

INSARAG GUIDELINES | 2020

Volume III: Operational Field Guide



Contents

Abbre	eviations	4
1 I	Introduction	6
2 (Checklists	7
3 1	Management	8
3.1	Mobilisation	8
3.2	2 Operations	11
3.3	B Demobilisation	15
3.4	Post-Mission	16
4 5	Search	17
4.1	Mobilisation	17
4.2	2 Operations	18
4.3	B Demobilisation	20
4.4	Post-Mission	20
5 F	Rescue	21
5.1	Mobilisation	21
5.2	2 Operations	22
5.3	B Demobilisation	23
5.4	Post-Mission	23
6 1	Medical	24
6.1	Mobilisation	24
6.2	2 Operations	26
6.3	B Demobilisation	29
6.4	Post-Mission	30
7 L	Logistics	31
7.1	Mobilisation	31
7.2	2 Operations	33
7.3	B Demobilisation	35
7.4	Post-Mission	36
8 9	Safety and security	37
8.1	Mobilisation	37
8.2	2 Operations	39
8.3	B Demobilisation	40
8.4	Post-Mission	40

9	Hazardous Materials Operations	41
ç	9.1 Other Considerations	41
An	nnexes	43
,	Annex A: Table of Changes to INSARAG Guidelines 2015-20	43
,	Annex B: Annexes hosted on www.insarag.org	44
	Annex B1: Ethical Considerations for USAR Teams*	44
	Annex B2: Media Management Checklist*	44
	Annex B3: Country Information – Affected Area Information Template*	44
	Annex B4: USAR Team Fact Sheet*	44
	Annex B5: RDC Establishment Checklist*	44
	Annex B6: RDC Briefing Handout*	44
	Annex B7: Security Briefings*	44
	Annex B8: Airfield Assessment*	44
	Annex B9: OSOCC Planning Guide*	44
	Annex B10: USAR Coordination Cell Establishment*	44
	Annex B11: OSOCC/UCC-LEMA Initial Briefing*	44
	Annex B12: Standard Meeting Agenda*	44
	Annex B13: Assignment Briefing Package*	44
	Annex B14: Base of Operations Requirements*	44
	Annex B15: Base of Operations Layout*	44
	Annex B16: Management Tent Layout*	44
	Annex B17: Safety and Security Plan*	44
	Annex B18: Evacuation Plans*	44
	Annex B19: Wide Area and Sector Assessment*	44
	Annex B20: Assessment, Search and Rescue Level*	44
	Annex B21: Hazmat Evaluation Guide*	44
	Annex B22: Worksite Triage and Structural Evaluation*	44
	Annex B23: Worksite Triage Form*	44
	Annex B24: Worksite Report Form*	44
	Annex B25: Incident/Sector Situation Report*	44
	Annex B26: USAR Team Marking System and Signalling*	44
	Annex B27: Victim Extrication Form*	44
	Annex B28: Demobilisation Form*	44
	Annex B29: Mission Summary Form*	44
	Annex B30: USAR Team Post-Mission Report Form*	44

Note: Selected annexes, checklists and forms from the INSARAG Guidelines (2015) have been moved to the Guidance Notes section of www.insarag.org. For more information on the changes from the 2015 Guidelines, refer to the Table of Changes under Annex A. For the Annexes specific location on www.insarag.org, refer to page 49.

*Annex located in the Guidance Notes on www.insarag.org.

Abbreviations

AAR After Action Report AoO Area of Operation

ASR Assessment, Search and Rescue Level

BMS BoO Medical Station
BoO Base of Operation

Con. Construction
CP Command Post

Dy. Deputy

DVI Disaster Victim Identification
GIS Geographic Information System

GPS Global Position System
Hazmat Hazardous material

IATA International Air Transport Association
ICAO International Civil Aviation Organization

ICT Information and Communication Technology

IMT Incident Management Team

IOD Injury on Duty

INSARAG International Search and Rescue Advisory Group

LEMA Local Emergency Management Authority

LO Liaison Officer

MAP Medical Action Plan
MEDEVAC Medical Evacuation
MIL Medical Incident Log

OCHA United Nations Office for Coordination of Humanitarian Affairs

OSOCC On-Site Operations Coordination Centre

PPE Personal Protective Equipment
PTSD Post-Traumatic Stress Disorder

RC/HC Resident Coordinator/Humanitarian Coordinator

RCM Rapid Clearance Marking System
RDC Reception/Departure Centre

SAR Search and Rescue

SLS Security Level System

TL Team Leader

UCC USAR Coordination Cell

UNDAC United Nation Disaster Assessment and Coordination
UNDSS United Nation Department of Safety and Security

UNJLC United Nation Joint Logistics Centre

USAR Urban Search and Rescue

VHF Very High Frequency
VIP Very Important Person

VOSOCC Virtual On-Site Operations Coordination Centre

1 Introduction

The INSARAG Guidelines, Volume III: Field Operational Guide targets all USAR managers and team members and is designed to be a quick-reference guide that assists with field and tactical information for all missions, exercises and training sessions.

This Field Handbook follows the five components of USAR capability: Management, Search, Rescue, Medical and Logistics. It also includes a section on Safety and Security.

The annexes of Vol III include the INSARAG Marking System and check-sheets for the establishment of a Reception Departure Centre (RDC) and a USAR Coordination Cell. They can be found in the "Guidelines Annex" sub-section of the "Guidance Notes" in www.insarag.org.

Further information can be found in the UCC Manual, and the Virtual OSOCC online learning module.

The pocket-sized handbook is designed to allow individual USAR Teams to add other reference material relevant and specific to their team to assist in rescue operations.

Overview of Response Cycle and USAR Teams Functions:

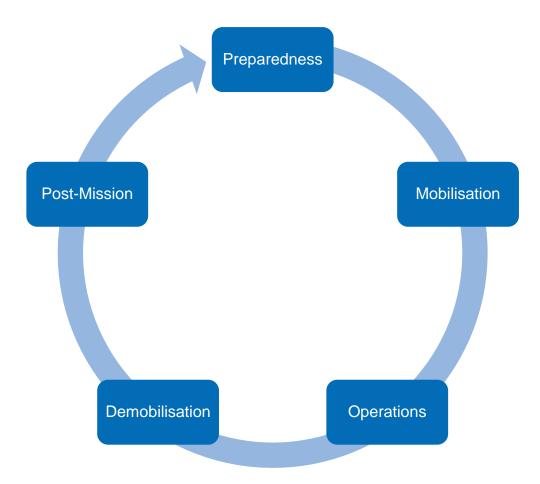


Figure 1: The International USAR Response Cycle.

2 Checklists

The following checklists provide guidance for teams on methodologies to effectively manage the five elements of a USAR deployment. The examples detailed in the volume are not exhaustive nor are they prescriptive. They serve to assist teams with the set up and efficient running of a large-scale event. They serve also to provide collective examples that will assist teams to better interoperate in multi-agency environments.

