of experienced experts.

The identification process utilizes a number of media to make a positive identification. The process may start with documents found on the victim, as well as descriptions of clothing, jewelry, and other characteristics described by family members. Family members have been requested to provide dental

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records and x-rays that will assist the forensic odontologists with their work. The fingerprint experts of the FBI Disaster Squad will also make fingerprint comparisons. Forensic pathologists and anthropologists can also assist by providing information on general age, sex, size, color of hair and eyes, and race of the victim. Based upon past medical information collected from family members, they may be able to determine a victim by a previous broken arm that was reported by the family and the comparison of a x-ray taken by the medical examiner. Collectively, all these procedures' findings must support one another prior to a positive identification being determined by the medical examiner.

Once **(NAME**) makes a positive identification, the medical examiner's office will personally notify the victim's family. Health care and other support professionals will be available to assist family members through this experience.

FOR BACKGROUND INFORMATION

AVIATION DISASTER FAMILY ASSISTANCE ACT OF 1996 (PL 104-264, Title VII)

The National Transportation Safety Board (NTSB) has been investigating the nation's aviation accidents for nearly thirty years and has been to the scene of nearly 100,000 general and commercial airplane accidents. The Aviation Disaster Family Assistance Act of 1996 (PL 104-264, Title VII), was passed by Congress and signed by President Clinton on October 9, 1996. The Act gave the NTSB the additional responsibility of aiding the families of victims of aircraft accidents. The new law is complemented by an earlier Presidential Executive Memorandum dated September 9, 1996, in which President Clinton designated the NTSB as the coordinator of Federal services for families of major transportation disasters in the U.S. This authority enables the NTSB to harness the collective resources of the Federal government and direct aid to any area in which it is needed.

Before President Clinton's Presidential Memorandum, the families of people killed or injured in a commercial aircraft accident had been primarily assisted in the aftermath of the accident by the involved airline. Often local and state agencies, including volunteer organizations also responded, but often times the effort was uncoordinated and divisive. While the airline remains a major participant, the NTSB is now able to apply Federal resources to augment local and state efforts and coordinate the overall family assistance support system.

The following are highlights of the Aviation Disaster Family Assistance Act of 1996:

1. The Chairman of the NTSB designates and publicizes the name and telephone number of the Director of the Office of Family Affairs who will be the liaison between family members and the airline.

2. The Chairman of the NTSB designates a nonprofit organization (American Red Cross) whose primary responsibility will be to coordinate the emotional care and support to victims and their families.

3. Upon request, the airline will provide a copy of the latest available passenger manifest to the Director of the Office of Family Affairs.

4. No person (including a State or political subdivision) will impede the ability of the NTSB and/or the Director of the Office of Family Affairs to carry out its responsibilities or the ability of the families of passengers involved in the accident to have contact with one another.

5. Provides a 30-day waiting period in which unsolicited communications by attorneys, representatives of an attorney, insurance company, or airline litigation representative to victims or their families are prohibited.

FOR BACKGROUND INFORMATION

RETURN OF PERSONAL EFFECTS

At the time victims of an accident are removed from the incident site, their personal effects are also being recovered. All recovered items are stored in a secure area. There are two types of personal effects, associated and unassociated.

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Associated personal effects are those personal items that can be identified to a specific individual. Examples are items such as rings or earrings that are found on the victim or articles such as a wallet found in a carry on bag with driver's license, credit cards, and other items with a specific person's name.

Unassociated personal effects are those items that can not be identified to a specific person. Examples may be a necklace or earrings found near, but not on, a victim or clothing that has spilled out of a suitcase.

Sometimes authorities retain personal effects if needed as evidence or as part of the investigation. Once the authorities no longer need retained items, the items are returned to the airline to be returned to the appropriate owner.

The airline or their representative returns associated items by contacting the survivor or victim's family and asking them how they would like the recovered items returned. The airline or its representative then carries out the desires of the survivor or the victim's family.

The process for the return of unassociated personal effects is deliberate and time consuming. The primary problem is determining ownership of items that may number in the thousands. Normally, all items are first inventoried, numbered, and photographed. Once completed, a photo catalogue is produced and provided to all families who request a copy. Instructions are provided for claiming an item. Once all families have responded, items that are claimed by only one family are returned according to their instructions. Claims by more than one party must be substantiated and proven by pictures, invoices, or other means. The item in question is returned once ownership is determined.

APPENDIX B

Joint Family Support Operations Center

The Joint Family Support Operations Center (JFSOC) is an important element in the control and coordination of the responses and resources of supporting organizations involved in an aviation accident.

Although the JFSOC concept is not new, historically there has been no element such as the JFSOC that has been utilized at an aviation accident that specifically focused on coordinating support to families affected by an aviation disaster.

The JFSOC comes from the well-utilized and regarded concept of the Emergency Operations Center (EOC). It is a central location where participating organizations can be brought together to monitor, plan, coordinate, and execute a response operation maximizing the utilization of all available resources. Communication or sharing of information has always been and will always be the major obstacle to a successful emergency response. The JFSOC is designed to address this common problem.

Organizations that will normally be involved in the JFSOC are the NTSB, airline, ARC, local government and law enforcement. Depending on the extent of the disaster, other organizations may also be involved in the JFSOC. They may be the Department of State (DOS), Department of Justice (DOJ), Federal Emergency Management Agency (FEMA), Department of Defense (DOD), and foreign consulates.

The responsibilities of the JFSOC are as follows:

1. Serves as the central focal point for coordination and sharing of information among participating organizations.

2. Monitors ongoing family support activities and tracks mission activities of each organization, such as the status of the resources available, whether is has been assigned or is out of service.

3. Maintains current list of locations and key telephone numbers of involved organizations and personnel.

4. Provides responses to calls and requests or provides an appropriate hand off with the primary organization responsible for the issue.

5. Maintains a daily journal of organizational activities and responses.

6. Maintains a record of coverage of family affairs activities by the media.

The staff of the JFSOC is responsible for the following tasks:

- 1. Maintains current status of family support activities.
- 2. Prepares input for the NTSB family web site.
- 3. Provides input for the daily family briefing.

4. Agencies represented in the JFSOC will be briefed on activities concerning family support via daily briefings.

5. Coordinates and shares information among all organizational representatives.

6. Maintains locations and telephone numbers of organizational entities along with key personnel (family assistance center, medical examiner, staff processing center, NTSB investigation HQs, airline, crash site, supporting organizations, local law enforcement, local government, and etc).

7. Responds to requests with an appropriate reply or by directing requests to the appropriate organization with primary responsibility.

8. Monitors and collects media reports on the family support area.

9. Maintains and updates daily plan and future operations.

10. Maintains status and location of injured victims.

11. Maintains status of identification effort utilizing information provided by ME/coroner.

12. Updates information on numbers of families at site and projected departures/arrivals (24/48 hours).

13. Tracks status of ante mortem interviews.

An aviation accident may take place anywhere, from an isolated area to a major metropolitan area. Due to the need to provide flexible planning guidance, the location of the JFSOC will be determined on a basis of available space, such as hotels, local government buildings, mobile command posts, and also the location and severity of the aviation disaster.

The involved air carrier should plan on securing a hotel area that can accommodate the people, equipment, and activities that will be involved in the JFSOC. Although hotel space for family members and the Family Assistance Center (FAC) will be at a premium, the JFSOC should be located in the same hotel. A small ballroom or large conference room would be ideal. Planning guidance for people and equipment is provided for the three crash scales.

While the air carrier is reserving space for the families, FAC, and the JFSOC, the NTSB will be in contact with local authorities to see if their EOC is suitable and available, as well as other local facilities. If the local government can accommodate the JFSOC, the NTSB will coordinate with the air carrier to determine the best location for the JFSOC.

The following is a general description of the duties and responsibilities of members of the JFSOC:

1. Coordinator: The JFSOC Coordinator represents the NTSB and is charged with managing the day to day activities of the JFSOC. The coordinator is responsible to the Board's family affairs specialist managing the FAC. The coordinator may assign responsibilities to JFSOC members; facilitates the exchange of information among the JFSOC participants; ensures critical information is kept current; informs other participants of significant developments; collects information that may be used for family briefings; ensures individual logs are kept current; coordinates with NTSB HQs on information to be placed on the Board's web site; and other duties relating to the specific requirements of the accident.

2. Deputy Coordinator: A Deputy Coordinator may be designated to assist the Coordinator. The Deputy Coordinator may be from the carrier or from the local emergency management group.

3. Administrative Officer: An Administrative Officer will assist the Coordinator with administrative functions, such as preparing drafts of documents, collecting and posting of logs; assembling clips of media coverage of the accident; providing supplies; and other duties relating to the specific requirements of the accident.

4. Airline representative: The airline representative is responsible for representing the carrier in the JFSOC. The representative serves primarily in a coordinating role for the carrier. Such things as passing information to the carrier's command center on passengers that have been positively identified (after families have been notified); questions relating to current and future support provided to families by the airline; other agencies' current and future plans and developments; meetings and agendas; and other informative issues are examples of things that the representative may be doing in the JFSOC. Other tasks are maintaining a daily log; monitoring status of injured victims and numbers of family members on and off site; providing input for daily briefings to family members; updating other JFSOC participants on the carrier's activities and developments, and general sharing of information.

5. Local government representative: The local government representative is the coordinating point for JFSOC participants on issues of security of the morgue, FAC, hotels for family members and other designated sensitive areas. The representative is also responsible for keeping his/her organization informed of family affairs activities and meetings; updating other JFSOC participants on the local government's activities and developments; maintaining a daily log; providing input for daily briefings to family members; identifying local assets and resources that can be utilized in support of the operation; and assisting other participants in their understanding of the local community and their leaders.

6. ARC representative: The ARC representative serves primarily in a coordinating role for the ARC and its FAC coordinator and staff processing center; responding to questions that relate to current and future support being provided to families and support workers by the ARC; answering questions related to persons and organizations who want to volunteer services or support; informing the ARC of scheduled meetings; and other informative issues are examples of things that the representative may be doing in the JFSOC. Other tasks are maintaining a daily log; monitoring status of support personnel in the FAC and other sites; answering or redirecting calls from family members who may be off site; providing input for daily briefings to family members; updating other JFSOC participants on the organization's activities and developments; and general sharing of information.

