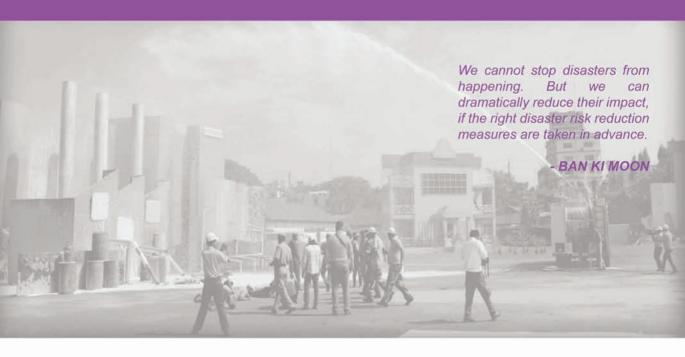
DOCUMENTATION



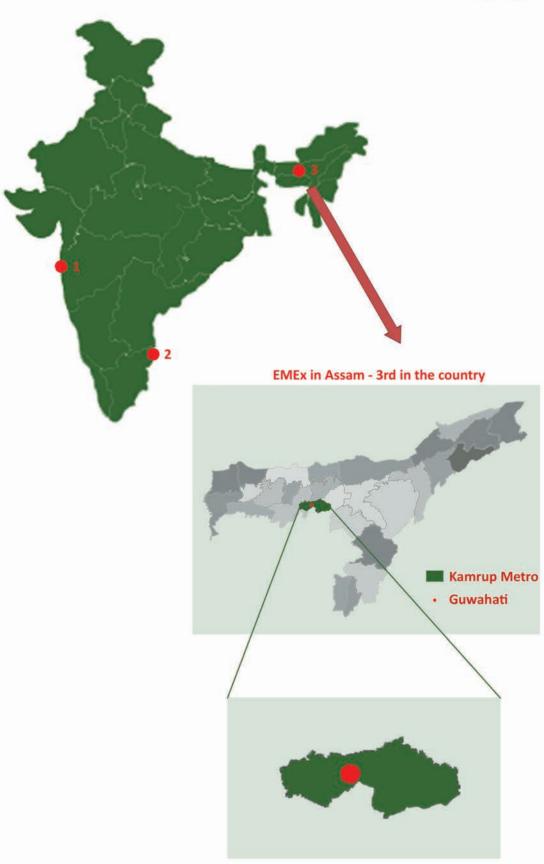
GUWAHATI EMERGENCY MANAGEMENT EXERCISE 2012

A Report









- 1 1st EMEx MEMEx (Mumbai)
- 2 2nd EMEx CEMEx (Chennai)
- 3 3rd EMEx GEMEx (Guwahati)



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EMERGENCY MANAGEMENT EXERCISE: THE MEANING

Emergency Management Exercise (EMEx) is a capacity building week-long exercise conducted to test the response mechanism that is in place in a disaster-prone city/town. The exercise is designed to harness the strengths and capabilities of the different departments/institutions/ organizations that are responsible for carrying out the emergency response mechanism in an event of a disaster.

The exercise involves trainings, workshops and mock scenarios participated by various professionals for disaster management in the city, viz. regional emergency responders, educational institutions, hospitals, health professionals, humanitarian agencies, state agencies, community, non government organisations, civil society organisations and professionals working in related fields to assess the cities / towns disaster preparedness and resilience.



EMERGENCY MANAGEMENT EXERCISE: THE MEANING ... contd



The week-long exercise provides an environment for the participants to build up communication agency coordination for responding to a disaster. It helps in developing new skills emergency management and casualty events, and to work together to develop a multi-disciplinary, coordinated disasters response to local emergencies. It becomes an important tool evaluating and assessing capabilities of the emergency responders and to test the current plans and identify gaps in existing capacity and systems.

EMEXs provides for efficient disaster preparedness in a city which is vulnerable to multi-hazards and at the same time has a history of several disaster occurrences with devastating effects infrastructures, utilities and lives of people. EMEx was originally designed by a team from Harvard Humanitarian Initiative, experts from Cornell Columbia Hospital and other institutions in US and tested around the world including India in Mumbai, and Chennai. The National Disaster Management Authority, Gol has taken-up EMEx as a systematic approach to capacity building in urban areas for emergency preparedness and periodic testing of its response capabilities.









NEED FOR EMEX



The of occurrence disaster in an urban setting has a different character and magnitude and is different to that of the rural environments. The scale and number of the effect is significantly greater terms of lives. infrastructure, services and economy. The Mumbai experience of the 2005 Floods demonstrates this clearly which brought the entire city's commercial,

trading and industrial activities to a standstill for days, causing a direct loss of at least US \$ 100 million. Flight and rail services had to be stopped entirely and the local stock exchanges could operate only partially.

Against the backdrop of such a challenge, the urban risk reduction and disaster response strategies even today are still poorly understood. Despite the huge social and economic costs that disasters pose to the cities, the emergency response capacities remain largely untested. Addressing this situation, EMEXs helps largely to promote awareness of urban disaster risks and to examine, test, evaluate, and assess a city's emergency disaster response capabilities. It is through the conduct of the EMEXs, the strengths and weaknesses of the systems can be identified and improved in managing disasters and emergencies. It also helps in bringing together the various actors involved in emergency management facilitates them to network, coordinate, work co-operatively, gain a comprehensive overview of the city's disaster management frameworks and to obtain insights into how their role fits with others. Therefore, with an objective to address the enormous risks of disasters in the city of Guwahati, the need was felt to conduct an EMEx for preparing the emergency responders in providing efficient disaster response in the city.

EMEx in Guwahati was the first ever mega-exercise to be conducted in the North East India and third in the country to be held after Mumbai and Chennai. The exercise was planned to carry out in collaboration with the District Disaster Management Authority, Kamrup Metro, National Disaster Management Authority, Government of India and with the support of United Nations Children's' Fund.



THE STATE OF ASSAM: PROFILE

Assam (Asom, Axom) is a beautiful and diverse state with an incredible range of cultures and landscapes. It is situated in north east India and serves as the gateway to the other states viz. Arunachal Pradesh, Nagaland, Manipur, Mizoram, Tripura and Meghalaya.



The state stretches for an area of 78,438 km² with a total population of 31,169,272 (Census of India, 2011). The total population of the state has increased in the last decade with a growth rate of 16.93% thus increasing manifold the pressure on land.

The physiography can be characterized mainly by three types of regions, viz. Brahmaputra River valley in the north, Barak River valley in the south, and the hilly region between Meghalaya (to the west) and Nagaland and Manipur (to the east) in the south-central part of the state. Assam experiences Tropical Monsoon Rainforest Climate with temperatures ranging from highs of 36 °C in August to lows of 7 °C in January. Although some rain occurs from March through May, the heaviest precipitation comes with the southwest monsoon, which arrives in June, stays through September, and often causes widespread and destructive flooding.

Annual rainfall in Assam is not only the highest in the country but also ranks among the highest in the world; its annual average varies from about 70 inches (1,800 mm) in the west to more than 120 inches (3,000 mm) in the east.

Seismically the state of Assam falls under Zone V the highest seismic risk zone that has the probability of earthquakes of intensity MSK IX or greater.

Thus the physiography, climate and population pressure on land combined with the multi hazard vulnerability makes Assam a multihazard State which is prone to floods, earthquake, storms and landslide besides man-made disasters.

Therefore, to sustain the pace of development initiative in the state in the occurrence of any disaster, the Government of Assam envisages building a State Prepared and Disaster Resilient by minimising losses in the State.



PROFILE OF THE CITY OF GUWAHATI



Guwahati, situated in the Kamrup Metropolitan district of Assam is an ancient urban area and the largest city in the State and north-eastern India. It is one of the fastest developing cities in India. Dispur, the capital of the State of Assam is situated in the city. With a population of 1260419 the city shares 4.04 per cent of the State's total. The district accounts for an urban population of 82.90 percent of the district's total (Census of India, 2011).

The Kamrup Metropolitan District situated between 26° 10' 45" North Latitude and 91° 45' 0" East Longitude occupies an area of 216.79 sq km. The city is situated on undulating plain with varying altitudes of 49.5 m to 55.5 m above mean sea level (MSL). The southern and the eastern sides of the city are surrounded by hillocks.