Teams should fully assess their specific configuration and individual team requirements when preparing for, a responding to, emergencies as a USAR Team.

3 Management

3.1 Mobilisation		
Action	Description	Reference
Do you have approval to go?	 Gather as much current information as possible on the affected country and the actual situation to aid in the decision-making process. Liaise with the team's governing agencies to determine whether the USAR Team will be deployed on the mission. 	Annex B3, B4
Do an internet information search of open source material, check the VOSOCC for further information. Upload team data.	If intending to mobilise and or deploy make an entry on the VOSOCC detailing the USAR Team's travel details including its special needs upon arrival in the affected country.	Annex B1, B4, B7
Is your team ready for deployment/availability?	 Conduct an initial planning session to determine the team's readiness to deploy. Ensure departure is possible within ten (10) hours after the request for assistance. 	Annex B1, B3, B4, B7
	Communicate internally within the team and through the governing agencies.	
	Provide passenger lists and equipment manifests, ensuring the cache is deployable to the affected country.	
Brief the team members on the current situation.	Provide a written and verbal briefing to all deploying personnel.	Annex B3
Is there a contact in affected country?	Determine the Country focal point for incoming assistance. This may be the embassy or National Emergency Management Agency. Check VOSOCC for details.	Annex B3
Brief team on plan of action and cultural awareness.	Provide a written and verbal briefing to all deploying personnel.	Annex B3
Check for any changes to assignment before departure.	Develop contingency plans to allow for changes to cache, personnel and equipment based on available information about the situation (i.e. staffing, specialist components, special hazards, transportation, etc.)	Annex B3, B4
Check on media arrangements for the mission.	Assume that the local agencies will manage all media and do not release any information without the express permission of the LEMA.	Annex B3
Ensure accountability systems for all personnel.	Seek a security briefing from the LEMA and/or the local law enforcement agencies.	

Update the national focal point of the teams' status.	Ensure a constant flow of information and intelligence to and from the LEMA.	
Arrange and fund transportation to the affected country.	Develop an independent Team transport plan.	
Develop a plan of action regarding safety and security issues, moving to and from the disaster sites, logistics and specialised teams if required (i.e. reconnaissance team, liaison, team, identify the BoO and work area, etc.)	An Incident Action Plan (IAP) is a detailed plan outlining actions needed to reach one or more objectives. The IMT will determine the IAP based on allocated tasks from the UCC.	
Ensure a plan of action on arrival.	Develop an initial IAP based on known conditions. Liaise with local authorities to receive updates ASAP.	
Establish the RDC and UCC.	If the team is the first into the affected country, they are to establish an RDC at the infill point and a UCC at a strategic position relative to the impact site.	
Prepare all documents for RDC and UCC.	Provide trained and qualified personnel to establish and sustain the coordination function within the RDC and UCC, if required.	Annex B5, B6, B9, B10, B11
Do you have appropriate forms for assessment?	Ensure a cache of paper and electronic versions of all forms are available.	
Prepare for customs immigration.	 Passport photos (x4). Identification cards. Record of immunisation. Microchips and vaccination certificates of search dogs, including scan reader. Personnel lists and equipment manifest. 	
Check on transport arrangements in-country.	Liaise with the UCC or LEMA.	
Check on load/unload availability for cache.	Liaise with the UCC or LEMA.	
Prepare for meeting with the UCC.	 Representatives of the IMT are to provide the UCC with their needs and their capabilities. Provide paper copies of all requests. 	Annex B11, B12

Meet with the UCC to discuss BoO site, suppliers, other teams, local suppliers, INSARAG, safety and security and reporting.	 Representatives of the IMT are to provide the UCC with their needs. Provide paper copies of all requests. 	Annex B15, B17, B18
Liaise with point of contact back in the home country.	Establish two-way communication links with home agencies and provide regular sitreps.	
Prepare media statements.	 Develop an overarching media plan that details the requirements for social media posting for both the team and team members. Ensure that all information is vetted by a LEMA representative prior to dissemination. 	Annex B2
Prepare plan of operations.		

3.2 Operations		
Action	Description	Reference
Ensure the team follows the affected country policies, which includes the USAR Team Leader working with the UCC and only within the requirements of the LEMA.	To avoid creating confusion it is vital that only activities sanctioned by the UCC or LEMA are undertaken by the teams.	Annex B3
Ensure the IMT enters the affected area country via RDC and receives a briefing and information on the current situation.	 Teams must register with the RDC on arrival in the affected country. The RDC will provide information on transport and BOO locations as well as other situational and cultural considerations 	Annex B5, B6, B8
Ensure the IMT attends a briefing at the UCC to receive information on the current situation and to receive their first taskings.	 Prior to commencement of any operations the Team IMT is to request a meeting with UCC staff to receive first taskings. Note no operations are to commence other than the establishment of a BOO without UCC approval or request. 	Annex B9, B10, B11
Gather and document information from the UCC.		Annex B11
The IMT needs to gain information from the UCC regarding:	 Current situation updates. Chain of command. Points of contact. Team assignments Safety and security considerations. Communications plan. Length of operational periods to accomplish assigned tasks. Guidance for patient handover from the USAR Team to local medical system as well as medical treatment and medical evacuation plans for an injured USAR Team member. Map of disaster sites. Safety and security issues regarding site evacuation. Logistics support available to the team. The reporting schedule including situation reports, operational briefings, etc. Communications methods available and in use. 	Annex B11

	USAR Team logistical support locally available.	
	 How reports and requests are transmitted to and from the UCC. 	
	Site location and information.	
	Information regarding the affected area prior to the event.	
	Availability of specialised equipment.	
	 General population demographics, languages and anticipated numbers of victims. 	
	Information on infrastructure assessments.	
	Identified objectives of the assignment.	
	Translators.	
	GPS Datum.	
Brief the UCC on the team capabilities using the USAR	Provide a copy of Team Fact sheet in either electronic or paper copy.	Annex B4
Team Fact Sheet.	Provide additional information as needed.	
Assign one position to be the	Actions to consider are:	Annex B20
point of contact between the team and the UCC. This may assist communications between	Develop an initial IAP to achieve the initial objectives of the LEMA.	
the team and the UCC.	Gather information to establish the extent of the issue.	
	Develop an IAP for sustained operations.	
Develop and implement an initial Incident Action Plan of action for	Consider appropriate actions including Assessment, Search and Rescue Level (ASR) Level.	
the operational period.	Establish internal Team briefing schedules.	
	Provide regular briefings to the UCC on progress.	
	Order additional resources as required.	
	Identification of outcomes.	
	Evaluation and review of operations.	
	Update of the IAP.	
Identify logistical requirements	• Fuel.	
of the team and forward these to the UCC daily. The UCC will	Timber.	
coordinate with the LEMA officials for the supply of the required local support including:	Compressed gases.	
	 Heavy lifting and other specialised equipment and/or support personnel (i.e. local emergency responders, local civilian volunteers, NGOs, military personnel, etc.) 	
	Debris removal plan.	