7. DOS representative: The DOS representative serves in a coordinating role between the JFSOC and the DOS. The representative will coordinate issues involving foreign passengers and the support they will need from DOS, the victim's embassy/consulate, and other participants of the JFSOC. Other tasks include maintaining a daily log; monitoring status of foreign victims and their families; providing advice on cultural issues; answering or redirecting calls from foreign government officials; providing input for daily briefings to family members; updating other JFSOC participants on the organization's activities and developments; and general sharing of information. If foreign consulate officials participate in the activities of the JFSOC, the DOS representative will serve as their sponsor.

8. DOJ representative: The DOJ representative is responsible for representing DOJ in the JFSOC. DOJ will not normally be involved in the JFSOC, unless the disaster is considered to be caused by a criminal act. The representative serves primarily in a coordinating and informational role for DOJ. Since the ARC's and DOJ's role of assisting victims is closely related, it is imperative that both organizations closely work with one another. Synchronization of current and future support provided to families by both organizations is critical. Other representative tasks are maintaining a daily log; monitoring of support provided to families; providing input for daily briefings to family members; updating other JFSOC participants on organizational activities and developments; and general sharing of information.

9. FEMA representative: The FEMA representative is not normally involved in the JFSOC, unless the disaster requires substantial Federal government assistance. This may be a disaster that takes place in a highly populated area causing severe structural damage and a substantial number of ground casualties. The representative will be primarily responsible for coordinating the local and state emergency management agency efforts with the family support operation.

Manpower Planning Guidance

<u>Manpower</u>: Person(s) must have decision-making authority or have access to those who do and must be knowledgeable about the structure of their organization.

Crash scale 1 Crash scale 2 Crash scale 3

NTSB 2 2 2

Airline 2 2 3

ARC 1 2 3

HHS 0 0 0

DOS * * *

FEMA # # #

DOJ # # #

DOD \$ \$ \$

Local

Government 2 3 4

* Person required if foreign (non-U.S.) personnel are on the flight and additional personnel required if it is an international flight

Required only if having a role in operation and additional personnel required if organization has a large role

\$ Required if carrier is chartered military flight

Communications (Telephone) Planning Guidance

Crash scale 1 Crash scale 2 Crash scale 3

NTSB 4 4 4 Airline 4 4 4 ARC 4 4 4 HHS 0 0 0 DOS # 2 2 2 FEMA # 2 2 2 DOJ # 2 2 2 Local 4 4 4 Government # Necessary if agency is involved in accident response Each agency should have access to data ports for computer systems. **Other Resource Planning Gu**

Other Resource Planning Guidance

Crash scale 1 Crash scale 2 Crash scale 3

Fax machines 2 2 3

Copying machines (high speed) 1 1 2

Copier should collate and sort

Printers 2 2 2

Paper shredder 1 1 1

JOINT FAMILY SUPPORT OPERATIONS CENTER DAILY STATUS REPORT INFORMATION

- 1. Number families notified /number pending notification AIRLINE
- 2. Number families on site /number of families at home AIRLINE
- 3. Number of total family members at the hotel AIRLINE
- 4. Number of families expected to arrive within next 24 hours AIRLINE
- 5. Number of families expected to depart within the next 24 hours AIRLINE
- 6. Number of families at home that have been contacted by their airline representative within the last 24 hours AIRLINE
- 7. Status of injured personnel and location of family members AIRLINE
- 8. Number of families at the site that have requested ARC assistance and have been assisted by ARC personnel within the last 24 hours ARC
- 9. Number of families at home that have requested ARC assistance and have been contacted by their ARC representative within the last 24 hours ARC
- 10. Number of workers that have received ARC assistance in last 24 hours ARC
- 11. Number of injured emergency personnel that have received ARC assistance ARC
- 12. Status of dental records and x-rays ME

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- 13. Status of ante mortem and disposition of remains interviews ME
- 14. Status of identification efforts ME
- 15. Status of families notified of positive identification ME
- 16. Status of release of remains ME
- 17. Update on assistance provided to foreign families DOS
- 18. Update on assistance provided to victims and families DOJ
- 19. Number of Federal support personnel, to include DMORT and ARC personnel ALL on site and their locations.
- 20. Remarks on daily activities. ALL
- 21. Remarks on next 24 hours activities. ALL

APPENDIX C

SAMPLE AFTER-ACTION REPORT FORMAT

National Transportation Safety Board

Director, Office of Family Affairs

490 L'Enfant Plaza East, SW

Washington, DC 20594-2000

SUBJECT: (AVIATION ACCIDENT) AFTER-ACTION REPORT

Describe such items as how the organization was organized; relationships to other organizations; what the organization's mission was; how many of the organization's personnel were involved; what other resources were provided; transportation and equipment requirements; date arrived/departed; daily activities; and any other item the organization feels important to add to this document. This outline is not intended to limit the content of the input.

Attach as separate enclosures specific areas observed throughout the operation that were both successful and problem areas. The following format is provided:

Topic:

Discussion:

Recommendations:

Also enclose any programs, associated ceremonial material, or video coverage.

APPENDIX D

Frequently Asked Questions

Please note this section was in response to many inquiries for clarification about various topics of the basic plan from some small and foreign air carriers. This is not a substitute for reading and understanding the basic plan.

Is there a specific definition of who constitutes a family member?

U.S. Federal and state laws define who constitutes a family member from a legal point of view. These legal definitions may also vary from state to state. The traditional view included spouse, children, mother, father, brother, and sister. Terms such as stepparents, stepsiblings and life partners have become more common in recent years in defining some family environments. It is suggested that airlines should plan on dealing with a variety of family member scenarios and to take each one on a case by case basis.

During the initial hours of an aviation disaster there is a significant amount of verification of facts that the airline needs to do. What information should be given to a family member if they call while the verification process is still in progress?

Airlines must establish contact with the family of a victim as soon as possible following an accident. In some cases, a family member may call the airline <u>before</u> the airline has reached out to contact the family that has just called in. During this process it is important to give whatever passenger information about the victim that is available. There are cases in which notifying an additional family member may be necessary. There may be a family member who will be calmer or more helpful to the airline in dealing with his or her family. This person may also be able to assist in other situations, such as families that do not use English as their primary language.

Are there any special considerations for employees assigned to be family escorts?

As specialized airline escorts are assigned to family members, it is important to identify any immediate needs the family may have. This may include monetary, childcare, medical or religious needs.

Are there any steps that an airline can take to be better prepared to manage the manifest reconciliation process during an emergency?

It is strongly suggested that airlines periodically and randomly select flights that have departed and verify the manifest using each airline's specific emergency procedures for manifest reconciliation. This exercise provides an opportunity for employees to develop the habit of checking manifests against boarding documents. It may also identify procedural problems that can be corrected prior to an accident. After a period of time the airline will be able to establish a confidence level based on the accuracy of the initial manifests.

Is there a requirement by an airline to release the names of the passengers and crew to the media?

There is no requirement to release the names of passengers and crew to the media. However, once notification has been made, it is acceptable to ask a family how much time they will need to establish contact with other family members. There should be consideration in delaying any release of names until a family has had an opportunity to contact other family members.

It is important to keep family members informed, even if there is no additional news. Family members should receive regular updates. Please remember that if the airline states they will call a family member back within a specific time frame, then those calls must be done as close to the time set as possible.

Are there any steps an airline can take to limit the number of inquiry calls that follow a disaster?

When the media asks the airline for an 800/888 number, it is important for the airline to stress that the numbers are "only for those family members who have reason to believe that their loved one was onboard the flight". Also, the media should continue to reemphasize the name of the carrier, flight number, airport origination, connection and final destination.

The airline should also have an internal "call home" system. Upon learning that the airline has had a major accident, crews and employees should be advised through the company's internal communications network of the event to call home and advise family members of their well being.

Are there any special considerations for family members who wish to travel to the accident city?

Legislation requires that airlines will "assure" that they will provide transportation to the accident city and that they "assure" they will assist with the immediate needs of family members, including lodging.

It is unreasonable to ask a family member to travel alone to an accident site in which a loved one has been killed or injured. It is important for the airline to consider requests on a case by case basis as there are numerous factors that may require more than one family member or a non-family member to travel to the accident city.

Some family members may request to travel to the accident city via an alternate air carrier or alternate mode of travel (rental car, bus, or train). It is suggested that the airline try to honor such requests.

Are there any training topics that can help teach employees how to assist families following an accident?

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It is required that airlines train the employees in a number of areas, including, but not limited to: an understanding of the range of physical and emotional reaction to trauma, including long term effects from post traumatic stress disorder; understanding the need for information by family members and victims; skills to assist with age groups that range from children to the elderly; how to remain caring, non-judgmental and compassionate while assisting those who are suffering or who are extremely demanding or angry.

There should be a variety of methods used, including, but not limited to: small groups with role play scenarios; use of survivors and family members who relate their experiences in person or by video tape; timeline of the response from the first hour to the return of the remains and personal effects and first year anniversary; introduction to representatives of Federal agencies that would be involved in the accident and the American Red Cross.

It is also very important to tell employees about the effects they may encounter while responding to a major accident. Training should include methods employees can use take care of themselves during and after the response. It should also train them how to look out for co-workers who may be having difficulties.

After initial training there should be <u>annual</u> recurrent training.

Does an airline need to file their plan?

All carriers that are required to file their assurances must file with both the NTSB and the US DOT.

What issues should an airline consider in managing personal effects?

Due to the physical and psychological impact that the recovery process can have on airline employees, it is strongly suggested that a professional third party be employed to respond to and manage the recovery and cataloging of the personal effects effort.

Airlines need to allow family members the opportunity to view non-associated personal effects. This can be done via a catalog or a CD with photographs of the items.

What is the AIR Team?

The local Red Cross chapter will initiate the Red Cross response in accordance with local planning. These activities may be supported as needed by other Red Cross chapters from within the state. The Aviation Incident Response Team (AIR Team) made up of trained and experienced Red Cross disaster management specialists will mobilize within 4 hours, travel to the site and blend with the existing Red Cross response and coordinate and manage the resulting Red Cross response.

