

Date of Document Completion: 26th June, 2011

Leicester City Council &
Leicestershire County Council
Zombie Incident Survival Plan

Proposal to make
Leicester the first ‘Zombie
Ready’ city in the World.

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June 26th, 2011
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‘Zombie Incident’ Survival Plan

Contents Page:

Page 1:	Title Page
Page 2:	Contents Page
Page 3:	Purpose of this Document
Page 4:	Case Studies supporting the Publication of this Document.
Page 5:	Responses required to a ‘Zombie Incident’
Page 6:	Area of Difference to ‘Major Incident’ – Location & Transportation
Page 7:	Area of Difference to ‘Major Incident’ – Treatment of Individuals
Page 8:	Further Actions to be taken upon confirmation of Zombie Presence.
Page 9:	Grab Bags A & Z
Page 10:	Take Home Message for the General Public
Page 11:	Document Definitions
Page 12:	References and Links

Purpose of this Document

This document is designed to have 3 purposes:

- 1) To enable the Councils and Emergency Services to respond efficiently to a Major Incident involving ‘Zombies.’
- 2) To increase the number of visitors to the Councils Emergency Planning website and therefore making readers of the document more likely to understand actions to be taken in case of a more likely Emergency (than the Zombie Apocalypse)
- 3) For the city of Leicester to become the first in the world to adopt this policy and therefore become, ‘Zombie Ready’

This document takes into account the very unlikely event that a Zombie ‘Incident’ should occur within Leicester or Leicestershire. It also takes into account the current financial climate within the county and country as a whole and suggests actions to be taken when, and only when, a medically confirmed case of a ‘Zombie’ walking the streets of the county, is medically confirmed.

This document also takes into account the planning and emergency services, policies and procedures and support network already in place at such sites as the Local Resilience Forum (Link in the References section) and the Leicester City Councils Emergency Planning Page (Link in the References section). This document highlights some of the differences between a standard and a possibly expected ‘Major Incident’ and a ‘Zombie Incident.’

Therefore, in summary, this document is to be referred to in the event of a confirmed ‘Zombie Incident’ and covers some of the relevant actions to be taken. This is to ensure that no manpower currently allocated to other tasks and duties of the City and County Council and Emergency Services is used to prepare for any form of Zombie ‘Incident’ unless absolutely necessary.

Case Studies supporting the Publication of this Document.

Case Study 1: Leicester City Council

When Leicester City Council received a Freedom of Information request on June 8th, 2011 regarding their plans for coping with a ‘Zombie Incident’ and the story was posted on the BBC website, it received more than one million hits within one week and was shared more than 60,000 times. (Link in the References section)

If useful and perhaps more relevant advice is digested by people looking for the Zombie Incident Procedures for the council, then by looking into adopting this document, a potential and very real side effect would be preparing the people of this city and county for a more likely incident than that of a Zombie Apocalypse.

Case Study 2: The Centers for Disease Control

The Centers for Disease Control (CDC), an American federal agency, has posted (May 2011) guidance telling people what to do in the event of a ‘Zombie Incident.’ A blog-post by the organisation said U.S. citizens should prepare an emergency kit and then look for a refugee camp. The Zombie Apocalypse campaign has a serious side, as it familiarises Americans with disaster preparedness techniques for the hurricane season. The blog post drove so much traffic that it crashed the website. (Link in the References section) If this is a tactic to enhance awareness taken by the US government department, which had in 2008 an annual spend of over \$9 billion, perhaps it is time we looked at spreading information in a similar way.

Responses required to a ‘Zombie Incident’

Emergency responses to a ‘Zombie Incident’ should be the same as those to any other affecting the city, as already planned for by the city council and details of a significant amount of relevant information can be found on the Local Resilience Forum (Link in the References section)

The preparation and organisation of this document is in depth and in its own right could save lives and help the city, its populace and its environs survive the occurrence of a ‘Zombie Incident’

The emergency planning in place may indeed serve to escalate any ‘Zombie Incident’ if the following factors are not taken into account at such a time that ‘Zombies’ are proven to be the cause of the problem.