The central part of the city has small hillocks namely Sarania hill (193 m), Nabagraha hill (217 m), Nilachal hill (193 m) and Chunsali Hill (293 m).

The city is also covered by swamps, marshes and water bodies like Deepor Bil, Dighali Pukhri, Silsakoo bil.

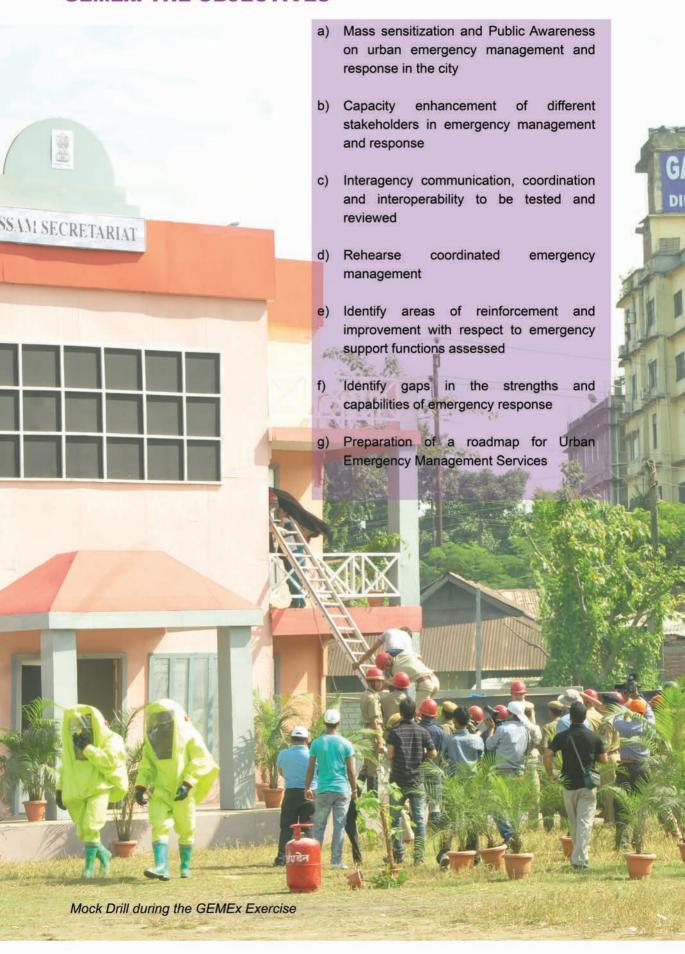
The climate is characterized by rainfall ranging between 1500 mm to 2600 mm under normal circumstances. However, the city also experiences high intensity rainfall in short durations which results in urban flooding. The climate is Sub tropical with semi - dry summer & cold in winter and characterized by maximum temperature of 38.5° C and minimum of 7°C.

The physiographic and climatic conditions play a critical role in inducing the natural hazards in the city. The growing population has led to a haphazard growth of the city with an unplanned land use pattern. The combined effect of the natural as well as human factors exposes the city dwellers to high risk and vulnerable to earthquake, landslide, urban floods, storms, fire etc. The multi-hazards faced by the city are detailed below in the table:

TYPE OF HAZARD	TIME OF OCCURENCE	VULNERABLE AREAS
Urban flood (Water logging)	May to October	RG Baruah Road, Nabin Nagar, Anul nagar
Storm	March to May	Entire District
Earthquake	Anytime	Entire District
Landslide	May to October	Nilachal, Kharguli, Dhirenpara, Noonmati and Kalapahar
Fire Accidents	Anytime	Noonmati, Fancy Bazar, Paltan bazar, Dispur etc.



GEMEX: THE OBJECTIVES







(i) Meetings

Inception meeting

The germination of the idea for conducting GEMEx can be traced back to a meeting held in September, 2011 between Dr. Muzaffar Ahmed, Honourable member, NDMA and Shri V. K Pipersenia, Principal Secretary Revenue and DM, Govt. of Assam. Taking the modalities of CEMEx (Chennai) - 2011, the 2nd EMEx in the country to be conducted after Mumbai, a similar exercise in Guwahati with the name GEMEx was planned. It was decided that **NDMA** with support from UNDMT/UNICEF would facilitate the planning for GEMEx.

SDMA Meeting

The proposal to conduct the GEMEx was placed before the SDMA in its 4th Meeting held on October 14, 2011 and Chaired by Hon'ble Chief Minister. The proposal was approved for conducting the Guwahati Emergency Management Exercise (GEMEx) in collaboration with DDMA Kamrup (M), NDMA and International Agencies. With the formal approval of the SDMA the process of preparation for its conduct started.







Introductory Meeting

The first introductory meeting on GEMEx was held on January 20, 2012, under the chairmanship of Dr. Muzaffar Ahmed, Hon'ble Member National Management Authority (NDMA). Shri V.K. Pipersenia, Principal Secretary, Revenue and Disaster Management Department; Shri Atul Chaturvedi, CEO, ASDMA; Shri Aushotosh Agnihotri, Deputy Commissioner, Kamrup Metro attended the meeting with the participants from Line Departments, NDMA, UNDMT/UNICEF, AIDMI ETC.

In the meeting Hon'ble Member, NDMA, Dr Muzaffar Ahmed explained to departments the need of the exercise for the existing testing system of preparedness and meeting the shortcomings after the exercise. It was decided that conduct of GEMEx would be guided by UNICEF. Mr. Sarabjit Singh, Emergency Specialist would coordinate and plan the exercise with DDMA and ASDMA.

Follow-Up Meeting at NDMA, Delhi

To discuss on the modalities of conducting GEMEx, a meeting was held on August 8, 2012 at NDMA, Delhi. In the meeting a detailed discussion was made on the modalities of GEMEx. A comprehensive plan for the exercise spanning over 62 days culminating to a Full Scale Drill in Guwahati City and Post-simulation long term planning strategy was presented by NDMA which was discussed threadbare regarding its operational viability.

Preparatory Meeting

A preparatory meeting was conducted by ASDMA to kick start the GEMEx 2012. It was held on 28th October 2012 at the State Museum. Guwahati. ASDMA offcials. NDMA officals. officers of district administration, Senior State Government Officials, UNICEF officials, personell from Police, NDRF, National & Internation faculties were all present at the meeting wherein the objectives, action plan and expected outcome of GEMEx 2012 were discussed at length.





A. PLANNING

(i) Meetings

Follow-Up Meetings at ASDMA, Guwahati

a) Meeting on GEMEX Comprehensive plan:

ASDMA convened a meeting on August 14, 2012 for preliminary discussions on the Comprehensive Plan for conducting GEMEx with all the stakeholders. In the meeting, it was decided that the time span of GEMEx would be reduced to 45 days.

b) Review Meeting

Subsequently a review meeting was convened under the chairmanship of Dr Muzaffar Ahmad, Hon'ble Member, NDMA on September 17, 2012. In the meeting, a detailed discussion regarding the various issues and different activities to be conducted as a part of the exercise was held and the data for the exercise including tracks to be covered was decided.



Member NDMA, attending a review meeting at ASDMA office

c) Several rounds of meetings

Several brainstorming meetings were held at ASDMA Headquarter involving officials of NDMA and DDMA (Kamrup Metro) to plan and work out the preparatory activities for the exercise. This simultaneously led to the preparation of massive groundwork for the mega event.