Why was the American Red Cross selected?

The NTSB designated the ARC because it met the requirements that were set forth in the legislation. The legislation required an organization that was independent and nonprofit, that had experience in disasters and post trauma communications with families, and could take the responsibility of coordinating the emotional care and support of the families of passengers involved in the accident.

Is there any requirement by an airline to meet with the ARC before a disaster occurs?

There are no mandates for an airline to meet with the ARC before a disaster. However, it is important that local airline station management and Red Cross chapters coordinate their local planning activities where appropriate to ensure each group's awareness of the other's plans. This will enhance the coordination of the immediate response. An annual pre-disaster meeting can eliminate any misunderstandings or confusion on services that may or may not be provided.

What other services can the ARC provide to an airline, family members, or the community where the disaster occurred?

The ARC can also provide emotional or critical incident stress debriefing (as required) for local agencies that may not have specialists or training in this area. If needed, they will assist with referrals to families for long term mental heath service providers.

What is the role of the U.S. State Department during an aviation disaster in the United States or its territories?

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The U.S. Department of State will be responsible for notifying a foreign government that citizens from their country were involved in an aviation disaster.

What assistance can the State Department offer to a foreign air carrier that has had an accident in the United States or its territories?

They can assist the affected foreign air carrier with alerting Customs and Immigration that a corporate "Go Team" is enroute to the accident city. They can assist with obtaining required visas or other documents required gaining entry into the United States.

Assistance can also be given to family members enroute to the accident city. The State Department will work with Customs and Immigrations to ensure that entry into the United States by these families is done in a timely and professional manner.

What is the difference between the Friends and Family reception center and the Family Assistance Center (FAC)?

The Friends and Family reception center will be located at the arriving and departing airports. This is a temporary location for family members to gather until a Family Assistance Center is established. The Family Assistance Center will typically be located in a hotel, but may be located in another type of facility, such as a college or community center. This is the location where families will gather to obtain information and assistance.

Who is responsible for the FAC?

The airline should secure a facility to accommodate all family members traveling to the accident city. Agencies providing support and services to families will work together to insure families are served properly. The NTSB has the overall responsibility to make certain the FAC runs smoothly, but relies upon the cooperation and support of all contributing organizations.

How will professionals and other service agencies in the local community be utilized?

ARC has been designated as the non-profit organization responsible for family care and mental health. In this capacity they will manage the recruitment, training and support of all volunteers, including those in the local community, through a Staff Processing Center. It is the intent of the ARC and the NTSB that local professionals and organizations affiliated with a disaster response agency/organization, spontaneous individual volunteers and groups are integrated in order to provide support to the incident as required.

Who is considered family for access to the FAC?

Today's family often does not have traditional boundaries. Any definition of "family member" should take into consideration that many individuals consider themselves to be the family of the victim, even though the law does not formally recognize the relationship. This would be the case for a fiancée or long-time companion. Family member will be defined in broad terms for the purpose of FAC access.

How do families not traveling to the accident city get information and support?

A conference call bridge will be used during family member briefings. Families not traveling to the accident city will be provided a toll-free number to connect to the bridge. In addition, the airlines will maintain contact and provide support to the family and the ARC can provide support through their chapters in the local community.

Who is responsible for the expenses associated with the FAC?

The airline is generally responsible for reasonable expenses associated with the set up and operation of the Family Assistance Center.

How do other service providers interact with the American Red Cross?

The ARC is interested in the assistance of others that can help at an accident. They will establish a staffprocessing center to ensure the best use of all resources. Other providers can contact the ARC through the processing center or can contact their local chapter of the ARC in advance if interested in assisting.

How will the airlines, local emergency responders, ARC, and other Federal agencies coordinate the services delivered to family members?

These services for families will be coordinated through a Joint Family Support Operation Center (JFSOC). The operations center will be facilitated by a member of the NTSB Office of Family Affairs and will have representation from each organization providing assistance. This will insure efficient use of resources and sharing of information.

What type of training will airline escorts need to work with the family members?

Many airlines have initiated extensive training for their family member escorts. For those who have not, it is important that the escorts understand the dynamics of working in this environment, what is expected of them, basic understanding of grief and trauma, and effective communication with families experiencing complicated grief.

How do the family members get answers to their individual questions?

First, they should ask their airline escort/representative for answers to their questions. If the airline representative cannot answer the question, they will notify their supervisor. The supervisor will either provide the answer or ask assistance from the agency that is most likely to have the answer.

What areas of consideration should airports have in planning to assist families during the first few hours of an aviation disaster?

Although airports are not currently required to plan for family assistance issues, airports should plan to assist passengers and their families during the initial hours of a disaster.

This is especially critical for those airlines that have limited manpower or are charter operations that may have no company representation at the airport.

Consideration should be given to providing family members a secluded Friends and Family reception area in which to gather while awaiting information from the airline about their loved one. Airline clubs, conference rooms, or restaurants can serve this purpose. This room should be away from the media and should have restrooms in or near by. Sheriff officers should be used to secure the room and the immediate area from the general public. If at all possible, choose a room that does not have a view that overlooks the crash site or recovery operation. Local Red Cross chapters should be included in planning sessions as they can provide mental health and health (nurses) services personnel, as well as other needed local resources, to assist airline staff with families at this location.

If the room or airline club has a television(s), it would be best to leave at least one television on and give family members the option to stay in that room or to stay in an area that does not have a television or one that is turned off. This option will allow those family members that wish to watch the news coverage of the disaster to do so.

What areas of consideration should be given when airports are reviewing their airport emergency plans?

If an airport's plan calls for sealing off access to the airport or terminals during an emergency, consideration should be given to asking local airline management to determine a list of those employees who would be required to have access to the airport or terminal(s) during such a period. Airport operations access (AOA) badges for these individuals should be issued with a unique indicator. Some airports have used the following indicators, "COMMAND POST", EMERGENCY ACCESS", "INCIDENT RESPONSE", "DISASTER RESPONSE" or a large letter "E". Once a format is chosen, the information is relayed to all law enforcement agencies that would be used to seal off the airport. This should allow those airline/airport personnel to gain access when roadways are closed.

Airports should consider placing large signs at their predetermined staging and emergency access areas and gates. These signs should be reflective, preferable white on red wording and in simple text. For example, **STAGING AREA "A" or MUTUAL AID ACCESS GATE #5.** These simple signs would assist in eliminating any confusion for mutual aid agencies that may respond to the airport or who have periodic personnel changes.

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Airports should review and contact all of the emergency service agencies within a five (5) mile radius of the airport. These agencies should receive aircraft emergency ingress/egress familiarization and training. Airport fire services can coordinate with airlines to arrange familiarization tours of various airline aircraft types.

There should be pre-accident meetings with local emergency planners, hospitals, American Red Cross, city, county, state Sheriff and fire services, and clergy.

Are there any special considerations about moving wreckage *after* life safety efforts have been completed?

Once the event has moved from a <u>rescue</u> to a <u>recovery</u> operation, the area should be sealed off until the first NTSB representative arrives on the scene and takes charge. <u>If at all possible, pieces of wreckage</u> <u>should not be moved</u>. If there is a need to move pieces of the wreckage, every effort to photograph the wreckage should be made prior to disturbing the items.

If the accident is caused by a criminal act, who will be in charge?

In a scenario in which the accident was caused by a criminal act, the FBI will be the lead agency. The NTSB will support the FBI with technical expertise. Even if it is not a criminal act, local authorities must ensure that all wreckage is preserved and not moved unless necessary for life safety activities

What resources can the NTSB provide to a medical examiner or coroner in the way of personnel, equipment and temporary morgue facilities?

Under the Federal Family Assistance Plan for Aviation Disasters, the NTSB will coordinate and integrate the resources of the Federal Government to support the efforts of the local and state government. The Department of Health and Human Services/Office of Emergency Preparedness (DHHS/OEP) has been designated as the primary agency for "Victim Identification and Forensic and Medical Services."

The Public Health Service, a division of DHHS has developed a Disaster Mortuary Operational Response Team (DMORT) and mobile morgue to provide manpower and technical assistance to support local medical examiners or coroners in times of an aviation disaster.

In addition, under the Federal plan, the NTSB can call upon the resources of the Department of Defense (DOD) and Federal Bureau of Investigation (FBI) Disaster Squad to provide additional support.

What is DMORT?

DMORT stands for Disaster Mortuary Operational Response Team. The team is set up to provide professional personnel and technical support and assistance to the local medical examiner or coroner in forensic services and victim identification. The team is composed of forensic pathologists, forensic anthropologists, forensic dentists, medical investigators, funeral directors and other technical support staff.

What is the Portable Morgue Unit?

The DMORT Portable Morgue Unit (DPMU) has been developed to support the processing and identification of victims in the event of a mass fatality incident. The DPMU is a packaged system containing all the equipment and supplies required to establish and operate a temporary morgue facility under austere field conditions and/or augment local morgue capabilities. It is designed to be deployed by land, sea and air transport.

What is the FBI Disaster Squad?

The FBI has a team of highly trained experts in the area of fingerprint identification. This team is normally activated simultaneously with the DMORT and will provide any assistance to the local medical examiner or coroner in the area of fingerprint identification.

In addition to the conventional means of identification, can DNA be used as another method of identification?

Dental records and x-rays along with fingerprints are normally the primary methods used in victim identification. DNA will be used as a last resort and only after all conventional means of identification are exhausted.

Will autopsies be performed on all flight crew and passengers?

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Generally speaking, the local medical examiner or coroner has jurisdiction and determines if autopsies will be conducted. The NTSB has specific requirements that the flight crew is autopsied and full toxicology tests are performed. Depending on the circumstances of the crash, the NTSB investigator-in-charge will consult with the medical examiner or coroner to determine if additional autopsies are required.

What is a FAA toxicology kit and how do I go about getting one?

A FAA toxicology kit is a kit that provides specimen collection vessels and instructions to the medical examiner in obtaining fluid and tissue samples needed by the FAA to test for drugs and alcohol in the blood system of the flight crew.

