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ADDENDUM 1 MRAG AMERICAS: IATTC OBSERVER PROGRAM - EMERGENCY ACTION PLAN

I. Introduction and Table of Contents

The following Emergency Action Plan (EAP) is to be used by MRAG Americas during the provision of observers in the 2015 and 2016 IATTC Observer Programs based in Honolulu, Hawaii. The contact information is specific to the IATTC in which the program will take place. A copy of the EAP will be distributed to each observer and MRAG staff member in the program.

IATTC Observer Program	1
Emergency Action Plan.....	1
I. Introduction and Table of Contents	1
II. Safety Equipment.....	2
III. Training	3
IV. Appropriate Response Level	4
A. Minor Injuries	4
B. Serious/Life Threatening injuries	5
C. Death	7
D. Natural Disaster	9
V. Communications	14
A. Equipment Protocols.....	14
B. Office Contact Card	16
C. Information to Relay	16
VI. Employee Information.....	17
VII. Responsibilities at the Scene	17
A. Observe Accident Scene for Report.....	17
B. Collect Statements from Witnesses.....	17
C. Collect Program Equipment.....	17
VIII. Support for Non-injured Employees	18
IX. Accident Report Form	18
A. Insurance Copy Form	19
X. Coordinate with MRAG office	20
A. Report outline of Accident/Injury	20
B. Identify Priorities	20

C.	Identify Needs	20
D.	Determine Additional Actions.....	20
E.	Coordinate Transfer of Witness Statements and Evidence ...	20
XI.	Contact Employee's Emergency Contact Numbers	21
A.	Contact Employee's Emergency Contact.....	21
B.	Post-Fatality Calls	21
XII.	Contact Interested Parties	22
A.	IATTC COTR	22
B.	IATTC Spokesperson.....	22
C.	Insurance Company	23
D.	IATTC Legal Counsel	23
E.	Disperse Information to the Rest of the Program.....	23
F.	Notify Media	23
XIII.	Creating an Accident Report File	24
A.	Assemble Original Accident Report	24
B.	Include Additional Information	24
C.	Copies of Press Releases	24
D.	Conduct an Investigation.....	24
	Part One: Fact Finding	25
	Part Two: Accident Analysis	25
XIV.	Long Term Support of the Injured Employee or Family.....	25
A.	Offer Support and Sympathy.....	25
B.	Explain Workers' Compensation Procedures.....	25
C.	Maintain Contact with Injured Employees.....	26
D.	Consider Defraying Transportation or Funeral Costs	26
E.	Send Letters of Condolence	26
F.	Maintain Contact with Family Over Next Year	26
XV.	Long Term Support for Non-injured Employees.....	26
A.	Meet with the Employees	26
B.	Facilitate Communication Between Employees.....	26
C.	Provide Critical Incident Stress Management	27
XVI.	Continuation of the Program	27
A.	Take Steps to Resolve Safety Issues.....	27
B.	Arrange for Employees to Visit Injured Employees	27
C.	Make Arrangements for Time Off	27
D.	Continue Communication of Concerns.....	27

II. Safety Equipment

The Inter-American Tropical Tuna Commission (IATTC) and Marine Resources Assessment Group, Americas (MRAG) will provide safety equipment for the observers in the field for the IATTC Observer Program (IATTC). To

ensure the equipment is available and ready when needed, it is essential for employees to store equipment in the proper location and maintain it in working order. This includes, but is not limited to 1st aid kits, survival suits, PFDs, phones, and safety kits. In addition the Emergency Action Plan (EAP), Emergency Access Card, Office Contact Card, and Injury Report forms should be posted at each communication station.

Vessel captains will be responsible for maintaining all safety equipment to US Coast Guard standards. All vessels will maintain a current USCG Commercial Fishing Vessel Safety Decal. MRAG staff will meet with vessel captains and observers to ensure all communication devices and safety equipment is in working order. MRAG staff will verify the Safety Decal is valid and visually confirm the following:

Communications equipment- is all communication gear, including VHF and SS radios and satellite phones fully operable?

Lifejackets – Is there the proper amount? Are they in good condition? Do they have the correct markings?

Ring life buoy – Is it in good condition? Are the vessels name marked on it and have retro-reflective tape on four points?

Survival Craft – Is it in good condition and marked properly? Stowed correctly? Is the capacity sufficient for the crew and observer?

Distress signals – Have they expired? Are they stowed in a watertight container?

Alarms and Warning Devices – Is there a sound warning device onboard? Is it functioning? Are alarms working operable?

EPIRB – Is there a record of monthly tests? Is it registered with NOAA?

Fire extinguishers – Are there the correct amount onboard? Have they been serviced recently? Are they mounted correctly?

Waste management plan – Does the captain have one onboard? (It is required for vessels over 40 feet that operate more than three nautical miles offshore.)

Navigation lights – Do they work? Do they show the correct arc of visibility?

Injury placard – Is there one mounted onboard?

Oil pollution placard – Is it posted onboard?

Garbage placard – Is it posted onboard?

III. Training

The first step in responding to an accident is to assess the situation and apply 1st Aid to stabilize any injured people. All employees and vessel personnel will complete a basic first aid course prior to training. Observers will be ready to provide basic first aid in the field to stabilize injuries. All employees will have current CPR training. Observers will be trained in survival suit and life raft use, skiff safety and emergency response to man-over-board situations.

IV. Appropriate Response Level

Different injuries or emergencies require different levels of response. MRAG and IATTC are concerned about all injuries or near injuries. The close calls often tell you as much or more about safety issues, than actual injuries do. Observers will maintain a record of near injuries and injuries that will be entered into the computer during the Exit Interview. MRAG will compile the lists and determine what safety concerns need to be addressed.

MRAG will categorize emergencies into four groups: Minor Injuries, Serious/Life Threatening Injuries, Deaths and Natural Disasters. The response for each category grows in intensity as the seriousness of the situation increases. It is important for employees to familiarize themselves with each category, the criterion that defines the category and the required responses. The details of different aspects of each response are covered in the following sections. This section is provided as a quick reference.

A. Minor Injuries

Conditions: Any injury that requires basic 1st Aid treatment, includes minor illness, scrapes, minor cuts, bleeding, 1st degree burns, minor impaling, strains, and sprains.

Response: Stabilize the injury using 1st aid training and supplies.

- 1) **Minor Illness** – Colds, headache, upset stomach, etc. Use appropriate medicine in first aid kits. If symptoms persist, seek medical attention.
- 2) **Scrapes** - A scrape is not a serious wound, but it does pose a threat because dirt and germs are usually ground into it. This makes infection possible. The scrape should be washed thoroughly with soap and water. An antibiotic cream or ointment can then be applied. It is important to keep the wound clean and dry by choosing a band-aid or dressing that completely covers it.
- 3) **Cuts** - Cuts can be more serious than scrapes depending on the depth, amount of bleeding, and possible nerve and tissue damage. Cuts will usually bleed more than a scrape. This is good and bad. While the cut bleeds, it is cleaning itself, removing dirt and other matter. For cuts that are bleeding profusely, some measures need to be taken to control the flow of blood. Serious cuts may require immediate medical attention.
- 4) **Bleeding** - The most effective means of controlling bleeding are covering the wound with a dressing and applying direct pressure. Next elevate the wound above the level of the person's heart. Once the dressing is on the wound, secure it with tape or other bandage. If the person is conscious he or she can continue to apply direct pressure to the wound. It is also important not to tie the dressing too tight. As a guideline you should be able to put two fingers under the dressing.
- 5) **1st Degree Burns** - those that merely redden the skin, run cold water over burned area for 15 minutes, if possible, do not put any creams or greases on the burned area, do not pop any blisters. Cover the burn with light gauze dressing. If blisters pop, apply a light antibiotic ointment and dress as above
- 6) **Minor Impaling** – Splinters or other small objects in the skin should be removed and the wound thoroughly cleaned. Large items or objects in eyes or other soft tissue should not be removed; immediate medical attention should be sought.
- 7) **Strains and Sprains** - A sprain or strain is an injury to tissue, tendons, cartilage, and/or nerves in a specific area. Ankles are some of the most common sprain injuries. Indications of a strain include immediate swelling, black and blue discoloration of the skin and sharp pain. The best treatment for sprains is known as RICE. That is Rest, Ice, Compression, and Elevation. First get off the injured body part. Apply ice for 5-15 minutes every hour to reduce and prevent swelling and also to reduce pain. Heat should not be applied for the first 24 hours. Compression is also used to minimize swelling. Use an ACE or elastic bandage and wrap the area. Elevation prevents fluid build up in the injured area. All these steps lessen pain and swelling of the affected area.
- 8) **Dislocations** - Dislocations can be painful. Signs of a dislocation are swelling, deformity, tenderness, and discoloration. Untrained people should not reset a dislocation. The best that can be done is to immobilize it with a splint, elevate it above the heart if possible, and seek medical attention.

Reporting Protocol: Minor injuries must be reported to IATTC and/or MRAG at the first regularly scheduled radio contact. The party to receive the report will notify the other by e-mail or written response within 24-hours. The observer should record the following information in their logbook and on the appropriate forms. Observers should also complete the following information and include it in reporting for all near injury situations as well.

- 1) Record who was injured.
- 2) When the injury occurred (date and time).
- 3) Where the injury occurred, include the vessel, skiff, or location name, and specific setting of the injury.
- 4) How the injury occurred, should include a brief narrative of the accident.
- 5) Why the injury occurred, should include specific causes that led to the injury (rough weather, loose bolt)

B. Serious/Life Threatening injuries

Conditions: Any injury that requires immediate medical attention such as but not limited to dislocations, fractures, animal bites, serious burns, serious lacerations, internal bleeding, severe impaling, dismemberment, head/back trauma, severe illness, and poisoning.