Focusing on the primary requirements, an analysis was made on the availability of resources and an action plan developed which is detailed below:

SI. No	Particulars of the Plan	Descr	iption of Works	Responsible Department / Agency / Persons
1	Date for conduct of the exercise	Octob (7 day	er 29 and November 4, 2012 rs)	
2	Capacity Building Tracks	15 no	s.	
		SI .No	Name of the Tracks	
		1	Basic & Advanced Disaster Life Support	
		2	Chemical and Industrial Disaster Preparedness	
		3	Community Based Relief and Public Health	
		4	Comprehensive Trauma Life Support (Nurses & Doctors)	
		5	Coordination of Response for Senior Govt. Representative	
		6	Emergency Medical Services	
		7	Emergency Nursing Care	
		8	Engineers on Earthquake Safety	
		9	Higher Education Preparedness	
		10	Hospital Emergency Management	
		11	Incident Response System	
		12	Multi- sectorial Need Assessment in Emergencies	
		13	School Disaster Preparedness	
		14	Search and Rescue	
		15	Minimum Initial Service Package in Reproductive Health in Crisis situations (NF	
3	Design Preparation		Design of Logo; Brochure; Sand ation; Banner, Poster/ Advertisement / ees / Leaflet; ID Card; Certificate;	ASDMA





		b. Web site for	GEMEx	
4	Media Campaign	Audio-Visual Advertisement on GEMEx (Sand Animation)		ASDMA
		Radio Jingles (Common for all channels)		ASDMA
		Street Play (Earthquake Theme)		ASDMA
		Road Shows (As per ASDMA Media Plan)		ASDMA
		Print Advertisement		ASDMA
		Posters		ASDMA
		Leaflet Distribution		ASDMA
		Invitation to Media for media coverage		DDMA/ASDMA
		Press Release		DDMA/ASDMA
5 Venue Finalization		 Identification/Selection of Venue for Training Based on the requirement of the specification given by the trainers of ToTs sent one month before the event Strategically all the venues were chosen close to DDMA Office and was ensured that they are next to each other. 		ASDMA / DDMA/ NDMA
		Logistics at Venue fo	r training	ASDMA
6	Resource Persons	Identification and Co and National Resour	onfirmation of International	UNICEF/NDMA
		Logistic	a. Travel	UNICEF/NDMA/
		Arrangement:	b. Accommodation	ASDMA
7	Co-ordination in Tracks	Identification of Co-o	ASDMA/DDMA	
8	Training materials	Co-ordination with Resource Person seeking study materials for each track		ASDMA
		Training Kit		ASDMA
9	Participants for ToTs	Participants profiling for respective tracks		ASDMA
		Invitation of participants for ToT		DDMA
		Preparation of Partic of the attendance in	cipant Database and update website	ASDMA





		Follow-up of Participants for each scheduled training, Table-Top and Field Drill & Hotwash	DDMA
10	Invitation	Identification and Invitation of chief guests/ legislators/ Elected Representatives/Media/ other invitees to Inaugural ceremony, Table Top, Mock Drill and Closing Ceremony	ASDMA/DDMA
11	Table top exercise	Preparation of Scenario	NDMA
		Identification of Facilitator for table top exercise	NDMA
		Identification of observer for table top exercise	NDMA
12	Mock Drill	Set design : Four Sets 1. One School - St. Angel High School) 2. One Apartment (Heritage Complex) 3. Assam Secretariat 4. Assam Petrochemical Limited	DDMA
		T-Shirts (colour-coded for 4 groups) and Caps For Mock Drill on final day	DDMA
		Identification of Field drill coordinator	NDMA
		Identification of Observer for Field drill	NDMA
		Arrangement of Artists for field drill (150)	DDMA
		Briefing of different groups in the field participating in the Mock drill	NDMA identified Field Drill Co- ordinator
13	Budget	Particulars of the financial implication template: 1. Awareness Week (7 – 10 days before commencement of exercise) 2. Preparatory Workshops (7 Nos) with different stakeholders. Viz. Inception workshop, Workshop on Hospital Safety 3. Implementation of the week long EMEx Exercise 4. Optional Certified Tracks 5. Post-exercise documentation & follow up	ASDMA prepared the budget based on the broad financial implication template sent by NDMA
14	Food		ASDMA
	Arrangement / Refreshment		DDMA/ASDMA/ NDMA
15	Documentatio n	a. Process Documentation (day-to-day) b. Overall documentation	NDMA
16	Publication of Souvenir		DDMA/District Administration (Kamrup Metro)





A. PLANNING

ii) Schedule for Implementation of GEMEx

Sl. No.	Name of Track	Days	Date	Venues
1	Basic & Advanced Disaster Life Support	3 Days	October 29 - 31, 2012	Cotton College - Chemistry Department Classroom (Gallery)
2	Chemical and Industrial Disaster Preparedness	3 Days	October 30 - November 1, 2012	Don Bosco School Auditorium
3	Community Based Relief and Public Health	4 Days	October 29 - November 1, 2012	Cotton College - Auditorium
4	Comprehensive Trauma Life Support (Nurses & Doctors)	3 Days	October 29 - 31, 2012	Cotton College - Geology Dept - Model Classroom
5	Coordination of Response for Senior Govt. Representative	1 Day	October 29, 2012	Circuit House Conference Room
6	Emergency Medical Services	4 Days	October 29 - November 1, 2012	Cotton College - Sudmerson Hall
7	Emergency Nursing Care	3 Days	October 29 - 31, 2012	Cotton College - Chemistry Library Room
8	Engineers on Earthquake Safety	2 Days	November 1-2, 2012	Zilla Parishad Metro - Conference Room
9	Higher Education Preparedness	2 Days	October 31- November 1, 2012	Don Bosco School Seminar Hall
10	Hospital Emergency Management	4 Days	October 29 - November 1, 2012	Cotton College State University - Seminar Room
11	Incident Response System	2 Days	October 31- November 1, 2012	Conference room of Assam State Museum
12	Multi- sectorial Need Assessment in Emergencies	2 Days	October 30 - 31 ,2012	Circuit House Conference Room
13	School Disaster Preparedness	2 Days	October 29 - 30, 2012	Don Bosco School Seminar Hall
14	Search and Rescue	3 Days	October 30 - November 1, 2012	Handique Girls' College - Seminar Hall
15	Minimum Initial Service Package in Reproductive Health in Crisis situations (NF)	4 Days	October 29 - November 1, 2012	Bishnu Nirmala Children Auditorium

- * Table-Top to be conducted on November 2, 2012 at Jawaharlal Nehru Indoor Stadium
- * Field Drill to be conducted on November 3, 2012 at the Assam Engineering Institute Playground, Chandmari
- * Hotwash or Lesson Learnt & Valedictory on November 4, 2012 Rabindra Bhavan, Guwahati



iii) Human Resources Mobilization and Deployment

Technical support:

Technical support was sought from Local National and International Agencies/Institutions to conduct the ToTs, Table Top Exercise, Field Drill and the Hotwash on the



final day. The Resource Persons against each training track is given in Annexure - 1

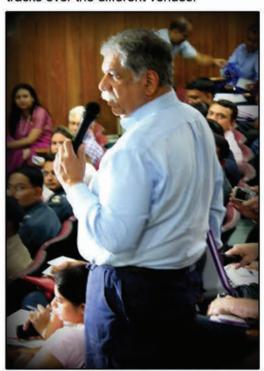
Liaising and execution:

TIn the process of planning, liaising and execution of the mega exercise the following were involved:

- consultants and co-ordinators from NDMA
- * officials from UNICEF
- * officials from AIDMI
- the entire team of ASDMA (Headquater)
- * officials of DDMA, Kamrup Metro
- District Project Officers deputed in the DDMA, Kamrup Metro
- * District Administration



Project Officers from the district as well as the Headquarter of ASDMA and officials from the District Administration were assigned the task of co-ordinating in the TOTs conducted in the different parallel tracks over the different venues.



iv) **GEMEx Website**

Exclusive GEMEx website http://www.asdmagemex.com was designed and launched. ASDMA IT division worked out the domain name, design and development of the webpages, layout, content, framework and activation of website.







Inauguration

The first ever mega event of EMEx in North East India was inaugurated on October 29, 2012 by Shri Prithibi Majhi, Hon'ble Minister, and Disaster Management Department and Vice-Chariman, SDMA with the lighting of a lamp at Rabindra Bhawan, Guwahati. The occasion was graced by Dr. Muzaffar Ahmed, Hon'ble Member National Disaster Management Authority (NDMA); Shri V.K. Pipersenia, Principal Secretary, Revenue and Disaster Management Department and Shri Aushotosh Agnihotri, Deputy Commissioner, Kamrup Metro.

On the occasion, a warm felicitation was made to about 70 international and national faculties of different expertise on emergency management who were invited to conduct the entire exercise. A number of about 1300 people consisting of participants of the ToTs, students, teachers and public attended the occasion.