Generally, medical examiner offices throughout the country should have at least four kits on hand in their facility. If the medical examiner or coroner does not have access to kits, the NTSB team through the FAA representative will provide them.

How is ante mortem information obtained from family members?

Generally, the local medical examiner or coroner is responsible for obtaining medical record information from family members. However, in the event the local jurisdiction does not have enough staff to interview family members, trained DMORT members can be used to assist the local jurisdiction in interviewing family members.

Is the NTSB responsible for making positive identification of victims in the disaster?

The local coroner or medical examiner is responsible for making positive identification of victims. The NTSB can provide additional resources, such as the DMORT and/or the mobile morgue from the Department of Health and Human Services. These resources are available to help local authorities manage a large number of victims.

How does the local medical examiner or coroner request assistance?

The medical examiner or coroner should contact the Forensic Specialist, Office of Family Affairs, at the NTSB in Washington, DC. The specialist will ask them specific questions on the number of fatalities and what resources the medical examiner/coroner has or doesn't have in order to meet their responsibilities. The NTSB will activate the DMORT and FBI Disaster Squad at the request of the medical examiner or coroner. The telephone number is 202-314-6290.

ALERT AND WARNING PROCEDURES

The City of Agoura Hills is responsible for warning the citizens and community of the threat of imminent extraordinary danger. The City is committed to achieving success in saving lives and property which is dependent upon timely dissemination of warning and emergency information to persons in threatened areas. Although the Los Angeles Sheriff's Department Lost Hills Station has the primary responsibility to alert and warn the community, other departments may be required to initiate or assist in this task as needed.

There are various mechanical systems in place, described below, whereby an alert or warning may originate or be disseminated. Following the description of the systems is an explanation of the "Emergency Conditions and Warning Actions" through which these systems may be accessed.

ALERT AND WARNING SYSTEMS Emergency Alerting System (EAS)

The EAS is administered by the Sheriff of Los Angeles County. Activation of the Los Angeles County EAS shall be for emergency events and conditions of concern to a significant segment of the population of Los Angeles County. The message must be a voice message, it may be prerecorded and it must originate from the Sheriff's Communications Center.

How To Access EAS:

- Write your 50-60 second WARNING message to be broadcast. To assure broadcast and timely rebroadcasts, you should keep your message under one (1) minute. Be sure to include the <u>Who</u>, <u>What</u>, <u>Where</u>, <u>When</u>, <u>Why</u>, and the <u>How</u> in your message. *Never dictate the message to the LP1 station;* you are the announcer.
- Telephone the primary (LP1) EAS station for Agoura Hills.
 KFI (AM) 640 KHz Los Angeles, CA
 KNX (AM) 1070 kHz Los Angeles, CA
- **3.** Identify yourself by name and title.

State that you want to activate the Emergency Alert System because of a (nature of the emergency).

EAS station will initiate a call-back procedure to verify this as an authentic request from an authorized agency.

4. Once the request has been verified and authenticated:

Say "3 - 2 - 1" and read your message.

Remain quiet at the end until the station announcer speaks to you. The radio station will now do the rest.

5. It is imperative that your written message be uploaded to EDIS (Emergency Digital Information Service) ASAP! TV stations, CATV, and other media need your exact words in digital format to program their equipment for the hearing impaired, hard copy printers, etc.

The Emergency Alerting System (EAS) is designed for the broadcast media to disseminate emergency public information. This system enables the President, and federal, state and local governments to communicate with the general public through commercial broadcast stations.

Presidential messages, national programming, and news will be routed over established network facilities of the broadcast industry. State programming will originate from the state operations center and will be transmitted through the state using the state's CLERS VHF/UHF radio relay stations.

Message priorities are as follows:

PRIORITY ONE	Immediate and positive action without delay is required to save lives	
PRIORITY TWO	Actions required for the protection of property and instructions to the public requiring expedient dissemination	
PRIORITY THREE	Information to the public and all others	

(Reference: State EBS Operations Plan, Emergency Broadcast System, March 1987.)

Any one of the following parties can authorize local EAS activation:

- Sheriff of Los Angeles County or designate
- Chairman of the Los Angeles County Board of Supervisors or designate
- Authorized public official of the incorporated cities of Los Angeles County
- Authorized representative of National Oceanic & Atmosphere Administration (NOAA)

Examples of emergencies identified by Los Angeles County Operational Area, which may warrant either immediate or delayed response under EAS by the broadcast industry include earthquakes, serious fires, heavy rains and flooding, widespread power failures, severe industrial accidents, and hazardous material accidents and acts of terrorism. The context of any emergency broadcast transmitted on EAS should be of concern to a significant segment of the population of Los Angeles County.

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Electronic News Network (ENN)

The ENN is a subset of the EAS. It is a digital format that allows messages to be sent via the State of California's EDIS system. The media, schools, large business and anyone who monitors the AQMD channels will receive the digital message. It is less restrictive than an EAS broadcast and can be originated by any agency with access to a JDIC terminal. It allows for routine or test messages, in addition to emergency messages.

An ENN message should be concise and direct and be approved by the Deputy EOC Director or the Emergency Operations Director. The Public Information Officer is responsible for creating the message and its' content, however, law enforcement personnel with JDIC clearance must physically send the message.

To access ENN, type EDIS on a blank JDIC administration screen and fill in the appropriate prompts, including the full text of the message. When the message is sent, LASD personnel rebroadcast it over VHF frequencies.

National Weather Service (NWS)

The numbers for the NWS are in the Appendix section of this plan due to the fact that the numbers are restricted and confidential.

National Weather Service

520 No. Elevar St. Oxnard, CA 93030 http://www.wrh.noaa.gov/lox/

The National Weather Service transmits continuous weather information on 162.40, 162.475, and 162.55 MHz frequencies and on the Internet at <u>http://www.weather.gov/</u>. The frequency for the Los Angeles area is 162.55 MHz in the VHF radio band.

The City should report any unusual (funnel cloud, etc.) or other potentially hazardous weather situation to the NWS as quickly as possible.

More contact information for NWS is found in the Appendix.

California Emergency Services Fire Radio System (CESFRS)

White #1 is located in Dispatch and in the Mobile Command Center vehicle. White #1, White #2, and White #3 are in every Fire Apparatus. CESFRS is the statewide communications network, available to all fire agencies. The three available channels have been designated Fire White #1, #2, and #3. All three white channels are designated by the Federal Communications Commission as Intersystem channels and are intended solely for inter-agency fire operations, i.e. for mutual aid. White #2 and White #3 are intended for on-scene use only. Several Fire handhelds contain White #1, #2, and #3 frequencies. All White frequencies are in the VHF radio band and will not work on the Sheriff or Fire UHF radios.

California Law Enforcement Mutual Aid Radio System (CLEMARS)

<u>All Sheriff Department supervisor car radios are programmed with CLEMARS.</u> The City participates in CLEMARS and is licensed for mobile and base station communications. CLEMARS is found on many of the mobile and portable radios owned by the City. The Regional Law Enforcement Coordinator is responsible for coordination of use of the system within the Mutual Aid Region.

CLEMARS was established to provide common Sheriff radio frequencies for use statewide by state and local law enforcement agencies during periods of man-made or natural disasters or other emergencies where inter-agency coordination is required. It operates under appropriate FCC rules and regulations and is administered by the State of California through the Office of Emergency Services.

Participation in CLEMARS is open to all California Law Enforcement agencies, which are eligible to operate on radio frequencies authorized by the FCC for the Sheriff Radio Service. It usually operates in "simplex" or "direct" modes, without the use of a radio repeater.

California Law Enforcement Telecommunications System (CLETS)

The CLETS terminal in the City is housed at the Lost Hills Sheriff Station. CLETS is a high-speed message switching system, which became operational in 1970. CLETS provides law enforcement and criminal justice agencies access to various data bases and the ability to transmit and receive point-to-point administrative messages to other agencies within California or via the National Law Enforcement Telecommunications System (NLETS) to other states and Canada. Broadcast messages can be transmitted intrastate to participating agencies in the Group Bulletin Network and to regions nationwide via NLETS.

Emergency Digital Information System (EDIS)

The main purpose of EDIS is to distribute official information to officials and responders during emergencies. EDIS emergency notification subscriptions are available by email at www.incident.com

Caltech/U.S. Geological Survey Broadcast of Earthquakes (CUBE)

<u>CUBE pagers are available on a subscription format.</u> Earthquake data is collected at Caltech Seismological Laboratory and is reduced to provide earthquake time, location, intensity and magnitude. This information is then transmitted to the commercial paging system. Earthquake information can also be obtained at <u>www.trinet.org</u>.

COMMUNITY NOTIFICATION

The following are specific means to notify only the Agoura Hills community of an emergency.

Cable Television Override System

The City had prior agreements with existing cable television providers Time Warner Cable Company and Charter Communications under prior cable franchise agreements. With the

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passage of the Digital Infrastructure and Video Competition Act, all cable television providers, including the newest telecommunication companies (AT&T, Verizon, etc) now operate under a State franchise system, with franchise agreements issued by the State of California. DIVCA still requires the City to work with its cable providers to provide emergency alert systems and emergency overrides. The system can break into all TV's that are part of the cable system in Agoura Hills.

Cable has the responsibility of managing this system. Due to the confidential nature of contact information, please refer to the Medial Phone List in the Appendix Section of this document.

City Owned Cable TV Channels

The City's Cable Channels will provide directions to the citizens via graphic information.

City AHTV has the responsibility of the coordination of local cable television operations during a disaster. During normal business hours City AHTV can be contacted to request consideration of a programming segment. The City has final approval on what is shown on the channel.