Response: Stabilize the injury using 1st aid training and supplies. The MRAG staff will ensure that a current Emergency Access Card is present at the wheelhouse radio during the Placement meeting. In cases of serious injury, the captain, captain's representative, or observer will relay location, which is injured, what the injury is, and how it occurred as soon as possible. The Coast Guard should be contacted first via radio or 24-hour telephone (808) 541-2500 and assistance requested as required; the MRAG field staff and or IATTC should be contacted next. MRAG will notify IATTC within 24-hours if a serious injury is reported by a vessel.

- 1) **Dislocations** - Dislocations can be painful. Signs of a dislocation are swelling, deformity, tenderness, and discoloration. Untrained people should not reset a dislocation (with all respects to Mel Gibson a.k.a. Martin Riggs). The best that can be done is to immobilize it with a splint, elevate it above the heart if possible, and seek medical attention.
- 2) **Fractures** - Signs of a fracture include swelling, discoloration, tenderness, loss of feeling in the extremity and pain. Sometimes the bone snapping can be heard. A simple fracture should be splinted and medical attention sought. It is important to splint the fracture in the position it is broken do not try to correct any strange angles. Like dislocations, leave the repositioning to trained medical personnel. Serious bleeding may occur with a compound fracture. Do not apply pressure to a compound fracture to stop the bleeding, nor should you EVER try to push the bone back into the wound. Cover the injured part with a sterile pad. Apply a splint to keep the bone from causing further injury to the surrounding tissues. Keep the person warm and reassured and treat for shock.
- 3) **Animal Bites** - To care for a small animal bite scrub the wound and surrounding area for 10 minutes with an antibacterial/antiseptic or just plain old soap and water, dry the wound and cover with a sterile dressing. For a large animal bite, control bleeding and treat for potential broken bones and/or internal bleeding. Transport the person to a medical facility immediately for further evaluation and treatment. In all animal bite cases, the injured person should receive a tetanus shot unless it is known that he or she received a tetanus booster shot fewer than ten years ago.
- 4) **Serious Burns** - Second-degree burns cause reddening and blistering of the skin. If they are moderately large, they require medical attention. Third degree and worse burns involve charring or whitening of the skin. Critical burns that need immediate medical attention include those where breathing difficulty is present, where more than one body part is affected, or where the head, neck, hands, feet, or genitals are involved. A medical professional, especially if burn covers more area than the palm of your hand, should evaluate all chemical, explosion, electrical, and third-degree burns.
- 5) **Serious Lacerations/ Dismemberment** – A cut is serious and should be seen by a doctor when wound will not stop bleeding; more than 1/4 inch long and on the hands, face, feet, or genitals; in the mouth that are more than 1/2 inch long; cuts elsewhere on the body that are gaping (you can see tissue/fat). If it has been more than 8-12 hours since the wound occurred, most doctors won't stitch it. For severe cuts or dismemberment, apply direct pressure and elevate the stump to stop the bleeding. Treat the injured person for shock. Apply a

tourniquet if direct pressure and elevation do not control the bleeding. If a part of the body was removed, collect the tissue, rinse the body part with disinfected water, wrap the body part in dry sterile gauze, place the wrapped body part in a clean and waterproof plastic bag and seal the bag, place the sealed plastic bag in ice water, making sure no water can get into the bag and that the body part does not get wet. Do not place the body part on ice, or it may freeze or be injured by the cold. Transport the body part to the hospital along with the injured person.

- 6) **Internal Bleeding** – is very dangerous, get medical help immediately. Never give a person suffering from internal bleeding food or drink. If the person has been impaled and the object is still in the wound, do not remove it. If the victim has an open chest wound, cover it to prevent air from entering the chest. If there is bleeding from the leg or uterus, lay the person down with the legs raised to reduce bleeding. Keep the victim warm and comfortable, but do not overheat them.
- 7) **Severe Impaling** - when a foreign object is stuck in the body. Do not remove an impaled object. It is very important to immobilize it with dressings and seek professional medical attention. Removing an impaled object is an example of when more harm than good can result if not done by professional medical personnel. A prime example is a small stick that has impaled the eye. No attempt should be made to remove the stick or twig. To immobilize it you should cover both eyes to prevent the person from looking around and causing further damage to the injured eye. Immediately seek medical attention.
- 8) **Head/back Trauma** – for a mild head injury, no specific treatment may be needed. However, closely watch the person for any concerning symptoms over the next 24 hours. The symptoms of a serious head injury can be delayed. While the person is sleeping, wake them every 2 to 3 hours and ask simple questions to check alertness, such as "What is your name?" Get medical help immediately if the person: becomes unusually drowsy, develops a severe headache or stiff neck, vomits (especially more than once), loses consciousness at any time (even if brief) or behaves abnormally. For a moderate to severe head or back injury, take the following steps immediately:
 - a) Contact field office or research vessel.
 - b) Check the person's airway, breathing, and circulation.
 - c) Stabilize the head and neck by placing your hands on both sides of the person's head, keeping the head in line with the spine and preventing movement.
 - d) Attempt to stop any bleeding by firmly pressing a clean cloth on the wound. If the injury is serious, be careful not to move the person's head. If blood soaks through the cloth, DO NOT remove it, just place another cloth over the first one.
 - e) If you suspect a skull fracture, DO NOT apply direct pressure to the bleeding site, and DO NOT remove any debris from the wound. Cover the wound with sterile gauze dressing.
 - f) If the person is vomiting, roll the head, neck, and body as one unit to prevent choking. This still protects the spine, which you must always assume is injured in the case of a head injury.
- 9) **Serious Illness** – Any illness that persists for more than seven days or at the outset of systems for a major illness, contact medical personnel to schedule an appointment, arrange for travel to hospital if possible.
- 10) **Poisoning** – Contact the Coast Guard or MRAG field staff and relay the following information:
 - a) Describe the patient by name, age and weight.
 - b) If possible, have the container or poison in your hand and identify as best you can:
 - c) What was taken?
 - d) When was it taken?
 - e) How much was taken?
 - f) How is the person acting?The MRAG staff will contact the Poison Information Center at **(800) 222-1222**.

Reporting Protocol: Major injuries must be reported immediately after the injured person is stabilized. The vessel captain or observer should contact the Coast Guard and get direction on care or evacuation. Once the situation is under control the MRAG office or IATTC should be contacted. Time may be of the essence.

- 1) Record the following information to relay to the field office or research vessel:
 - a) Who is injured
 - b) When the injury occurred (date and time).
 - c) Where the injury occurred, include the vessel, skiff, or location name, and specific setting of the injury.
 - d) How the injury occurred, should include a brief narrative of the accident.
 - e) Why the injury occurred, should include specific causes that led to the injury (rough weather, loose bolt)
- 2) In the case that an observer is severely injured while at sea, they will need to be evacuated from the vessel to a medical facility in Hawaii or at another location. The Vessel or MRAG will contact the USCG Search and Rescue at (808) 541-2500 to coordinate the evacuation of the observer, note the time and whom the information was relayed to. Standby to receive further instructions. The USCG will be in charge of all the evacuation details. Usually the USCG will transfer the observer to another vessel in order to get the observer within helicopter range of Honolulu. The evacuation may take several days. During this time, MRAG will keep in contact with the USCG to keep informed of the status of the observer and the time of arrival to the hospital.
- 3) Depending on the location of the vessel, the USCG may make the decision to transport the observer to a location other than Hawaii. In this case the USCG may turn the case over to another USCG Search and Rescue facility that is in that jurisdiction. They will direct MRAG on who they should contact at that facility. In addition, MRAG will need to locate a trauma unit near that location and make arrangements with them to receive the patient.
- 4) MRAG staff will start an accident report immediately upon receiving an emergency call. The information relayed from the scene should be recorded. The time and person contacted at the Coast Guard should be recorded along with specific instructions provided by the Coast Guard.
- 5) MRAG staff will alert IATTC, MRAG Program Manager and Assistant Program Manager and forward copies of the injury report.
- 6) MRAG will contact Queens Hospital at (808) 538-9011 to arrange for the receiving of the observer to the emergency room. Queens Hospital has an excellent trauma unit and they have a helicopter pad. An MRAG coordinator will also be at the emergency room when the observer arrives to provide insurance information and to ensure that the observer is admitted to the hospital without difficulty.
- 7) The Assistant Program Manager and IATTC COTR will coordinate information dissemination with the appropriate authorities.
- 8) If an injured person is an MRAG employee - Assistant Program Manager will contact the person's emergency contacts as appropriate.
- 9) MRAG staff will maintain a log of all communications involving the accident and compile all information in the accident report.

C. Death

Conditions: Anytime an employee is killed in the field as a result of injury, drowning, exposure, or other unforeseen cause, except for natural disaster situation (see Natural Disaster below). This protocol should also be used if an unidentified body is found or non-employee is killed in the presence of MRAG employees.

Response: Contact Coast Guard immediately. Indicate there has been a **Tragic Accident**. If other emergency or injury situations exist, use protocols above first to reduce further loss of life.

- 1) Relay your position, any immediate danger to survivors, name of victim(s), and a brief description of circumstances. Remain at communications to await instructions.
- 2) Record Who is killed, When the death occurred (date and time), Where the injury occurred, include the vessel, skiff, or location name, and specific setting of the accident, How the accident occurred, should include a brief narrative of the accident, Why the accident occurred, should include specific causes that led to the death (rough weather, broken cable, etc.), and the names and contact information of any witnesses.
- 3) Once the situation is stabilized, the vessel captain will contact MRAG staff.

