

Lillian Poulin, Area Deputy Commissioner of the Guides, alerted Guide leaders around Mississauga on Sunday morning, 11 November. She told them to go to the Centre nearest their area, where they helped with Registration and Inquiry, child care and food service.

Other groups helping with the general operation of the Centres were local service clubs, particularly the Kinsmen, Lions Club and Rotary; Sea, Air and Army Cadets from some of the Corps in Mississauga and surrounding communities; and local churches and church groups. Their involvement depended on their own initiative. If they volunteered in person at the Centres, they were involved; if they phoned in an offer of help, they were not used. Generally, the groups from the evacuated area itself were not involved.

The Service Clubs brought in food, offered their homes to evacuees, and helped out at the Centres. The Kinsmen were particularly involved and well organized. By chance, the Deputy Governor of all the Clubs in and around Mississauga, Bill Pycock, had a business meeting of Club Presidents in his Zone on Sunday morning in his Meadowvale home. When they realized the extent of the emergency, they alerted their members and were able to muster a large number of volunteers, with Pycock acting as coordinator of their operations.

#### 4.3.8. Peel Region Social Services

Commissioner of Peel Regional Social Services, Jim Crozier, who found out about the accident on the radio early Sunday morning, called his senior staff to the Sheridan Villa Home for the Aged (Social Services are responsible for the Homes for the Aged) later Sunday morning, and set up a Command Post. When Sheridan Villa was later evacuated.

their Command Post was moved to the old regional office at 150 Central Parkway Drive in Brampton. From the Command Post, the Commissioner and senior staff assisting him could coordinate the responsibilities of the Social Services and maintain contact with the site and the Centres. They did not have a staff person at the site, and this turned out to be a problem in getting the necessary information to carry out their responsibilities as capably as possible.

In general, Crozier regarded Social Services as a back up agency in this emergency, providing assistance wherever it was needed, not as the lead agency co-ordinating the provision of community needs. Crozier assigned a resource person from his senior staff to each of the major Centres. This person acted as a liaison between the Centre and Social Services to help provide whatever needs the Centre was unable to fill elsewhere. The Commissioner arranged for local pharmacists to supply medication to those who required it, and bill Social Services for the costs. The resource person could provide funds for purchasing supplies when necessary, such as toothbrushes and soap, and also gave funds to families who had run out of money and had come to a Centre from hotels. Social Services also helped to find supplies needed at the Centres, for example, tracking down blankets from the Army. There were four day-care centres closed during the emergency, but most of their staff did not report to the Social Services office. They could have been used to help with young children at the Evacuation Centres.

In Halton, Rennie Vivian, administrator of Social and Family Services, arranged for catering of meals to the M.M. Robinson Secondary School and provided staff to assist in operating the Centre, both of which were the responsibility of this agency.

#### 4.3.9. Individual Volunteers

The final component in the organization and operation of the Centres was the use of individual volunteers from the local community and the evacuees, themselves. Many individuals brought in food, such as homemade muffins and cookies, and many came forward to volunteer their homes to evacuees or their time to work in the Centres. Many evacuees volunteered to help or were asked by the organizers. This was good for the spirits and morale of the evacuees because it gave them something to do besides sit around waiting to hear when they could go home. It worked best in Centres with clearly defined co-ordination and with numbers small enough for a sense of community and identity.

The importance of individual volunteer effort is perhaps best illustrated by the case of the Vic Johnston Arena and Recreation Centre in Streetsville. Although the Red Cross had a person there, the Centre was basically organised and run by four women from the local Minor Hockey Association's Women's Auxiliary, who were experienced in running functions at the arena. One ran the kitchen and food service; one manned the phones; one, a nurse, looked after health care; and the fourth organised the other operations of the Centre. They used their contacts in the community very effectively to get food and other necessary supplies, and recruited volunteer assistance from the community and the evacuees themselves. Except for a nursery upstairs, everyone was in one large room, but numbers were small (about 100 at the peak) and a real sense of "family" developed. Evacuees were very grateful for the care they received.

#### 4.3.10. Consolidating the Centres

The numbers of people in the Centres declined after the Sunday night peak. Some evacuees found places to stay with friends or relatives. Others took the offer of billets in homes in the local community. On Tuesday, many were able to return to their homes. As the numbers in the Centres declined below a certain level, it was decided to consolidate the evacuees into the larger Centres (Table 4.1). This also took some strain off the volunteer effort which began to wane over time as people felt increasing pressure to return to work or were tired out by their efforts.

