

CTH NRG JUNE 2020 RADIO EXERCISE DEBRIEF

For discussion at July Meeting

I. SCRIBE'S FEEDBACK SUMMARY

Overall people were calm, identified their zone and block and summarized their situation without too much detail. Not everyone provided a specific location. Not everyone provided either a plan of action or a specific request for assistance. Not everyone, when finished with their transmission, concluded by saying "over". A few people had situations that were not deemed emergencies but tried to respond as if they were. No one cleared the channel at the conclusion of the call.

II. BEST PRACTICE REMINDERS

- Stay calm, use a well-modulated voice, speak at a pace that makes accurate recording at CTH Command possible, and remember 2-way radio communications protocols;
- Identify yourself by your call sign, and identify the Zone and Block you are in if you are not in your designated location;
- Clearly identify the specific address/location that you have assessed and state whether or not there are any hazards present;
- Emergency messages always take precedence, break in to radio traffic by saying "Emergency, emergency - this is Z__ B__ - CTH Command do you read me";
- Describe the situation concisely and do not give extraneous details;
- Specify exactly what assistance—if any—is needed;
- Make sure after each completed transmission you say "over";
- When given an instruction, say "roger" to confirm you received and understand;
- Immediately hold non-emergency radio traffic when you hear an emergency call;
- Clear the channel when you sign off by saying "clear" or "out".

III. SCRIBE'S FEEDBACK ON INDIVIDUAL CALLS

CTH 4 – Nate and CTH CERT 1 - Cinda

In the wake of a large earthquake, after ensuring the safety of your own family, you are determining your appropriate roles. BC and ZC are starting to call in assessments to CTH Command and based on what you are hearing, you determine that the two most pressing actions are:

1. To set up the first aid field unit at Menke Park, i.e., MENKE MED; (Nate)
2. To identify the number of available CTH CERT volunteers to see if you have at least 5 available CERT trained volunteers to self-activate, and if you do too initiate self-activation and identify a meeting point for the team to gather and start responding to requests for CERT assistance. (Cinda)

You listen carefully to all the radio reports coming in to see if any CERT members identify themselves as available and if any BCs say they are available to assist in setting up MENKE MED. Based on what you hear you then make the necessary appeals and/or announcements to CTH Command about the two actions listed above and inform CTH Command and the ZCs/BCs listening of your plans and the anticipated timeframes.

Scribe's Feedback: CTH CERT 1's first request was concise. the second a bit too long/too much information.

Zone 1| Block 1 - Mark Levie

This home is severely damaged, the lower portion of the house has collapsed, you hear additional cracking sounds and there is an injured resident on site lying at the door. You cannot safely reach the resident, but he says his leg is broken. From his demeanor you can tell that he is in shock and very scared. You do not have FADR, CERT or first aid training. You can also smell gas. **Evaluate the situation and make your radio report accordingly.**

Scribe's Feedback: Identified Zone and Block, provided specific location, good summary of situation.

Zone 1 | Block 5 - Gina

A young girl is lying at the entrance to (list an address on your block or you own address). Her injuries are unknown and she is unconscious. You do not have FADR, CERT or first aid training so you think she needs to be transported to a medical field unit immediately and carefully. A stretcher will be needed and CERT assistance. The car that hit her when the earthquake struck and a large tree are blocking the road. The driver is shaken but unharmed. **Evaluate the situation and make your radio report accordingly.**

Scribe's Feedback: Identified Zone and Block, 2nd call was more informative and concise, responded to the call for CERT.

Zone 1 | Block 7 - Debra

Emergency. This home is badly damaged and there is a barrier to the front entrance—a large oak tree has fallen across the front stairway blocking the entrance to the house. You found another entry point but it is unsafe and precarious. There is an injured resident on site with a head wound that is **bleeding profusely**. You have FADR training and a stop-the-bleed kit in your backpack. The injured homeowner tells you that his elderly mother is in the house but the structure is clearly unsafe. The oak tree has downed a power line. **Evaluate the situation and make your radio report accordingly.**

Scribe's Feedback: Identified Zone and Block, provided specific location, concise description, specific request for assistance

Zone 1 | Block 8 - Cynthia

Scenario: The apartment complex is seriously damaged and there is a barrier to entry through the front entrance - a large oak tree has fallen across the front stairway blocking the entrance to the apartment. You can find no other entry point. You hear a woman calling for help. She was on the balcony when it collapsed and she fell 30 feet to the ground. You have no idea what injuries she has suffered. You have no FADR or CERT training so you believe she needs to be transported to a medical field unit ASAP. Other residents are calling for help and you are alone. You also smell gas and see smoke billowing out of the apartment complex. **Evaluate the situation and make your radio report accordingly.**

Scribe's Feedback: Identified Zone and Block, provided specific location, was not designated as an emergency but BC called it in as an emergency and made an appeal for immediate assistance.