PLEASE NOTE: It is vital that this information is ready to be disseminated to people within all levels, a communication breakdown and a lack of properly prepared first response, could lead a ‘Zombie Incident – Minor Level’ to escalate simply through human error.

The Differences between a ‘Major Incident’ and a ‘Zombie Incident’

Area of Difference to ‘Major Incident’ – Location

In most ‘Major Incidents’ the location of them can be identified and is fixed for the duration, for example ‘Chemical Spillage’ or ‘Fire.’

In some ‘Major Incidents’ the location of potential problems can be estimated, such as ‘Flood Incidents’ following waterways and know flood plains.

In ‘Zombie Incidents’ the location of the incident can move and expand as fast as a zombie can shamble, or even faster if an infected individual is leaving the area of infection.

Solutions – Containment

It is important to quickly contain the area of the ‘Zombie Incident’

Once contained, all people working or living within that area must be accounted for as early as possible. This is to give the ‘Zombie Incident Response Organisations’ an idea of potential numbers of Zombies, Survivors or potentially infected individuals.

Once contained, anyone leaving the area within 24 hours of the ‘Zombie Incident’ must be accounted for as early as possible. This is to give the ‘Zombie Incident Response Organisations’ an idea of potential numbers, and locations of potential secondary outbreaks and to alert local ‘Zombie Incident Response Organisations’ of the potential threat.

Solutions – Infection Prevention and Control

As early as possible, 2 decontamination/quarantine areas should be established.

The first is within the area of the ‘Zombie Incident’ and this is for the identification of anyone found within the area, their examination, the treatment of wounds and injuries, victim support counselling and the secure isolation of potentially infected individuals.

The second area is located on the perimeter of the area of the ‘Zombie Incident’ and this is for the decontamination and subsequent examination of all members of the ‘Zombie Incident Response Organisations’ prior to allowing them to leave the incident area.

Area of Difference to ‘Major Incident’ – Transportation

In the instance of most ‘Major Incidents’ people leaving the area would be expected and possibly encouraged, but in the occurrence of ‘Zombie Incident’ another reaction to proven ‘Zombie’ infection should be the pre-emptive closure of Transportation options for all except the ‘Zombie Incident Response Organisations.’ This is to prevent a potential spread of the infection further than the boundaries of the city or county.

Solution - Examination Stations and Personnel Presence.

Examination Stations and a ‘Zombie Incident Response Organisations’ presence should be set up to interview all individuals trying to leave the city on major arterial routes, motorway junctions, airport/aerodromes, waterways and train stations. This will have a detrimental effect on travel, transportation and the local economy in the short term, but not as detrimental as having a city or county rife with Zombies.

Area of Difference to ‘Major Incident’ – Treatment of Individuals

Area of Difference to ‘Major Incident’ – Treatment of Survivors

Survivors of a ‘Zombie Incident’ should still be considered potential sources of another outbreak and should therefore be treated with respect and quarantined for examination until such a time as the individual is cleared of any potential to pass on the infection, due to the fact they have not been infected, or until such a time as they become a zombie.

Solution: Secure Quarantine areas

All quarantine areas should be secure for patients going into them, but the staff to be aware of the possibility of zombies coming out of them.

Area of Difference to ‘Major Incident’ – Treatment of the Potentially Infected.

The potentially infected are all possible sources of another outbreak and should therefore be treated with respect and quarantined for examination until such a time as the individual is cleared of any potential to pass on the infection, due to the fact they have not been infected, or until such a time as they become a zombie.

Solution: Secure Quarantine areas

All quarantine areas should be secure for patients going into them, but the staff to be aware of the possibility of zombies coming out of them.

Area of Difference to ‘Major Incident’ – Treatment of the Recently Deceased.

The recently deceased are all possible sources of another outbreak and should therefore be treated with respect and quarantined for examination until burial arrangements are made or until such a time as they become a zombie.

