

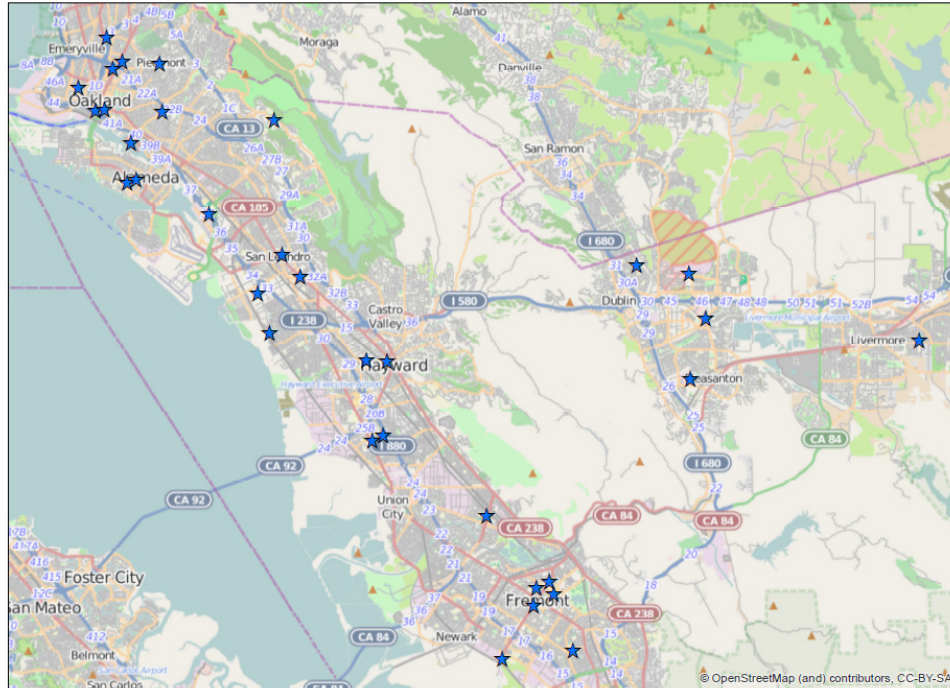
# INCIDENT BRIEFING (ICS 201)

**1. Incident Name:**  
Operation Anthrax 2014

**2. Incident Number:**

**3. Date/Time Initiated:**  
Date: 11/18/2014 Time: 0800

**4. Map/Sketch** (include sketch, showing the total area of operations, the incident site/area, impacted and threatened areas, overflight results, trajectories, impacted shorelines, or other graphics depicting situational status and resource assignment):



**5. Situation Summary and Health and Safety Briefing** (for briefings or transfer of command): Recognize potential incident Health and Safety Hazards and develop necessary measures (remove hazard, provide personal protective equipment, warn people of the hazard) to protect responders from those hazards.

Op 1

On Wednesday, November 18<sup>th</sup>, filters in all of the BioWatch sites in the San Francisco/Bay Area BioWatch Program were positive for *B. anthracis*. Per the San Francisco Bay Area BioWatch Consequence Management Plan, a BioWatch Actionable Result (BAR) was declared at 0800, followed by local and national response actions.

Conference Call: Regional and National calls have taken place to assess risk and determine actions and support.

Activation of the PH DOC and the Op Area EOC

Notify City of Berkeley of activation

ALCO lab working with CDC lab to begin susceptibility testing.

Environmental Sampling-Phase 1 and Phase 2 initiated.

Request filter retrieval every 12 hours

Surveillance-PH Active Surveillance by ALCO Infectious Disease started.

Health Alert has sent to ALCO health care providers.

SNS Managed Inventory Requested to MHOAC for deployment.

Op Area EOC has sent alerts and notification to city PODs for activation.

Infection control precautions are being developed.

|  |                            |  |
|--|----------------------------|--|
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| <p>Requested to CDPH assistance with veterinary surveillance.<br/>         Plume modeling requested from lab per Bio Watch protocol.<br/>         Press Release in progress.</p> <p>All Staff responding to the incident shall assure their safety and safety of other responders and take part in First Responder medication dispensing to be able to continue operation.</p> <p><b>Statistics in Alameda County</b></p> <ul style="list-style-type: none"> <li>• <u># confirmed cases:</u> <b>0</b></li> <li>• <u># suspected cases:</u> <b>unknown</b></li> <li>• <u>Estimated extent / # exposed:</u> <b>unknown</b></li> <li>• <u># hospitalized:</u> <b>0</b></li> <li>• <u># given treatment / prophylaxis:</u> <b>0</b></li> </ul> |                            |  |
| <b>6. Prepared by:</b> Name: _____    Position/Title: _____    Signature: _____  |                            |  |
| ICS 201, Page 1  | Date/Time: _____ Date      |  |

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### 7. Current and Planned Objectives:

1. Staff PH DOC (activate IDER) and Op Area EOC
2. Recall all ACPH EOC staff to report to DOC and support IDER activities.
3. Activate COOP
4. Support lab activities by ensuring equipment, supplies and human resources are in place.
5. JCC will ensure Phase 1 and Phase 2 sampling will take place per protocol.
6. PH Surveillance-Ensure staffing is in place to support surveillance activities
7. Activate Risk Communication Plan
8. Activate call down lists and make notifications.
9. Activate SNS and SNS Distribution Plan
10. Assign staff to RSS location and prepare to receive SNS.
11. Coordinate with ABAHO Health Officers and PIO's
12. Request additional staffing from AC HR to support plans.