Other

The following are other methods to disseminate Alert and Warning to the City:

- City's Connect-CTY
- Mobile emergency vehicle sirens and loudspeakers
- Helicopters using public address system
- Door-to-door notification
- Volunteer groups
- CERT/DRT Sector Leaders, CERT/DRT members, DCS members
- City employees

NATIONAL WEATHER SERVICE ISSUANCES

TYPES OF ISSUANCES

OUTLOOK-For events possible to develop in the extended period (extended definition depends on the type of event)

ADVISORY-For events that are occurring or are forecast to develop in the short term (generally within the next 6 hours)

WATCH-For the **possibility** of an event happening within the short term (generally refers to the next 6 to 12 hours)

WARNING-The most serious issuance! For life-threatening events occurring or forecast to develop within the short term (generally within the next 6 hours)

STATEMENTS (OR UPDATES)-Issued as updates to the above products

SPECIFIC TYPES OF ISSUANCES

FLASH FLOODING:

Flash Flood Warning: Flash Flooding is occurring or imminent.

Urban and Small Stream Flood Advisory: Flooding is occurring or imminent, but is not life threatening. (Nuisance flooding.) This may be upgraded to a Flash Flood Warning if conditions worsen.

Flash Flood Watch: There is a good possibility of Flash Flooding, but it is neither occurring nor imminent (generally means the possibility exists within the next 24 hours).

Flash Flood Statement: Updates any of the above three issuances.

Tornado and Severe Thunderstorm Warnings: Issued on the observation of a tornado, funnel cloud, or severe thunderstorm (a thunderstorm is defined as severe when it is accompanied by 58 mph winds or 3/4" hail), or the indication of any of the above based on radar data.

Tornado and Severe Thunderstorm Watches: Issued (by the National Severe Storms Forecast Center in Kansas City, MO) when there is a likelihood of development of either tornadoes or severe thunderstorms.

OTHER TYPES OF ISSUANCES

Dense Fog Advisory: Issued when dense fog (visibility below 2 mile) is expected to last for three hours or longer)

Dense Fog Warning: Issued when widespread zero or near-zero visibilities are forecast to last three hours or longer.

Refer to the Appendix section for contact numbers for the National Weather Service.

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PROCEDURES TO BE FOLLOWED FOR HANDLING THE DEAD

Overview: The Department of Coroner is responsible for the collection, identification, and disposition of decedents during conditions of disaster or extreme peril. Responsibilities include the following:

- 1. Identify human remains and provide adequate and decent storage.
- 2. Determine the cause and manner of death.
- 3. Inventory and protect personal effects found on the decedent.
- 4. Locate and notify the next-of-kin.
- 5. Release of remains.
- 6. Files and records death certificates.

Additional responsibilities include:

- 1. Coordinate with all agencies both public and private for the collection, identification, notification and disposition of human remains and their personal property.
- 2. Recruit additional, qualified personnel to perform those various duties.
- 3. Establishes collection points and body staging areas for processing the dead.

Assumptions: It is likely that fatalities will occur during a major disaster. Communications and transportation may be disrupted. The Department of Coroner may not be able to provide assistance for 72 hours or longer. Therefore, the City must take action to ensure the safe handling and storage of decedents until the Coroner or Coronerdesignated personnel can respond.

In the event of a major disaster within Los Angeles County, it may be several days before the dead can be collected and processed by the Department of the Chief Medical Examiner-Coroner.

Therefore, the following guidelines have been prepared to aid the City in handling the dead until the Coroner can relieve the City of that responsibility.

Handling the Dead

When it becomes necessary to remove the dead from disaster sites because rescue work is in progress or the health and safety of the community is threatened, specific procedures **must** be followed:

Procedures:

- I. Handling of decedents who have been located.
 - 1. Determine if the decedent(s) can be safely moved.

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- a. Structural damage and debris may prevent the safe removal of one or more decedents. If this is the case, clearly mark area for later removal of decedent by the Coroner Team and support personnel. Use an indelible marker or spray paint. Write letters DOA and arrow pointing to the location of the decedent.
- b. If decedent or body parts can be removed, refer to body-wrapping procedures before removing to fatality collection area.
- 2. Set aside an area that can be used as a collection point for fatalities. This can be termed the building mortuary. Cement parking structures, covered areas, nearby parks, etc. are ideal for this purpose. Special care should be taken not to place bodies where following supplies are recommended to be kept on hand for the number of possible fatalities: body bags, heavy duty gloves, rubber gloves, plastic aprons, face masks, household Clorox, indelible markers.
- 3. When handling decedents, follow precautions for infection control. Wear rubber or heavy duty leather gloves, facemask, and protective clothing. Always wash hands with antiseptic solution after handling decedents.
 - a. If a body can be moved, perform the following:
 - (1) **Do not** remove any personal effects from the body at any time. Personal effects must remain with the body **at all times**.
 - (2) Secure body in plastic or vinyl body bag. If a body bag is not available, wrap and secure body with plastic sheet approximately .25mm in thickness. Place body in center of sheet cut 4 ft. X 10 ft. or use two heavy duty lawn debris trash bags. Secure in such a manner that fluids are contained using tie wrap or 3 ply cotton rope. Do not damage body when securing (For example, do not secure rope around the face. This may disfigure the body and hinder identification efforts.).
 - (3) Complete Body Identification Sheet (See Attached).
 - a. Attach a tag or label to the body with the following information (see attached sample):
 - b. Record identity, if known, e.g. through personal recognition, and important details on the discovery of the body (i.e. address, location, position).
 - c. Date and time found.
 - d. Exact location where found, including floor/room number, etc.
 - e. Name/address of decedent, if known.
 - f. If identified, how, when and by whom.
 - g. Name/phone number of person filling out tag.
 - e. If body is contaminated, so state with type of contamination.
 - f. Other casualties (living and dead) found nearby.
 - (4) Place each body in a separate disaster pouch or in plastic sheeting and tie securely to prevent unwrapping. Securely attach a second tag

with the same information stated in Item No. 2 to the outside of the sheeting or pouch.

- (5) If personal effects are found and thought to belong to a body, place them in a separate container and labeled as in Item No. 2. **Do not** assume any loose effects belong to a body and do not attach loose effects to the body but, store separately.
- (6) Move the properly tagged body with its personal effects to a convenient location, i.e., garage or other cool building, preferably one with refrigeration. In case of extreme heat or direct sunlight, move the body **as soon as possible**.
- (7) Move bagged body to fatality collection area. Establish security to prevent looting of bodies. Keep log sheet for number of bodies stored and a grid showing the location of each body.
- II. The putrefaction process is strongly temperature-dependent and also dependent on exposure.
 - A. Temperature (the season of the year) makes a big difference in the speed of putrefaction of exposed human bodies in Los Angeles County. The following approximations are dependent on the temperatures prevailing at the time:

	Summer	Winter
Facially identifiable	day 1	day 5
Bloating	day 2	day 2 - 6
Putrefaction/external maggots	day 3	day 3 - 10
Collapse of face and abdomen/internal maggots	day 4 - 8	week 2 - 3
Skeletonizing	week 2	week 3+
Dismemberment	week 3+	week 6+

FOR MORE INFORMATION, CONTACT THE LOS ANGELES COUNTY DEPARTMENT OF CORONER/DISASTER AND COMMUNITY SERVICES PROGRAM (See Appendix for contact numbers).

EVACUATION AND CARE OF PETS AND LIVESTOCK

The evacuation and care of pets and livestock in Agoura Hills is coordinated with the County of Los Angeles Animal Care and Control.

Emergency Information

The Agoura Hills website at <u>www.ci.agoura-hills.ca.us</u> features down-loadable emergency preparedness information for both small animals and horses to enable the animal owner to be ready in the event of an evacuation order.

Emergency Management

The Chief Administrative Officer's Office of Emergency Management (OEM) is charged with the responsibility to organize and direct preparedness efforts for Los Angeles County. OEM's area of responsibility includes county government, all cities (including Agoura Hills), school districts and special districts within county borders.

Small Animals

For the evacuation and care of small animals, the Los Angeles County Sheriff's Department at Lost Hills Station works in cooperation and coordination with the:

LA County Agoura Shelter 29525 Agoura Road Agoura Hills CA 91301 (818) 991-0071 Hours: Monday through Thursday 12 PM-7PM Friday through Sunday 10 AM-5PM

Closed Holidays Directions: Exit the Ventura Freeway at Kanan Road; go south to Agoura Road, turn right.

Large Animals

In the event of an emergency which requires large animal evacuations, Los Angeles County Office of Emergency Management will select and activate the evacuation site to be used. For the City of Agoura Hills, Pierce College Equestrian Center is the most convenient location.

In the event of a major emergency or disaster, up-to-date evacuation information, as well as; LA County Online Emergency Information or LA Animal Services – Preparing for Emergencies is available at http://community.piercecollege.edu/equestrian/emerginfo.html

Pierce Equestrian Center (PEC) 6201 Winnetka Avenue Woodland Hills CA 91367 (818) 710-3308

CASUALTY COLLECTION POINT (CCP) FIELD TREATMENT SITE

DEFINITION:

Casualty Collection Point or Field Treatment Site is a location within a jurisdiction that is used for the assembly, triage (sorting), medical stabilization and subsequent evacuation of casualties. It may be used for the receipt of incoming medical resources (doctors, nurses, supplies, etc.) Preferably the site should include or be adjacent to an open area suitable for use as a helicopter pad. The State Emergency Services Authority is now referring to CCPs as Field Treatment Sites rather than Casualty Collection Points.

DIRECTION AND GUIDELINES:

Each hospital is assigned one Field Treatment Site (FTS) and an alternate site. That facility is responsible for opening, staffing, and supplying this site. It is anticipated that prior assessment addressing numbers of professional and paraprofessional personnel available in each area will be done. Volunteer medical personnel will be requested by emergency alert stations to report to the nearest FTS when they are able to do so. A recent photo I.D. listing medical training and licensure should be presented. Field Treatment Sites will be opened by decision of the Health Officer in the event of multi-casualty incident(s) or requests for medical mutual aid from neighboring counties.

FTS s will be established, as necessary on the premises of local hospitals. If no hospital exists in the area, the EMS agency will coordinate with local emergency management agencies to establish a location.

