



California Blood Bank Society

Disaster Response Plan

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This plan is intended for use by our institutional members. Should any person, agency or organization duplicate this plan in part or whole, acknowledgement and credit must be given to CBBS.

CBBS DISASTER RESPONSE PLAN

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Section 1

Purpose This plan coordinates the activities of all California Regional Blood Centers in the event of a local, regional, or national emergency.

Primary focus The primary focus of the plan centers on community blood centers, and how they communicate and coordinate shipments of blood and blood components during an emergency. Secondly, the plan may be utilized during times of National emergency keeping in mind that communication with National Agencies (FEMA, American Red Cross, AABB National Blood Exchange etc.) is vital to prevent duplication of effort and to safeguard the movement of resources to the affected area.

Definition(s) The table below lists terms and definitions

Term	Definition
Disaster	<ul style="list-style-type: none"> • General - a sudden misfortune or calamity causing widespread distress or misery or loss of life. • Related to Blood Centers – a situation that: <ol style="list-style-type: none"> 1. suddenly requires a much larger amount of blood than usual; 2. temporarily restricts or eliminates a blood center’s ability to collect, test, process and distribute blood; 3. creates a sudden influx of donors requiring accelerated drawing of blood to meet an emergent need elsewhere.

Section 1 – Continued

What blood centers need to do

Each blood center will need to:

<ul style="list-style-type: none"> • develop blood center internal disaster response plans
<ul style="list-style-type: none"> • create an Emergency Response Team (ERT)
<ul style="list-style-type: none"> • consider plans for an off-site alternate command center
<ul style="list-style-type: none"> • ERT should carry hard copy of emergency procedure contact information 24/7
<ul style="list-style-type: none"> • develop the means for alternate communication (such as, but not limited to) Amateur radio (HAM radio), cell phone, Fax, Internet e-mail. Consider GETS/WPS cards/system. (www.wps.gov)

Note: Amateur radio will require installation of appropriate amateur band high frequency and 2 meter antenna, a dedicated HAM radio operator and use of the operator's HAM radio equipment and/or purchase of high frequency and 2 meter Ham radios.

<ul style="list-style-type: none"> • become familiar with the CalEMA mutual aid disaster response plan (see Appendix F)
<ul style="list-style-type: none"> • develop methods and options so that serviced hospitals know how to obtain blood during a disaster
<ul style="list-style-type: none"> • have phone lines with unlisted numbers to bypass facility main lines
<ul style="list-style-type: none"> • plan to be self-sufficient for at least 6 days or more if isolated
<ul style="list-style-type: none"> • accelerate collection and processing activity to supply blood for their own areas or other affected areas
<ul style="list-style-type: none"> • determine if blood is available for elective surgery (other than emergencies) for the duration of the disaster • Note: Outside support may include networking with other organizations as appropriate
<ul style="list-style-type: none"> • assure back-up power supply to maintain water supply pumps for testing, bathrooms, air conditioning
<ul style="list-style-type: none"> • develop utility vendor contacts for priority status for fuel, water, phone, including unlisted contact phone numbers

Section 1 – Continued

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| <ul style="list-style-type: none">• develop primary and alternate means of communication between blood centers so that accurate and timely information is available for disaster response decision making |
| <ul style="list-style-type: none">• prepare disaster media responses |

Note: It is understood that many emergencies do not require more than the usual amounts of blood and donors typically respond to reports of any emergency. Accurate media communication is essential to informing the public of appropriate response to disaster situations and needs for blood and blood components.

Section 2

Activation The table below lists information for activation of the disaster response plan

Who can activate the plan	How can it be activated	When should it be activated
Federal, State, or Regional authority (FEMA, CAL-EMA, EMSA, and/or OES Mutual Aid Region)	Through contact with BloodSource, Sacramento Emergency Operations Center whenever there is a disaster requiring the need for blood and blood components.	Normal means of acquiring blood and blood components are not available or are overloaded
Key personnel of a regional blood center	Through contact with CBBS Area Emergency Operations Centers whenever normal means of obtaining blood are exhausted	The degree of implementation will depend on the situation
<p>BloodSource, Sacramento, deemed by CBBS as Northern Area Emergency Operations Center (NAEOC) 916-731-7100</p> <p>Houchin Community Blood Bank, Bakersfield, deemed by CBBS as Central Area Emergency Operations Center (CAEOC) 661-327-8544</p> <p>San Diego Blood Bank, deemed by CBBS as Southern Area Emergency Operations Center (SAEOC) 619-298-5535</p> <p>Note:</p> <p>1. It is helpful if the affected blood center(s) initiates contact with Houchin, San Diego, or Sacramento so that statewide communication can occur to exchange pertinent information.</p> <p>2. What may seem a minor event locally may be creating a large donor or media reaction in other parts of the State.</p>	Whenever a known or reported emergency/disaster situation affects Northern California and the BloodSource link to the State EOC in Sacramento.	The degree of implementation will depend on the situation and will include sharing of disaster information as well as coordination of blood resources with the Inter-Agency Task Force (AABB National Blood Exchange, American Red Cross, etc.) liaisons identified in this plan

