

Action Plan for the Brickyard MYN (7/2021)

“To do the greatest good for the greatest number”

At Home

MYN steps 1 - 7

1. Steps 1-6 (detailed in the MYN brochure)

- All will attend to their own, immediate household needs before heading to Rebecca’s carport (the Command Center (CC)) at 25th & Onyx
- Put your fire extinguisher out in front of your house

2. Step 7

- As you make your way to the CC (with hard hat and gloves) make mental or actual notes of what you see and hear
 - what is your observation of the extent of damage
 - are there specific houses that are of concern (fire, heavy structural damage, hazards)
 - do you see or hear casualties
 - has anyone reported anything to you

With Neighbors

Check In

1. The first Responder to arrive at the CC becomes the PIC (Person In Charge)

- assesses suitability of using Rebecca’s carport as CC
 - structurally intact
 - nearby hazards
 - weather conditions
- accesses community bin (lock code: PETER)
 - begins organizing materials and tools
- begins making notes about situation on whiteboards and map

2. The PIC position can be handed off to another Responder who shows up

- report what you know when handing off

3. Assign job of Scribe (notetaker) to another early arrival

- scribe will collect data from people as they arrive
- scribe will use notepads, whiteboards and map to document actions taken by team

Take Action

Step 1: Size up the situation

1. PIC will send out Responders in teams of two with radio to do a **quick** assessment of

- structural damage
- people in distress
- hazards
- fires

2. Scribe

- notes which Responders go to which streets
- collects observations from returning Responders

- annotates map
 - relays info to PIC
3. Assign a Responder to confirm location for medical treatment center & care center
- Medical: Steve & Debbie (2456 Onyx) 541-554-7564
 - Care Center: Jack and Susan (2420 Emerald)
 - Alternatives: other intact protected structures

Step 2: Triage (Sorting)

1. PIC will organize teams of 2 or 3 Responders to do house to house triage
 - give each team a triage kit containing
 - walkie talkie
 - notebook/clipboard
 - gas wrench
 - laminated neighborhood map
 - colored tapes (4)
 - instruction sheet
 - assign teams to specific blocks
 - highlight assigned area on laminated map

2. Scribe will record team composition, assignment, and time they left the CC

3. Triage teams will first
 - check around exterior of house for
 - injured people
 - safety hazards
 - downed power line
 - gas leak
 - fire/smoke
 - signs/sounds of distress
 - attempt to contact neighbors in each house
 - will not enter any house that looks unsafe or unoccupied

4. Teams will then systematically search each house room by room
 - quickly evaluate injured persons by
 - making sure airway is open
 - do head-tilt/chin lift if no sign of breathing
 - controlling major bleeding
 - direct pressure
 - elevate of wound above heart
 - pressure points
 - tourniquet as last resort
 - checking for sign of shock (fail any part of '30-2-CanDo' assessment)
 - more than 30 breaths per minute
 - more than 2 seconds to refill capillaries
 - can't follow 'squeeze my fingers' command
 - mark injuries found by tying colored tape to person's arm or leg
 - Minor (**Green tape**)
 - injuries are not serious/person is ambulatory
 - person can be enlisted to assist another with more serious injury

- person can be directed to CC or Care Center
- Delayed (**Orange tape**)
 - person passes '30-2-CanDo' test
 - needs medical attention that can wait
- Immediate (**Red tape**)
 - person fails any part of '30-2-CanDo' test
 - needs medical attention ASAP
- Deceased (**Black tape**)
 - person is not breathing after attempting to open airway
- document what injuries found, where injured is located, and action taken

4. Triage teams will report to Scribe on each house via walkie talkie

- **OK**
 - OK sign in window
 - no (or minor) injuries
 - mark house with **green** tape
- **Delayed**
 - injuries are not life threatening (pass '30-2-CanDo' test) but need medical attention
 - report location of injured persons in house
 - mark house with **orange** tape
- **Immediate**
 - fire observed or gas smelled
 - people are trapped
 - injuries appear life threatening (fail '30-2-CanDo' test)
 - no contact but injured people are observed
 - report location of injured persons in house
 - mark house with **red** tape
- **Unknown**
 - no contact with residents
 - no injured observed
 - unsafe to enter house
 - mark house with **blue** tape

Step 3: Search & Rescue + Medical

1. PIC will organize teams of 2 or 3 Responders to do medical and S&R response
 - give each team a medical kit containing
 - walkie talkie
 - notebook/clipboard with notes on where to find injured persons
 - multi tool/gas wrench
 - laminated neighborhood map
 - first aid kit
 - instruction sheet
 - assign teams to specific blocks
 - highlight assigned area on laminated map
 - will enter a house only if it is structurally safe
2. Scribe will record team composition and assignment

3. Send teams to **Immediate** houses (*1st priority*)
 - locate and account for all residents
 - assess injuries with 'head-to-toe check' in place if safe
 - evacuate injured before assessment if environment is unsafe
 - get injured to medical center with blanket stretcher or other means
 - record and report actions
4. Send teams to **Delayed** houses (*2nd priority*)
 - assess injuries with 'head-to-toe check'
 - treat injuries (wounds, breaks, burns) within scope of training
 - get injured to medical center
 - record and report actions
5. Send teams to **OK** houses (*3rd priority*)
 - check on well-being of residents and treat minor injuries
 - record and report actions
6. Send teams to **Unknown** houses (*4th priority*)
 - confirm that no-one is home
 - record and report actions

On-going: while teams are being sent out

1. Volunteers
 - Responders should direct people looking to help to the CC
 - pair volunteers with Responder who can direct them to effectively help
 - send with teams to do evacuation, scribing, whatever is needed
 - use to set up medical treatment center
 - use to staff other CC teams as they are established
 - can watch over hazards (e.g. downed power line) to warn people
2. Build an organization structure as more people become available
 - Teams:
 - Operations (*"Does stuff"*)
 - Fire suppression
 - Search and Rescue
 - Medical
 - Planning (*"Runs things"*)
 - Tracks resources (who is doing what)
 - Tracks the overall situation
 - Develops action plan/alternative strategies
 - Documents actions and resource allocation
 - Logistics (*"Gets stuff"*)
 - Provides communications
 - Finds resources (food, tools, skills) to support Team members
 - Manages supplies and facilities
3. Keep records of actions needed and actions taken so nothing is overlooked