- 4) The Coast Guard will relay instructions to the accident scene. Specific instructions will be provided regarding retrieving and transporting the victim, collecting evidence and equipment, emergency response, and communications instructions.
- 5) MRAG staff will alert IATTC, MRAG Program Manager and Assistant Program Manager and forward copies of the injury report.
- 6) The Assistant Program Manager and IATTC COTR will coordinate information dissemination with the appropriate authorities
- 7) The Assistant Program Manager will contact victim's emergency contacts. Arrange for transportation.
- 8) MRAG office and IATTC will conduct investigation as required.
- 9) MRAG will provide support for employees and relatives.

Reporting Protocol: Deaths in the field must be reported immediately to the Field Coordinator in charge of the region.

- 1) Record the following information to relay to the field office:
 - a) Record who is killed.
 - b) When the death occurred (date and time).
 - c) Where the injury occurred, include the vessel, skiff, or location name, and specific setting of the accident
 - d) How the accident occurred, should include a brief narrative of the accident.
 - e) Why the accident occurred, should include specific causes that led to the death (rough weather, broken cable, etc.).
 - f) The names and contact information of any witnesses.
- 2) Once contact with the field office has been made, note the time and whom the information was relayed to. Standby to receive further instructions.
- 3) MRAG staff will cooperate with US Coast Guard and appropriate authorities.
- 4) MRAG staff will start an accident report immediately upon receiving an emergency call. The information relayed from the scene should be recorded. The time and person contacted at the Coast Guard should be recorded along with specific instructions provided by the Coast Guard.
- 5) The Field Coordinator will maintain a log of all communications involving the accident and compile all information in the accident report.
- 6) The body of the victim and any evidence collected will follow the same protocol for the transfer of biological specimens. A biological sample sheet will be used to track the transfer of the body and all evidence. A copy of the biological sample sheets will be included in the accident report.

D. Natural Disaster

Conditions: In the case of an earthquake, tsunami, or volcanic eruption, the following protocols will be followed. The information provided is adapted from the Oahu Civil Defense Operations Plan.

Employees at sea will be at very low risk for Natural Disasters. However, MRAG's office staff and observers on waiting status will be at moderate risk. All employees should be familiar with the protocols below to ensure the proper response to public warnings and alarms

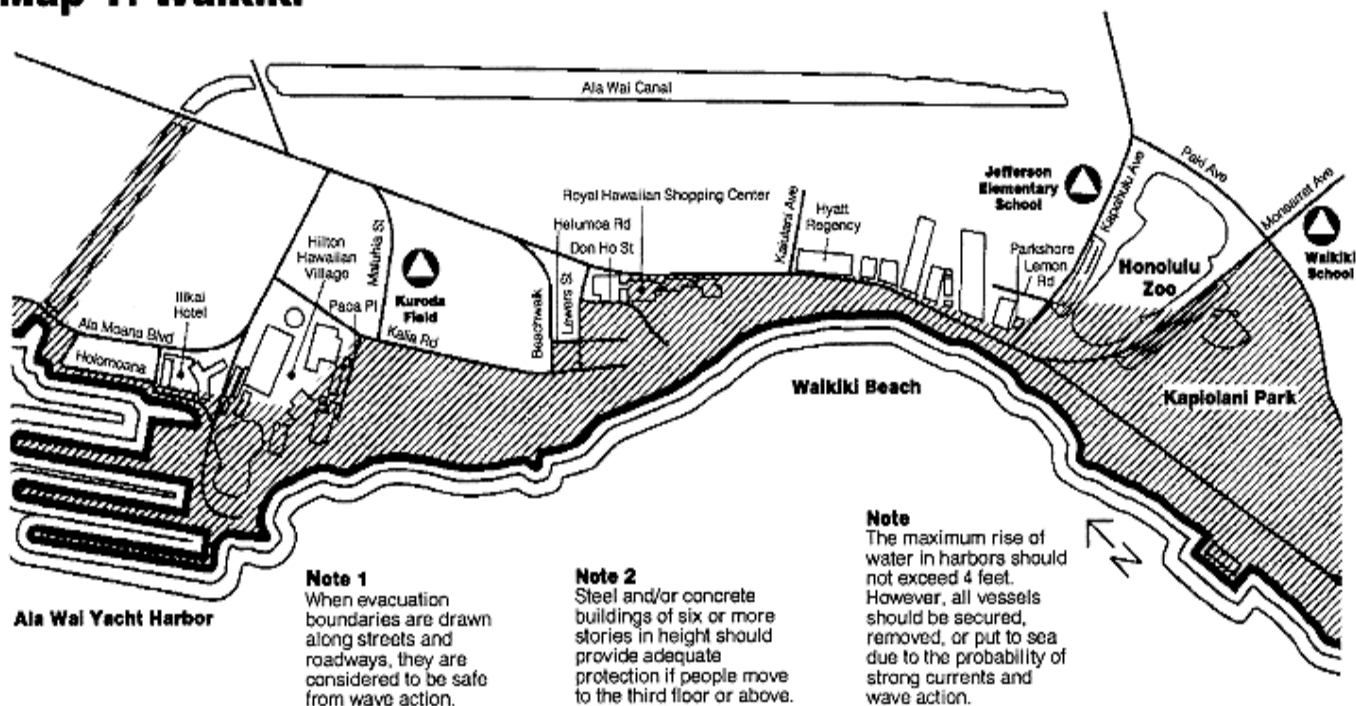
- a. **Volcanic Eruption** – Hawaii is located in the “Pacific Rim of Fire.” Hawaiian volcanoes can erupt either at their summits or on their flanks. Young Hawaiian volcanoes, such as Kilauea and Mauna Loa, have summit calderas. Summit eruptions of Kilauea and Mauna Loa occur within or near their calderas. Flank eruptions usually take place along rift zones, which are highly fractured zones of weakness within the volcano. Rift zones typically extend from the summit of a volcano toward the coastline and may continue for many miles under the sea. Lava flows are the most common of the direct hazards created by Hawaiian eruptions and pose the greatest threat to property. Other hazards include airborne particles of ash, cinder, and corrosive volcanic gases. Explosive eruptions occur much less often than non-explosive eruptions at Hawaiian volcanoes but have been witnessed in historic time. The greatest danger associated with explosive eruptions is their potential to produce pyroclastic surges. These surges are highly destructive, turbulent gas clouds that flow rapidly along the ground carrying hot ash and rock fragments. A lesser volcanic hazard is created by ground movement, which may result in large cracks across roads and other property or cause uneven settling of foundations. Generally, only areas near an active or recently active volcanic vent are affected by large-scale ground cracks and settling.
- b. **Earthquake** – The vast majority of the large earthquakes in the Hawaiian Islands occur in and around the active volcanoes on the big island The Island of Hawaii experiences thousands of earthquakes each year; most are so small that they can only be detected by instruments, but some are strong enough to be felt, and a few cause minor-to-moderate damage. Most of Hawaii's earthquakes are directly related to volcanic activity and are caused by magma moving beneath the earth's surface. Earthquakes may occur before or during an eruption, or they may result from the underground movement of magma that comes close to the surface but does not erupt. A few of the island's earthquakes are less directly related to volcanism; these earthquakes originate in zones of structural weakness at the base of the volcanoes or

deep within the earth beneath the island. Strong earthquakes endanger people and property by shaking structures and by causing ground cracks, ground settling, and landslides. Strong earthquakes in Hawaii's past have destroyed buildings, water tanks, and bridges, and have disrupted water, sewer, and utility lines. Locally, such damage can be intensified where soft, water-saturated soils amplify earthquake ground motions. On steep slopes, such soils may fail during an earthquake, resulting in mudflows or landslides. An indirect hazard produced by some earthquakes is a tsunami, a large sea wave that can be far more damaging than any of the direct seismic hazards. .