Section 2 – Continued

Deactivation

Response to the emergency and to deactivation of the plan will commence when the activating official determines that the emergency requirement no longer exists

Coordination

In a disaster situation, requests for blood will usually come from hospitals to their servicing blood centers, but may be channeled through local government (county) Emergency Operations Center (EOC) or communications center. In case of National emergency, requests and/or coordination of resources may come through FEMA, or other National Agencies (such as, but not limited to, American Red Cross, AABB National Blood Exchange for the Inter-Agency Task Force for Domestic Disasters and Acts of Terrorism).

- The Northern AEOC is located at BloodSource in Sacramento. Besides coordinating the movement of blood and blood components to and from Northern California, it will serve as the State Disaster Control Center for blood and will liaison with the Duty Officer of OES.
- The Central AEOC is located at Houchin Community Blood Bank, Bakersfield, and the Southern AEOC is located at San Diego Blood Bank, San Diego. Together with the Northern AEOC, they will help coordinate all movement of blood to and from Central and Southern California in a disaster situation.

Note: Regional Blood Centers may not be able to rely on routine means of transportation and delivery into the affected area(s). Therefore, each Blood Center should be prepared to coordinate with its County Public Health and communications Directors and their Regional Disaster Medical Coordinators so that at all levels blood delivery is coordinated and not delivered to locations where it is not needed. (See Appendix F)

Section 2 - Continued

AEOC actions The “**If -- Then**” table below lists AEOC actions to be taken in the event of a disaster

IF	Then
A disaster occurs in California	Northern, Central, and Southern AEOCs will activate the CBBS Disaster Response Plan (to an appropriate level of response) and contact each other, AABB National Blood Exchange (NBE), and American Red Cross Headquarters to share intelligence, information, convey status, and blood component needs.
A small or localized disaster occurs	All AEOCs will activate and contact each other to encourage good communication between centers
Normal communication is down	All AEOCs will: <ul style="list-style-type: none"> • activate the CBBS Amateur Emergency HAM Radio network • establish RadioNet Control for coordinated transmission of Emergency messages • determine and communicate needs and coordinate blood component transportation through EMSA to the affected area
Blood centers are unable to communicate with any AEOC	They should contact AABB Disaster Task Force (800-458-9388), American Red Cross National Headquarters, (619-531-0686) or ABC (202-3993-5725)

Section 3

Communications

- Key element in a disaster The “If - Then” table below lists directives for disaster communications

If	Then
Normal means of communication (telephone, cellular phone, fax, internet, e-mail etc.) are intact	Use them for communication
Normal means of communication are unusable or overloaded	<ul style="list-style-type: none"> • Activate Northern, Central and Southern AEOCs and establish Amateur (HAM) Radio communications and “Net Control” <p>Note:</p> <ol style="list-style-type: none"> 1. AEOCs will come “On Air,” establish HAM Radio Net Control and attempt to contact each Blood Center in roll call succession 2. “Net Control “will gather status and disaster intelligence to be shared with blood centers and EMSA officials. <ul style="list-style-type: none"> • Contact your respective Northern, Central, and Southern AEOCs using HAM (Amateur Radio) on either the 40 meter and/or 75 meter high frequency bands or 2 meter relay bands • Follow standard Ham Radio Net Control Procedures when sending or receiving messages • See Appendix G <p>Note: Authorized personnel may activate GETS/WPS system</p>
Unable to make direct contact with any of the AEOCs via HAM radio	Establish contact via an Amateur (HAM) radio relay and share appropriate information and needs.
Amateur Radio contact cannot be established	Amateur Radio operators will continue to monitor blood center frequencies trying to establish contact with Net Control every 15 minutes until a blood center representative is reached.
Still no response after reasonable attempts	Local blood center officials should contact AABB Disaster Task Force, American Red Cross National Headquarters, ABC, or any other blood center that can assist them.