Solution: Secure Quarantine areas

All quarantine areas should be secure for patients going into them, but the staff to be aware of the possibility of zombies coming out of them.

Area of Difference to ‘Major Incident’ – Treatment of Zombies

This is a decision to be made by someone with more authority than simply a civilian advisor and policies and procedures affecting the treatment of ‘Zombies’ is to be decided upon examination of the incident by the Senior Members of the ‘Zombie Incident Response Organisations.’

Solution: Zombie Quarantine areas

Zombie quarantine areas should be secure, isolated and located away from centres of population.

Further Actions to be taken upon confirmation of Zombie Presence.

Committee to be formed:

Membership of the Committee

Members of the locally based ‘Zombie Incident Response Organisations’
Members of the national ‘Zombie Incident Response Organisations’
Members of the local City Council
Members of the local County Council
Plus Civilian Advisors

Purpose of the Committee

To implement the recommendations of this document in as timely a manner as possible, upon the occurrence of a ‘Zombie Incident.’

Information to be disseminated to the ‘Zombie Incident Response Organisations’

As to be determined by the Organisations themselves.

Information to be disseminated to members of the public.

Go Indoors: Lock doors and windows, unless there is an obvious threat to property.

Stay Indoors: In the time of a ‘Zombie Incident’ DO NOT go for a trip to the shops for a Cornetto or any other form of supplies.

Tune In: Listen to your Emergency broadcasting stations for more information.

The General Public should be made aware of the following in the event of a ‘Zombie Incident’

DO NOT open your front door to anyone who appears injured, as they may be infected.

DO NOT open your front door to anyone who groans and claws at the glass.

DO NOT open your front door to anyone who appears to want to eat you.

DO NOT open your front door to anyone who does not talk and growls the word ‘brains’

DO NOT open your front door to anyone unless they are bearing the correct Identification

AND they are not showing any of the signs or symptoms as listed above.

If you should find yourself outside, then seek shelter immediately, avoiding any suspicious characters and if possible return to your home, if this is not possible then find your nearest ‘Zombie Incident Response Organisations’ representative and follow their instructions.

If a member of the public should find themselves facing a ‘Zombie’ or ‘Zombies’ they should not be encouraged to engage in any form of physical contact with them.

LEAVE THE AREA IMMEDIATELY

FIND A ‘ZOMBIE’ FREE LOCATION

INFORM the ‘Zombie Incident Response Organisations’

If physical contact is unavoidable then try to push the ‘Zombie’ away by bracing yourself against a wall or pushing them in the centre of the chest with your foot or by using a long stick (See Grab Bag Z). This should give you the enough distance to leave the area.

NEVER ATTEMPT TO FIGHT A ZOMBIE.

By striking a zombie you run the risk of breaking your skin and becoming infected.

Remember the ‘Zombie Engagement Formula’

ZOMBIE Vs. Hero = 2 x ZOMBIES

Grab Bags A & Z

During the time prior to, if warning is given, or during any ‘Zombie Incident’ every citizen should be encouraged to prepare to grab bags, in case of evacuation from the locale of a ‘Zombie Incident.’

Much of the preparation has already been done by the Local Resilience Forum, however, in the case of a ‘Zombie Incident’ I would suggest 2 x Grab Bags are prepared, the first Grab Bag A, is virtually identical to the one suggested on the Local Resilience Forum, most of the contents are self explanatory the second is Grab Bag Z and should be used if the ‘Major Incident’ turns out to be a ‘Zombie Incident’ and you are forced to leave your house during a ‘Zombie Incident.’