For planning purposes, the following <u>assumptions</u> are made:

- 1. The flow of casualties is unpredictable depending upon its distance from casualties, success of public information efforts, its accessibility, and the pace of search and rescue operations. It is assumed, for planning purposes, that an influx of 600 casualties per 24-hour period is appropriate.
- 2. Due to limited availability of transportation, evacuation of casualties from some FTS s may not begin until 72 hours after the disaster occurs.
- 3. Supplies from outside the disaster area may not reach some FTS s for 12-48 hours after the disaster occurs.
- 4. Water, power, and other resources will be extremely scarce, limiting the type of medical field treatment feasible at a FTS.
- 5. You must plan from a worst-case incident involving dam failures, flooding, shaking intensity, liquefaction, etc.

The primary purpose of FTS s is to facilitate the stabilization of casualties for evacuation from the disaster site to a more definitive facility designated by the State. FTS s will be able to provide only the most austere medical field treatment directed primarily to the moderately/severely injured or ill requiring later definitive care and who have a substantial potential of surviving until they are evacuated to the other state facility or other medical field treatment center. The state facility will operate under the direction of

City of Agoura Hills Operations Support Documentation	
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the State Disaster Medical Services Coordinator or his/her designee, and County officials shall be notified of such. The California National Guard will establish two field hospitals at the state facility capable of providing an intermediate level of surgical and medical care. This, however, will probably require a minimum of 48 hours to set up and staff and will contain about 300 beds.

Field Treatment Sites are chosen according to the following criteria:

- 1. Proximity to hospitals (to allow rapid staffing and delivery of supplies).
- 2. Proximity to areas which are most likely to have large numbers of casualties.
- 3. Distribution of locations throughout the jurisdiction.
- 4. Ease of access for staff, supplies, and casualties.
- 5. Ease of evacuation (by land when practical, or if necessary, air and water).
- 6. Capability of utilization of large amounts of open space so that immediate use of buildings is not necessary.
- 7. Site without competing use (i.e., mass care and shelter areas)
- 8. Ability to secure the area.

The Field Treatment Sites will be supported by Mobile First Aid Caches and Disaster Medical Assistance Centers. The Mobile First Aid Cache has enough Basic Life Support supplies to meet the needs of 100 patients.

PRE-DESIGNATED FIELD TREATMENT SITES

RESPONSE GROUP 1

LAC + U.S.C. Medical Center 1200 N. State Street Los Angeles, CA 90033

RESPONSE GROUP 2

Kaiser Permanente, Harbor City 25825 S. Vermont Ave. Harbor City, CA 90710

Little Company of Mary Hospital 4101 Torrance Blvd. Torrance, CA 90503

RESPONSE GROUP 3

Rancho Los Amigos Medical Center 7601 East Imperial Highway Downey, CA 90242

RESPONSE GROUP 4

VA Medical Center - Long Beach 5901 East Seventh Street Long Beach, CA 90822

RESPONSE GROUP 5

Queen of the Valley Hospital 1115 South Sunset Avenue West Covina, CA 91790-3999

RESPONSE GROUP 6

Henry Mayo Hospital 23845 W. McBean Parkway Valencia, CA 91355

RESPONSE GROUP 6 continued

Holy Cross Medical Center 15031 Rinaldi Street Mission Hills, CA 91352

Pacifica Hospital of the Valley 9449 San Fernando Road Sun Valley, CA 91352

RESPONSE GROUP 7

Northridge Hospital Medical Center 18300 Roscoe Boulevard Northridge, CA 91328

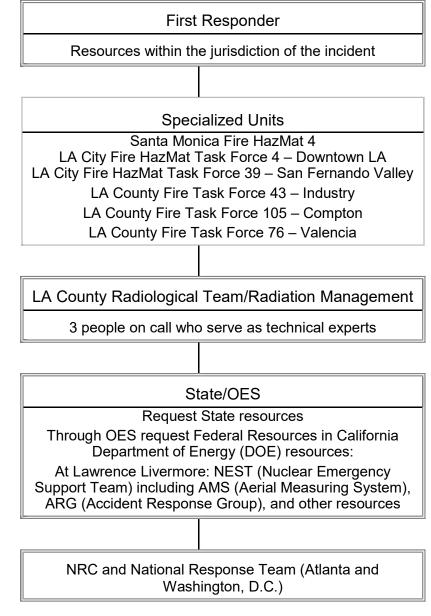
VA Medical Center - W. Los Angeles 11301 Wilshire Blvd. Los Angeles, CA 90073

RESPONSE GROUP 8

High Desert Hospital 44900 N. 60th Street West Lancaster, CA 93536 Page intended to be blank.

RADIOLOGICAL PROTECTION PROCEDURES FOR CITIES IN THE LOS ANGELES COUNTY OPERATIONAL AREA

RADIOLOGICAL INCIDENTS: TIERED RESPONSE



PROCEDURES

Refer to Los Angeles County Fire Department Emergency Operations Manual.

Refer to Fire Department SOPs for Hazardous Materials/Radiological Incidents.

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Operations Support Documentation

CIVIL PREPAREDNESS GUIDE (CPG) RADIOLOGICAL PROTECTION REQUIREMENTS

In conjunction with the Logistics Section, obtain and maintain radiation and hazardous materials detection devices.

- All Fire Department fire apparatus carry radiological equipment that will detect beta and gamma radiation.
- Fire Department HazMat Squads carry radiological equipment that can detect alpha, beta and gamma radiation.
- Fire Department does maintain RADEF equipment. (All Fire Department front line apparatus carry dosimeters. District Engines, the Truck and the Command Vehicle carry monitors capable of detecting alpha, beta and gamma radiation as well as radiological contamination.)

Maintain radiation exposure records for response personnel and require dosimeter readings at appropriate frequencies, if necessary, during emergency operations.

- Safety Officer at incident site
- Long-term maintenance (career exposure)
 - Individual personnel records. Radiation exposure records for Fire personnel will be maintained at the Fire Department
 - Health care providers

Follow Fire Department procedures for radiological decontamination of response personnel, equipment, supplies, instruments and facilities.

See City of Agoura Hills Hazardous Materials SOPs for Radiological Protection Procedures.

See Los Angeles County Fire Department Emergency Operations Manual Hazardous Materials Incidents: Vol. 10, chapter 6, subject 1, pages 12-13 Radiological Monitoring: volume 5, chapter 7, subject 1, pages 78-80

Identify medical facilities with the capability to decontaminate radiological or chemically contaminated casualties.

The Hospital Council of Southern California's Radiation Accident Guidelines dated January 1978 (currently under revision) states: "*If victims are required to be transported to hospitals, this activity will be coordinated by Los Angeles County: The Medical Alert Center (MAC)*"

In conjunction with the Health Branch, develop procedures for determining the levels of radiation exposure of affected individuals and providing treatment and care.

- Utilize the radiological equipment at scene to determine levels of radiation exposure.
- Apply regular department procedures for treatment.

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Appoint personnel to perform radiological monitoring, reporting and decontamination duties during emergencies.

- Appointment of personnel is specific to the incident tiered response.
- Every Fire Fighter has received minimum training competencies in radiological response.
- Every Fire Fighter has radiological training

In conjunction with the Planning/Intelligence Section, prepare radiological reports for submission to the state or federal governments, as appropriate.

Utilizing federal guidance with input from the state and local health agencies, arrange for crisis training of emergency services staff and shelter teams for radiological monitoring reporting and decontamination duties.

• Station in-service drills are held on radiological monitoring to update field personnel.

In conjunction with the Logistics Section, the FD Training Officer will identify instructors for crisis training in radiological monitoring, reporting and decontamination for field and EOC operations.

In conjunction with the Logistics Section, maintain an inventory list of the source and quantity of available RADEF instruments.

- All Fire Department fire engines and LA County Health HazMat units carry appropriate equipment to detect high and low levels of radiation.
- Fire Department apparatus carry radiation detection equipment. All apparatus carry dosimetry equipment capable of measuring gamma radiation.

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EMERGENCY POTABLE WATER PROCUREMENT & DISTRIBUTION

INTRODUCTION

The following procedures are designed to facilitate acquisition and distribution of alternative potable water. They set forth-specific activities that should be considered to evaluate emergency situations and then to procure and distribute potable water to critical locations if needed.

Primary Response Agency Roles and Responsibilities:

Agent:	Function:
City of Agoura Hills in cooperation with the LVMWD by way LVMWD.	Primary responsibility for purchase and distribution of in alternate source of potable water for populations within its jurisdiction. Operates Local Emergency Operations Center (LEOC): Coordinates resources and manages operations for distribution of alternative potable water to affected populations
Los Angeles County (Operational Area) Health	Operates Operational Area Emergency Operations Center (OAEOC): Coordinates county resources and assists Dept. of LEOC(s) in providing potable water to affected population(s).
State Governor's Office of Emergency Services	Coordinates federal, state, and regional resources to assist OAEOC(s) in providing alternative source of potable water to affected populations. Operates Regional Emergency Operations Center (REOC) and State Operations Center (SOC).
Federal Emergency Management Agency (FEMA)	Coordinates federal emergency response resources and provides alternate source of potable water to affected populations, as requested by State.

Note: For the purpose of this document: "alternative potable water" and "emergency potable water" means water that is supplied from an alternative source and/or delivery system. The Governor's Office of Emergency Management will assist local government in pursuing possible Federal reimbursement for costs incurred.

WATER CONCEPT OF OPERATIONS

During the initial hours following an emergency it is especially important to ascertain the scale of the emergency and the areas where the potable water supply and delivery system has been affected.

PROCUREMENT AND DISTRIBUTION PROCESS

Successful implementation of these procedures will require the support of public, private, and volunteer agencies. The following identifies the public, private, and volunteer agencies, which will play a part in the acquisition and distribution of emergency potable water and assigns to them specific roles and responsibilities.

OPERATIONAL AREA

The **Los Angeles County Department of Health** is the primary agency responsible for the purchase and distribution of emergency potable water to populations within its jurisdiction.

CITY OF AGOURA HILLS

In cooperation with the Las Virgenes Municipal Water District (LVMWD), provides alternate source of potable water to affected populations. Deploy Field Response personnel activate Local Emergency Operations Center(s) (LEOC) and Operational Area Emergency Operations Center (OAEOC). Implement duties pursuant to Field Response Agent, LEOC and OAEOC roles and responsibilities.

