**XXXX Contingency Plan for JRCS EC**

**- XXXX (Site Name)-**

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

**Preamble**

**1.Potential risk**



**2.Key assumptions:**



**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**



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 |  |  |