01 1 11 11	-	
Check coordination needs with other teams.	To be done at regular UCC meetings.	
Brief all teams on the operation, including safety.	IMT to conduct regular whole of team briefings.	Annex B12, B17, B24, B25
Report information on the VOSOCC and update it.	It will usually be the role of the LEMA to update the VOSOCC. Do not publish information on the VOSOCC without prior approval from the LEMA.	Annex B25
Build a rotating system (shift system).	 Medium and Heavy Teams are to ensure 24-hour operations. Light teams need to work with the UCC to ensure continued operations commensurate with their capacity. 	
Prepare a plan for media and execute.	 Request the UCC to provide information on the requirements of the LEMA for interacting with the media. Brief team personnel on the procedures for interacting with the media. 	Annex B2
Are there effective communications with team members?		
Do you have plans for medevac, transport, site evacuation, media, communications and hazmat?		Annex B17, B18
Prepare meeting requirements (including internal meetings) with the UCC/LEMA and coordinate own country briefings as requested.		Annex B12, B25
Assess the potential BoO sites identified by the UCC.	The UCC may task a USAR Team to identify potential BoO locations for arriving international USAR Teams.	Annex B14, B15, B16
Maintain a detailed operations log listing the chronological order of events and activities during the mission for each worksite; a site-specific report should be completed.	 The log can be maintained electronically or via manual entry and should include: Number of rescues and body recoveries. Other activities undertaken. Details of potential worksites. Safety and security considerations. A sketch of the worksite 	Annex B25

	Operational shortfalls regarding equipment, supplies, personnel, etc.	
The USAR Team Leader is required to attend scheduled UCC briefings to ensure the team is kept informed of current issues and latest developments.		Annex B11
Have your necessary risk assessment forms?		Annex B21, B22, B23
Perform risk assessment with specialist (engineers, hazmat and security personnel).		Annex B21, B22

3.3 Demobilisation		
Action	Description	Reference
Liaise with LEMA prior to consideration of demobilisation.		Annex B11
Ensure effective briefing to the LEMA once demobilisation is approved.		
Manage the VOSOCC and post regular updates.		Annex B24
Notify UCC that all assignments are complete.		Annex B11, B1
Facilitate in-kind donations.	As determined by the LEMA/UCC.	
Coordinate transportation for team.		
Provide mission summary.		Annex B29
Ensure timely availability for further taskings.		
Notify home representatives of the pending return.		
Develop a return to readiness plan.		
Disestablishment of BoO.		
Ensure all members are accounted for.		
Ensure effective communication with all parties.		
Prepare a press release.	As determined by the LEMA/UCC.	Annex B1
Ensure exit from the Area of Operation (AAO) is conducted via the RDC at the designated exit point.	The RDC will be established and operating to ensure that all outgoing teams are correctly processed. Teams are to ensure that they liaise with the RDC prior to final demobilisation and transport from the AAO.	

Develop pre-determined procedures in the event of situation that requires immediate evacuation of the BOO, or Worksite to a safe location.	In the event of a sudden change in conditions it may be necessary to evacuate the BOO or worksite. It is vital that all personnel are aware of the signal indicating the need for an evacuation and the immediate actions to take.	Annex B18
Unplanned demobilisation of the team.	Circumstances at the AAO may change such that continued operations are no possible. If a team needs to withdraw from the AAO and time permits, follow the procedures for a standard demobilisation. If circumstances require a rapid removal of the team, notify the UCC and move all personnel to a safe environment as quickly and as safely as possible.	Annex B18

3.4 Post-Mission		
Action	Description	Reference
Manage the VOSOCC and post approved updates.		
Close the mission on the VOSOCC when completed.		
Perform an analysis of USAR Team operations, training, gaps, and personnel issues.	Develop a structured debriefing process.	Annex B30
Ensure all groups (Rescue, Search, Logistics and Medical) complete report on mission.		Annex B30
Ensure injury follow-ups as well as short and long-term stress management issues are addressed.	Ensure a post mission mental wellness check is offered to all personnel.	
Post-mission vet check recommended.		
Ensure post-mission report is completed. The post mission report is to include a lesson learnt section.	The INSARAG Secretariat requests that a copy of the USAR Team Post-Mission Report is received in a timely manner; preferably within 45 days of the teams return.	Annex B29, B30

4 Search

4.1 Mobilisation		
Action	Description	Reference
	Technical Search General	
Ensure equipment is available for technical search, e.g. Search cameras.	Establish search equipment as permanent element of the USAR cache.	
Coordinate with rescue, logistics, and medical elements.	Ensure that there is no duplication of equipment in other caches.	
Report back to management.	Provide a documented record of all available equipment.	
	Canine Search	
Ensure availability of canine microchips, vaccinations documents travel documents and other health reports.	Develop a portfolio of information pertaining to the K9s that can be provided on request.	
Ensure appropriate caging and/or containment for canines is available.	Use fit for purpose cages only. Makeshift enclosures may cause injury to the animals.	
Check on cultural issues regarding canines.	Seek a briefing from the TL prior to departure.	Annex B3
Check vaccination cards are available with the canine teams at all times while on deployment.		
Consider transport option for canines, e.g. cages.	Use fit for purpose cages only. Makeshift enclosures may cause injury to the animals.	
Consider relief stations for canine.	Canines need regular breaks to work effectively in the field.	
Check canine health risk of affected country, e.g. extreme weather.	Constantly monitor weather conditions and do not use the canines in extreme heat or cold.	
Check on emergency evacuation plan for canines.	Seek a briefing from the TL prior to departure.	Annex B17, B18

4.2 Operations		
Action	Description	Reference
	Technical Search General	
Develop a safety and security plan and brief the team.	A thorough risk assessment needs to be undertaken prior to attempting a search.	
Determine search strategy and reconnaissance.	Determine whether the search will be conducted using personnel or listening equipment or other methods such as thermal imaging cameras or drones. The search methodology may impact other activities and needs to be clearly communicated to the IMT.	
Liaise with local authorities regarding additional victim information from locals and first responders.	Those on the scene and familiar with the area will be the best source of information. Consider conducting quick interviews before evacuating people from the scene.	
Liaise with local authorities regarding advice on building structure.	Local councils and city officials will often have detailed plans of buildings.	
Can verbal or visual contact be made with victims?	A surface line and hail search should be the first step in establishing the location of trapped victims.	
Liaise with local authorities to determine tactics.	Many agencies will have detailed plans to respond to major emergencies. USAR Teams need to ensure their activities are coordinated with local arrangements.	
Ensure communications with all other team functions.	All activities of the team need to be coordinated by the IMT. Teams should follow their instructions and not deviate without approval from the IMT.	
Are personnel familiar with the evacuation signalling system?	Aftershocks and other conditions may cause further movement and collapse of structures. Teams need to be ready to evacuate immediately the need arises.	
Ensure effective accountability system for all personnel.	No activity should be commenced without an accountability system in place prior to the activity.	
Ensure appropriate Personal Protective Equipment (PPE).	Your PPE is the last line of defence against injury. It should never be comprised.	
Ensure re-commissioning of all equipment and return to logistics.	Ensure that equipment is ready for the next assignment as soon as practical. Liaise with the logistics function to replace consumable items as soon as they are used.	