Zone 2 | Block 1 – Elizabeth

This home is badly damaged and you can smell gas and smoke. There are two elderly residents onsite who need assistance to evacuate the house and they are confused and scared. You are alone. The residents do not know where the gas shut off valve is and you do not have a gas shut off tool with you. There is a downed power line right next to the house. You decide that you cannot simply leave the residents alone

and you prepare to act and render assistance as best you can. **Evaluate the situation and make your radio report accordingly.** **Scribe's Feedback:** No show

Zone 2 | Block 3 - Steve Silver

Emergency. This home is severely damaged, the lower portion of the house has collapsed, you hear additional collapsing sounds and there is an injured resident on site calling out for help. The house is clearly unsafe to enter but you can see the resident through the open front door and he is clearly in great distress. He says he is **bleeding profusely** from a deep cut to his leg. You cannot safely enter the house to reach the resident and you do not have FADR, CERT or first aid training, but you do have 'stop the bleed kits' in your Block Captain back pack. You can also smell gas. **Evaluate the situation, decide on your action, and make your radio report accordingly.**

Scribe's Feedback: Identified Zone and Block; Did not provide specific location; Summarized situation well.

Zone 2 | Block 4 - Brandon

This home may be damaged and you can smell gas and smoke, but the only entrance is behind a locked gate and you have no way to get in. You know that 2 elderly residents reside here (one of whom has dementia), and are onsite and that they will need assistance to evacuate. You have called out to them but there is no response. There is a downed power line at the corner near the house. You have no idea where the gas valve is or what the condition of the residents or the home is. You decide that you have to act. **Evaluate the situation and make your radio report accordingly.**

Scribe's Feedback: Identified Zone and Block; Provided specific location; Good summary of situation.

Zone 2 | Block 5 - Chas

Might be classified an Emergency. Damage to this home which sits well above the road is extensive. When you arrived at the house you found an injured man and an injured young child at the entrance to the house. **He is groaning with pain and holding his chest** and tells you that a large object fell on him. Moving him may cause him further injury. You do have FADR training. The child's leg appears to be broken and she will need to be transported to the medical field unit as she cannot walk. You clearly cannot manage on your own and you will need CERT assistance but you have not heard from CTH Command that a CTH CERT unit or a medical field unit has been activated. **Evaluate the situation and make your radio report accordingly.**

Scribe's Feedback: Identified Zone and Block; Provided specific location; Did not mention man with chest pains and trapped; Specific request for a transport.

Zone 3 | Block 3 Scenario – David

Emergency. This home is severely damaged, the lower portion of the house has collapsed, you hear additional collapsing sounds and there is an injured resident on site calling for help. You cannot safely reach the resident but he is clearly in great distress and says he is **bleeding profusely**. From his voice you can tell that he is in shock and very scared. You do not have FADR, CERT or first aid training. You can also smell gas. **Evaluate the situation and make your radio report accordingly.** **Scribe's Feedback:** No show

Zone 3 | Block 4 - Linda

Emergency - Severely Injured Resident. A man is lying at the entrance to (list an address on your block or your own address). His injuries are unknown and he is unconscious. You do not have FADR, CERT or first aid training and you are alone so to get help he needs to be transported to a medical field unit immediately. A stretcher will be needed and CERT assistance. You do not know how he sustained his

injuries. There is large debris and fallen trees blocking the road. A neighboring resident appears on scene who is shaken but unharmed. **Evaluate the situation and make your radio report accordingly.**

Scribe's Feedback: Identified Zone and Block; Provided specific location; Gave concise summary of situation; Repeated emergency call - could have just updated situation from 1st call; Great she volunteered to expand her area in absence of other block captains

