**XXXX Contingency Plan for JRCS EC**

 **- XXXX (Site Name)-**

**XX/X/20XX(Ver.X)**

**Preamble**

**1.Potential risk**

1.

**2.Key assumptions:**

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**3.Preparedness**

**4.Action plan**

In line with IFRC contingency plan, XXXXXXX and react as summarized in the table below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Level** | ***Description*** | **Actions** | **Responsible** |
| **Level 0** | ***Depression / potential XXX formation* -120 hours before impact** |  | Head admin |
| **Level 1** **Preparation**  | ***Depression / potential XXX formation* – 96 hours before impact** | *
*
 | Head admin |
|  | All staff |
|  | TL |
| **Level 2** **Activation**  | ***XXX – likely to increase to severe* – 72 hours before impact**.  | *
 | Head admin |
| **Level 3****Evacuation/ Hibernation** | ***XXXX/XXXX*****– 48 hours before impact**  | *
 | TL |
| **Level 4** **Lockdown** | ***During Severe XXXX*** | *
 | TL |
| **Level 5****(0 + 1)****Recovery& Reestablishment** | ***Post XXXX*** |  | Head admin |
| *
*
 | TL |

**Mass causality plan**

**5. Transportation of medical material and equipment**

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Table 1.

|  |
| --- |
| Category of BHC-ERU Equipment for Contingency Plan |
|  |  |  |  |
| 1.Situation RED | 　 | 　 |
| 　 | Name of Equipment | Unit | Place |
| 1 | Radio | 11 | Office Tent |
| 2 | Autoclave | 1 | OP Tent |
|  |  |  |  |
| 2.Situation YELLOW | 　 | 　 |
| 　 | Name of Equipment | Unit | Place |
| 1 | Refrigerator | 1 | Office Tent |
| 2 | Transformer | 1 | Office Tent |
| 3 | Generator | 5 | Outside |
| 4 | Lithium ion battery | 2 | Outside |
| 5 | Lithium ion light | 3 | Office Tent, Outside |
| 6 | Toolbox | 1 | Warehouse |
| 7 | Water Purifier | 1 | Warehouse |
| 8 | Tent | 2 | Outside |
| 9 | Surgery Tent | 1 | Outside |
|  |  |  |  |
| 3.Situation Blue | 　 | 　 |
|  The other equipment above is left in the Fix clinic |
|  |  |  |  |
| 　 |  High priority |  |  |
| 　 | Middle priority |  |  |
| 　 | Low priority |  |  |