ToT TRACTS

GEMEx involved capacity building Training of Trainers (ToTs) tracks conducted in 15 different parallel tracks at different venues from October 29 — November 1, 2012. The ToTs were attended by about 1013 participants from different Government Line Departments, Doctors, Paramedics, Students, Teachers and personnel from Police, Fire Service, Traffic, NGOs etc.



ToTs in detail:

1. EMERGENCY MEDICAL SERVICES

ToT on this course has been carefully designed with the following objectives to be achieved in the event of a major incident:

- to understand theoretical and physiological basis of life support
- * early trauma management
- triage
- to practice skills and decision making in the response to a major incident

Overall the course was designed to give first responders - EMS or Paramedics, the confidence, skills and knowledge they need to provide the highest level of immediate care in a disaster setting. Participants were to gain skills in assessing patients, attending to burns, attending to different types of injuries (e.g. spine damage, chest trauma), triage, and responding to specific types of disasters.

Participants

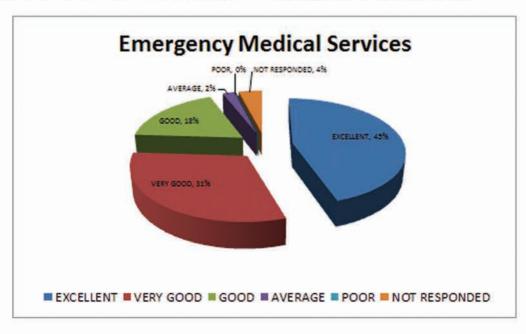
About 68 doctors and officials engaged in



Participants of the "Emergency Medical Services" track

Hospital Management attended the training. The participants were from Hayat Hospital, International Hospital, Nemcare Hospital, Guwahati Medical College and Hospital, GVK EMRI, Marwari Maternity Hospital Guwahati, Down Town Hospital, the Indian Air Force, 151 Base Hospital, the NDRF, GNRC Hospital, Pratiksha Hospital, and the Directorate of Health Services, Assam.

Participants provided positive feedback to the training. As shown in Figure below, 45% of the participants thought that the overall subject balance of the training course was excellent, while 31% felt that it was very good. A further 18% gave a good rating and 2% thought that the balance was average and 4% did not respond.





ToTs in detail:

2. HOSPITAL EMERGENCY MANAGEMENT

The Course

The course was aimed at improving the abilities of hospital managers (administrators, emergency physicians and casualty medical officers) in organising intra-hospital care during mass casualty events, with special consideration given to building surge capacity and adapting to local physical conditions. The key objectives of the course were:

- * Enhance hospital-based preparedness in India
- * Bring medical and administrative leaders together to:
 - a) Discuss and understand the characteristics of disasters and mass casualty events.
 - b) Learn the principles of disaster management.
 - Organise and lead a disaster preparedness program in their facility
 - d) Improve the overall preparedness of the city

The content of the course covered topics such as: emergency medical service systems, managing resources and assets



Participants of the "Hospital Emergency Management" track

during emergencies, hospital disaster management planning, pre-hospital care, disaster medicine, emergency care and resuscitation, hospital safety, and incident command structures.

Participants

The training was attended by 50 doctors and officials engaged in Hospital Management from Khetri CHC Health and Family Welfare, GNRC Hospital, Pratiksha Hospital and administrative staff from GNRC Hospital. The course was also attended by students from Hospital and Health Care Management Course.

The figure below shows the participants' views on the overall subject balance in the training course. The majority of 75% said that the balance was excellent, 12% stated that it was very good, and 13% thought the balance was good.





ToTs in detail:

3. EMERGENCY NURSING SERVICES

The Course

This course was designed to give the nursing staff working in the emergency department, the confidence, skills and knowledge they need to provide at the highest level of immediate care in a disaster setting in the Emergency Department. The objectives of the course were:

- * To provide an overview of the role of the nurse in disasters
- * To discuss disaster management, the stakeholders involved in disaster and humanitarian assistance, and specific activities in response
- * To introduce Advances in Disaster Nurse Competencies (ICN/WHO)
- * To introduce participants to some of the lessons learned in disaster response globally
- To teach participants how to conduct and analyse their own workplace preparedness and the nurses' needs in disasters
- * To improve trauma and emergency nursing skills through skill stations.

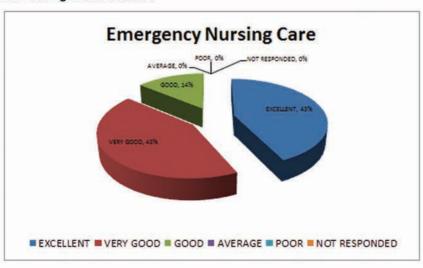


Training at the "Emergency Nursing Services" track

The content of the course covered topics such as: emergency medical service systems, managing resources and assets during emergencies, hospital disaster management planning, pre-hospital care, disaster medicine, emergency care and resuscitation, hospital safety, and incident command structures.

Participants

The training programme was attended by 35 nurses and nursing attendant from EMS International Hospital, GMCH, Arya Hospital, Hayat Hospital, Marwari Hospital, Nemcare Hospital and Base Hospital. The feedback from the participants was that, 38% said that the overall subject balance was excellent, 43% said it was very good, and 19% said it was good.





ToTs in detail:

4. COMPREHENSIVE TRAUMA LIFE SUPPORT

The Course

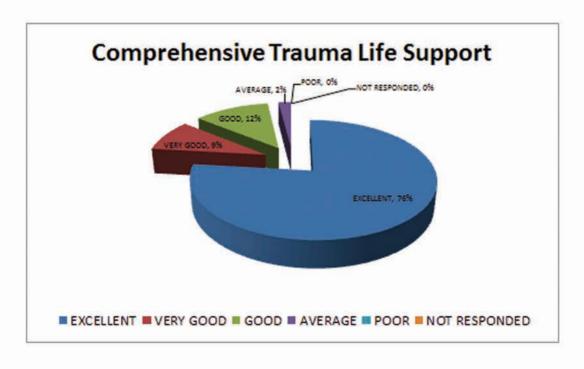
Comprehensive Trauma Life Support is an initiative of ITACCS India, supported by International Trauma Care (ITACCS). CTLS course is an authentic course on acute trauma management beina organised in India. Its purpose was to teach participating doctors how to assess, resuscitate and deliver initial care in a systematic algorithmic manner to patients with major trauma. It focused on teaching participants basic anatomy principles, how to recognise trauma injuries to different parts of the body, and the appropriate management protocols and triage methods.



Participants

The course was participated by 35 paramedics from Pratiksha Hospital, Hayat Hospital, Dispur Hospital, MMCH, GVK EMRI, Arya Hospital, GNRC Hospital, International Hospital, GMCH, Base Hospital and Downtown Hospital.

The participants rated the overall subject balance of the training course. 76% said it was excellent, 9% stated it was very good, 12% said it was good, and 3% felt that the balance was average.



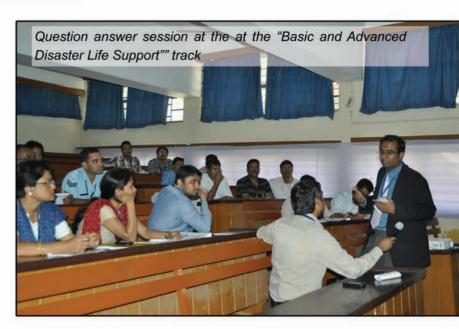


ToTs in detail:

5. BASIC AND ADVANCED DISASTER LIFE SUPPORT

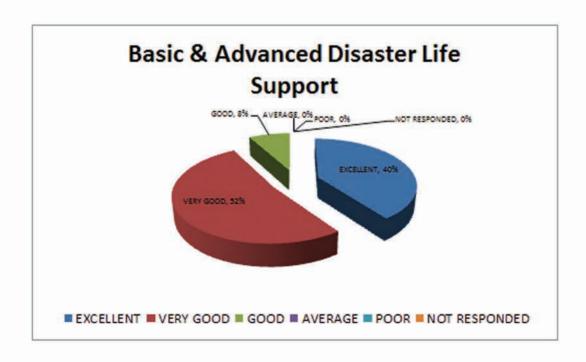
The Course

This three-days intensive course trains participants ways of handling explosive, nuclear. radiological, biological and chemical disasters, triage methods, the public health aspects of disasters, and the psycho-social aspects of disasters and terrorism. Using simulated all-hazards scenarios. interactive sessions and drills high-fidelity with mannequins and volunteer patients. the course creates true-to-life. a practical experience in treatment and response.