Zone 3 | Block 5 - Mark Rudy

This home is damaged and the lower portion of the house has collapsed and you hear additional collapsing sounds. There is an injured resident on site calling for help. You cannot safely reach the resident. From his voice you can tell that he is very scared. You do not have FADR, CERT or first aid training but you have a neighbor who is a retired police officer who arrives on the scene to help you. **Evaluate the situation, decide what you are going to do and make your radio report accordingly.** **Scribe's Feedback:** No show

Zone 3 | Block 6 - Soren

This home is badly damaged and there is a barrier to the front entrance—a large tree has fallen across the front stairway blocking the entrance to the house. You found another entry point but it is unsafe and precarious. There is an injured resident on site who is hurt but able to talk and walk with assistance. She is bleeding slightly from a cut on her leg. You have FADR training and a stop-the-bleed kit in your backpack. The injured homeowner tells you that her elderly father is in the house but the structure is clearly unsafe. The tree has also downed a power line near the stairs to the house. **Evaluate the situation and make your radio report accordingly.** **Scribe's Feedback:** No show

Zone 3 | Block 7 - Joe

You have completed your preliminary block assessment and found no injured people in distress. While doing your rounds you have gathered around you roughly 6 residents who are offering to help in whatever way they can. One of them is a doctor and one is an RN, one other person is a retired fire fighter. You have not heard CTH Command announce the activation of a first aid field unit at Menke Park. You know that there is a medical trailer at Menke Park and that the combination lock code to get into the trailer to set it up is 1775. **Evaluate the situation, develop your plan of action and make your radio report accordingly.**

Scribe's Feedback: No show

Zone 4 | Block 1 & Block 2 - Beth and Cheryl

You are working together as a team to assess the damage to Zone 4 – no other Zone 4 BCs have reported in. All around you people are gathering in the street – some are bewildered and scared and some are asking for help with family members that are injured or trapped inside their homes. Some of the residents gathering around you are asking how they can help. One of them is a doctor and 2 are RNs. **Evaluate the situation, decide what your plan of action is and make your radio reports accordingly.**

Scribe's Feedback: Identified Zone and Block; not an emergency but reported as such; Good summary of situation.

Zone 5 | Block 1 & Block 2 - Leslie and Mariellen

You are working together as a team in Zone 5 B1 and B2 (Sunrise Lane). The cluster of 5 homes on upper Sunrise Lane cannot be reached because a downed power line is blocking the narrow road up the hill. One of the residents calls to you that a small fire has broken out in one of the homes and 2 residents are trying to put the fire out with a hose. He says that you can smell gas and that the high wind is fanning the flames. He says they have called 911 and that the residents are unsure what to do next. In response to asking if anyone has checked on all the residents to alert them about the fire the answer is no. You have your bullhorn with you which you toss to the resident with instructions to alert the residents about the fire and to try and find a safe evacuation route. You heard another BC report on the radio that there is another downed power line at the corner of Summit and Marina Vista, one of the 2 only access roads to Sunrise Lane. If a fire truck comes up Summit to respond they will not be able to get to Sunrise Lane. Time is of the essence.

Around you people are starting to panic, but a few people have gathered to offer their assistance and one man has brought a chainsaw with him. **Evaluate the situation, develop your plan of action and make your radio report accordingly.**

Scribe's Feedback: Identified Zone and Block; provided location; called in as an emergency but not designated as such in exercise; identified situation as life threatening and initiated evacuation.

Zone 5 | Block 5 - Ann

You have done an initial assessment of your block and have found no injuries or people in distress. In addition, at least 5 people have gathered around you to offer to help you in any way that they can, one of whom is an RN. You are CERT and FADR trained. You have not heard CTH Command announce the activation a CTH CERT Team or of MED 5, the Zone 5 first aid field unit. You know where the location of MED 5 is and where the supplies are kept and you decide to start setting MED 5 up with the volunteers gathered. At the MED 5 location—47 Summit—the home has minor damage and you rapidly locate and checked the gas shut-off valve to be sure that the MED 5 team can operate safely in this location. You have made sure that the location is free of any hazards that might impede the work of the medical team. The resident is onsite and available to assist. **Make your radio report accordingly.**

Scribe's Feedback: Did not identify first time but did the second call; provided a bit too much detail – could have summarized more concisely.