Canine Search		
Ensure rest time for canine and rotation of personnel (shift system).	Canines require regular rest breaks to work effectively. Over working the canine will reduce their effectiveness.	
Apply canine, acoustic and optical senses when necessary in an integrated way.	The removal of material that may mask scents or block vision may assist the canine's effectiveness.	
Are canine/personnel available for other tasking's or priorities?	Maintain effective communication to facilitate the optimal use of the canine team.	
Search leader should consider:	The physical readiness of searchers through proper nutrition, water intake, rest and stress control techniques.	
	Site assessment to include safety, structural, hazmat risks, number of victims and any other information relevant to the search.	
	Ensure proper equipment needs are met and equipment is operational prior to each work period.	
	Ensure use of all safety practices and procedures.	
	Briefs, debriefs and observes the canine team during search.	
	 Reports relevant information to appropriate USAR Team manager and coordinates any follow-up or reassignment activities. 	
	Brief shift replacement fully on all ongoing operations when relieved at work cycle rotations.	
	 Report any signs/symptoms of incident stress, injury, fatigue, or illness in searchers to immediate supervisor. 	
	Participate in USAR Team daily briefings and meetings as requested.	

4.3 Demobilisation		
Action	Description	Reference
	Canine Search	
Ensure that appropriate caging and/or containment for canines is available.	Use fit for purpose cages only. Makeshift enclosures may cause injury to the animals, especially during transport.	
Ensure the readiness of the canines (health, fitness, hygiene, diet, etc.) for travel, including all specialised gear and equipment.	Conduct a full examination of the canine and provide for food and water for the journey. If possible, transport all the canines together.	
Ensure that the canines have an opportunity to relieve themselves immediately prior to departure.	Failure to allow this may result in injury the animal.	

4.4 Post-Mission		
Action	Description	Reference
The Search Leader prepares and delivers a report on the mission to their USAR Team.	Each element of the task force is required to provide a daily report to the IMT. This report assists with the daily sitrep provided to the OSOCC and LEMA.	Annex B24
A post-mission veterinary check is recommended.	Canines should be thoroughly checked prior to resuming normal activities.	
Attend USAR Post-Mission debriefing.		Annex B29
Perform an analysis of USAR Team operations (performance and tactics, training gaps, personnel problems, new needs for the members).	A search specific debrief is advised to seek best practice for the activities undertaken. This will inform training activities going forward.	
Analysis of the team behaviours and needs in the Preparedness phase.		

5 Rescue

5.1 Mobilisation		
Action	Description	Reference
Check on readiness of equipment.	All equipment needs to be checked regularly to ensure operational readiness. Comprehensive records should be kept of these checks.	
Is cache appropriate for affected country?	Seek a pre-deployment briefing from the IMT to ensure all equipment is appropriate for the conditions e.g. extreme cold conditions.	Annex B3
Check health risk of affected country, e.g. extreme weather.	A comprehensive risk assessment should be undertaken by the IMT prior to departure.	Annex B3
Check on emergency evacuation plan.	An evacuation plan needs to be included within the risk assessment.	Annex B18
Check on rescue tactics with structural engineers.	 Advice from qualified engineers should be sought prior to operations in, or in close vicinity of, damaged buildings. 	
Liaise with hazmat and security over tactics/issues.	Check for hazardous conditions including leaking pipes, sewers etc. Ensure the area is secured by local authorities prior to starting operations.	Annex B21
Coordinate with rescue, logistics, and medical elements.	Local rescue units may be in your location. Always liaise to ensure your proposed activities are consistent with the overall strategy.	
Report back to management.	Provide regular sitreps to the IMT.	

5.2 Operations		
Action	Description	Reference
Follow the affected country's policies and procedures regarding incident operations.	Ensure that all operations are consistent with the strategic intent of the incident controller in your area of operation.	Annex B3
Develop a safety and security plan and brief the team.	Conduct a risk assessment and ensure all team members are aware of the risks and preventative actions	Annex B17
Apply INSARAG Marking System.	Only use the INSARAG system so that following teams are familiar with the markings.	Annex B26
Check assignment and define strategy and determine what equipment is required on existing information.		
Liaise with Logistics for transport/check on fuel.	Ensure that you have large enough vehicles to carry the required equipment. Don't have personnel carry heavy equipment long distances.	
Check availability of extra rescue equipment.	Local suppliers may be able to support components for rescue equipment.	
Liaise with medical for possible treatment and determine handover point.	Set up a triage point in consultation with medical personnel.	
Check on-site safety during tunnelling, shoring, stabilising medical treatment, victim extrication, O2 dust.	Refer to the Risk Assessment prior to all activities.	
Ensure evacuation point.	It is good practice to clearly mark the evacuation point. Signage or flags may assist.	Annex B18
Are personnel familiar with the evacuation signalling system?	Three longs horn blasts should signal an evacuation.	Annex B26
Ensure appropriate handover to other shift or other emergency services.	Provide a written and verbal handover to the oncoming team.	Annex B25
Manage reporting system both internal and external.	Provide a written report of all activities to the IMT. Include such information as number of victims found or released. Status, i.e. live or deceased. Any injuries to personnel and any problems encountered.	

Ensure re-commissioning of all equipment and return to logistics.	Work with the logistics team to have the equipment made operationally ready for the next assignment as soon as practicable.	
Ensure effective accountability system for all personnel.	Accountability systems will form part of the risk assessment process.	
Consider decontamination.	All personnel should wash their hands prior to leaving the work site and should shower prior to entering the BoO. Clear clean and dirty areas should be established.	
Ensure debrief on return to BoO.	Crews should be involved in a hot debrief prior to being dismissed.	Annex B24

5.3 Demobilisation		
Action	Description	Reference
Brief the UCC on structural stability concerns and make recommendations regarding further operations.	Provide a comprehensive report on all operations and the condition of the premises on extraction.	Annex B11

5.4 Post-Mission		
Action	Description	Reference
The Rescue group prepares and delivers a report on the mission to their USAR Team.	A rescue specific report should be completed as soon as practical. This report should detail all operations and make recommendations for improvements.	Annex B24, B30
Full team debrief should occur.	All personnel should be involved in the debrief process and be encouraged to provide feedback.	