Section 4

Transportation Once areas affected by a disaster are known, transportation between blood centers will be coordinated locally first, then through each AEOC with EMSA. Blood will not be transported until the need is determined by competent authority to prevent duplication and/or loss of scarce resources. It is expected that each blood center will develop emergency transportation contacts. **Institutional members see Appendix A.**

The table below lists transportation options for URGENT or EXTREME need only.

Who	Contact Number
Angel Flight West (HSEATS Program)	0830 – 1630h: 888-426-2643 310-390-2958 1630 – 0830h: 800-413-1360
CA Hwy Patrol – Aero Division OES (State) Emergency Media communication	911 916-845-8911 916-845-8400
Salvation Army SATERN Territorial (Natl Disaster) Disaster Services—Kevin Ellers	847-294-2000 (Chicago) 847-795-3293
Western Territory (CA) Disaster Services—Ken Cavallero	562-491-8341 (Long Beach) ken.cavallero@usw.salvationarmy.org
USAF Civil Air Patrol (May require 3-5 days to assign mission)	CalEMA Sacramento 916-845-8911

Be aware that the Civil Air Patrol scheduling may require 5 working days ahead of need as they receive orders from the military. Angel Flight is dependent on volunteer pilots. Pilots may cancel without notice due to illness, mechanical problems, weather, etc. Larger centers may wish to establish prior contracts so that there is not a delay in time of need.

Section 4 - Continued



Worksheet for Requesting a Blood Mission

Please make copies of this form and use one for each referral.

Pick-Up Date _____ Pick-Up Time _____

Pick-Up Airport / City _____ Destination Airport / City _____

Pick-Up Contact Name _____ Phone # _____ Cell # _____

E-mail _____

Delivery Contact Name _____ Phone # _____ Cell # _____

E-mail _____

Additional Contact Person _____ Phone # _____ Cell # _____

E-mail _____

Shipment Description: Coolers containing donor blood:

Size: (EXAMPLE: 4 small coolers @ 24" x 14" x 18" – 50 lbs., and/or 2 large coolers @ 27" x 16" x18" – 50 lbs)

Pieces / Weight: _____

Blood Center Contact Person _____ Phone # _____ Cell # _____

E-mail _____

Mobile # _____ Collection Site Name: _____

Comments: _____

PLEASE CALL 310-390-2958

3161 Donald Douglas Loop South, Santa Monica, CA 90405
Toll Free 888-426-2643 Phone 310-390-2958 Fax: 310-397-9636
www.angelflightwest.org

Section 5

Donor Processing

If a blood center is in a disaster area, it may not be able to operate at all or only partially be able to take care of its own area of responsibility. If it is operating, in or out of an affected area, it must be able to accommodate greater than normal numbers of donors. Procedures for special drives and limited emergencies should be refined so that normal procedures will be used, but at a greatly accelerated pace. Each donor center should have 6 days drawing supplies, ABO and Rh processing kits, and infectious disease testing kits available if disease testing is done on-site. Prior arrangements for emergency transport to NAT laboratories should be in place.

Inventory

CBBS AEOCs will:

- coordinate and communicate needs as determined from direct requests of EMSA officials or blood centers affected by the catastrophic event;
 - share all blood center to AEOC requests for blood and pertinent information (disaster intelligence) with EMSA officials;
 - coordinate requests with AABB Disaster Task Force , American Red Cross, or ABC to reduce the possibility of duplication of effort;
 - expect blood centers with the ability to commit resources to notify their respective AEOC of quantity, product, cubic volume of packing, and weight of the shipment(s);
 - direct responding blood centers (committed suppliers) to designated staging areas as established by county EOCs; confirm shipping arrangements made by centers. (See Appendix F)
-

Shipping – volume, size, weight

Cubic volume (size) and weight of each shipment should be pre-calculated (example: 1 box 12" x 12" x 12" weighing 20 pounds). Information regarding the size and weight of the shipment should be conveyed to EMSA officials (or other carriers) prior to transportation to the designated staging area(s).

Section 6

Record Keeping

It is important that complete records be kept during a disaster. All records and shipments will be marked —“DISASTER RESPONSE” so that when the disaster situation has been terminated, proper accounting and compensation can be implemented. Billing and reimbursement will be handled through normal means between shipping and receiving blood centers.