Participants

A no. of 36 medical and paramedical staff participated in the training programme. The participants were from Guwahati Medical College and Hospitals, the Indian Air Force, International Hospital, Hayat Hospital, GNC Hospital, and the GVK Emergency Management and Research Institute





ToTs in detail:

6. COMMUNITY BASED RELIEF AND PUBLIC HEALTH TRACK

The Course

The course was designed to teach senior-level public health practitioners, community medicine Post Graduates and disaster management personnel the skills needed to better respond disaster in situation The course will include community-based disaster management, the of disaster principles management, participatory research methods, and wavs empowering vulnerable groups in the community.

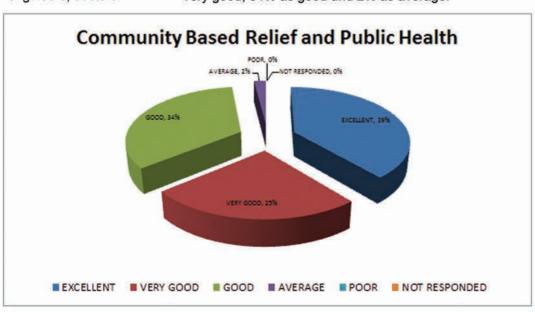
Participants

The training programme was attended by 84 participants consisting of personnel from NGO, engineers, doctors.



Deliberations by International faculty at the "Community Based Relief and Public Health" track

The participants are from Jyoti Darpan (NGO), ICDS, the Social Welfare Department, MSW students of NEF College, the Public Health Engineering Department, Guwahati Medical College and Hospital, SEED (NGO), Pragati Sangha (NGO), Guwahati Municipal Corporation, Neptune (NGO), New Horizon (NGO), Soraighat Human Worship Association (NGO), Clean Care Society (NGO), Eight Brothers Social welfare Society (NGO), the Sub-Divisional Medical & Health Department, the Health and Family Welfare Department and the Good Life Society. Participants provided positive feedback to the training course. 39% of them rated the overall subject balance as excellent, 25% as very good, 34% as good and 2% as average.





ToTs in detail:

7. COORDINATION OF RESPONSE FOR SENIOR GOVERNMENT REPRESENTATIVES

The Course

This training focuses on the Inter-agency communication/ protocol coordination within agencies and communication with the media during the occurrences of disasters, effectively. Current global trends in communication technology will also be discussed.

The objectives of the course were:

- Inclusive, functioning humanitarian coordination structures to respond immediately to an emergency.
- State authorities and in-country humanitarian actors are able to initiate joint assessments and utilise findings.
- * Effective coordination between in-country humanitarian actors, governments, the military, civil society, and others.
- * The state government creates an enabling environment in discussion with central government for international responders and can effectively trigger its own internal resources.

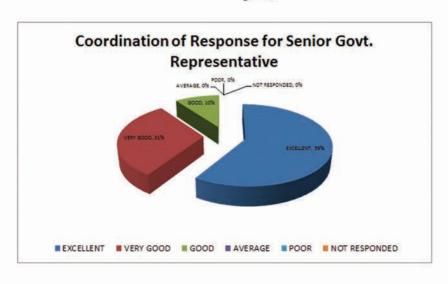


* Gaps in emergency information management, communication, planning etc. at various levels are identified.

Participants

The programme was attended by 48 officials from government departments. They were from Animal Husbandry and Veterinary Department. Indian Air Force. department, Chief of Medicines & Health Operations Kamrup Metro, Assam Police, Public Works department, National Home Guards, SFSO, Directorate of Geology and Mining, District Museum Office, Mines and Mineral Departments, City Police, Social Welfare Water Department, Resource Department, Civil Defence and Ministry of Home Affairs, Government of Nepal.

The track was a successful one. All the participants gave positive feedback for the course's overall subject balance. 59% said that it was excellent, 31%, very good and 10% good.





ToTs in detail:

8. MULTISECTORAL NEED ASSESSMENT IN EMERGENCIES

The Course

The course is designed for Government staff responsible for doing needs assessments during emergencies. It will provide perspective assessment on information gathering and analysis for emergency programme planning and response. Specific tools for data collection and analysis will be introduced to the participants.

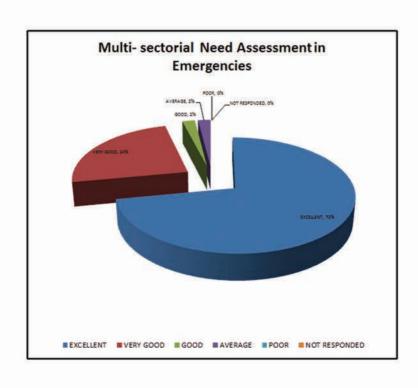


About 53 officials from government department attended the training programme.



The participants were from Handloom and Textile Department, Public Works Department, Social Welfare Department, Department of Fisheries, District Fisheries Development Office, Police Department, Animal Husbandry and Veterinary Department, APBCL, PHED and SFSO Assam.

There was a very positive response to the training course. 72% of the participants rated the overall subject balance as excellent, 24% as very good, 2% as good and 2% as average.





ToTs in detail:

9. SEARCH AND RESCUE

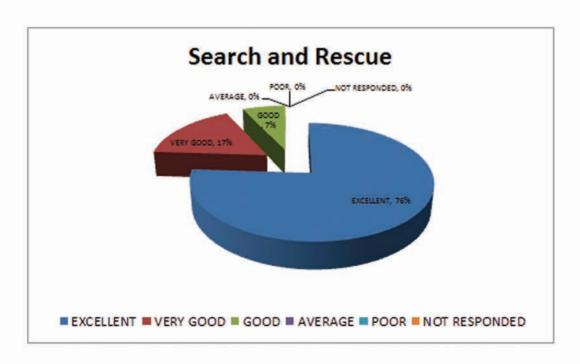
The Course

The search for and provision of aid people who are distress or imminent danger is vital. This course provides Search and Rescue personnel with the skillset they need to successfully complete search and rescue missions. The course focused on basic techniques and methods for community members and first responders to conduct organised and safe rescues of injured during persons disasters



Participants

A number of 124 participants from the State Disaster Response Force; the State Fire Service; the Zila Sainik Board; Assam Police and NGOs, viz. as Red R; Omega Society Solutions; P.M. Society attended the training programme. Participants' feedback on the overall subject balance was that 76% stated that the overall subject balance was excellent,17% of them rated it as 'very good' and 7% said that the balance was good.





ToTs in detail:

10. INCIDENT RESPONSE SYSTEM

The Course

The course gave an introduction to the participants the interaction of hazards vulnerability and (material, organizational, attitudinal), Standard Operating **Procedures** approaches and disaster response, public health approaches disaster management, minimum applying standards (Sphere, INEE). health public promotion, and mass communication.

Participants

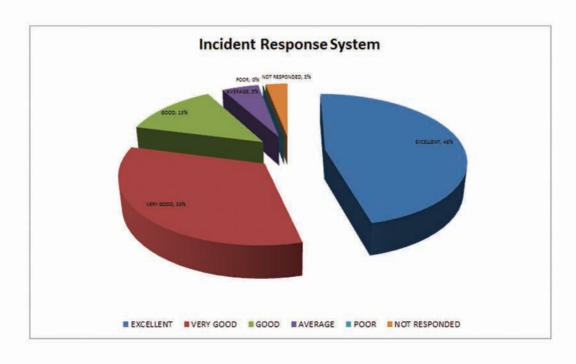
The training was attended by 55 participants who were



Participants at the "Incident Response System" track

from the Public Works Department, H & F Kamrup, the Health Department, Assam Police, Guwahati Municipal Corporation, SFSO (Assam), APDCL, the District Commissioner's Office (Kamrup) and GVK EMRI.

Participants responded positively to the training course. Of the total 46% of them rated the overall subject balance as excellent, 33% as very good, 13% as good, and 5% as average 3% did not provide a rating.