6 Medical

6.1 Mobilisation		
Action	Description	Reference
Ensure deploying USAR medical personnel have:	 Passport. Personal medication. Inoculation record. Personal issue equipment. Documentation to support right to clinical practice. Issued name and number contact list. 	
Have pre-deployment checks been completed?	Documented checks should be carried out on all personnel.	
Evaluate the medical check report and liaise with management if required.	Report any personnel to the TL who do not meet the medical requirements for deployment.	
Check on medical tasks and procedures.	Liaise with local health authorities.	
Conduct remote information gathering to include:	 Any prevailing endemic medical situations (e.g. prevalence of HIV/AIDS, rabies, etc.) Determine need for country-specific prophylaxis (e.g. malaria). Unusual or site-specific medical conditions and appropriate precautions (e.g. vectors). Altitude and or extreme weather considerations. Local health and medical infrastructure (include veterinary facilities). Medical Evacuation Plan (as known at the time). 	Annex B3, B17, B18
Review USAR Team policy for dealing with Injury on Duty (IOD) or death of a USAR Team member during deployment.	 Injuries should be treated by the Team medical staff in the first instance with assistance from local medical resources as required. An injury resulting in a death of a USAR Team member will need to be managed collaboratively with local authorities as determined. 	
Supervise the accountability and security of the controlled drugs.	All drugs need to be secured within the BoO area. Only authorised medical personnel should access any drugs during the deployment.	

initiate Medical Incident Log (MIL). All medical interventions should be separately recorded by USAR Medical staff. This information is to remain confidential between patient and medical staff is so desired by the patient. Coordinate with the designated personnel responsible for hazmat and safety on known incident hazards. Prepare questions for the UCC including: - Local medical command structure. - Availability of local medical resources (including veterinary) to support USAR medical activities. - Availability of international and medical resources (e.g. hospitals, field hospitals). - Casualty handover procedure. - Casualty transport capabilities. - Patalty management procedure including Disaster Victim Identification (DVI) procedures as determined by the LEMA. Establish a plan of action for medical. - This plan should be incorporated into the overall operations plan and updated continuously throughout the mission. Including: - Review medical mission priorities as required. - Collaboration with local and international medical and health infrastructure. - Resource limitations. - Re-supply constraints. - Deceased victim management, including DVI requirements. Check on all medical documents. Is there a medical contact in affected country and emergency contact in home country? Ensure welfare of canine after transportation. - Conduct a thorough examination of the canines as soon as practical after BoO establishment. - Provide regular sitreps to the IMT.			
personnel responsible for hazmat and safety on known incident hazards. Prepare questions for the UCC including: - Local medical command structure. - Availability of local medical resources (including verienary) to support USAR medical activities. - Availability of international and medical resources (e.g. hospitals), field hospitals). - Casualty handover procedure. - Casualty transport capabilities. - Fatality management procedure including Disaster Victim Identification (DVI) procedures as determined by the LEMA. Establish a plan of action for medical. - This plan should be incorporated into the overall operations plan and updated continuously throughout the mission. Including: - Review medical mission priorities as required. - Collaboration with local and international medical and health infrastructure. - Resource limitations. - Re-supply constraints. - Deceased victim management, including DVI requirements. Check on all medical documents. - Establish contact with local medical focal point in affected country and emergency contact in home country? Ensure welfare of canine after transportation. - Conduct a thorough examination of the canines as soon as practical after BoO establishment.	_	recorded by USAR Medical staff. This information is to remain confidential between patient and medical	
Availability of local medical resources (including veterinary) to support USAR medical activities. Availability of international and medical resources (e.g. hospitals, field hospitals). Casualty handover procedure. Casualty transport capabilities. Fatality management procedure including Disaster Victim Identification (DVI) procedures as determined by the LEMA. Establish a plan of action for medical. * This plan should be incorporated into the overall operations plan and updated continuously throughout the mission. Including: Review medical mission priorities as required. Collaboration with local and international medical and health infrastructure. Resource limitations. Re-supply constraints. Deceased victim management, including DVI requirements. Check on all medical documents. Is there a medical contact in affected country and emergency contact in home country? Ensure welfare of canine after transportation. **Conduct a thorough examination of the canines as soon as practical after BoO establishment.	personnel responsible for hazmat and safety on known		
medical. operations plan and updated continuously throughout the mission. Including: Review medical mission priorities as required. Collaboration with local and international medical and health infrastructure. Resource limitations. Re-supply constraints. Deceased victim management, including DVI requirements. Check on all medical documents. Is there a medical contact in affected country and emergency contact in home country? Ensure welfare of canine after transportation. Conduct a thorough examination of the canines as soon as practical after BoO establishment.		 Availability of local medical resources (including veterinary) to support USAR medical activities. Availability of international and medical resources (e.g. hospitals, field hospitals). Casualty handover procedure. Casualty transport capabilities. Fatality management procedure including Disaster Victim Identification (DVI) procedures as determined 	
ls there a medical contact in affected country and emergency contact in home country? Ensure welfare of canine after transportation. Establish contact with local medical focal point in affected country. • Conduct a thorough examination of the canines as soon as practical after BoO establishment.		 operations plan and updated continuously throughout the mission. Including: Review medical mission priorities as required. Collaboration with local and international medical and health infrastructure. Resource limitations. Re-supply constraints. Deceased victim management, including DVI 	
affected country and emergency contact in home country? Ensure welfare of canine after transportation. Conduct a thorough examination of the canines as soon as practical after BoO establishment.			
transportation. soon as practical after BoO establishment.	affected country and emergency		
Report back to management. • Provide regular sitreps to the IMT.			
	Report back to management.	Provide regular sitreps to the IMT.	

6.2 Operations		
Action	Description	Reference
Prepare medical facilities at BoO.	Undertake daily maintenance of the BoO Medical Station (BMS) to ensure it is clean, tidy and functional.	Annex B14, B15
	Ensure accountability and security of the controlled drugs with the USAR Medical Manager and Liaison Officer (LO).	
	Record and update daily the medical consumables used.	
	Monitor medications that require refrigeration as required.	
	Record any equipment faults, damages or losses.	
	Advise USAR Medical Manager of any equipment concerns or low-stock items.	
	In conjunction with the MO develop a re-supply plan as required.	
Ensure medical capability on worksites.	Provide medical management and oversight of the assigned worksite.	
	Monitor health and welfare of the rescue group during operations.	
	Set-up and operate a medical post at the worksite as required.	
	Establish a medical evacuation plan for the worksite.	
	Monitor victims for potential negative impacts from rescue operations (e.g. dust, noise, falling debris) and coordinate mitigation measures with rescue personnel as required.	
	Ensure Personal Protective Equipment (PPE) (e.g. eye, hearing and respiratory protection) is applied to patients during the disentanglement and extrication process.	
	Ensure accountability and security of the drugs on- site.	
	Safeguard the medical equipment cache and restrict access to authorised personnel only.	
Ensure contact with other medical services is available in	Liaise with local health agencies within the affected area.	
affected area, plus own country.	Maintain contacts with home country	
Support rescue operations.	Provide medical services to rescue operations as required.	