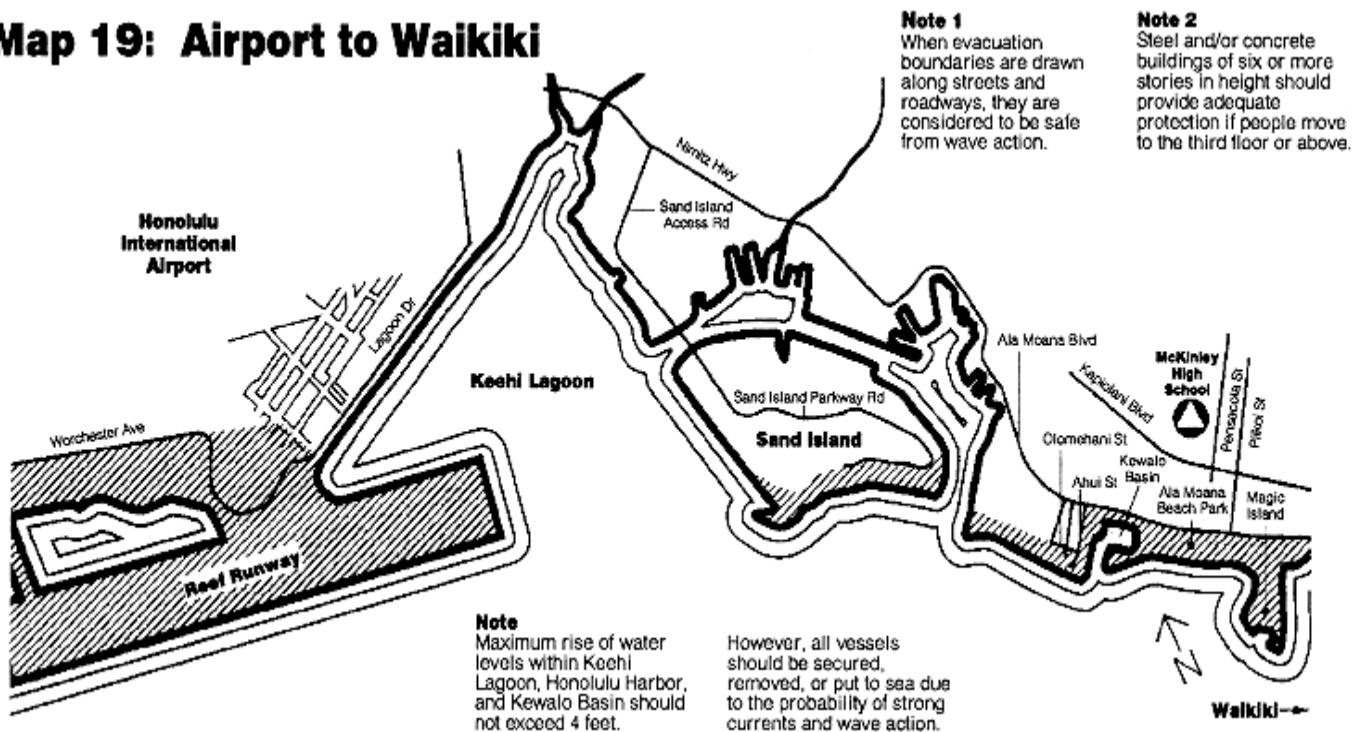
- c. **Tsunami** - Tsunamis are natural phenomenon that are a series of traveling ocean waves generated by disturbances associated with earthquakes, volcanoes, or landslides in oceanic and coastal regions. In Honolulu, the most serious threat is from local tsunamis – those generated Hawaiian waters. However, the Hawaiian Islands are at risk from tsunamis originating anywhere in the Pacific Rim. Locally generated waves that are begin immediately offshore may strike the coast with very little warning. Large tsunamis, which can reach 100 feet and more in height, are usually generated in the western Pacific. Submarine landslides, which may induce tsunamis, can and have occurred without an earthquake. These waves could impact any or all shoreline areas in Hawaii region, depending on the size and direction of movement of the tsunami.

Response: If an earthquake is felt or a volcanic eruption is observed it is critical to assess the chance of a tsunami impacting the region. Typically if there is a danger from tsunami, the warning sirens will be sounded to advise the need to evacuate. NOAA Weather Radio Broadcasts on frequencies 162.550 MHZ and 162.400 MHZ and will provide detailed evacuation instructions. Local radio and TV broadcasts will also broadcast emergency information. If you are below 100-feet above sea level be advised that in the event of a strong earthquake, immediately head for high ground regardless of whether an alarm has been sounded. Localized tsunamis (generated nearby) may hit land in a matter of minutes. A concrete and/or steel building taller than six stories should provide adequate safety if you can reach the 3rd floor or higher. The maps below show the proper evacuations routes and areas of highest risk for the downtown Honolulu area.

Map 1: Waikiki



Map 19: Airport to Waikiki



- A. **Volcanic Eruption** –The risk of volcanic eruption in Honolulu is minimal. The major concern is Tsunamis created by local eruptions. However, if a volcanic eruption is forecast the Hawaii Volcano Observatory, a warning indicating the potential for volcanic eruption will be released. The Emergency Services Council will make whatever confirmations are necessary, and pursue further information and guidance from the Hawaii Volcano Observatory, National Weather Service, FEMA, or other qualified agencies. If the potential is high enough a warning will be made estimating when an eruption is anticipated and its duration, which areas are expected to be subject to flooding, mudflows, ash fallout, pyroclastic flows and to what extent, how much warning time will be available from the time that an eruption is definitely imminent until the time that it actually occurs, and what measures can be taken to lessen the effects and damage anticipated. If a warning is issued that affects the Honolulu area:
- 1) MRAG Anchorage office at (888) 425-8772 to notify of the situation.
 - 2) Identify areas safe and suitable for shelter if evacuation is necessary and for the storage of evacuated equipment and emergency supplies. Assure that evacuation routes to the areas selected will not become impassable before they can be reached.
 - 3) Alert field personnel of impending situation.
 - 4) So far as is practical, put personnel and equipment on stand-by, and maintain communication with operating and stand-by crews.
 - 5) Establish a watch and observation of volcano activity.
 - 6) Limit travel as required.
 - 7) Request assistance as necessary and available under the conditions, and continue volcano disaster operations.
 - 8) Where injuries are involved, notify local EMS agencies as soon as possible.
- B. **Earthquake** – If a severe earthquake occurs follow the protocols below. Remember any earthquake can produce a tsunami. Follow the Tsunami protocols below as well
- 1) Be aware the danger of the collapse of structures weakened or damaged by the earthquake.
 - 2) Survey existing communications. Establish short and long-range communications as available.
 - 3) Contact shore based employees and observers to determine their status.
 - 4) Where injuries are involved, notify local EMS agencies as soon as possible.
 - 5) Control fires and the escapement and/or spread of hazardous or toxic substances.
 - 6) Restore and maintain essential services such as power, transportation and computer systems as soon as it is safe and possible to do so.
- C. **Tsunami** - Currently, areas to be evacuated in Honolulu are identified in the Maps above. **If you are below 100-feet above sea level be advised that in the event of a strong earthquake, immediately head for high ground regardless of whether an alarm has been sounded. Localized tsunamis (generated nearby) may hit land in a matter of minutes.** Follow the following protocols if a Tsunami Warning is issued:
- 1) Alerted to Tsunami risk from earthquake or warning sirens.
 - 2) Receive alert information from radio or television stations or NOAA Weather Radio Broadcasts on frequencies 162.550 MHZ and 162.400 MHZ.
 - 3) Refer to Evacuation Maps above and determine if facility/activity is within or outside of an evacuation zone.
 - 4) Determine time remaining to estimate first wave arrival.
 - 5) If the first wave will arrive in 6 hours or less and office is inside the evacuation zone, notify employees and clients:
 - a. If office is currently closed, remain closed
 - b. If office is open, immediately begin phasing down and terminate normal operations.
 - c. Implement preplanned evacuation plan see maps above or posted at the office exits.
 - 6) If the first wave will arrive in 6 hours or less and office is outside the evacuation zone, notify employees and clients:
 - a. If office is currently closed, remain closed.
 - b. If office is open, remain open and retain employees and clients.
 - c. Terminate all non-emergency transport/travel.
 - d. Attempt to stagger the release of those who must leave.

- 7) If the first wave will arrive in more than 6 hours and office is inside the evacuation zone, notify employees and clients:
 - a. If office is currently closed, remain closed.
 - b. If office is open, establish a positive pace of pre-evacuation preparation.
 - c. Minimize movement of employees and clients to the office.
 - d. Consider early closure, staggering employee release.
- 8) If evacuation is required:
 - a. Relocate/store/tie down equipment/loose items.
 - b. Handle/safeguard hazardous materials on premises.
 - c. Locate gas/electric shutoff.
 - d. Ensure telephone is forwarded to cell phone and take a satellite phone if available.
 - e. Remove all laptop, backup drive, and personnel files if time allows.
- 9) . Establish an emergency operation center, inventory communications capabilities between essential facilities and the emergency operations center
- 10) Initiate a rough estimate of the extent of public and private damage following a tsunami wave.
- 11) Where injuries are involved, notify local EMS agencies and medical facilities as soon as possible.
- 12) Contact MRAG Anchorage office at (888) 425-8772 to notify of the situation.
- 13) Arrange for initial debris clearance and restoration of essential facilities, power, and transportation.
- 14) Arrange for the drainage of water pockets.
- 15) Arrange for emergency housing as may be necessary.
- 16) Initiate immediate and long range rehabilitation measures and programs.
- 17) Release excess personnel and equipment.

Reporting Protocol: The primary responsibility of the MRAG Field Coordinator is to keep everyone informed about the severity of the situation. The Filed Coordinator will be the primary source for the relay of communications between the Public Information System and the employees in Honolulu. The Field Coordinator will apprise and consult with the Assistant Program Manager and IATTC COTR to determine the proper course of action.

V. Communications

Accurate communications are one of the critical aspects of any emergency situation. Due to the nature of the densely populated city of Honolulu and the remote nature of the majority of MRAG's employees, following the proper chain of communication and relaying the correct information will be essential to the successful resolution of the emergency.

All observers will conduct regularly scheduled radio reports with IATTC/MRAG. The Field Coordinator will maintain telephone communication at all times. If a major emergency situation (Death or Natural Disaster) is occurring or has occurred, the Field Coordinator will update the observers during radio schedules. When an emergency arises at sea the observer or vessel captain will contact IATTC and/or MRAG Field Coordinator and relay the vessel's name, their name, location, and type of situation, i.e., Serious injury, Death, or Natural Disaster. If possible the caller should provide a level of urgency, how imperative it is to get help and the type of help required. The caller should stay close to the radio and be ready to respond to instructions.

The following questions should be answered to help determine the level of the emergency and provide information for response teams.