Zone 6 | Block 3 & Block 4 - Jean and Jordan Rinker

Emergency. Damage to this home which sits well above the road is extensive. When you arrive at the house you find an injured woman and baby at the entrance to the house. She is groaning with pain, **is bleeding** and tells you that a large object fell on her and the baby. The baby is **unresponsive**. Moving them may cause further injury. You have FADR training and your spouse is a doctor and you have access to a red medical bag. The woman and child's injuries appear to be serious - you have not heard from CTH Command that a CTH CERT unit or a medical field unit has been activated near you. While you are evaluating this situation, a few neighbors arrive on the scene to offer their assistance and they tell you that an elderly couple next door is yelling for help and appear to be trapped in a home that is collapsing, they ask for your guidance. **Evaluate the situation, decide on your plan of action and make your radio reports accordingly.**

Scribe's Feedback: Identified Zone and Block; emergency identified, provided location; good summary; provided update.

Zone 6 | Block 5 – Connor

You have done an initial assessment of your block and have found no serious injuries or people in distress. In addition, at least 4 people have gathered around you to offer to help you in any way that they can, one of them is CERT trained but is not a member of CTH NRG. You are FADR trained. You have not heard CTH Command announce the activation a CTH CERT Team or of MED 5, the Zone 5 first aid field unit. You know where the location of MED 5 is and where the supplies are kept and you decide to start setting MED 5 up with the volunteers gathered. At the MED 5 location—47 Summit—you find another Z5 BC also ready to start setting up MED 5. You and she make sure that the location is free of any hazards that might impede the work of the medical team and you start to set up the field unit. The resident and some volunteers are onsite and available to assist. You estimate that MED 5 will be functional within 20-30 minutes as you have so many volunteers. There is a downed power line just above the MED 5 location and the road is blocked by a fallen tree that struck the power line. **Fully assess/evaluate the situation and make your radio report accordingly.**

Scribes Feedback: Gave clear directions on initiating MED 5 and the type of help that was needed. Could be a little more succinct.

IV. FEEDBACK FROM PARTICIPANTS

From: Gina Ponticello <gponticello@gmail.com>

Hi Anita,

Thank you for organizing the radio exercise and for today's 'last call for feedback' reminder. I had this in my draft folder waiting to complete.

My radio reception and clarity was awful which is not my usual experience on the drills. However, during those drills I am only listening for call signs and not more detailed messaging so that comparison may be skewed. My guess is that approx. 50% of the transmissions were just static and interference. Fortunately, I was able to hear both you and Cinda loud and clear.

I mostly have questions about my messaging. I wasn't able to attend the radio training but I did read over everything you sent.

My attempt went something like this:

1. Break in with Emergency
2. Identify myself (Z1/Blk5)
3. Say WHERE I am (231 Corte Madera Ave) and WHAT I need (Stretcher transport Immediately)

End transmission (out/clear)

My understanding is that I should keep messaging short and concise and wait for acknowledgement or request for further clarification before proceeding with next point

No further info was requested during that initial transmission.

As I listened to the other communications, many sounded like the entire scenario was reported in one transmission.

As a result, I ended up elaborating at the end of the call when asked if there was anyone else who needed to report.

-Should there have been more detail in my original reporting?

-Does the Guideline/Best Practice of 1. Do Not give details/symptoms of injuries unless asked for them only apply to NRG communications with CERT or does it apply to NRG to NRG messaging as well?

Thanks for compiling feedback and for all the work you do! Look forward to learning more.

Gina Ponticello, Zone 1 Block 5

From: "Beth O'Neill" <bethoneill17@gmail.com>

Hi Anita,

I think the exercise was excellent. I think we'd learn a lot if we debrief it together. It would be helpful to go through each scenario and assess the situation. Is this an emergency? What is the appropriate

way to report the scenario? How do you break into the radio conversation when there are multiple emergency scenarios? What do you do when there is so much interference on the radio that it's difficult to hear? How can you tell where the interference is coming from?

Hope that helps.

Beth

From: Cynthia England <cengland565@gmail.com>

Hi Anita great exercise. Here are my comments:

I began with breaking in "Emergency Emergency" but then you said it wasn't an emergency, that I would need to wait for others to report in order. So I was confused - my scenario indicated i believed the woman who fell needed immediate transportation, which is why I thought it was an emergency. I'm still getting used to how this works and maybe part of the drill is to learn to step down when told I need to wait! Would love to talk it through at our next meeting. Was I not clear? Was the situation just not serious enough? Whose job is it to determine what is an emergency and what is not? Great learning exercise and looking forward to discussing. THANKS!