The first reduction occurred on Sunday night, when evacuees at W.J. Fenton Vocational School in Brampton were moved next door to J.A. Turner Secondary School. The Red Cross and school administrators had set up a very effective billeting system in both these schools which was able to place hundreds of evacuees in private homes as soon as they arrived. This allowed them to comfortably put the remaining evacuees all in the one school. It is interesting to note that this was the only case in the emergency when billeting worked well. At other Centres, there were many offers of homes, but few people were willing to accept them. The only obvious difference at Fenton and Turner was that people were placed right away before they "settled" in the Evacuation Centre. The Red Cross estimated that 1600 people were billeted and 950 homes were offered.

On Monday morning, the people placed in Dolphin Senior Public School in Streetsville were returned to Streetsville Secondary School. Dolphin was opened under the efforts of the local municipal councillor without consultation with the Board of Education or the school principal, who was surprised to arrive at work on Monday to find 40 evacuees in

his school. The Board would have refused the use of the school because its desks and chairs are too small to accommodate adults comfortably.

At various times on Tuesday, 13 November, the remaining evacuees at Turner, Westwood and Morningstar Secondary Schools and at the Vic Johnston Arena, were taken to Streetsville Secondary School because of reduced numbers. Attempts had been made to keep some of the schools open on the Monday, but this had been difficult for school staff to handle, and added to the impetus to reduce the number of Centres. Streetsville Secondary School remained closed for classes until evacuees were gone, as did the two Sheridan College campuses. Brampton Centennial School was open for classes from Tuesday on and was able to cope with both activities at once. In the case of the 101 Legion Hall in Etobicoke and M.M. Robinson Secondary School in Burlington, the evacuees they sheltered were all from the areas reopened on Tuesday, and they closed by Wednesday morning.

By Wednesday, there were only 5 major Centres still operating: the two Sheridan College campuses, the International Centre, Streetsville Secondary School, and Brampton Centennial Secondary School. Mayor McCallion decided that "her people" should be moved to hotels for that night, so Tom Huntley and representatives from CP Rail, Mississauga Public Relations and Mississauga Transit, worked out a plan to move the evacuees to hotels in and around Toronto, with CP Rail picking up the bill.

On Wednesday afternoon, the evacuees in the 5 remaining Centres were re-registered and the names sent to CP Rail, who allocated people to available hotels. On Wednesday evening, 14 November, buses were sent to the Centres to pick up the

evacuees. They were not told where they were going, and they were not allowed to take their cars because of a concern that only registered evacuees have access to hotel accommodation. Those wishing to have their cars were able to return on the bus and pick them up after checking into the hotel. This arrangement irritated many of the evacuees, particularly because they had already registered their names, so that, presumably unregistered people could not get into hotels anyway. Some thought they were going to the International Centre about which they had heard negative reports. The situation was further complicated when someone told the news media of the hotel accommodation plan, and it was broadcast to the public late Wednesday afternoon. People in billets and paying for hotels gave up their accommodation and rushed to the Centres (primarily to the International Centre) to get free hotel accommodation. In most cases, they were refused.

It became necessary to keep the International Centre open for these people, and others who had to give up their existing accommodation due to lack of funds or some other reason. About 100 people remained at the International Centre until it closed on Friday evening with the reopening of the last evacuated area.

Estimates of the number of people taken to hotels were from 800 - 1000. Red Cross volunteers accompanied evacuees to hotels to assure that their needs were met. On Friday night, 25 - 35 handicapped and elderly people at the International Centre were taken to the Travelodge Hotel, so that they could be comfortably returned to their homes on Saturday, with Red Cross assistance.

#### 4.3.11. The Centres: Some Case Studies

The overall operation of each Evacuation Centre was done with varying degrees of success. Three important factors determining this were the adequacy of existing facilities in the Centres, the degree of organisation and effective overall co-ordination of the Centre, and the number of evacuees sheltered relative to the availability of facilities and quality of organisation. Other factors such as adequacy of food, other supplies and manpower are important, but were generally not a problem in this emergency. The three factors can be clearly illustrated by looking at the operations of specific Evacuation Centres.

The International Centre, which sheltered the largest number of evacuees for the longest time, was, ironically, the poorest of the facilities used. Although the Peel Police had it on its list of possible Evacuation Centres, the Social Services' list of centres, which favours schools and recreation centres, specifically recommended against using the International Centre because its existing facilities are poor for this use.