Check medical evacuation plan for possible emergency situation.	Conduct a risk assessment and establish procedures for all considered situations.	
Ensure hygiene standards are maintained both at base and worksites.	Work with logistics staff to set up base hygiene procedures.	
Maintain health checks and monitor personnel and canines continually.	Paramedics should be assigned to the rescue teams and constantly monitoring the health of the team members.	
Check on casualty handover procedures.	 Medical staff needs to be aware of local procedures for the acceptance of patients into the local system. A system of repatriation to the home country for further treatment should also be developed. 	Annex B27
Ensure appropriate medical transport procedures.	As above.	
Ensure appropriate management of medical documentation.	All documentation pertaining to patient treatments should remain confidential and be held in a secure location.	
Participate in daily USAR Team briefings and conduct the daily medical briefing.	A representative from the medical teams should be part of the IMT and be involved in all briefings.	
Provide ongoing clinical care as required, including psychological assessment and monitoring		
Supervise the monitoring of USAR Team members for:	Stress-related health problems and implement stress management techniques as appropriate (e.g. fatigue).	
	General state of health – monitor trends (e.g. diarrhoea).	
	Hydration status.	
	Nutrition status.	
Coordinate with the personnel responsible for hazmat and safety issues regarding.	The potential for hazardous materials contamination or other exposures (and documentation of potential exposures per home team protocol).	Annex B21
	Decontamination information for various contaminates or exposures.	
	Available treatment options for hazardous materials exposures.	

Monitor any USAR Team members hospitalised at local healthcare facilities as required.	Team members admitted to local health facilities will require daily monitoring until release.	
Ensure the implementation of the isolation procedure for any USAR Team members suffering a potentially contagious condition that may jeopardise other members of the team.	Ensure a location at the BoO site is isolated to accommodate any potentially contagious team members.	
Facilitate the adherence to safe BoO health and hygiene practices.	Food storage and preparation.Water.Sanitation.	Annex B14

6.3 Demobilisation		
Action	Description	Reference
Ensure medical manager initiates demobilisation plan.	 Consider the management of restricted drugs. Consider donation of medical supplies/drugs that are close to use by dates. 	Annex B1
Medical cache donations.	 Identify medical equipment and appropriate consumables to be donated, if any. Identify an appropriate recipient for donated items (e.g. local health authorities, other international organisations). Communicate with LO and USAR Team Leader regarding donated medical items as it pertains to amendments to the medical cache inventory. 	
Coordinate demobilisation with the local relevant health authorities (e.g. through UCC or LEMA).	Ensure demobilisation does not negatively impact on the health of any injured team member.	Annex B1, B29
Coordinate the repatriation of any USAR Team members hospitalised whilst on deployment.	If the team member cannot be repatriated with the rest of the team, other team members should be assigned to accompany them until they can be repatriated.	
Prior to departure from the affected country, consider conducting a health and welfare check.	Consider the use of trained psychologists or doctors to conduct the checks.	
Perform basic decontamination, packing and loading of the medical cache.		
Pack items requiring refrigeration appropriately for transport.		
Ensure accountability and security of the controlled drugs with the LO.	Provide confirmation in writing to the TL that all drugs are properly secured for transport.	
Preparation of initial Medical After Action Report (AAR).		

6.4 Post-Mission		
Action	Description	Reference
Ensure immediate medical follow-up of all staff on return to home country.	Consider both physical and psychological checks be conducted.	Annex B30
Complete and submit all medical paperwork.		
Attend USAR Post-Mission debriefing.		Annex B29
Report on the operational readiness of the USAR medical component of the team and its equipment cache once restored.		
Complete medical contribution to the AAR as required by USAR Team policy.	The medical Team Leader should conduct a debrief and consolidate all information for the AAR.	

7 Logistics

7.1 Mobilisation		
Action	Description	Reference
Ensure having sufficient logistics support, equipment and staff to set up and maintain a BoO for the duration of the mission, including:	 Sufficient food and water. Equipment storage and maintenance facilities. Sanitation and hygiene facilities for the team for the duration of the mission. Sufficient and appropriate medical supplies. Search dog rest and exercise areas. Appropriate shelter for the prevailing weather. Communications equipment. Power generation and lighting. Transportation. 	Annex B14, B15, B16
Check all transport documents, hazmat, and equipment.	Personnel lists and equipment manifest.	
Check on air transport.		
Do you have self-sufficiency (food and water) for the duration of the mission?		
Do you have ability to purchase and/or acquire supplies (fuel)?		
Check on availability of transportation in affected country.		
Check on capabilities of designated arrival at country airport.	 Make contact with airport security. Liaise with airport authorises regarding unloading. Prepare unloading/loading plan. Monitor cache during unloading/loading. 	Annex B8
Check on communications in team and affected country and prepare a communications plan.		
Coordinate with other elements of team to ensure all cache requirements.		

Do you have food/drink for transport?		
Liaise with all other elements of team regarding priorities of cache.		
Do you have a transport plan?	 Gather information on transport routes/mobility. Establish a route plan. Check on vehicles and drivers and ensure security briefing, advise on routes. Develop and route a contingency plan. 	
Prepare questions for the UCC regarding BoO, water, fuel and sanitation.		Annex B13
Prepare logistics plan to service multiple sites.		
Consider BoO reconnaissance and establish GPS coordinates.		Annex B14, B15, B16
Establish BoO plan in affected area.		Annex B14, B15, B16
Ensure you have an overarching BoO plan and staffing plan.		Annex B14, B15, B16
Ensures updates on security level and situation on arrival.	Develop a Safety and Security Plan.	Annex B17, B18
Ensure suitable personnel accountability systems are functional for all personnel.		
Ensure briefing of all personnel.		Annex B1, B3, B7, B26
Compile transport documentation. Identify aspects that may require additional or supplementary logistical support, e.g. climatic conditions.		
Report back to management.		

7.2 Operations		
Action	Description	Reference
Consider the following when selecting a BoO site:	 Locations provided by the LEMA/OSOCC/UCC. Suitably sized areas (minimum size 50 x 40 m). Locations should be as safe and secure as the environment allows. Close proximity to the UCC and worksites. Allow easy access to transportation. Environmental considerations (hard-surfaced, good drainage, etc.) Close proximity to logistics and support resources. Should be situated in an area that does not influence communications (satellite). A team of trained USAR Logistics Specialists should 	Annex B14, B15, B16, B17, B18
Select and set up the site based on mission priorities and available resources to include:	 be responsible for BoO maintenance. Equipment stock and maintenance area. Medical treatment area. Management area. Communications centre. Food preparation and feeding area. Personnel lodging area. Sanitation and hygiene area. Vehicle parking. Transportation access areas. Search dog areas. Briefing area. Generators and lighting should be strategically placed to ensure a safe and secure environment. 	Annex B14, B15, B16
Coordinate with external/internal parties for supplies and logistics.		
Prepare and ensure effective transport plan.		
Ensure adequate food and suppliers for personnel and canines, within roster system.		