- 1) Record who was injured.
- 2) When the injury occurred (date and time).
- 3) Where the injury occurred, include the vessel, skiff, or location name, and specific setting of the injury.
- 4) How the injury occurred, should include a brief narrative of the accident.
- 5) Why the injury occurred, should include specific causes that led to the injury (rough weather, loose bolt)

Once the Field Coordinator receives the emergency call and assess the situation, a call to the appropriate emergency service should be completed. In most cases the first call should be to the US Coast Guard Dispatch. See the Emergency Calling Card below for details. Relay the information in a calm, clear voice. Be ready to write down information and instructions. Stay on the line until you are dismissed, providing all the information required. The Field Coordinator or vessel captain should relay information and stay by the communications station as required until the emergency is resolved.

A. Equipment Protocols

When an emergency occurs, the selection and proper use of the communications equipment will dictate the success of the call. For most field emergencies, the person in the emergency will use handheld or skiff based VHF radios to contact a field office, research vessel, or nearest person for quick response. It is important to remain calm and speak clearly on the radio. If the emergency situation is under control and you are advising the field office or research vessel of the problem, switch up off the public channel. If the situation is dire, and you need immediate response from the closest source, you may broadcast the emergency on the public channel. Be concise and use suitable language, give the needed information, and then standby to receive responses.

The Field Coordinator will monitor the office phone during all periods of deployment. If an emergency situation arises, the primary means of relaying messages to should be the Sat phone. Use the SSB or VHF when appropriate or dial the number directly for US Coast Guard. If the Sat Phone is not working due to poor signal use SSB or relay to a vessel that can transmit via SSB.

Emergency Access Card

The Emergency Access Card will be posted on the wall at the communications station at each field office and

EMERGENCY ACCESS CARD

Once you receive an emergency call from the field, call the following numbers, in the following order, until you reach a person rather than a recorder. Once you reach a person, pass on the information listed under “What to Say” on back.

If the accident is life-threatening emergency and requires immediate assistance, contact:

US COAST GUARD DISPATCH (3-200 Miles) (808) 541-2500

US COAST GUARD DISPATCH (200+ Miles) (800) 331-6176

US COAST GUARD DISPATCH MEDIUM FREQUENCY SIDEBAND 2670kHz

US COAST GUARD DISPATCH HIGH FREQUENCY SIDEBAND 7080kHz

If the emergency is life threatening or involves a death, contact:

HONOLULU POLICE DEPARTMENT - 911

If the above numbers fail to reach a live person, contact:

NMFS ENFORCEMENT - (808) 853-1964

HONOLULU POLICE DEPARTMENT - (808) 529-3111

KAISER HONOLULU HOSPITAL - (808) 597-2468

Other import numbers:

Poison Hotline - (800) 222-1222

Oil & Toxic Chemical Response - (808) 927-0830

Oahu Civil Defense - (808) 523-4121

Harbor Police Dispatch - (808) 587-2076

FEMA – (808) 851-7900

After calling for medical support, or if the emergency is not life threatening, call the following phone numbers in the following order until a person is contacted:

(888) 425-8772 – MRAG’s Anchorage office – Bryan Belay

(907) 240-7586 – Bryan Belay’s cell phone

(907) 677-0873 – Bryan Belay’s home phone

(813) 639-9519 – MRAG’s Tampa office – Bob Trumble

What to Say (Most importantly, SPEAK CALMLY & CLEARLY)

- Who you are and toll free phone number.
- Where the emergency is located (be specific, list the physical name and latitude and longitude).
- How many injured people there are.
- What happened (be very brief)
- Provide a very basic medical assessment, if it is available (e.g., patient is unresponsive, patient is not breathing, etc.)
- Tell them what type of support you need or would prefer (i.e. search & rescue, medical helo, charter craft, etc.)
- Ask them how long it will take for someone to respond.

Be prepared to stay on the line. Be prepared to take instructions. If it is important for you to stay with a seriously injured patient, it might be prudent to have an assistant or other qualified employee make the call.

B. Office Contact Card

After a field emergency has been stabilized, it is important for the Field Coordinator to convey accurate information to the Anchorage office. The person making the call should be sure that the person receiving the information has written it down and that it is clearly understood. If the person contacted cannot help the caller, do not assume that the correct information will be passed on to the appropriate person. Also, in the event of a serious incident, it is important that a follow-up contact time and plan is established. That is, the Field Coordinator and Bryan Belay should clarify what is going to happen once the phone call ends and both parties should come up with a plan for remaining in contact in the event that someone has a question or requires a status report.

What to Say: Communicating with the Office

Once you stabilize the field emergency, you need to pass along applicable information to the designated office personnel, Bryan Belay. If you are a lead observer or vessel captain and you need to relay the following information to Bryan Belay.

The following information **MUST** be **ACCURATELY** passed from the lead observer to the office staff:

- Name of person doing the reporting.
- Location of the person doing the reporting.
- Nature of the incident, including its location, what occurred and why it occurred.
- How many employees are involved.
- Using clear and concise notes, identify each employee's problem and treatment plan.
- What has been done up to this point (i.e. EMS has been called, patient on the way to hospital, search and rescue in progress, etc.).
- What will you do with the uninjured employees (i.e. continue sampling, help in search, return to Honolulu, etc.)?
- Is there anything the office can do to assist?
- Where and how can you be reached once you get off the phone or radio? (Consider arranging a follow-up contact.)

C. Information to Relay

In an emergency situation the two most important pieces of information to relay are who you are and where you are. Be specific on the location, for example, name the bay or closest body of water and give latitude and longitude. Next convey as calmly as possible the details of the emergency, use concise language and speak clearly. Include how many people are injured and the extent of the injuries, a brief description of what happened, and provides the time of the accident. Indicate what kind of assistance you need such as search and rescue, helo-ambulance, etc. Ask how long until response arrives!

VI. Employee Information

MRAG will maintain a file that contains the medical information for each Hawaii based employee. This file will contain information to be used in case of emergency such as, allergies, current medications, existing medical conditions, and previous injuries or conditions to consider when treating the employee. This file will be stored in a locked file cabinet near the communications station for easy access. The Field coordinator will relay any important information to the accident scene as required in an emergency situation.

A list of Emergency Contact Numbers will be kept at the MRAG Anchorage office and at the Honolulu office. The list will include the employee's name, relation of the contact person, and a valid phone number. The numbers will be verified at the beginning of each new contract, to ensure the list is accurate and up to date.

In the case of an accident that will require medical attention, the Field Coordinator in charge of the injured employee must fill out an insurance claim form. The forms and instructions will be stored at the office. If you have questions filling out the forms contact Bryan Belay at (888) 425-8772.

VII. Responsibilities at the Scene

The person at an accident scene has the most important job. An accident may involve a member of the MRAG team, part of the vessels crew, or other people in the area. As part of the vessel crew, MRAG employees are obligated to provide assistance. However, employees should consider their actions when helping others, it is important not to create a larger problem by trying to help with inadequate equipment or training.

A. Observe Accident Scene for Report

When a MRAG employee arrives at an accident scene or an accident occurs, the first thing to do is observe the scene and to plan an appropriate response. Rushing into an accident usually results in additional accident victims. Make a mental list of the scene:

- Who is injured?
- When did the accident occur?
- Where did the accident occur, i.e. specific setting.
- How the accident occurred, what do the injured people need that you can provide?
- Why the accident occurred, is there a chance the problem could reoccur?

Be prepared to record this information once the situation is under control. When you mentally focus on these questions during an accident situation, the responses will be easier to recall.

B. Collect Statements from Witnesses

In the case of a serious accident involving MRAG employees, it is important for responding employees to record a record of what happened. Once the emergency has been stabilized, the MRAG employee should collect a statement from any witnesses and from those that responded to help. These statements will be included in the accident report provided to IATTC. Witness statements can provide valuable information about the cause of the accident. They can help reduce future accidents if the proper information is collected and used. The following information should be recorded in a Witness Statement:

- Name of Witness
- Time of Arrival at Accident – Hour/minute and relative to accident, i.e. witness accident, arrived just after, etc.)
- Description of Events – the order in which actions transpired at the scene. Specifically how the accident occurred, who responded, what the response was?
- Contact number for further information.

C. Collect Program Equipment

If the accident involving MRAG employees, it is important that a non-injured employee be designated to ensure all program property is secured and accounted for. This may include large items such as skiffs, sampling gear, safety gear, and communication devices, but should also include any personal items of the injured employees, all data and biological samples. A list of the items collected, including damage to the items should be made and stored with the other forms regarding the accident.

VIII. Support for Non-injured Employees

Once an emergency situation is resolved it is important to update uninjured parties on a regular basis. Any employee who knows the injured person or who has been associated with the emergency will likely want to be informed of the status of the injured person, of the details of the incident, and how the events might affect employees or the program. Consequently, as part of our crisis communication plan, MRAG has considered what information it will pass along and what information must remain confidential. Details of the injured persons medical condition will not be shared without the person's (or the family's) permission. However, factual information about the accident, who was involved, and if they were hurt will be relayed to everyone in the program.

MRAG realizes everyone wants to know if or how events will affect their lives. MRAG will try to provide accurate, timely responses to each employee on duty following any accident or emergency situation. Stress can be minimized and rumors eliminated by providing open and honest information as it becomes available. Field Coordinators will deliver accident information in person to employees. Information will not be relayed via SSB or VHF radios. The information may be relayed via Sat phone.

IX. Accident Report Form

All accidents, from minor injuries to deaths, will require an accident report. MRAG will provide a form that will be filled out by the injured employee in the case of minor injuries or the Field Coordinator in the case of major injuries or deaths. The basic information is required for all accidents, who was injured, when, where, how, and why the accident occurred. For major accidents or deaths, the Field Coordinator will include a communications log, a written summary of the response and resolution of the emergency, all witness statements or evidence collected, and any reports filed by the responding agencies.