It basically consists of two large rooms. The one that was used in this emergency has a cement floor which was very cold to sleep on, particularly as food and other supplies were constantly coming into the building. The large service doors, which open into the room, were frequently open, letting in cold air. Washroom facilities were inadequate for the number of people at the Centre for the first three days, and there were no showers. There were no separate rooms for eating and sleeping, medical care, a nursery, a quiet room for those needing privacy, or a recreation room for children. Everything had to be done in the one room, with the echoing P.A. system making constant announcements in the background.

There were no gym mats or other materials that people could sleep on, compounding the problem of the cold floor. Old people and mothers with young children were given long bingo tables, their legs folded, to use as "beds", but this deprived others of tables at which to sit. There were no kitchen facilities or refrigeration for the food that poured into this Centre.

Although a lot of volunteer effort, particularly by the Scouts, got the Centre into operation, there was no effective co-ordination set up by the Red Cross until Monday. This added to the confusion experienced by the evacuees and the workers.

There was also some friction between the Boy Scouts and the Red Cross; early on, the Scouts perceived themselves in charge, and resented the Red Cross for taking over operations later on. This friction occurred in several situations during the emergency and is a reflection of the lack of formal agreement among volunteer and government agencies about which agency has a mandate to co-ordinate emergency services and what the responsibilities of each agency should be. It was also exacerbated by personality clashes between highly motivated volunteer leaders who were perceived as "taking over" operations and being "in charge" rather than performing a co-ordinating role, with responsibilities assigned and agreed upon among the agencies involved. These incidents were not serious, and were ironed out after discussion and agreement.

Streetsville Secondary School, despite having excellent facilities, including a very large, well equipped kitchen with a large refrigeration capacity, experienced some problems as a Centre. Most of these were in organisation.

This Centre received busloads of evacuees from Square One before it was properly set up. Not all people were



registered as they came in so that local youths were able to get into the Centre, looking for some fun, and no one knew that they were not evacuees. Subsequent problems with drinking, fights and some vandalism, necessitated bringing in the police. This was unnerving to some of the evacuees and created a strain on those running the Centre.

It was never clear to the evacuees who was running or co-ordinating the Centre. The Red Cross were supposed to be the co-ordinating agency, but a group of Cadets operated pretty much on their own performing "crowd control" and the local municipal councillor, the school staff and the Salvation Army were also very much involved in running things. This confusion was compounded by the fact that the Streetsville Centre was the "co-ordinating" Centre for the other Evacuation Centres, as much as there was one. Much of the energy and focus of those in charge was on moving evacuees through Streetsville Secondary School to other Centres on Sunday, moving them back again on Tuesday, and moving food and other supplies via the Streetsville Centre to other Centres which needed them. In general, however, the Centres had to look after their own requirements for food, supplies and manpower.

Streetsville Secondary School also housed a large number of evacuees - estimates range as high as 1100 at the peak - which, under the circumstances, added to the evacuees' confusion. Those performing "crowd control" (basically keeping the halls clear) caused some irritability in the evacuees, who felt that the "policing" was over-zealous. There were no problems with crowd control reported at any of the other Centres. Moving busloads of evacuees from other Centres back into the existing situation at Streetsville Secondary School on Tuesday added to the confusion, and was hard on those coming in who had been very comfortable at the

Centres they had left.

How much of this situation was caused by the sheer number of people at Streetsville Secondary School is hard to say. If the organisational problems had not been there, Streetsville Secondary School might have comfortably sheltered the numbers that it did. The evacuees at Streetsville Secondary School were well looked after. The problem for them, and the workers, was the confused, chaotic and somewhat alienating atmosphere, where the evacuees did not feel at home.

The other major Centres did not experience the problems of the International Centre and Streetsville Secondary School. They had adequate facilities. They were well organised, with one agency, either the Red Cross or St. John Ambulance, co-ordinating operations. There was no friction reported between agencies. At Brampton Centennial Secondary School, the Red Cross arrived several hours after the Centre opened. Their team leader could see that, despite a tremendous volunteer effort by various groups and individuals to set up the Centre, some co-ordination was needed. He called together the other volunteer leaders and offered to co-ordinate the Centre, explaining that the Red Cross was trained to do this. The others agreed, responsibilities were delegated, and the Centre ran like clockwork from then on.