Support the management in security and safety measures in BoO.		Annex B17
Ensure adequate waste management procedures are in place. Liaise with LEMA or UCC on how to link with local waste management arrangements for the area. Consider methods to store and then remove waste as needed.	 Consider the following: Sewage and wastewater. Rubbish, including food waste. Medical waste, including contaminated medical waste. Contaminated wastewater from personal decontamination procedures. Hydrocarbon waste including fuels and oils. 	
Prepare evacuation plan and demobilisation plan.		Annex B28

7.3 Demobilisation		
Action	Description	Reference
Activate the demobilisation plan.		Annex B28
The BoO site should be restored to its original state as far as is possible.		
Coordinate the demobilisation with LEMA/OSOCC/UCC.		Annex B28
Provide resources for logistical requirements during demobilisation (preparing of manifests, packing and loading, etc.)		
Ensure relevant communication links are maintained during the demobilisation phase.		
Ensure correct documentation for logistics.		
Equipment is to be recommissioned, checked and packed for return to country, with consideration to the following:	Quarantine issues that may arise during demobilisation. Possibility of re-deployment while enroute home. Gifting of equipment and/or resources. The BoO site should be restored to its original state if possible.	
Consider donation/gifting to affected country.		

7.4 Post-Mission		
Action	Description	Reference
Ensure all cache items are ready for immediate deployment.		
Attend USAR Post-Mission debriefing.		Annex B29
Equipment should be cleaned, checked and re-stowed ready for re-use.		
Share lessons learned with management in written format.		

8 Safety and Security

8.1 Mobilisation		
Action	Description	Reference
Ensure all personnel are mission ready to deploy to the event. Considerations for mission ready status are:	Have appropriate documentation (i.e. passport, visa, Certificate of Vaccination, emergency contacts for next-of-kin).	UN BSAFE course.
·	Have appropriate PPE for the incident environment.	
	Have appropriate clothing for the climate.	
	Have undertaken appropriate security training.	
Equipment and supplies.	Safety practices are incorporated into the packaging, labelling, storing, and movement of personnel and equipment.	
	Operator manuals should accompany specialised equipment.	
	Team members must be trained in the use of their equipment, PPE, hazard identification and mitigation procedures.	
	Sufficient quantities of food appropriate for entry into the affected country are available and will not adversely affect personal health and performance.	
	Adequate water is available for the initial phase and that there is sufficient water purification equipment to support the team's needs.	
	Sufficient sanitation and hygiene provisions are available for deployment.	
Security.	Level 1 — Minimal.	Annex B17
	• Level 2 — Low.	
	Level 3 — Moderate.	
	Level 4 — Substantial.	
	• Level 5 — High.	
	Level 6 — Extreme.	
Assign the security and safety function to a team member.		
Identify the general and disaster-specific safety issues	Identify the environmental conditions at the disaster area. Before departure, identify and brief the team on the hazards associated with modes of transport that	Annex B21, B3 and B17

and include in the initial team briefing.	will be used to travel to the affected country and those most likely to be encountered for transport within the affected country.	
In transit monitor and enforce compliance with established safety and security practices.		
Receive briefing from the RDC and or OSOCC/UCC on safety and security aspects including:	 Type and condition of transport equipment. Local driving customs. Movement of equipment. Any special hazard considerations (i.e. road conditions, land mines, animals, infrastructure, weather, looting, civil unrest, criminal acts, restricted areas, check point procedures, escort procedures, etc.) Identify local medical capabilities available in case of an emergency during transportation to the disaster site. 	
Implement security procedures as appropriate.	 Vehicle inspection programme. Ensure reserve fuel supply. Movement procedure, i.e. only move about in pairs etc. Establish evacuation routes. Establish a safe haven. Implement a roll call system. Establish communications protocols. 	

8.2 Operations		
Action	Description	Reference
Liaise with OSOCC/UCC on safety and security issues.	Note that the safety and security conditions can change rapidly. Ensure constant communications with local authorities.	
BoO sites and travel routes.	Continually conduct a risk/hazard analysis of the BoO, travel routes and assigned work area and take appropriate mitigation action.	
BoO perimeter control.	Establish BoO and worksite perimeter control procedures using physical barriers or other measures to delineate the BoO site.	Annex B14, B15, B16, B17
Daily briefings.	Ensure safety and security considerations are included in the plan of action and briefings.	Annex B17, B18
Evacuation procedures.	 Ensure a warning system and evacuation plan is established, briefed and exercised. Regular roll-call of all personnel should be maintained throughout the mission. Ensure that team personnel adhere to the "buddy system." 	Annex B18, B26
Provide adequate lighting for security of BoO and worksites.		Annex B14, B15, B16
Continually monitor weather forecasts.		
Base hygiene.	Ensure biomedical control measures are adhered to (i.e. body recovery, patient handling, sanitation, hygiene etc.) Ensure personnel and equipment decontaminating	
	practices are followed prior to leaving the worksite and entering the BoO.	
Ensure that all team personnel have reliable means of communications.	Each member should carry radio or other means of communication always when outside of the BoO.	
Shift rosters.	Ensure adequate rest, rotation, hydration, and feeding of team members.	

8.3 Demobilisation		
Action	Description	Reference
Personnel considerations during this phase include:	 Mitigating fatigue. Monitor team members for signs of stress. Preventing loss of concentration and motivation. Maintaining team discipline ensuring regular information exchange. 	

8.4 Post-Mission		
Action	Description	Reference
On the return to the home base, the following safety and security issues should be considered.	Safety and security concerns are incorporated into the Post-Mission Report. It is imperative that the safety findings and lessons learned are highlighted and incorporated into future training sessions, field exercises and operational guidelines. Safety equipment and supplies must be restocked.	Annex B29, B30
Attend USAR Post-Mission debriefing.		Annex B29

9 Hazardous Materials Operations

Generally, the following tactics should be adopted while assessing a site that is suspected to be contaminated:

If a site is deemed contaminated teams should assess whether they have the means to safety work in this environment. Teams should not commit to a contaminated site without conducting a thorough assessment of their hazmat capability for short or longer-term operations. If it is deemed appropriate that a team can work in a contaminated environment the following should be considered:

- Ensure a safe approach always upwind and up-slope.
- Ensure clear command and control arrangements are in place and well understood by all present.
- Secure the site as best as possible to ensure the safety of others.
- Attempt to identify the contaminant (UN Numbers, Dangerous Goods or Hazchem Codes).
- Assess the potential harm and minimise, where possible, environmental contamination.
- Call in assistance expert advice/additional resources, if possible.
- If within the teams' capability render safe.
- Always assume the worst until proven otherwise.

Decontamination can be both equipment and labour intensive; therefore, consideration should be given to avoiding overextending the teams' capability in this area.