Cynthia

From: Nathan Blomgren <nathan.blomgren@gmail.com>

Anita-

Thanks so much for putting that together. There's plenty of room for improvement, but I was very impressed with everyone's efforts. I think that our normal radio checks should have a component like that, every time.

Feedback

- remind people to identify themselves EVERY TIME they speak, not just the first time.
- When discussing medical issues/emergencies, give info about stability, location, access of person. IC should be able to act on the info in a very specific way
- When discussing road blockages or power lines, slow down and be specific about location/address/cross street, perhaps including what is inaccessible. I think Leslie did that - describing that the 5 houses up Sunrise were inaccessible. As IC, I want to put a specific mark on my map.
- When discussing trees down, describe size - movable by several people, could be cut by chainsaw, too big to move, etc.

-Nate

From: Cinda van Lierop <cinda_vanlierop@yahoo.com>

Hi Anita,

That was a great exercise Anita, well worth the time! I second what Nate said, and add that everyone should slow down and allow for someone to take down the info as it's impossible to clearly record everything at rapid fire pace. Also, people should repeat the address where issues are located ("I repeat, the address is ..."). Also, it would be helpful if people would say, "This is an update to the issue I reported at 5 Meadowview..."

But in general, I think the exercise was very useful and great practice for everyone to get more radio time and rehearse communicating complex scenarios in succinct ways.

Thanks for all the time you took to prepare everyone for this!

Much appreciation, Cinda

From: Debra Sartell <debrasartell@aol.com>

Hi Anita, Sorry for this delay, I had trouble remembering. First of all, I cannot thank you enough for putting the radio call exercise together. Again, with practice I'll get better, but during this first exercise I hadn't realized we were carrying it through to the end and so therefore I was unsure as to how to resolve the issues in my exercise. There were multiple problems that required me to call out for different types of support i.e. Medic, Cert, (or does CTH 1) make the calls for support? so do I wait until all those people have arrived and cleared me to go?

Again, thanks so much for the amount of work you put into CTH NRG!

Debra Sartell

From: Linda Meier <lmeier906@gmail.com>

Hi Anita:

My apologies for not getting this to you sooner! First- you were one calm steady firm person at the helm during that drill! Thank you very much. Your calm calmed me down!

My feedback is part feedback and part questions due to gaps in knowledge or need for clarity.

- radio - lots of interference which, at least for me, created some confusion due to not hearing your full response. This is real world though and should have asked for repeat.

-obsessed pre-drill about whether my scenario was an emergency. Even researched it and called Beth! Have much to learn and review!

- really great to practice radio

- once info on emergency was transmitted/ reported, was not sure about next steps-was not conveyed and was unclear on whether to call it in on radio again. Were you gathering info and then would prioritize and get back to us on next steps? e.g. CERT or medical team coming to help or if can transport, take to xxx.

- if no response from rest of my zone, should I have taken initiative to assess their blocks once my block was assessed and emergency was reported/ addressed? Then report to UC?

- when gas smell (but no fire), not considered emergency but what reassessment or monitoring is appropriate and when considered emergency. Assume evacuate area is assumed but whose responsibility is determining source to pass info on to IC and PGE?

- re: downed tree- assume remove if safe/ possible and if needed to re-establish safe, clear exit route, or pathway to emergency or other injured, etc.

- when reporting medical emergency, when/ is it recommended to make suggestions on not only where to find person with emergency but how to best access especially if there is a usual route that is blocked with tree or downed house or wire or other dangers?

- re: this being a drill, unsure how much you wanted us to not deviate from script or take initiative regarding next steps. (I found it difficult, as health care provider, to not assess and act on assessment in this scenario where I had no CERT, FADR, other training) . No action needed, just a comment.

I wonder if it is wise for each block captain to have some gloves (and masks) available for assessing neighbors if they are bleeding. Will have some myself. Hope these comments add something substantive! Again, excellent drill Anita! I cannot thank you enough!