GOVERNOR'S OFFICE OF EMERGENCY MANAGEMENT (OES)

If the Operational Area cannot provide enough alternate source of potable water to affected populations, the State OES will activate Regional Emergency Operations Center(s) (REOC) and State Operations Center (SOC). Implement duties pursuant to REOC and SOC roles and responsibilities.

FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA)

Provide alternate source of potable water to affected populations, as requested by State. Implement duties pursuant to FEMA roles and responsibilities.

RESPONSIBILITY

The Operations Section is the lead section to cooperate with the LVMWD in establishing and operating emergency potable water distribution sites.

The Operations Section is responsible for working with the LVMWD to evaluate needs assessments and prioritize resource allocation. When necessary, Operations is to help establish or assist in the establishment and operation of the alternative potable water procurement and distribution program. The size, makeup and specific assignment of the City's emergency staff will be dependent on the magnitude of the problem at hand.

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The Water Coordinator and Water Task Group will be staffed by the Las Virgenes Municipal Water District. The Operations Section staff as determined appropriate will act as Liaison with the LVMWD

Duties of the water coordinator/water task group are as follows:

- 1. Serve as EOC primary contact for all potable water procurement and distribution matters.
- 2. Coordinate conference calls with other level EOC water coordinators to assess potable water needs.
- 3. Obtain consolidated situation information compiled by the Planning/Intelligence Section and other sources. This information would include:
 - cause and extent of water system damage
 - estimated duration of system outage
 - geographical area affected
 - population affected
 - actions taken to restore system
 - resources needed to reactivate system
 - emergency potable water needs (quantity and prioritized areas)
- 4. Prioritize distribution locations (include needs of critical facilities) and make recommendations to the Operations Section Chief.
- 5. Identify and secure potable water resources with assistance from the Logistics Section, Procurement Unit.
- 6. Identify transportation and equipment needs and secure required resources through the Logistics Section, Procurement Unit.
- 7. Coordinate with DHS, water utilities, and EOC Public Information Officer for appropriate public information announcements and Media interface.
- 8. Document all information related to expenditures, resource commitments, contracts and other costs related to procurement and distribution of potable water and provide such information to the Finance and Administration Section.

EMERGENCY POTABLE WATER SUPPLY CONSIDERATIONS

When there is a need for emergency potable water, everyone should work with the Operational Area and with the State Department of Health Services, Division of Drinking Water and Environmental Management. When there is a "Boil Water" advisory, the public should be advised to bring water to a rapid boil for 1-2 minutes. In the event of any other situation that may require supplying potable water, the Local Emergency Operations Center (LEOC) and Operational Area Emergency Operations Center (OAEOC) will utilize the following options in the order listed below. All City requests should go through the Operational Area EOC.

Bottled Water

Water in one-gallon plastic containers is by far the most convenient and effective way to initially provide emergency water to the public. A list of approved commercial vendors is

maintained by the State Department of Health Services, Food and Drug Branch, is available through the REOC Operations Section Water Coordinator.

The Regional Emergency Operations Center (REOC) can arrange transportation, if necessary, with state assets. Water and beverage bottlers sometimes offer free bottled water and delivery.

Bulk Potable Water Deliveries: (If bottled water is not a viable option)

Bulk potable water deliveries are for limited use and should only be employed for immediate crisis situations when the first option is not available. Bulk potable water may also be needed for critical facilities such as hospitals, clinics and other health facilities.

Portions of the existing potable water system, or near by systems, may continue to have potable water in their normal distribution systems. These sources are closest and easiest to access and should be used for bulk water deliveries.

National Guard water buffaloes (500 gallon trailers) are available in limited numbers and should only be used to support evacuation efforts and immediate crisis situations. The small volume necessitates that water tenders keep buffaloes filled.

Water Purification Systems: (If bulk potable water deliveries are not a viable option):

Commercial portable water purification systems are available where connection to an approved water source and some means of storing or distributing water is available. Approved and licensed commercial vendors can provide limited water storage (approximately 1,000 gallons). The State Department of Health Services Drinking Water Program or County Health Department must approve the water source to assure that the treatment is sufficient to deal with the level of contamination, and confirm the integrity of the system. The National Guard has limited purification capability, which should only be requested when all other options are exhausted.

CITY OF AGOURA HILLS DEBRIS MANAGEMENT PLAN

Purpose

To facilitate and coordinate the removal, collection and disposal of debris following a disaster; to mitigate any potential threat to the health, safety, and welfare of the impacted citizens, and expedite recovery efforts in the impacted area; and to address any threat of significant damage to improved public or private property.

Situations

Natural and man-made disasters precipitate a variety of debris that includes, but is not limited to, such things as trees, sand, gravel building/construction materials, vehicles, personal property, etc.

The quantity and type of debris generated from any particular disaster is a function of the location and kind of event experienced, as well as its magnitude, duration, and intensity. The quantity and type of debris generated, its location, and the size of the area over which it is dispersed directly impacts the type of collection and disposal methods used to address the debris problem, associated costs incurred, and the speed with which the problem can be addressed.

In a major or catastrophic disaster, the City of Agoura Hills will not have staff, equipment and funds to devote to debris removal in the short, as well as long, term. Private contractors play a significant role in the debris removal, collection, reduction and disposal process.

The debris management program implemented by the City of Agoura Hills will be based on the waste management approach of reduction, reuse, reclamation, resource recovery, incineration and land filling. The City of Agoura Hills will work with its residential franchise collector to finalize implementation of the debris management plan.

Organization and Concept of Operations

The Public Works Department is responsible for the debris removal function. It will work in conjunction with designated support agencies, utility companies, waste management firms and trucking companies to facilitate the debris clearance, collection, reduction and disposal needs following a disaster.

The Public Works Department is responsible for removing debris from the public right of way. Only when it is deemed in the public interest will debris be removed from private property. If necessary, equipment will be staged in strategic locations both locally as well as regionally, to protect the equipment from damage, preserve the decision maker's flexibility for employment of the equipment and all for the clearing crews to begin work immediately after the disaster.

The City of Agoura Hills is responsible for developing a debris management plan and shall select a "Debris Manager" to supervise a "Debris Management Staff," as needed. The staff shall be comprised of personnel to perform the following functions:

Administration

Function: Housekeeping, supplies, equipment, funding and accounting. **Contracting and Procurement**

Function: Bidding requirements, form, advertisements for bids, instruction to bidders, and contract development.

Legal

Function: Contract review, right of entry permits, community liability, condemnation of buildings, land acquisition for temporary staging and reduction sites, insurance.

Operations

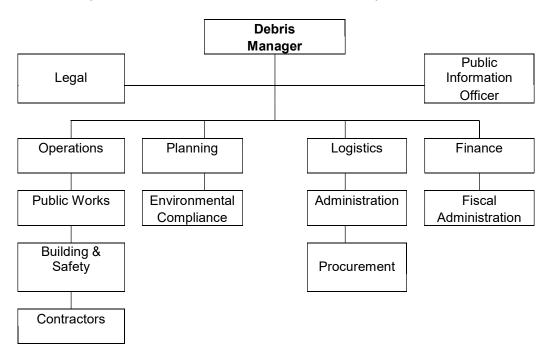
Function: Supervision of Government and contract resources and overall project management.

Engineering

Function: Detailed damage assessment, identification of project tasks, assignments of tasks, preparation of estimates, plans, specifications and recommendation of contract award

Public Information

Function: Coordinate press releases, contacts with local organizations, individuals and media, public notices for debris removal and disposal contracts.



Contracts and Cooperative Agreements

The City of Agoura Hills will be responsible for managing the debris contract from project inception to completion. Managing the debris contract includes such things as monitoring performance, contract modifications, inspections, acceptance, payment, and closing out

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of activities. The City of Agoura Hills will consider entering into cooperative agreements with other state agencies and local governments to maximize public assets. The development of such agreements must comply with existing contract guidelines.

The three types of contracts that could be considered in Debris Management are:

- 1. Times and Materials Contract;
- 2. Lump Sum Contract;
- 3. Unit Price Contract.

Debris Storage and Reduction Sites

Debris storage and reduction sites will be identified and evaluated by interagency site selection teams comprised of a multi-disciplinary staff that is familiar with the area. A listing of appropriate local, state, and federal contacts will be developed by the appropriate agencies to expedite the formation of the interagency, multi-disciplinary site selection teams. Initially debris will be placed in temporary holding areas, determined before the onset of the disaster, until such time as a detailed plan for debris collection and disposal is prepared. This is not anticipated to take place until after local traffic has been restored.

Temporary debris collection sites should be readily accessible by recovery equipment and should not require extensive preparation or coordination for use. Collection sites will be on public property whenever feasible to facilitate the implementation of the mission and mitigate any potential liability requirements. Activation of sites will be under the control of the City Manager (or designee) and will be coordinated with other recovery efforts through the Agoura Hills EOC.

Site selection criteria will be developed into a checklist format for use by these teams to facilitate identification and assessment of potential sites. Criteria will include such factors as ownership of property, size of parcel, surrounding land uses, environmental conditions, and transportation access.

Debris Removal Priorities

The debris removal process must be initiated promptly and conducted in an orderly, effective manner in order to protect public health and safety following a major or catastrophic event. To achieve this objective, the first priority will be to clear debris from key roads in order to provide access for emergency vehicles and resources into the impacted areas. Key roads in Agoura are identified as follows:

- Agoura Road
- Thousand Oaks Blvd.
- Canwood Road
- Driver Avenue
- Liberty Canyon
- Chesebro
- Kanan Road
- Reyes Adobe Road

City of Agoura Hills

The need and demand for critical services will increase significantly following a disaster. Therefore, the second priority of debris removal resources will be to provide access to critical facilities pre-identified by state and local governments. Critical facilities in Agoura Hills have been identified as

- Civic Center (City Hall and Library)
- Fire Station
- Recreation Center
- Animal Control Center

The third priority for the debris removal teams to address will be the elimination of debris related threats to public health and safety. This will include such things as the repair, demolition or barricading of heavily damaged and structurally unstable buildings, systems or facilities that pose a danger to the public. Any actions taken to mitigate or eliminate the threat to the public health and safety must be closely coordinated with the owner or responsible party.