Whenever protective clothing or equipment is used, decontamination strategies need to be considered.

Prior to committing resources to a contaminated site, the following should be considered:

- A risk analysis should be conducted based upon hazard/risk assessment and the site survey
- Teams should evaluate the risk in relation to the rescue of viable victims versus recovery of the dead
- Teams should also consider other search and rescue priorities within the immediate vicinity

While undertaking search and rescue operations at any worksite teams should consider the following issues and implement a monitoring regime for the duration of the operations:

- Oxygen levels.
- Flammability of substance or surrounding atmosphere.
- Toxicity levels.
- Explosive limits.
- Radiological emissions and monitoring.

9.1 Other Considerations

The following considerations may also affect the decision on whether to conduct search and rescue operations:

- Condition of voids if the hazard can be easily isolated or mitigated and this is carried out, the situation is considered rendered safe and operations are to continue.
- Time required to access victims this will be an estimate of the time required to get to the first
 victim. It should include the time it would take to mitigate hazards, cut through floors, walls, roofs,
 etc., and to shore and brace the access route as well as relevant adjacent structures if required.

- Special occupancy information increased attention and monitoring will be given to certain types
 of target hazards, especially those involving nuclear energy, radiological elements, specialised
 military facilities, chemical manufacture, and biological production or storage.
- Decontamination careful planning is needed to ensure the team has procedures in place that provides adequate decontamination of members including search dogs.
- Go or No-go conditions and subsequent risk assessments:
 - Time required to complete the assignment.
 - o Protection and limitations of available personal protective equipment.
 - Results of the risk-benefit analysis.
 - Resource status.
 - Security and safety considerations.

The following should be considered when undertaking detection and monitoring:

- Detection and monitoring is required of both the Operational Worksites and BoO.
- Operational Worksite detection and monitoring should be performed by the assigned hazmat specialist in the team and include the following:
 - Establishing safe perimeters of each assigned structure.
 - Establishing clean entry points of each assigned structure.
 - Plan for the need to monitor additional voids or potential spaces encountered during operations.
 - Establishing decontamination-sites including the appropriate disposal of contaminated run-off.
 - Ensuring decontamination of assigned tools and equipment, including protective clothing.
 - o Ensuring decontamination of assigned transportation vehicles.

Refer to Annex U for the Hazmat Evaluation Guide.

Note: USAR Teams deployed with Hazmat capabilities can assist to identify potential chemical hazards following disasters such as toxic spills. They would mark off the danger zone to warn others and immediately report this threat to the UCC, who, in turn, would coordinate with the LEMA.

Annexes

Annex A: Table of Changes to INSARAG Guidelines 2015-20

	Amended Topic/Subject			
1	Implemented ISG 18 decisions on UCC			
	Transition from provisional OSOCC.			
	All references to UCC added as required.			
	·			
2	All diagrams from original version would be retained.			
3	All content within the volume have been updated and enhanced in detail to provide additional			
J	guidance to USAR teams.			
	guidance to contribution.			
4	INSARAG Guidelines, Volume III available on www.insarag.org only.			
5	Annexes			
Ŭ	Introduction of "Tables of Changes to the INSARAG Guidelines from 2015 to 2020" as the			
	new Annex A to capture the updates made from the 2015 Guidelines.			
	From the 2015 Guidelines, the following annexes have been moved to the <i>Guidelines</i>			
	Annex → Volume 3 tabs of the Guidance Notes on www.insarag.org :			
	Annex A: Ethical Considerations for USAR Teams			
	Annex B: Media Management Checklist			
	Annex C: Country Information – Affected Area Information Template			
	Annex D: USAR Team Fact Sheet Template"			
	Annex E: RDC Establishment Checklist			
	Annex F: RDC Briefing Hand-out			
	Annex G: Security Briefings			
	Annex H: Airfield Assessment			
	Annex I: OSOCC/UCC Planning Form and USAR Planning Tool			
	Annex J: USAR Coordination Cell Establishment			
	Annex K: OSOCC/UCC - LEMA Initial Briefing			
	Annex L: Standard Meeting Agenda			
	Annex M: Assignment Briefing Package			
	Annex N: Base of Operations Requirements			
	Annex O: Base of Operations Layout			
	Annex P: Management Tent Layout			
	Annex Q: Safety and Security Plan, Checklist SSO			
	Annex R: Evacuation Plans			
	Annex S: Wide Area and Sector Assessment – Proposed Sector Assessment			
	Layout			
	Annex T: Assessment, Search and Rescue Level			
	Annex U: Hazmat Evaluation Guide			
	 Annex V: Worksite Triage and Structural Evaluation 			
	Annex W: Worksite Triage Form			
	Annex X: Worksite Report Form			
	Annex Y: Incident/Sector Situation Report			
	Annex Z: USAR Team Marking System and Signalling			
	Annex B27: Victim Extrication Form			
	Annex B1: Ethical Considerations for USAR Teams			
	o Annex B29: Mission Summary Form			
	Annex B30: USAR Team Post Mission Report Form			

Annex B: Annexes hosted on www.insarag.org

The following annexes have been moved to the *Guidelines Annex* \rightarrow *Volume* 3 tabs of the Guidance Notes on www.insarag.org.

NOTE: These documents are meant to serve as a reference material, for the latest and amendable version of <u>documents meant to serve as **forms**</u> (e.g. USAR Team Fact Sheet form), readers are recommended to refer to *Guidance Notes* → *Forms* on <u>www.insarag.org</u>.

Annex B1: Ethical Considerations for USAR Teams*

Annex B2: Media Management Checklist*

Annex B3: Country Information – Affected Area Information Template*

Annex B4: USAR Team Fact Sheet*

Annex B5: RDC Establishment Checklist*

Annex B6: RDC Briefing Handout*

Annex B7: Security Briefings*

Annex B8: Airfield Assessment*

Annex B9: OSOCC Planning Guide*

Annex B10: USAR Coordination Cell Establishment*

Annex B11: OSOCC/UCC-LEMA Initial Briefing*

Annex B12: Standard Meeting Agenda*

Annex B13: Assignment Briefing Package*

Annex B14: Base of Operations Requirements*

Annex B15: Base of Operations Layout*

Annex B16: Management Tent Layout*

Annex B17: Safety and Security Plan*

Annex B18: Evacuation Plans*

Annex B19: Wide Area and Sector Assessment*

Annex B20: Assessment, Search and Rescue Level*

Annex B21: Hazmat Evaluation Guide*

Annex B22: Worksite Triage and Structural Evaluation*

Annex B23: Worksite Triage Form*

Annex B24: Worksite Report Form*

Annex B25: Incident/Sector Situation Report*

Annex B26: USAR Team Marking System and Signalling*

Annex B27: Victim Extrication Form*

Annex B28: Demobilisation Form*

Annex B29: Mission Summary Form*

Annex B30: USAR Team Post-Mission Report Form*