Best regards, Linda

From: Chas Voorhis <chas@abacusbinc.com>

Hi Anita,

My only feedback is that I thought it was among the best things we have done. Practicing and getting the kinks out before it is "real" is so valuable. We need to be comfortable with our tools and systems before we put them to work.

Thanks, Chas.

From: Cheryl Kosmas <ckosmas@outlook.com>:

Good Morning Anita, I was having problems hearing conversations during the drill, some I could not hear at all. I also broke in twice before my message was recognized. Can we have a test of my radio to make sure it is working properly?

Cheryl

From: Beth O'Neill <bethoneill17@gmail.com>

Hi All, I don't think the problem was Cheryl's radio. There was a lot I couldn't hear, either. I think it's a good thing to talk about in the debrief. There was significant interference. Don't know where it was coming from.

Thanks, Beth

From: ann bentley <annbentley845@gmail.com>

Very interesting exercise. You did a great job monitoring, Anita. Good job delineating what is a life-threatening emergency. I am going to make sure I know how to turnoff people's gas because that was a recurrent issue.

Ann

From: steve Silver <747steve@gmail.com>

Great exercise! Very organized. Well thought out scenarios. Thanks for all your hard work.

People stepping on each other on the radio is always a significant issue. You addressed that in the "radio etiquette" instructions, but obviously still a problem.

Depending on how Incident Command is set up for exercises/real-world situations, I would recommend more direction from Command. If cell towers are operational, a text message from BC to incident command

will allow them to have all the details without transmission/reception miscommunications and allow a triage approach to prioritize response. If cell towers are not operational, then when Incident Command is established, the Commander should request "Any emergencies from Zone 1, Zone 2 etc" in sequential order.

Thoughts? Steve Silver

From: Connor Turnbull <connorturnbull@gmail.com>

Hi Anita,

Phew! That was quite an experience. I had a quick question about message clarity. It seemed like you were able to hear some that were very staticy on my end. Anything I can do to make it more clear? Also, from my end I felt like I was talking overly long in portions of my transmission. I wasn't sure about breaking it into parts? Any thoughts?

Thanks! Connor

From: Leslie Cunningham <lespt2@gmail.com>

Thank you for organizing, Anita!! And all your work creating the complicated scenarios. Wow. They all seemed like emergencies. And the radio was so busy. In a real situation, I wonder if the calls would be more spread apart, as everyone wouldn't be signing on at the exact same moment.

With a fire, wind and gas leaks, I feel we should evacuate. At least the residents on our street. I know the fire or police make that call, but as block captains, are we allowed to suggest it?

Leslie

From: Mariellen Stern <sea-hi@pacbell.net>

Hi Anita,

Boy, that radio drill was intense! For my drill, I did feel that a fire and the smell of gas was life threatening to my neighbors and the hill, even though there was no one hurt or injured. If this was real and I called this report in, would you be recommending what to do? Or would I have just evacuated everyone asap and let the fire and gas go, just to get everyone out asap. Although, I didn't know about the downed power line on Sunrise without Leslie reporting this. If I evacuated without knowing about the downed power line on Sunrise, we would have turned around and gone back up to the fire road to evacuate.

This was such a good exercise in so many ways. Things can get out of hand quickly and I guess we just have to do our best to assess the situation and make a decision. Especially, when there are other reports that are life threatening. I think everyone might agree that each block captain was faced with very serious scenarios.

There was a lot of talk over in the beginning but it slowly smoothed out and I think everyone spoke very clearly. Thanks for organizing this, I think it was really helpful for everyone! I needed to have a glass of wine when it was over!

Mariellen

V. FEEDBACK PROVIDED TO PARTICIPANTS

From: CTH NRG cthnrg@gmail.com
To: Connor Turnbull

You did great, Connor - very clear and your voice is very calm and easy to understand - could have been a little more succinct. Transmission generally improves outside. You are around the curve and tucked into the hill and these radios operate best in line of sight. I walk around during the monthly radio tests until I locate the best spot(s).

Thank you for participating. Anita

From: CTH NRG <cthnrg@gmail.com>
To: steve Silver <747steve@gmail.com>

Hi Steve - the exercise was structured to teach people how to break in when radio traffic is heavy and how to deal with radio traffic 'crush' - I intentionally did not provide too much structure so that the team could learn how to operate when things get hectic. Our March drill highlighted the need for our team to get more radio proficient when things heat up.