ToTs in detail:

11. SCHOOL DISASTER PREPAREDNESS

The Course

The two-day course on school disaster preparedness was targeted to students, teachers and school administrators. The objective of the course was to promote the use of inclusive, child-centred preparedness assessment strategies in schools so that they can identify ways of improving their current safety levels. The school administrators gained knowledge and skills in disaster risks, school vulnerabilities. auditing responding to disasters, mock drills, girl-centered School preparing Disaster Management Plans, financial instruments for school-based risk reduction, building codes, and fire safety measures.

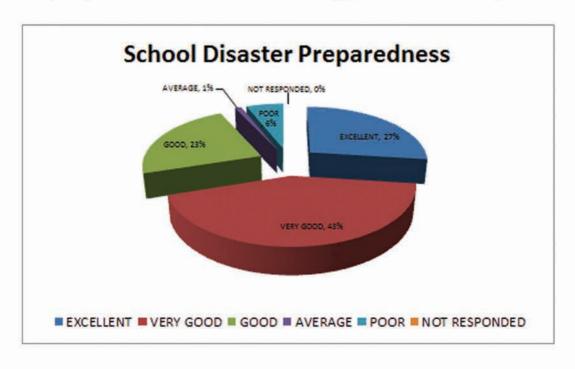
Participants

The training was attended by 217 participants including students, teachers and school administrators. The participants were from Guwahati



Refinery High School, Royal Global School Guwahati, TC Government Girls Higher Secondary School, Kendriya Vidyalaya - Maligaon, Holy Child HS School, St. Mary's High School, South Point School, Don Bosco School, Maharshi Vidya Mandir, AryaVidyapeeth, H.S and M.P School, Delhi Public School Guwahati, Cotton Collegiate Girls Higher Secondary School, Gurukul Grammar Senior Secondary School, Panbazar Girls High School, and Kamrup Academy Higher Secondary School.

The training course was a successful one. When evaluating the module's overall subject balance, 43% of the participants stated that the balance was very good, 27% thought that it was excellent, and 23% gave a 'good' rating. 1% felt that the balance was average and 6% said that it was poor.





ToTs in detail:

12. CHEMICAL AND INDUSTRIAL DISASTER PREPAREDNESS

The Course

The track was a three-day course disaster on preparedness and preparedness audits for Industries/ Service industries. This course is targeted at administrators of various industries at Guwahati. The primary objective of the course was to give participants the knowledge and skills necessary for responding effectively to industrial and chemical disasters

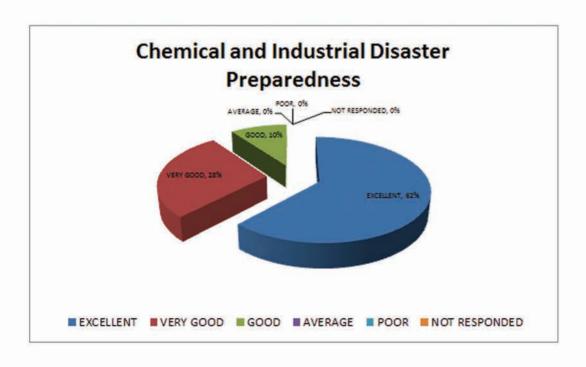
Participants

The track was attended by



Participants at the "Chemical and Industrial Disaster Preparedness" track

50 participants consisting of representatives from government departments, IOC Oil, Star Cement, Guru Detergent, National Refinery Limited, and hotels across the city. Of the total participants 62% stated that the overall subject balance was excellent, 28% said that it was very good, and 10% found that it was good. None of the participants thought that the subject balance was average or poor. This is shown in Figure below:





ToTs in detail:

13. MINIMUM INITIAL SERVICE PACKAGE

The Course

The 4-day course on minimum initial service package (MISP) aims to sensitize and train health and disaster management officials on the essentials of reproductive health care viz. sexual, maternal, and new-born health in disaster situations

Participants

A number of 47 participants attended the programme. The participants were from Assam Social Welfare Department, ICDS Project



(Guwahati Urban), Guwahati City Police, the Indian Red Cross Society Assam, office of the Joint Director of Health Services Kamrup (Metro), Nemcare Hospital, Assam Health and Family Welfare Department, GVK EMRI, Hengrabari Medical Unit, UPHC Gandhi Basti, MM Hospital, and Pratiksha Hospital.

The participants' feedback to the training course was quite positive. Of the total 44% rated its overall subject balance as excellent, 25% as very good and 31% as good.





ToTs in detail:

14. ENGINEERS ON EARTHQUAKE SAFETY

The Course

The course was designed focussing on developing local engineers' skills and knowledge in making buildings resistant to earthquakes. The course covered the following:

- * Earthquake safety in Assam and northeast India
- * Earthquake behaviour of buildings (configuration, stiffness, strength and ductility)
- * Earthquake behaviour of masonry buildings
- * Strengthening buildings
- Vulnerability of open ground storey RC buildings
- Earthquake behaviour of heritage structures and non-structural elements of buildings.

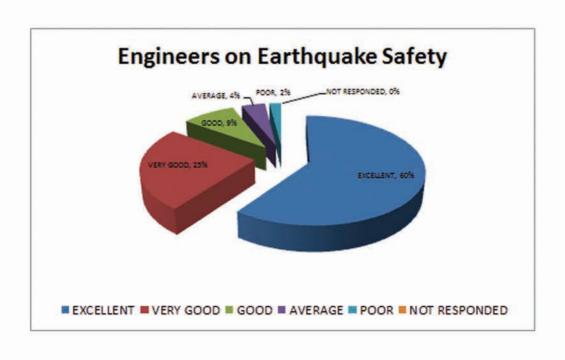


Participants at the "Engineers on Earthquake Safety" track

Participants

The programme was attended by 64 participants from Inland Water Transport Department, SSA Kamrup Assam, N.F Railways, NRHM, PHED, EGCR, APWD, the Department of Agriculture, PNDR, and the Assam State Housing Board.

All the participants were highly satisfied with all aspects of the course. Of the total 60% felt that the overall subjects balance was excellent, 25% was very good, 9% was good and 4% average. However, 2% thought that the subject balance was poor.





ToTs in detail:

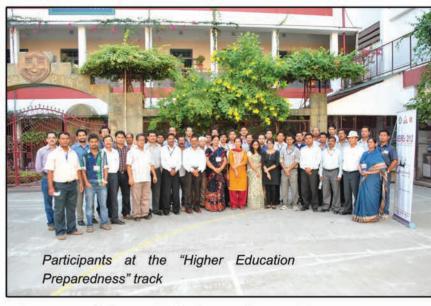
15. HIGHER EDUCATION PREPAREDNESS

The Course

The course aimed educate college superintendents/administrat ors DRR. disaster preparedness, and higher education safety. objectives of the training were and to promote institutionalize inclusive capacity-building, disaster preparedness, and safety practices assessment higher education institutes.

Participants

A number of 47 participants attended the training programme. The participants were from Pandu College, Royal Group of Institutions, NERIM law College, K C Das



Commerce College, GIPS, Azara, Cotton College, Handique Girls College, Don Bosco College of Engineering and Technology, Pragjyotish College, Guwahati College, Darwin School of Business, AryaVidyapith College, S B Deora College, LCB College, Girjananda Chowdhury Institute of Management and Technology, Guwahati Commerce College and KC Das Commerce College.

The training course was very warmly received by the participants. About 8% of them rated the overall subject balance as excellent, 73% as very good, 14% as good, and 5% as average.

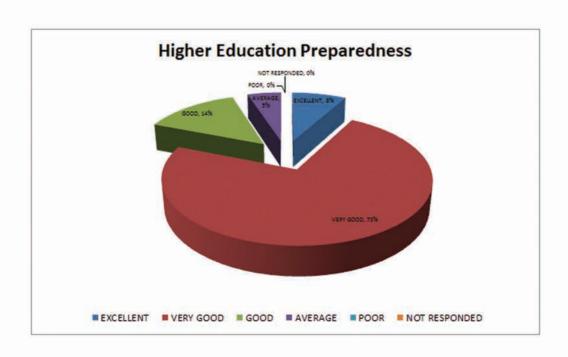




Table Top Exercise



After the conduct of the week long learning and capacity building exercises, the participants of the various tracks were brought together for a Table-Top exercise conducted on November 2, 2012 at Nehru Indoor Stadium. The exercise gave all the participants an opportunity to apply their new learning through a half day programme.