### 8. Current and Planned Actions, Strategies, and Tactics:

| Time: | Actions:  |
|-------|---|
| 0800  | Activate ALCO DOC Infectious Disease Response Plan                      |
| 8000  | Activate COOP   |
| 800   | Activate SNS and RSS Plans  |
| 0800  | Activate Risk Communication Plan  |
| 0800  | Activate BAMPWG Website   |
| 800   | Recall all ACPH PHEP and DCDCP staff to report to the DOC               |
| 0800  | Activate SF Bay Area Consequence Management Plan                        |
| 0800  | Activate ALCO EOC   |
| 0800  | Activate Epi and Surveillance Plan                                      |
| 1300  | Staff and warehouse team arrive at warehouse and prepare to receive SNS |
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**6. Prepared by:** Name: \_\_\_\_\_ Position/Title: \_\_\_\_\_ Signature: \_\_\_\_\_

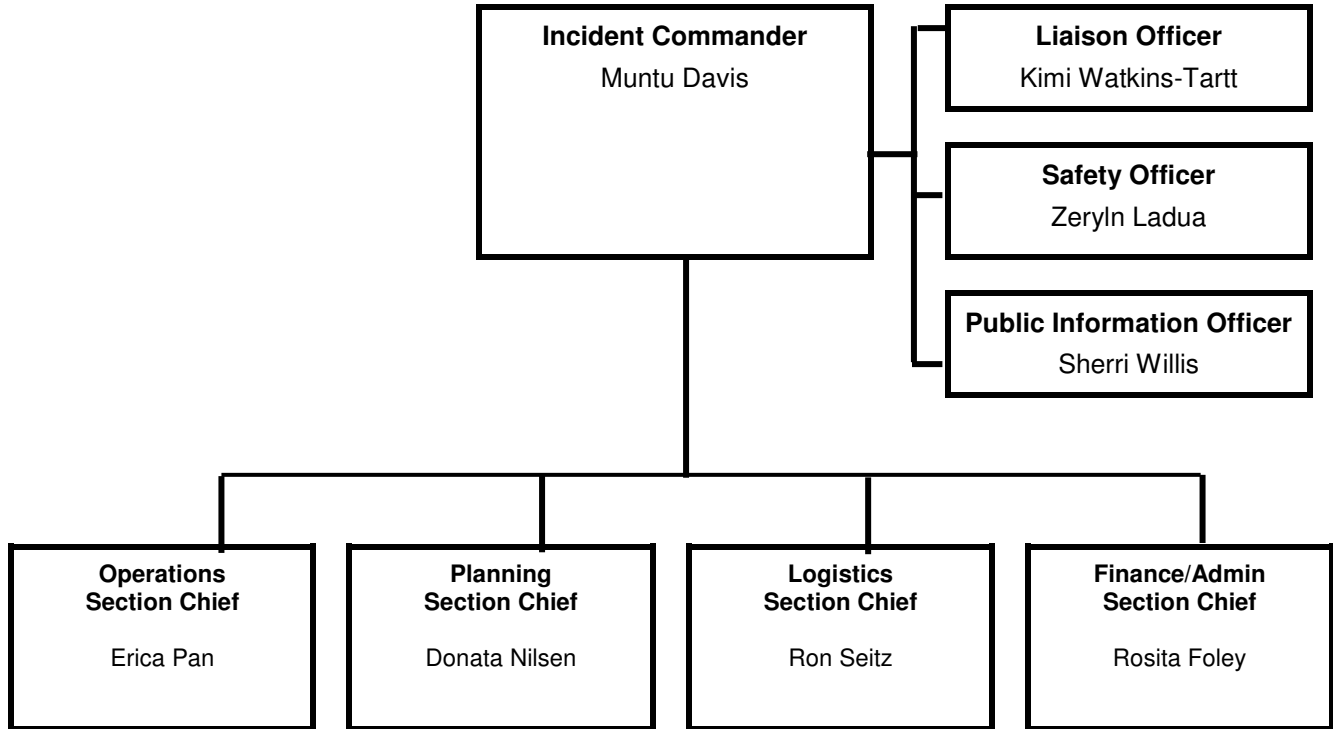
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**9. Current Organization** (fill in additional organization as appropriate):



**6. Prepared by:** Name:

Position/Title:

Signature: \_\_\_\_\_

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| <b>10. Resource Summary:</b> |                     |                   |     |                          |                                    |
|------------------------------|---------------------|-------------------|-----|--------------------------|------------------------------------|
| Resource                     | Resource Identifier | Date/Time Ordered | ETA | Arrived                  | Notes (location/assignment/status) |
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|------------------------|-----------------------|-----------------------|------------------|
| <b>6. Prepared by:</b> | Name: _____           | Position/Title: _____ | Signature: _____ |
| <b>ICS 201, Page 4</b> | Date/Time: Date _____ |                       |                  |