Your suggestions are, however, on point and we can implement those during our next radio exercise in October just before the November drill. I will include your suggestions in the feedback synopsis which we will discuss fully at our July meeting.

Thank you! Anita

From: CTH NRG <cthnrg@gmail.com>
To: Cynthia England <cengland565@gmail.com>

Thank you for your feedback, Cynthia.

My thoughts:

~The woman is speaking and conscious and you do not know what the extent of her injuries are, while you think they are, they may not be serious. What you need most is transport/CERT. This is not a life-threatening situation. Understand that if everything is an emergency, then there is no way that our small CERT team (if we can activate one with 5 members) simply cannot cope. So, if she had been bleeding profusely or was unconscious, then you might have classified this as an emergency.

~Gas leaks/smells and smoke are not considered Emergencies, i.e., life threatening, so you would call 911 and if you cannot shut off the gas yourself, report that to 911 as well. You would then report to CTH Command that you have done so.

~The entrance to the apartment is blocked, but might you have reached the woman below the balcony where she fell? If so, you might have been able to assess her injury. Or, you could have asked her to self-assess - i.e., 'where does it hurt? is anything broken? are you bleeding? can you move your arms? your legs? can you standup? walk?, etc. She could also tell you where the gas valve is because she is talking.

So, an example of radio report on your scenario might be (WHO-WHERE-WHAT):

"This is Zone 1 Block 8 at (address). One moderate injury, resident cannot walk so need CERT transport as soon as available. Gas and smoke smell on premises - 911 called, gas valve turned off. Back-up BC assistance requested for this location when available. Over."

~Being asked to hold your transmission is a normal procedure if CTH Command believes a more pressing issue has arisen. I had the luxury of knowing your scenario, but in a real-world situation there is no time for the CTH Command to ask you 'have you done this, have you done that? So CTH Command must be able to rely on you having done all you can before classifying something as an emergency. I did not write your scenario as an emergency, but if you had taken the added steps you might of course have determined that it was - if she told you she was bleeding profusely, for example.

Hope this feedback is useful. We will have a robust discussion on lessons learned at the next meeting.

Thank you, Cynthia!

Anita

From: Anita Bock <anitambock@gmail.com>

To: Leslie Cunningham <lespt2@gmail.com>, Mariellen Stern <sea-hi@pacbell.net>

Hi - regarding your question about evacuation, Leslie, and your drill comments, Mariellen: We should not recommend or order evacuation unless we have received an alert ordering evacuation and we are merely passing that information along; but what we can and should do is advise people to know where their evacuation routes are.

In a real-world situation like your radio exercise scenario - BCs should advise people to locate the most appropriate evacuation route and be prepared to evacuate when the police order it or if they—based on what they see, hear, smell—decide its best to do so, while paying attention to the location of the fire. Once an evacuation order is made by the police we should certainly use our bullhorns and spread the word as we ourselves evacuate.

Your scenario did not present an emergency. We have a very small response team and so we cannot respond to non-immediate life-threatening quasi-emergencies or situations that may become emergencies. The fire was small, people were working on it, 911 had been called and road blockages would have been reported when the 911 call was made. You could have urged all residents to shut off their gas ASAP. Your area has access to a fire road and the residents should have been urged to Shut off their gas and skirt the downed power line to get to the fire road ASAP if the fire became out of control, if necessary the volunteer with the chain saw could have cleared a path for them. Remember that first responders use the fire road and the Wiltshire MV access was not blocked in the scenario. So, the Upper Sunrise Lane residents had options and none were injured.

Your report(s) might therefore have been as follows:

This is Z__ B__ with a block assessment, CTH Command do you copy?

CTH Command: Copy Z__ B__, proceed.

Upper Sunrise Lane entrance blocked by downed power line. Small fire reported - residents responding and 911 called. Residents urged to stay calm, shut-off gas valves ASAP and locate best evac. route in the event evac. is ordered. 2 BCs on site will assist with evac. to Southern Fire Line Road/Huckleberry Trail if need arises. Another downed power line reported at MV and Summit, so only vehicular traffic access is from Wiltshire side. Will provide further update if fire not contained and evac. ordered, or undertaken voluntarily by residents. Over.

Hope this is helpful. I will collect all feedback and share and we can fully discuss at next meeting.

Thank you! Anita