Form Field Definitions/Instructions:

- Observer Name: Record observer name
- Fishery: Record fishery name
- Environment: Select most appropriate description where incident occurred from each list.
- Incident Location: Name of vessel or physical location, along with locality if appropriate
- Incident Date: Initial occurrence date
- Incident Time: Initial occurrence time
- Time details: Place the time into a frame of reference. For instance, the number of days the observer was in the field or training when the incident occurred, i.e.: day seven of a nine-day trip
- Evacuated: Indicate if observer was evacuated from the field due to illness or injury. If a vessel cut the trip short for the observer, select YES and note under OTHER below.
- Evacuation mode: Select or write-in mode of evacuation. Record the details of the evacuation, including the date and time of the evacuation and the location evacuated from and to.
- Type of Injury: Select all applicable descriptions of event.
- Body parts(s) affected: Record extent of injury.
- Contributing Factors: Recording any factor that was an immediate or contributing factor. Immediate means the direct cause (slick deck, rough seas). Contributing means indirect cause (fatigue).
- Duration: Record the length of time injury continued and length of time that work was missed due to injury - this will be completed at a later date. Do not include regularly scheduled time off.
- Professional medical assistance: Indicate if professional medical assistance was provided (EMT, nurse, physician) in response to this injury. Detail what that assistance entailed, including medication, hospitalization, etc. Note also if medical personnel came to site or advised via phone.
- Type of illness: Select all applicable illnesses. If "other", indicate nature of illness.
- Detail: Record name of illness (if known) and other details (symptoms, how transmitted, incubation, systems affected).
- Duration: Length of time ill/injured: Describe duration from onset to resolution/ healing. Consider lack of symptoms as healed/resolved. Total missed work time: Record the total time in hours or days that observer was not able to work due to illness. Do not include regularly scheduled time off.
- Professional medical assistance: Same as above
- Narrative: Provide all relevant details
- Tracking: Date and Name of the observer and Field Coordinator who completed and reviewed the form. Date and initials of IATTC program manager when form is received.

A. Insurance Copy Form

The first step in reporting a claim is to call the Early Notice number. Relay the information collected from the accident scene to the claims center. The Field Coordinator will relay information at the first available opportunity.
Early Notice Number 1-888-393-6828

If the employee believes he or she will not be able to work for more than 3 days due to the injury/illness, a WC-1 Employer's Report of Industrial Injury must be completed in triplicate and the original and a copy mailed to Department of Labor and Industrial Relations, Disability Compensation Division, P.O. Box 3769 Honolulu, Hawaii 96812-3769. If the employee visits a doctor due to the injury, a WC-2 Physicians report should also be completed and included in the mail. A copy of the WC-1 and WC-2 should remain in the employees file and a copy sent to the insurance company AIG. In the case of a temporary disability due to the injury, a TDI 45 form should be completed and turned mailed to the Department of Labor and Industrial Relations, Disability Compensation Division and the insurance provider.

- 1) Leave the shaded areas blank
- 2) Employer or Employee fills out top section:
 - a) Occupation = Fisheries Observer.
 - b) Department = Hawaii
 - c) Payroll Comp Class Code:
 - i) At Sea = 8719F
 - ii) On dock or vessel at dock = 8709F
 - iii) Training or Debriefing = 8810
 - d) DBA = Alaska Fisheries Division of the United Industrial Workers
 - e) Nature of Business = Fisheries Contractor
 - f) DOL Number = to be assigned**
- 3) Field Coordinator fills out the Details of Injury/Illness, documenting the accident and condition of the employee.
- 4) Time loss claims – Field Coordinator completes the Time Lost Information for claims that will include lost work time.
- 5) Give the employee the WC-2 Physician's Report form and ask them to give this to the doctor.
- 6) Field Coordinator completes the Insurance section:
 - a) Carrier ID = leave blank
 - b) Name of WC Insurance Carrier = American International Group (AIG)
 - c) Name of Adjusting Company = Insurance Office of America (IOA)
 - d) Policy Number:
 - i) At Sea (MEL) = F02ML914-3433-06
 - ii) On dock or vessel at dock (USL&H) = F02MM914-3433-06
 - iii) Training or Debriefing = WC 295-56-99
 - e) Policy Period = 01/01/06 to 01/01/07
 - f) Adjuster Name and ID = When assigned
 - g) Carrier Case Number = when assigned
 - h) Medical Deductible = N/A
- 7) Field Coordinator signs and dates the form and mails copies to the above listed parties.

The last required item is to contact Beth Weiland at the Tampa office and relay the information required to file a First Report of Injury or Occupational Illness form. She will file this with the US DOL and needs the information to complete the form. The required information is on the attached form and can be e-mailed to Beth at:

Beth.Weiland@mragamericas.com

X. Coordinate with MRAG office

Once the accident scene is under control and appropriate care has been provided to the injured as well as the uninjured employees, the Field Coordinator should immediately notify the Anchorage office and the Assistant Program Manager. In the event of a minor injury, this information will be relayed with the normal weekly reports. However, after or during any major accident a Field Coordinator might need guidance in what to do next.

Specifically, Field Coordinators should understand whom to call in order to initiate a crisis communication plan. Once an emergency is reported to the Honolulu office. The Field Coordinator will call the appropriate authorities to request assistance. This is the start of the plan. Once the initial emergency response is coordinated and the accident site secured, Field Coordinator will call the Anchorage office at (888) 425-8772 and relay the information about the accident, the current situation, and make plans for the next phase of the response. The main consideration is that the critical information is relayed efficiently and error free. The person receiving the call should write down the all-key points so that facts are not changed or forgotten as the information is passed on.

A. Report outline of Accident/Injury

The following information should be relayed to the Anchorage office as soon as the situation allows:

- 1) Name of person doing the reporting.
- 2) Location of the person doing the reporting.
- 3) Nature of the incident, include location of the incident, what occurred, why it occurred.
- 4) How many employees are involved.
- 5) Using Subjective/Objective, assessment, and plan style notes, identify each employee's problem and treatment plan.
- 6) What has been done up to this point (i.e. EMS has been called, patient on the way to hospital, search and rescue in progress, etc.).
- 7) What will you do with the uninjured employees (i.e. continue sampling, help in search, etc.)?
- 8) Is there anything the office can do to assist?
- 9) Where/how can you be reached once you get off the phone? (Consider arranging a follow-up contact.)

B. Identify Priorities

Once the Field Coordinator has clearly transmitted the critical information. It is important to decide upon a list of priorities. The Field Coordinator and Assistant Program Manager should identify the things that need to be accomplished to fully resolve the situation. The Assistant Program Manager should record the list during the conversation. Once the list is complete, each item should be assigned a priority. Some items will not be able to be done until other things are accomplished. Each emergency will have tasks that may have differing priorities.

C. Identify Needs

Once you know what you need to do, you can assign responsibilities for their implementation. This is a critical phase, because it is important to assign the duty to the person or group who can best carry it out. Identify whom can best provide for the needs and divide the responsibilities as the situation calls for. Be careful not to assume more responsibility than you can handle and do not allow others to over burden themselves.

D. Determine Additional Actions

In a serious emergency, one phone call will not cover every aspect of the response. It is important to deal with the immediate problems and keep an eye to the future. Identify things to consider in the future, but avoid planning them until the immediate trouble is resolved. By identifying the future issues, you can factor them into your current decisions without fully planning a response. Some issues may resolve themselves or be resolved as part of a solution to another problem. Always set a time to reconvene before finishing any call during the crisis communication plan. Setting up a schedule of communication helps maintain a good exchange of information.

E. Coordinate Transfer of Witness Statements and Evidence

In an emergency involving a major injury or death, it is important to coordinate the retrieval of all the statements and evidence surrounding the accident. An investigation will be conducted to determine the cause of a serious accident, in order to prevent similar emergencies in the future. The Assistant Program Manager will ask for the names and contact numbers of any witnesses and the Field Coordinator will coordinate the retrieval

of all statements and gear. A draft final accident report will be submitted from the Honolulu office, which will include all Injury Forms, witness statements, and reports filed by responding agencies. The Assistant Program Manager and Program Manager will review all these documents, make final edits, and forward the report to the IATTC COTR.

XI. Contact Employee's Emergency Contact Numbers

A list of Emergency Contact Numbers will be kept at the MRAG Anchorage office and at the Honolulu office. The list will include the employee's name, relation of the contact person, and a valid phone number. The numbers will be verified for each new contract, to ensure the list is accurate and up to date.

A. Contact Employee's Emergency Contact

The Initial call will be made as soon as possible, even if few details are known about the patient's status. Informing family members of an accident before they hear it via the media can reduce stress and anxiety. Once the Field Coordinator contacts the Assistant Program Manager, the next call is to the IATTC COTR. Following the call the Assistant Program Manager will call the injured employees' Emergency Contact Numbers. The following information will be relayed:

- 1) Provide information regarding the situation: what happened, who was involved, and where did it happen.
- 2) Provide Information on the health status of the individual (if known), and information on where the person is (hospital) or can be reached (including phone numbers).
- 3) Offer Sympathy (which is not the same as admission of fault).
- 4) Let the person know what will happen next from the program stand point.
- 5) Let the person know what logistical support you can offer (travel arrangements, rides, help with housing, etc.).
- 6) Ask open-ended questions: "What can I do to help?" or "Is there something we can do to help?"
- 7) Provide Contact Information so that the person can reach you. Provide names and phone numbers for a primary and backup contact person.
- 8) Offer a plan for subsequent communication.
- 9) If possible, reassure the family that the program will coordinate public statements and media contacts with them in advance.