The exercise facilitated a brainstorming on simulated scenarios of emergencies and the different ways to respond to the situation. The Table-Top exercise was led by Dario Gonzalez, Fire Department, City of New York/Long Island Jewish North Shore Hospital Center, Dr. Jo Anne Bennett, New York City Department of Health and Nandita Hazarika, State Project Officer, ASDMA.



Few complex scenarios were developed keeping in mind the vulnerability profile of the Guwahati City and were unfolded before the participants. They were asked to discuss and work out in their respective groups how to respond to the scenarios. The exercise was designed to help all the participants to work in a coordinated way to respond to the situation.

The participants of each track came forward with their own response mechanisms which were facilitated by the feedback of the facultieslt was an attempt to reveal the strengths and gaps in inter-agency communication and discrepancies and overlaps in response planning among the various stake holders.

The exercise brought together response agencies viz. Fire, Police, NDRF and EMS, along with heads of hospitals, doctors, nurses and non-governmental organizations to a single platform providing an opportunity for all of the stake holders to work together for responding to a city disaster.

The brainstorming facilitated on the simulated scenarios of emergencies different helped the agencies understand their roles and responsibilities. Thus the brainstorming at Table-Top exercise led to the groundwork for the drill simulated on the last day, i.e. November 3, 2012at the Playground, Assam Engineering Institute, Chandmari.





The Field Drill

The most important part of the exercise, the Field Drill was conducted on November 3, 2012 at the Assam Engineering Institute Playground situated at one of the city's centre point. The objective of this drill was to find out the gaps in their preparedness. planning and response activities and finally to identify the areas of improvement.

The drill was facilitated bv **ASDMA** in collaboration with the technical support from NDMA, DDMA, UNICEF and the chief facilitators of the New York City Fire Department and the Cornell-Columbia University. The drill was carried out with the participation from all the trainees of the ToTs of GEMEx. About 1500 people participated in the drill with a good number (i.e 60nos.) of school children aged between 13 to 18 years from 19 schools. The children were trained for the drill by UNICEF and AIDMI.



Hon'ble Minister, Revenue & DM at the Mock Drill in GEMEx

The field drill started with the simulation of a massive earthquake. The strong earthquake led to the collapse of a school (St. Angel High School) and an apartment (Heritage Complex). Simultaneously there was a terrorist attack in the Assam Secretariat and fire in the Assam Petrochemical Limited. The four mock disaster sites at the same point of time stood as a challenge for the emergency responders as well as the district administration. The disasters affected a large population and the number of victims stood at 200.

Shri Dhrubajyoti Das, ADC, Kamrup Metro was the Incident Commander at the site and alerted the response agencies viz. Police, Fire, NDRF and EMS to respond to the events. In response to that, the City Police was the first to reach the 1st disaster site – the Collapsed School building and taking control of the situation by cordoning off the same. Fire Tenders were rushed in to the site - Assam Petrochemical Limited where Fire broke out. NDRF was called in to perform the search and rescue tasks





Scenes from the Mock Drill in GEMEX



The Field Drill ...contd









A triage area was set up at the site of the "disaster" and all injured ones were triaged by doctors and paramedics trained during the ToTs tracks. Every single victim triaged was monitored by evaluators trained at GEMEx. The colour coded injured victims yellow, black) (red. green, transported by Ambulance Service to the identified Hospitals (GMCH, already GNRC, MCM, Downtown Hospital, Army Hospital and International Hospital), with realistic time delays built into the simulation.

At each hospital, the hospital emergency plans were activated and doctors, nurses, stretchers, pharmacies, and equipment were mobilized to accommodate the additional flow. Doctors trained at GEMEx activated the casualty wards applying their trauma care skills for handling this mass casualty incident. The entire drill was monitored by the local evaluators, in addition to the faculty, and the entire drill was video recorded.



Hotwash - The lessons learnt workshop









The entire exercise involved in GEMEx concluded with the conduct of Hotwash, the lesson learnt workshop on November 4, 2012 at the Rabindra Bhawan, Guwahati. All the participants from the 15 tracks of ToTs participated in the concluding lesson learnt workshop to make an appraisal of what went right and what went wrong. The hot-wash facilitated an environment to review their performance in the simulation exercise and to identify the gaps in the strengths and capabilities of emergency response.

The workshop was facilitated by Dario Gonzalez, Fire Department, City of New York/Long Island Jewish North Shore Hospital Center, Dr. Jo Anne Bennett, New York City Department of Health and Nandita Hazarika, State Project Officer, ASDMA.



LESSONS LEARNT IN GEMEX-2012



- Regular trainings for the Emergency Service Providers viz. Fire and Emergency Service personnel, Civil Defence and Home Guards, Police, Doctors, Paramedics and Nursing staff, Civil society Volunteers and personnel from Administration focussing on response planning, resource mobilisation and deployment strategy.
- 2 Requirements in Hospital Preparedness and Mass Casualty Management
 - a. Advance training on Emergency Medical Services
 - b. Effective drills at hospitals
 - c. Role of Nurses to be made specific in emergencies
 - d. Sensitization on how to handle children in emergencies is required in hospital
 - e. Need of effective Hospital preparedness and coordination in certain hospital locations
 - f. Hospital DM planning, activation and awareness needs attention
- 3. Need for DM Institutional strengthening at Local level Urban Body in the district
- 4. Development of Emergency Response Unit with Human Resources and Technical Know how
- 5 SOPs for Key Line Departments to be developed or revised
- 6 Emergency Operation Centres and its staff should be trained on their role
- 7 SDRF should conduct mock drills for schools, hospitals etc.
- 8 Mapping of resources is necessary (inventory Human and equipment both)
- More clarity on roles and responsibilities for all agencies concerned with emergency response



LESSONS LEARNT IN GEMEX-2012 ... contd

- Develop and maintain arrangements for accessing resources, equipment, supplies for response
- Rehearse procedures of emergency response that were not carried out or which did not work in the simulation drill
 - a. Using the Incident Response System to coordinate emergency activities
 - b. Mobilising emergency response personnel and equipment,
 - c. Coordinating and disseminating information to the media and public, and
 - d. Tracking and compiling inquiries from the public
- 12. Focus on agency-specific mini-drills and hot washes
- 13. To keep a heed to safety precautions during the search and rescue in an emergency as use of mechanical cutting tolls (such as electric chainsaws) endanger the safety of victims and could led to serious injuries
- 14. Emergency Service Delivery can be calibrated through proper planning and regular drills
- 15. All stakeholders are required to plan and test their plan of action to specific events on Interagency Coordination and Response.
- 16. Mass awareness on disaster management among the community is essential