Debris Classification

To facilitate the debris management process, debris will be segregated by type. It is recommended that the categories of debris established for recovery operations be standardized.

Segregation of Debris

Garbage and trash from residents should be set out at the curb as normal. Residents will be reminded not to mix garbage and trash with structural debris, vegetation, tires, household hazardous waste or appliances. Debris shall be segregated by categories:

- Household Hazardous Waste (HHW)
- Business Hazardous Waste
- Special Waste
- Appliances
- Asbestos
- Ash Disposal
- Soil Disposal
- Waste Tires
- Dead Animals

Public Information will develop a proactive information management plan. Emphasis will be placed on actions that the public can perform to expedite the cleanup process. Flyers, newspapers, radio and TV public service announcements will be used to obtain the public's cooperation in segregating debris. Pickup schedules will be disseminated in the local news media.

Site Close-Out Procedures

Each temporary debris staging and reduction site will eventually be emptied of all material and be restored to its previous condition and use. Before activities begin, ground photos will be taken. After activities begin, constant monitoring of soil, water and air quality should take place. Photo, maps and sketches of the site will be updated and fuel spills noted. At closeout, final testing of soil, water and air qualities

Debris Management Actions

The Debris Management Plan is separated into four stages:

Stage 1 Normal Operations

- Develop a local and regional resource list of contractors who can assist local governments in all phases of debris management.
- Develop sample contracts with generic scopes of work to expedite the implementation of debris management strategies.
- Identify and pre-designate potential debris storage sites for various types and quantities of debris anticipated following a catastrophic event.
- Pre-identify local and regional critical routes and key roads in cooperation with contiguous and regional jurisdictions.
- Develop site selection criteria checklists to assist in identifying potential debris storage sites.
- Identify and coordinate with appropriate regulatory agencies regarding potential regulator issues and emergency response needs.
- Develop the necessary right of entry and hold harmless agreements indemnifying all levels of government against potential claims.
- Establish damage and debris assessment processes to define the scope of the problem.
- Develop and coordinate pre-scripted announcements with the PIO regarding debris removal processes, collection times, temporary storage sites, use of private contractors, environmental and health issues, etc.

Stage 2 Increased Readiness (a natural or man-made disaster has hit or is threatening the local area)

- Review and update plans, standard operating procedures, generic contracts, and checklists relating to debris removal, storage, reduction, and disposal process.
- Alert personnel who have debris removal responsibilities to make sure that personnel, facilities and equipment are ready and available for emergency use.
- Review potential local, regional, and debris staging and reduction sites that may be used in the response and recovery phases of the impeding threat.
- Review the resources list of private contractors who may assist in the debris removal process and make necessary arrangements to ensure their availability in the event of the disaster.

Stage 3 Response

- Activate debris management plan; coordinate with needs assessment team.
- Begin documenting costs.
- Coordinate and track resources (public and private).

City of Agoura Hills

- Establish priorities regarding allocation and use of available resources.
- Identify and establish temporary debris storage and disposal sites (local, regional).
- Address legal, environmental, and health issues relating to the debris removal process.
- Continue to keep the public informed through the PIO.

Stage 4 Recovery

- Continue to collect, store, reduce, and dispose of debris generated from the event in a cost-effective and environmentally responsible manner.
- Continue to document costs.
- Upon completion of debris removal mission, close out debris storage and reduction sites by developing and implementing the necessary site restoration actions.
- Perform necessary audits of operation and submit claim for federal assistance.

Shelter Site:		,	Report	ty of Agoura H Shelter Activity o City EOC by 8:0	Daily S	Report		
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Supplies Needed:

Immediate	Future

Additional Comments:

CRITICAL FACILITY STATUS LOG

Facility	Status	Comments All Persons Accounted for Number and type of injuries Missing persons, names Assistance required
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Facility	Status	Comments All Persons Accounted for Number and type of injuries Missing persons, names Assistance required

BODY IDENTIFICATION SHEET

A.	Name:	
	Method of Identification:	Visual Recognition ID found on Body
	DOE (Unidentified):	
	WHERE: Found at (room nur	nber, floor, street, nearest intersection, etc.):
	TIME: Found at	AM/PM.
	There were no signs of life	(e.g., obvious signs of decomposition, no movement, no pain). The decedent was declared dead by the person
В.	The following valuables and follows:	personal effects were found with the body and listed as
	Clothing	Wristwatch Jewelry
	Other	
	These items have been wrap	ped with the body.
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	ion cited above.	
(Signatu	ire of party completing documer	nt) Date
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Address		

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S M T W Th F S City of Agoura Hills - Daily EOC Operational Period # PM toM PM toM Operational Period # PM toM PM toM PM toM es Section/Fersonnel Unit - Coordinator: - Coordinator: EOC Position Employee Name Dept/Agency Check Int Nums Specific Tasks EOC Position Employee Name Dept/Agency Check Int Hust Specific Tasks EOC Position Employee Name Dept/Agency Check Int Hust Specific Tasks EOC Position Employee Name Dept/Agency Check Int Hust Specific Tasks EOC Position Employee Name Dept/Agency Check Int Hust Specific Tasks EOC Position Enclose Name Dout Time Dout Time No Interviewer EOC Position Enclose Name Dout Time Dout Time No Interviewer EOC Position Enclose Name Dout Time No Interviewer Interviewer EOC Position Enclose Name Interviewer Coocutination Interviewer Interviewer<	
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	Signed Logistics/Personnel Coordinator.
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EOC INDIVIDUAL ACTIVITY LOG

SEMS/NIMS EMERGENCY OPERATIONS PLAN

City of Agoura Hills

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Activity Area	Phase 1 & 2 Interpandemic Period	Phase 3 Pandemic Alert (No, or rare, human-to- human transmission)	Phase 4 Pandemic Alert (Small clusters of human-to-human transmission)	Phase 5 Pandemic Alert (Larger clusters of human to-human transmission)	Phase 6 Pandemic period
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Activity Area	Phase 1 & 2 Interpandemic Period	Phase 3 Pandemic Alert (No, or rare, human- to-human transmission)	Phase 4 Pandemic Alert (Small clusters of human-to-human transmission)	Phase 5 Pandemic Alert (Larger clusters of human to-human transmission)	Phase 6 Pandemic period
Surveillance	Surveillance for illness and resources utilization Monitoring of world/national/state trends	Increase surveillance for influenza-like illness (ILI) among recent travelers to the affected region Continue monitoring of world, national, and statewide trends Disease surveillance to detect a case of novel virus in LAC	Review of death related to ILI/pneumonia Monitoring of international, national and statewide trends Work with agencies to detect influenza in animals	Surveillance efforts increased for both influenza and the circulation of influenza virus	Monitoring demographic characteristics of influenza cases to respond more effectively to the pandemic
Laboratory	Surveillance of hospital lab activity	Subtype influenza A insolates obtained	Report unusual human influenza cases to state, DHS and CDC	Provide guidelines for lab reporting on influenza specimens	Continue working with public health staff, local physicians, and hospital workers to implement safe and effective methods for specimen collection and management

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Limiting Transmission	Educate all on recommended strategies to prevent and limit the transmission of influenza	Work with hospitals to develop pandemic influenza response plan in acute care settings Public information campaign emphasizing containment measures such as hand washing, cough and sneeze etiquette, reduced social interactions, and guidelines for those being cared for at home	Continue activities of Phases 1 to 3	Implement containment strategies, including recommendations for control of influenza in schools and health care settings Issue containment measure if cases are detected	Notify hospitals, physicians and health care clinics to restrict visitors and to institute strict cough and sneeze hygiene including masks, wipes, and tissues and hands-free receptacles available in waiting rooms Reduce social interaction Advise people to avoid crowds and large gatherings Monitor the
Vaccine / Antiviral Medications	Review major elements of the vaccine distribution plan, including plans for storage, transport, priorities, and administration of vaccines	Monitor CDC/California DHS recommendations for target groups for vaccine and antiviral administration; update plans accordingly Work with CDC, state and representatives of the private medical sector to plan delivery and administration of vaccines when they become available	Continue to monitor the latest California DHS recommendations for priority groups for vaccine and antiviral allocation and modify as necessary based on current surveillance data	Once vaccine is available, the distribution plans will be activated Review and update distribution plan	effectiveness of containment measures and if indicated: Close schools, including universities. Cancel large public gatherings Discourage use of public transportation Continue to monitor availability of vaccine/antiviral Review vaccine / antiviral distribution plan

	Activity Area	Phase1 & 2 Interpandemic Period	Phase 3 Pandemic Alert (No, or rare, human-to-human transmission)	Phase 4 Pandemic Alert (Small clusters of	Phase 5 Pandemic Alert (Larger clusters	Phase 6 Pandemic period
L				human-to-human	of human to-	

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			transmission)	human transmission)	
Communication	Develop and/or update press release templates Advise health care providers of the state of novel (new) virus alert and latest recommendations regarding target groups for antivirals	Develop a communication infrastructure to address pandemic influenza Establish and continually update as needed we-based information on the LA Public Health website Institute an aggressive influenza containment public information campaign emphasizing hand washing, cough and sneeze etiquette, early recognition of symptoms. In rare human-to- human transmission case or cases technical information public information, and press releases will be disseminated Public information will include travel alerts, guidelines and limiting the spread of the disease, and information about when and where to obtain care. Prepare fact sheets detailing responses to questions coming from the media	Continue activities of Phase 1 to 3 Notify hospitals, EMS, health care providers, emergency responders, coroner, mortuary organization & labs	Continue and increase the information flow to medical providers, public, and local stakeholders	Intensify public information a campaign about containment measures, e.g., cough and sneezing etiquette, keeping ill persons at home and avoiding crowds
Emergency Response	Develop and/or update local response plans Participate with national, state, and local agencies in pandemic influenza guidance efforts	Collaborate with CDC Quarantine station in developing their pandemic influenza response plan Ensure on going coordination among surveillance, epidemiology, laboratory, EMS, and other local response efforts	Continue to assist health care facilities	Activate the emergency response system plan	Continue the emergency response plan to manage the local response at the time of the pandemic

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