If you reach an answering machine, do not leave a message unless it is absolutely necessary. Keep calling back. If you do need to leave a message, do not mention any details. Just ask the person to return the call as soon as possible.

B. Post-Fatality Calls

In a post-fatality notification, MRAG will consider carefully who should present the news. Typically a person in an executive or high-level position is considered most appropriate. If a lower-level employee knows the deceased and his/her loved ones, it might be appropriate for him/her to make the initial contact instead.

In most cases the news will need to be delivered via phone, however, if an injured/deceased lives locally in might be appropriate to deliver the message face to face. If more than one contact is listed, they may be residing at different locations. Try to time calls to notify two relatives at similar times. The caller should think about the timing of the call and try to consider what the loved one(s) might be doing at the time.

Contacting the next-of-kin following a fatality should be done as soon as possible. Delays in making the call will only make it more difficult and can ultimately result in bad feelings and/or suspicions. Great care should be taken in how any information is presented. The caller should maintain a high level of sensitivity to the family members and their feelings. It is acceptable to offer condolences. In fact it is important to offer sympathy and support.

Statements made should be clear and factual. Facts conveyed must be accurate, and the caller should make sure to have a list of facts available during the call. Do not speculate, assume, or pass judgment. If facts are unknown, let the person know you will call back with details and set a time. The caller should be direct, avoid "beating around the bush", and use tact.

Prior to making the call, the caller might practice by role playing with a co-worker or colleagues and rehearsing what will be said. It is important to come across as sincere; rehearsing a statement can help the caller's presentation. During the conversation the caller should follow these points:

- Do not make promise you cannot keep. For example avoid committing to financial help or investigation unless they can be backed up.
- Once the news of a fatality is offered, find out if the person is alone. If this is the case, it is common to encourage the family member to contact a friend or loved one.
- Be prepared for strong emotional reactions, the person may become upset or angry.
- The person may be stunned; do not expect them to carry on a conversation. Offer to call back later if they need time or provide a number where you can be reached.
- Ask open-ended question to give the person an opportunity to talk or vent.

If you reach an answering machine, do not leave a message unless it is absolutely necessary. Keep calling back. If you do need to leave a message, do not mention any details. Just ask the person to return the call as soon as possible there has been an emergency.

XII. Contact Interested Parties

Once the Assistant Program Manager has been informed of a serious accident, the second phase of the Crisis Communications plan goes into effect. The first person the Assistant Program Manager will contact will be the IATTC COTR and the Program Manager. The Program Manager and IATTC COTR will assess the situation and determine a course of action. The first priority will be to contact the designated emergency contacts. A decision will be made whether or not to contact the IATTC spokesperson. The insurance company will be contacted in order to receive advice for supporting the injured employees. If the circumstances warrant the opinion of legal council for the protection of the employees, MRAG or IATTC, a call will be made to the appropriate representative. A plan will be made to distribute information to the rest of the program. The media will be notified when the IATTC COTR and MRAG Program Manager decide it is appropriate.

A. IATTC COTR

As the IATTC Contract Officers Technical Representative (COTR), John Kelly is the primary contact for the National Marine Fisheries Service. He can be reached at (808) ??? office or (808) ???-??? home (or cell). The Assistant Program Manager will contact the Program Manager and COTR as soon as the call from the Honolulu office is complete. The Assistant Program Manager will relay the information to the COTR and ensure that the situation is reported in a clear concise manner. The Assistant Program Manager will make sure the COTR understands the current state of affairs and allows for the immediate planning of the appropriate response. The Assistant Program Manager will assist the Program Manager and COTR to resolve the following issues:

- 1) Approve upon information to be given to injured employees' Emergency Contact.
- 2) Determine if the severity of the accident merits an investigation or the involvement of the IATTC Spokesperson.
- 3) Determine if the NOAA General Counsel should be contacted.
- 4) Confirm the plan for distributing information to the remainder of the program and a statement about the accident.
- 5) Determine if the media should be informed and finalize a press release.

One or more of these items can be tabled to a later date when more information is available. However, each point above should be addressed within a day or two of a serious accident.

B. IATTC Spokesperson

Following any serious accident or fatality, the program will decide whether or not to contact a representative from IATTC headquarters at some point. The following criteria should be used to help decide when a call IATTC Spokesperson should be contacted. The IATTC COTR will contact and liaison with the IATTC Spokesperson. The IATTC spokesperson would become the media contact for the accident. The IATTC COTR will be responsible for providing the appropriate contact numbers for IATTC Spokespersons.

- 1) Serious Incident – If an accident involves inpatient hospitalization or a fatality, a IATTC Spokesperson may be contacted.
- 2) Multiple Parties Involved – If the accident involves program personnel and fishers, tender vessel, or other agency employees, it may be important to involve a IATTC spokesperson.

- 3) If there is a potential for criminal charges to be filed a IATTC Spokesperson should be contacted.
- 4) If there is a potential dispute about liability a IATTC Spokesperson should be contacted.

C. Insurance Company

The MRAG Assistant Program Manager will contact our insurance representative to relay the details of the accident and to receive advice on how to proceed with a claim. The primary goal of any conversation with the insurance company is to provide the best coverage and benefits for injured employees.

Insurance Agent – Bruce Johnson (888) 269-6019
Insurance Office of America
4915 W. Cypress Street, Suite 100
Tampa, FL 33607

D. IATTC Legal Counsel

The IATTC COTR will determine if a serious accident necessitates the involvement of legal counsel. (If the situation involves compliance issues, negligence, or the potential of a criminal investigation, legal council should be retained. It will be determined if NOAA General Council and/or a private lawyer retained by MRAG Americas is appropriate for the situation. The MRAG Tampa office will be in charge of retaining legal council on MRAG's behalf.

E. Disperse Information to the Rest of the Program

Once a plan of action has been developed, the next step is to inform the remainder of the program of the circumstances and action plan. If an employee is seriously injured, the other employees will be curious what happened, the condition of their co-workers, and what effect the accident will have on their daily routine. It is important to be straightforward and succinct when providing information to employees. Any attempt to cover an incident up or provide partial information could cause more problems in the future, due to the small nature of the program.

It is important to provide some information about the condition of injured employees, but it is critical to maintain the patients right to confidentiality. As soon as possible the Assistant Program Manager should speak directly with the injured employees. At that time, the Assistant Program Manager should ask what level of detail could be released to the program. Until the patient clarifies their wishes, MRAG will not provide more than basic information, such as in the hospital, treated and released, treated and held for observation, etc.

F. Notify Media

It is essential to have a media response plan in place. The plan should be clear and concise, and all employees should be familiar with it. In the event of a serious accident, MRAG employees should not answer any media questions. All requests for information should be turned over to the Assistant Program Manager. The Assistant Program Manager will work with the Program Manager and IATTC COTR to ensure the following plan is followed when appropriate:

- 1) Designate a spokesperson – One of the first steps, depending on the seriousness of the accident, either the Assistant Program Manager or a IATTC spokesperson will be responsible for writing press releases and providing interviews. This person must be compassionate and a good communicator.
- 2) Create a working paper – The program will anticipate questions that reporters will/might ask and should include information on the observer program, its history, the safety training curriculum, safety policies, and the program's accident history. It will also include the relationship between IATTC, the observers, and MRAG Americas.
- 3) Confirm the existence of an open route of communication between the spokesperson and the media. Make sure your spokesperson has up-to-date, accurate phone and fax numbers, and e-mail addresses for all the local radio and television station's, as well as newspapers.
- 4) Minimize and/or counter rumors – Communication of rumors through the media can worsen an emergency situation. The best way to control misinformation is through regular, direct, and honest communication of what is known and what is not known. Establish a "baseline of information" that outlines what you know to be true about the situation. Stick to the facts and avoid speculation, judgments or blame. Use the baseline as the starting point for updates, clarifications, and revisions.

XIII. Creating an Accident Report File

MRAG will create an Accident Report File for any serious injury or death. The file will include the Accident Report form, any witness statements or evidence, a communication log of incoming and out going calls, copy of any media press releases, and all investigative reports. The file will be the property of MRAG Americas, however, IATTC COTR will have full access to the file and the information contained.

A. Assemble Original Accident Report

For major accidents or deaths, the Field Coordinator will assemble the basic Accident Report, which will include the IATTC Accident Report Form, a written summary of the response and resolution of the emergency, all witness statements or evidence collected and any reports filed by the responding agencies. This is to be done in a timely manner. Copies of the original should be made and sent electronically to Anchorage and Tampa offices. The original will be maintained at the Honolulu office.

- 1) IATTC Accident Report Form – completed by the Field Coordinator and injured employee (if possible).
- 2) Summary of Incident - completed by the Field Coordinator or vessel captain, summarizing the communications and responses received. Should include a summary of the initial outcome of the emergency.
- 3) All witness statements and evidence collected – should be attached to the Accident Report form.
- 4) Reports from responding agencies – any information, invoices, or reports presented by the Coast Guard, State Troopers, etc.

B. Include Additional Information

The Field Coordinator and Assistant Program Manager will maintain a log of all outgoing and incoming calls involving the emergency. Calls will be logged by date, time, whether it was incoming or outgoing, which called, and any important information. The logs will be maintained in a logbook and will be filled out during the call. The logs will become a permanent record; so all entries should be clear and concise. Record an entry for each call.

All requests for information should be documented and forwarded to the Assistant Program Manager. Field Coordinators and MRAG employees should not provide information to non-emergency personnel. Only relay information to the responding parties and the MRAG Americas office. The Assistant Program Manager will provide information to IATTC, the media, insurance company, and all other interested parties.