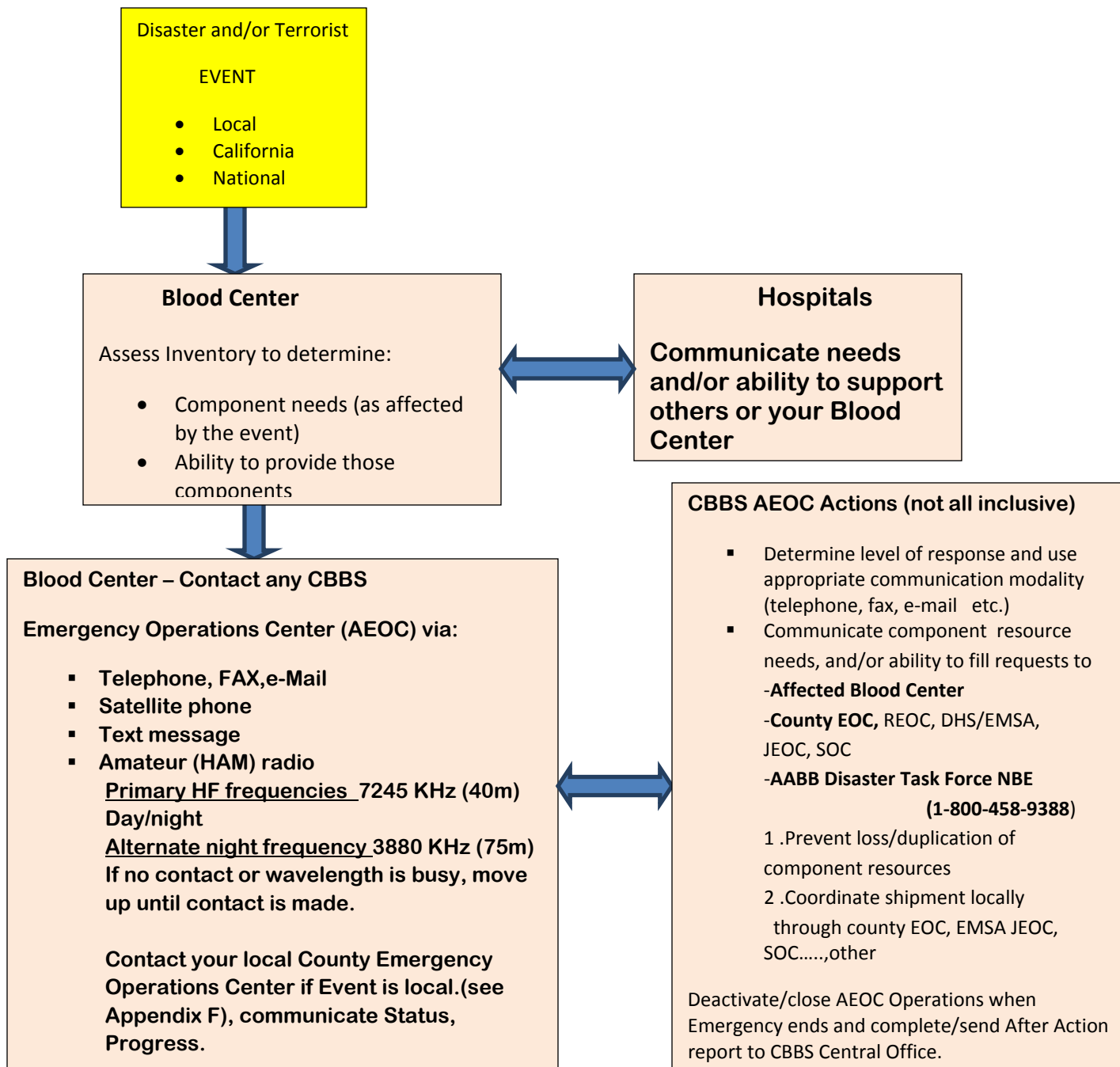
Media Contact

All media contacts should be handled by the Community Relations Coordinator/Director (or equivalent) of the blood center. An agreement should be made with area media to refrain from calling for donors without being requested to do so either directly by the blood center or through the Emergency Broadcast System (EBS). Community Relations should be informed regarding each disaster status passed between area Emergency Operations Centers (EOC) and EMSA to ensure correct dissemination of information to the media.

After Action Report: File an After Action Report (Appendix H) with the CBBS Central office so that procedures can be improved.

CBBS DISASTER RESPONSE PLAN

Attachment 1 - BASIC ACTIVATION DECISION TREE



Key to Abbreviations:	
AEOC – Area Emergency Operations Center	AABB- NBE InterAgency Disaster Task Force
EMSA – Emergency Medical Services Authority	ABC- America’s Blood Centers
EOC- Emergency Operations Center	NBE- National Blood Exchange
JEOC – Joint Operations Center	
SOC – State Operations Center	