Whenever possible, evacuees were encouraged to be involved in running the smaller Centres, which boosted morale and spirits, and helped create a "family" atmosphere. Although the numbers varied in these Centres from fewer than 100 up to 500, there were never more people than the facilities could handle. In general, the smaller the number, the greater the "family" feeling, but in most cases, the evacuees were as comfortable as they could be under the circumstances, and

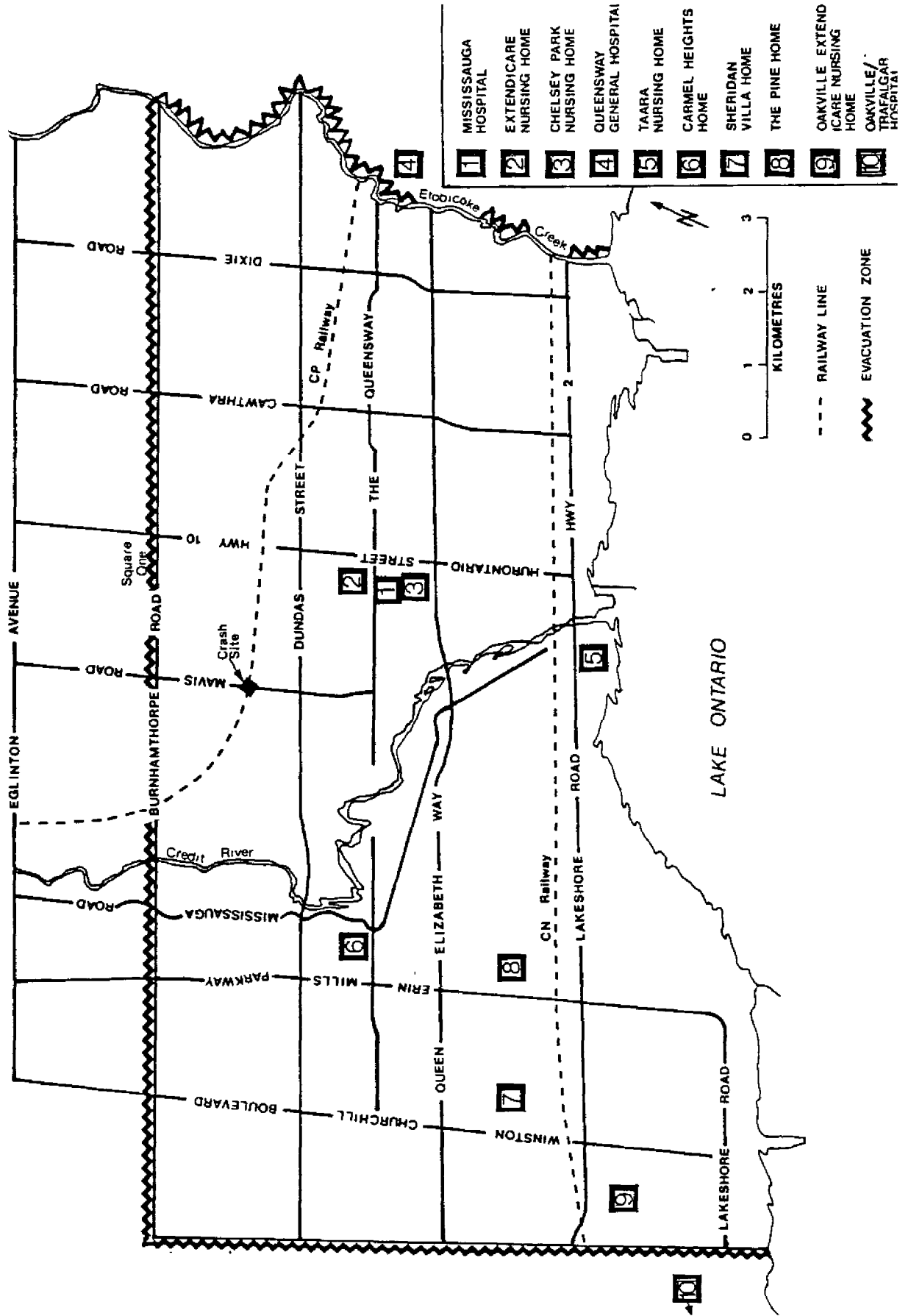
grateful to the people who looked after them. This made the work of the volunteers more rewarding and enjoyable. One advantage of smaller numbers is that if there is a serious health problem, it can be more easily contained. The scarlet fever cases at the International Centre required the temporary quarantine of over 1000 people.