NEWSCLIPS ON GEMEx 2012



'জেমেক্স-২০১২' মুকলি দুর্যোগ প্রশমন মন্ত্রী পৃথিৱী মাবিৰ





১ নবেশ্বৰ, বৃহস্পতিবাৰ, ২০১২ জ্বিলা খবৰ ৭



দুৰ্যোগৰ সময়ত কি কৰিব লাগিব গুৱাহাটীত 'মক ড্ৰিল'ৰ প্ৰদৰ্শন











प्रवाहति द्रम्यवान ३३ वार्ति ३५०० लन्, त स्टब्स्न २०३२ छ।



দৰঙত দুদিনীয়াকৈ ৰাষ্ট্ৰীয় দুৰ্যোগ প্ৰশমন দিৱস পালন



প্রশিক্ষণ কার্যসচী

ুজিমেক্স ২০১২' উদ্বোধন

'জিমেক্স ২০১২'ৰ ম'ক ড্ৰিল অনুষ্ঠান সম্পন্ন

১० कर्ता थेवि s ग्रहरूर, (मध्यार, २०১१

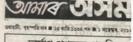


আজিৰ দৈনিব বাতৰি









দুৰ্যোগ প্ৰশমনৰ প্ৰস্তুতি

'জিমেক্স ২০১২'ৰ ম'ক ড্ৰিল অনুষ্ঠান সম্পন্ন





NEWSCLIPS ON GEMEx 2012 ...contd



Mock drill to test govt dept, NGO efficiency

GEMEx 2012 Inaugurated

Lessons on disaster management



Guwahati prepares

to face disasters



SNAPSHOTS OF GEMEx 2012















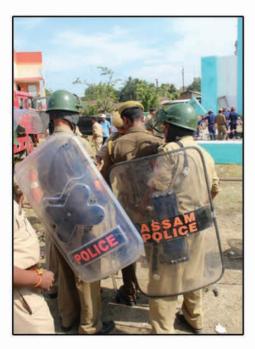


SNAPSHOTS OF GEMEX 2012 ... CONTD

















SNAPSHOTS OF GEMEX 2012 ... CONTD























SNAPSHOTS OF GEMEX 2012 ... CONTD























Annexure – 1: List of Resource Person against each tracks of TOTs

SI. No.	Name of Track	Technical	Support
		Organization/ Institute	Resource Persons
ToTs			
1	Basic & Advanced Disaster Life Support	Indian Institute of Emergency Medical Sciences(IIEMS)	1. Dr.A.Dhavapalani 2. Dr. Pratheep R 3. Dr. K. Karthikeyan 4. Dr. Ponmurugan 5. Mr.Srimon A K 6. Mr. Vyshak P M
2	Chemical and Industrial Disaster Preparedness	National Civil Defence College, Nagpur	7. Mr. Sudeep M. 1. Shri. G.S.Saini 2. R. S Chaudhari 3. Shri A. S. Kadam 4. Shri R.S. Gupta 5. Shri Nilesh Vaidya 6. SG. Atkare
3	Community Based Relief and Public Health	1.Tata Institute of Social Science, Mumbai 2.People in Centre 3.Foundation For Social	Mahesh Kamble Mr. Vivek Raval Mr. Rushank Mehta Mr. Tej Malladi Enakshi Dutta
		Transformation – enabling northeast india 4.Public Health Foundation of India	6. Dr. V. K. Singh 7. Ms. Kavita Narayan 8. Ms. Natasha D' Lima 9. Ms. Rakhi Dhawan
4	Comprehensive Trauma Life Support (Nurses & Doctors)	AIIMS	1.Dr. Amit Gupta 2. Dr. Kapil Dev Soni
5	Coordination of Response for Senior Govt. Representative	1.Natinal Civil Defence College 2.Office of the Coordination and Humanitarian Affairs, Regional Office, Bangkok	1.Mr. G. S. Saini 2. Rajan Gengaje
		3.LBSNAA	3.Dr. Indrajit Pal
		4.Oxfam	4.Mr. Zubin Zaman



6	Emergency Medical Services	1.Life Supporters Institute of Health Sciences	Dr. Ajay Desai Dr. Ganesh Auti
		2.Fire Department, City of New York/Long Island	Dr.Dario Gonazalez Arthur Lester
		Jewish North Shore Hospital Center	5. Rafael Goyenecha
		3.New York Presbyterian Hospital/The University Hospital of Cornell and Columbia	6. Pamela Lai
7	Emergency Nursing Care	1.AIIMS	Binu Babu Shallu Chauhan Anu Susan Mathew Shiny Thomas
		2.New York Presbyterian Hospital/The University Hospital of Cornell and Columbia	Richard Garfield Raymond Cordi
		3.New York City Department of Health & Mental Hygiene	7. Josephine Bennett
8	Engineers on Earthquake Safety	1.Indian Institute of Technology, Madras	1.Mr. C.V.R.Murty 2.Mr. Rupen Goswami 3.Mr. Arun Menon
		2.Indian Institute of Technology, Madras	4.Mr. Kaustabh Dasgupt 5.Mr. Hemant B. Kaushil
Service de la constante de la	Higher Education Preparedness	1.AIDIMI	1.Mr. Sanchit Oza 2.Mr.Vishal Phatak
	×2	2.S.P.University	3. Ms. Sadhna Adhikary
10	Hospital Emergency Management	1.Indian Armed Force	1.Lt. Col (Dr.) Sameer Mehrotra
		2.New York-Presbyterian Hospital, The University Hospital for Columbia and Cornell	2. Dr. Robert Bristow
		3.Peerless Hospital	3. Dr.Anees Banerjee
		4.NDMA	4. Dr. Muzaffar Ahmad
		5.New York City Department of Health &	5. Jo Anne Bennett 6. Susan Miller

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		Mental Hygiene	7.Josephine Bennet
		6.AIIMS	8.Dr. Sanjeev Bhoi
		7.Max New York Hospital	9.Dr. Tamorish Kole
		8.Life Supporters Institute	10.Dr. Paresh Navalkar
		of Health Sciences	
11	Incident Response System	1.SAARC Disaster	1.Mr. M. Bhaskar Rao
		Management Centre	
		2.LBSNAA	2.Dr. Indrajit Pal
12	Multi- sectorial Need	1.Oxfam	1.Mr. Zubin Zaman
	Assessment in Emergencies	2.Odisha State Disaster	2.Dr. K. L. Mishra
		Management Authority	
		3.LBSNAA	3.Dr. Indrajit Pal
		4.UNICEF, Nepal	4.Laura Bill
13	School Disaster	All India Disaster Mitigation	1.Mr. Sanchit Oza
	Preparedness	Institute	2.Ms. Sonali Das
14	Search and Rescue	1.National Disaster	1.Mr. Sivaji Singh
		Response Force (NDRF)	2.Marut pandey
			3.Manohar Singh
			4. Mr. Alok Kumar Singl
		2.United States National	5. Christopher Bennett
		Guard	
15	Minimum Initial Service	1.UNFPA	1.Sachi Grover
	Package in Reproductive	2.Health Deptt., Govt. of	2.Dr. Sripat Kamat
	Health in Crisis situations	Goa	
	(NF)	3.Health Deptt., Govt. of	3. Dr. V. Jitesh
		Kerala	
		4.Health Deptt., Govt. of	4. Dr. Ramji Adkekar
		Maharashtra	W
Table Top	Exercise	UNICEF	Mr. Sarabjit Singh
		ASDMA	Nandita Hazarika
		Fire Department City of	Dario Gonzalez
		New York / Office of	
		Emergency Management	
		City of New York	
Field Drill		NDMA	Dr. Mujaffar Ahmed
			Mrs. Naghma Firdaus
		ASDMA	Mrs. Nandita Hazarika
		UNICEF	
Hot Wash & Valedictory		NDMA	
		ASDMA	

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Annexure – 2: Number of participants against each track of ToTs

SI. No.	Name of Track	Type of Participants	No. of Participants
1	Basic & Advanced Disaster Life Support	Doctors	36
2	Chemical and Industrial Disaster Preparedness	Officials of Oil sectors, Hospitality Industry, Other Chemical Industries	50
3	Community Based Relief and Public Health	NGO, PHE Engineers, Doctors	84
4	Comprehensive Trauma Life Support (Nurses & Doctors)	Paramedics from Govt./Private Hospitals	35
5	Coordination of Response for Senior Govt. Representative	Govt. Officials	48
6	Emergency Medical Services	Doctors/ Officials engaged in Hospital Management	68
7	Emergency Nursing Care	Nurses/ Nursing Attendent	35
8	Engineers on Earthquake Safety	Engineers	64
9	Higher Education Preparedness	College Teachers	47
10	Hospital Emergency Management	Doctors/ Officials engaged in Hospital Management	50
11	Incident Response System	Officials from fire service/Police /PWD/ GVK Emri/	55
12	Multi- sectorial Need Assessment in Emergencies	Govt. Officials	53
13	School Disaster Preparedness	Students/Teachers	217
14	Search and Rescue	Officials from Police/ Fire/Civil Defence/NDRF/	124
15	Minimum Initial Service Package in Reproductive Health in Crisis situations (NF)	Officials from Departments	47
	Total	6	1013







ADDRESS: Office of Assam State DIsaster Management Authority Ancillary Block, Opp SBI Assam Secretariat Branch, Assam Secretariat, Dispur Guwahati-6, Assam

> Phone: 0361-2237221 Fax: 0361-2237010 Email: asdmaghy@gmail.com Website: www.asdma.gov.in