Grab Bag A

Copy of important documents in a waterproof bag (insurance, passport, birth certificate, copies of family photos, etc)

Torch & radio (wind-up or battery) and spare batteries

First aid kit & medication / health supplies and copies of prescription slips

Toiletries and feminine hygiene supplies

Childcare supplies (nappies, food, toys, clothes, blanket, etc)

Extra set of house and car keys

Mobile phone & charger

Wallet, purse, bank cards

Notebook and pencil

Black bag / bin liner

Bottled water

Snack bars

Spare glasses

Grab Bag Z

Walking Boots (already broken in)

Pants and socks

Waterproof clothing

Any one of the published ‘Zombie Survival Guides’

Large stick, cricket bat, hockey stick, umbrella

Gardening gloves

Thick layers of clothing or motorcycle wear

Canned food

Can opener

Water Purification Tablets

Local Map/Road Atlas

Swiss Army Knife or Multi Tool

Bedroll or Sleeping Bag (Non Bulky)

Plastic Bags

- Comfort and durability

- Comfort and Hygiene

- Staying Dry

- Reading or kindling

- To push away zombies

- To push away zombies

- Bite proof clothing

- In case of hunger

- For canned food

- To purify water

- Head for safer areas

- Many eventualities

- Sleeping when necessary

- Keeping equipment dry

Take Home Message for the General Public

Secure your location, lock your doors, windows, garden sheds, etc

Locate **Y**our Family, Friends or People you live, inform them of the ‘Zombie Incident’

Stay at Home, unless you are informed otherwise

Tune In, to emergency broadcast radio stations for information and instructions

Organise your grab bags and your supplies, be ready to move

No Heroics, stay safe and avoid contact with the Zombies

S.Y.S.T.O.N.

Document Definitions:

Zombie [zom-bee] –noun

Zombies are typically understood to be humans, who have been infected with some agent, chemical or biological, for which there is no known cure/vaccine and which has at an undisclosed and yet to be identified rate causes the victim to expire and then re-animate to further spread the infection. The agent is spread by contact with bodily fluids, (normally assumed to be biting and scratching), and can be spread to a new individual by contact of an open wound or bodily orifice and it causes the creature (or Zombie) to behave in an abnormal way, usually highly aggressive, with little desire to do much besides biting/feeding from uninfected individuals.

‘Zombie Incident’ – Minor Level

An occurrence/outbreak of Zombies, that can be, and are, contained within an area covering a single city or residential block. Normally assumed to be less than 25 infected creatures.

‘Zombie Incident’ – Intermediate Level

An occurrence/outbreak of Zombies, that can be, and is, contained within an area covering a upto 10 city or residential blocks. Normally assumed to be less than 500 infected creatures.

‘Zombie Incident’ – Major Level

An occurrence/outbreak of Zombies, that cannot be contained in an area less than the entire city itself. I.E. An area too large to be quarantined by local services acting without outside support.

‘Zombie Incident Response Organisations’

This covers all services that would respond to any ‘Major Incident’ or ‘Emergency’ alongside a Military service, required to potentially maintain quarantine areas during a ‘Zombie Incident.’ The phrase ‘Zombie Incident Response Organisations’ also covers council and local government employees or contractors not covered by the term emergency services, but would include many varied roles to be utilised especially after the lifting of any quarantined areas. The policies and procedures for such organisations will of course cover training, equipment and specialist knowledge and therefore this document takes into account the professional preparedness of these organisations.

‘Potentially Infected’

This term of phrase is used to describe people who have been exposed to ‘Zombies,’ during a ‘Zombie Incident.’ There is a possibility they may have been infected with the agent causing the ‘Zombies’ to occur.

They may exhibit no external signs of having been exposed to the ‘Zombies’ or they may be covered from head to toe in blood, and covered in bite and scratch marks. In either case treat them with respect and isolate at the earliest possible opportunity.

References & Links

Local Resilience Forum

<http://www.localresilienceforum.org.uk/>

Leicester City Councils Emergency Planning Page

<http://www.leicester.gov.uk/your-council-services/emergency-planning/>

Freedom of Information Request made to Leicester City Council

<http://www.bbc.co.uk/news/uk-england-leicestershire-13713798>

The CDCs Zombie Apocalypse page

http://emergency.cdc.gov/socialmedia/zombies_blog.asp

Who is ‘Zombie Ed’ Thurlow?

http://www.terror4fun.com/zombie_whoiszombieed.html