C. Copies of Press Releases

The Assistant Program Manager will attach copies of any press releases or articles written regarding the accident. The press material will include a summary of interactions with the media, which include agencies contacted, interviews provided, and summaries of any inaccuracies in the report articles.

D. Conduct an Investigation

If it is determined by MRAG Americas and IATTC IATTC that the situation merits an investigation, the following investigation policy will be used if IATTC IATTC does not have a policy in place. The following process is to occur as soon after the significant accident as possible. A significant accident will include any accident that involves fatalities or requires inpatient hospitalization. A significant accident may also include any incident that the IATTC COTR warrants an investigation.

“As soon as possible” means as soon as the safety, health, and well being of the employees and others have been addressed and stabilized. The following process must not interfere with the aid, rescue or any criminal investigation associated with the accident. The overall mission of an accident investigation is to help the program prevent future fatalities and permanently disabling injuries. The secondary goal of an accident investigation is to determine primary and secondary causes of the accident.

The following strategy includes a two-part process: The first includes identifying all applicable facts; the second includes analysis of the evidence. To ensure objectivity and eliminate any potential conflicts of interest, external team members will be used for both parties of this process.

Part One: Fact Finding

- 1) The Assistant Program Manager and the IATTC COTR will talk via the phone following any significant accident. At this time it will be determined if an investigation is warranted and a fact finding team assembled. The team will consist of one or two program members and at least two members from outside the program who have relevant expertise. The fact-finding team should not consist of more than four people.
- 2) Team members should be selected based on their field of experience, empathy, honesty, and ability to have an open mind, good communication skills, and ability to respect confidentiality. The primary intent is to select a team that will remain objective.
- 3) Once the team is selected the IATTC COTR will select a leader for the fact-finding project.
- 4) The fact-finding team will meet to identify tasks and a strategy; this will include identifying team member assignments.
- 5) Tasks will include, but not be limited to:
 - Identify and secure equipment used during the accident
 - Identify any and all factors associated with the accident
 - Interview Field Coordinators, observers, skiff operators, and witnesses.
- 6) Additional items that might be reviewed are:
 - Policies and procedures
 - Compliance issues
 - Full reconstruction of the incident
 - Photographic records
- 7) Assignments should avoid duplication of effort, however, some tasks may involve more than one team member.
- 8) Once a strategy has been crafted and tasks assigned, the team's plan will be reviewed and approved by the IATTC COTR. Once plan is approved, all assignments should be completed as soon as possible.
- 9) When the facts have been gathered, the team leader will be responsible for writing a fact-finding report. The report should not contain analysis. The IATTC COTR will forward the report to the Analysis Team.

Part Two: Accident Analysis

- 1) Once the fact-finding project is complete the IATTC COTR and the MRAG Assistant Program Manager will decide if the fact-finding team is the appropriate body to conduct the analysis. If it determined an external team is required, the IATTC COTR and MRAG Assistant Program Manager will identify the analysis team members.
- 2) The Analysis should be written as honestly and objectively as possible and should be supported by the evidence. It should include recommendation or avoiding similar accidents.
- 3) The analysis-team leader will present the findings to the IATTC COTR and MRAG Assistant Program Manager. This will be done prior to the release to family members, employees, or the media.

XIV. Long Term Support of the Injured Employee or Family

In the event of an employee death or serious injury, the program will provide support for the victim and their family. Prior to making any commitments, however, it is important to ensure that promises can be kept. MRAG will decide what is appropriate depending on the situation. Due to the wide range of potential accidents, it is difficult to make a rule that will fit each set of circumstances. The following items should be provided in all situations.

A. Offer Support and Sympathy

- Offer immediate sympathy and support to the injured employee's loved ones.
- Consider sending flowers.
- Have someone from the family visit the hospital.
- Checkup on the family regularly during the first week, and periodically thereafter.

B. Explain Workers' Compensation Procedures

Depending on the nature and severity of the injury, either the injured worker or the family should be told about MRAG's Workers' Compensation procedures. If possible, let them know when payments will be made. Most injured workers get little, if any, information about the benefits to which they are entitled until almost a month after the accident.

Tell the employee if there will be out-of-pocket medical expenses. If the medical provider agrees to bill the insurance carrier directly, advise the employee of that so they can avoid paying. Also, let the employee know if mileage will be paid for authorized medical appointments.

C. Maintain Contact with Injured Employees

Insurance representatives note that concern for the employee is very effective in reducing claims and helping injured employee's return to work. Therefore, talk to the employee about his or her injury status, well-being, and job status. On lost time cases, it is important that the employee not become disconnected from his/her job and coworkers. If there are problems, get in touch with the injured employee to minimize disputes and enhance positive relationships. Continue to maintain weekly communication. You can contact the injured employee by phone or in-person, or write a short note; it doesn't have to be a formal or extensive visit. Let the person know that his or her presence is missed; communicate coworkers concerns; tell them that you are all looking forward to the day they can return to work.

D. Consider Defraying Transportation or Funeral Costs

- Consider assisting with travel arrangements, including helping to defray costs.
- Have the Assistant Program Manager meet the loved ones at the airport.
- Consider funding the costs of lodging and car rental.
- Consider purchasing a phone card for the family

E. Send Letters of Condolence

Following the death, whether it is the death of an employee or other individual involved in the program, a letter of condolence should be sent to the next-of-kin. The following list of guidelines for writing such a letter is adapted from the "guidelines for Composing Letters and Notes of Condolence" of the Western Washington University Counseling Center.

- 1) Acknowledge the loss.
- 2) Express your sympathy.
- 3) Note special qualities of the deceased.
- 4) Recount a memory of the deceased.
- 5) Note special qualities of the bereaved.
- 6) Offer assistance.
- 7) Close with a thoughtful word or phrase.

F. Maintain Contact with Family Over Next Year

It is important to stay in contact with families of a deceased employee over the subsequent year. Family members often state that "finding meaning" in their loved one's death is a important component in healing. Consider ways in which you can help this request, offer a meaningful tribute such as a memorial, scholarship, or safety workshop. Remember the employee's birthday and one-year anniversary of the death.

XV. Long Term Support for Non-injured Employees

In the event that an employee is seriously injured or killed, it is likely that employees, peers, and program staff will be affected to some degree. The affect that a tragedy has on others will often increase significantly if the incident occurred in their presence. Do not underestimate the impact that an employee's death can have on an organization, and consider ways in which you can provide emotional support.

A. Meet with the Employees

Speak with the entire program as soon as possible. Let employees and program staff know what happened. Leadership should meet with staff at all levels to express shared grief, as well as to promote available counseling services and other resources. Provide ongoing information, as it is available.

B. Facilitate Communication Between Employees

Educate Field Coordinators about signs of emotional distress, and identify local treatment options. Provide educational resources to all employees, including common responses to death or critical incidents. Support among colleagues can help employees work through difficulties.

C. Provide Critical Incident Stress Management

Make sure you have the number for the Critical Incident Stress Management Foundation (CISM). The program is strongly encouraged to organize a critical stress debriefing within 72 hours of any serious incident or fatality. Any emergency service organization or individual connected with an emergency service may use the 24-hour Emergency Hotline to call for assistance or information; if they need to know the location and contact numbers for a CISM team during an emergency or if a situation distresses workers and they need guidance in working through the stress.

Emergency Hotline (410) 313-2473

All individuals not connected with emergency services and all public sector, private industry, corporate health organizations, insurance agencies, etc. should call the ICISF offices at 410-750-9600 during normal business hours, Monday through Friday 9:00 AM to 5:00 PM Eastern Time.

XVI. Continuation of the Program

The goal of the post-incident evaluation is to strengthen the existing emergency action plan and crisis communication plan and to find areas of weakness that can be remedied through better policies and training. Most crises stabilize within one week after the events. That is, the person who has been injured has been taken care of, family members have been contacted, interested parties have been notified, employees have been informed, and non-injured employees have gone back to work.

Nonetheless, following a serious incident, a number of challenging decisions often must be made in the long term. These might include addressing Workers' Compensation issues; the need to offer ongoing support to families; or the need to offer support to non-injured employees.

A. Take Steps to Resolve Safety Issues

- Ask for feedback from employees who handled the initial incident. Ask them to evaluate their performance and identify suggestions to improve the process.
- Interview all interested parties to find out how quickly they received news of the incident, who contacted them, and if any information was inaccurate.
- Review the call log from the media and record the nature of their calls and questions. Look at news clips and determine where the program could have received better coverage.
- Establish a hotline or suggestion box for the un-injured employees and staff to make comments.

After completing the assessment, adjust the EAP, program safety policies, and/or operational procedures as needed. Make sure that the updated policies are distributed and relayed to all employees and staff.

B. Arrange for Employees to Visit Injured Employees

It is often important to schedule breaks and leave for employees to visit injured employees. This may further slow down the production of the program. However, the value to the employee and injured employee can be dramatic. It is very important for people to relate to the injured person and resolve any emotional issue that the accident has caused.

C. Make Arrangements for Time Off

In some cases, it will be important to allow employee time off, away from the field site. This may be necessary for people that were involved in the accident but not physically injured. Often the mental injuries require individuals to get away from the setting of the accident.

D. Continue Communication of Concerns

It is important to continue the communication of safety and policy issues. An accident is often the result of poor communication or response to problems indicated by field personnel. If a problem or potential problem is identified, it is the Program Manager's responsibility to follow-up and make sure the policy is adjusted to avoid concerns in the future.