Some volunteer leaders were resentful about "their people" having to leave for another Centre during the consolidation on Tuesday, 13 November. On Wednesday night, the buses came very late (after 23:00) to take the evacuees from Sheridan College, Oakville, to hotels. Many evacuees wanted to stay until the morning and the President of the College refused to have them bussed that night if they did not want to go. Many evacuees expressed genuine regret at leaving these Centres, even when they could return to their own homes!

#### 4.4. PEOPLE IN INSTITUTIONS, GROUP HOMES, OR RECEIVING SPECIAL CARE

Among the people evacuated during the emergency were individuals living in institutions and group homes, or receiving some kind of special care in their own homes from health or social service agencies. In most cases, those in institutions and group homes had to be evacuated by those responsible for them and they had to be provided with alternative shelter and care. Those receiving special care in their homes were generally evacuated by families, but needed access, where they went, to the services they normally received at home. The locations of institutions that were evacuated are in Figure 4.3.

FIGURE 4.3 LOCATIONS OF INSTITUTIONS EVACUATED



#### 4.4.1. Psychiatric and Extended Care Hospital Patients

The evacuation of hospitals has already been described. However, two groups of patients were discharged from the hospitals at the time of the evacuation, some of whom needed care out of the hospital. Anticipating an evacuation of only a day, the Mississauga Hospital told psychiatric patients out on weekend passes to stay at home, and sent other psychiatric patients home at the time of evacuation. Most of these patients were subsequently evacuated from their homes. Because there was no health communication system operating, they were unable to contact their doctors to get psychiatric care if they needed it. Some of them had difficulty coping for the whole week.

Some of the patients in Mississauga Hospital were also sent home to their families. Out of concern for their needs at home, the Home Care Co-ordinator<sup>1</sup> for Mississauga General, June Morley, came to the hospital, on her own initiative. By the time she arrived, some of these patients had already been discharged. For the rest, she arranged Home Care or Public Health Nursing,<sup>2</sup> as required. Unfortunately, most of

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<sup>1</sup> *The Home Care Program is run by the Peel Regional Health Unit to provide short term care for discharged hospital patients who require physical nursing, physiotherapy, or homemaking. Physical nursing services are purchased from the Victorian Order of Nurses and the St. Elizabeth Nurses; homemaking from the Red Cross. People requiring long term care of this nature either receive a subsidy from Peel Social Services or pay themselves, often through private insurance.*

<sup>2</sup> *Public Health Nurses from the Peel Regional Health Unit provide home service to discharged hospital patients and others in the community who require teaching or counselling (for example, pre-natal counselling, or monitoring medication for seniors). The Public Health Nursing liaison person was not at the hospital during its evacuation, so June Morley had to look after this function, as well.*

them were subsequently evacuated. Those that phoned the Home Care Office of Peel Regional Health were referred to services in the community to which they had gone; the others could not be reached.

#### 4.4.2. Residents of Nursing Homes and Homes for the Aged

Residents of three nursing homes and three homes for the aged were evacuated from Mississauga, and residents of one nursing home from Oakville (Table 4.3).

Nursing homes, which are privately owned and are licenced by the Ministry of Health, were ordered evacuated by the Control Group, or the Halton Police Chief, in the case of Oakville Extendicare. The homes were asked to prepare their residents for evacuation. Residents were identified and their medical records and medication were sent with them. The ambulance service and transit buses, in one case assisted by vehicles from St. John Ambulance and the Red Cross, moved people to nursing homes, hospitals, and homes for the aged in the communities around Mississauga. Staff assisted in loading residents into the transport, and accompanied them to their destinations. There were no plans that required staff to call in to the homes when they heard about the emergency, although many did. Others were contacted and called in by the administration. While evacuated, residents were looked after by their own nursing home staff, staff from receiving institutions, and, in some cases, nurses brought in from private agencies. The same staff assisted the return of the residents by bus and ambulance, when the nursing homes were reopened.

Homes for the Aged in Peel Region are the responsibility of the Regional Social Services. Although their

Table 4.3

<u>Home</u>	<u>Location</u>	<u>Evacuated</u>	<u>Returned</u>	<u>Where and Numbers</u>
Mississauga Extended-care Nursing Home	Mississauga	10:00-12:00	Sunday, November 19	170 to E.C. Drury School for Deaf in Milton 23 heavy care to West Park Hospital, Toronto 9 home with families
Chelsey Park I Nursing Home	Mississauga	11:00	10:00 Saturday	54 to Chelsey Park, Streetsville (heavy care people) 78 to Tullamore Nursing Home, Brampton 78 to Cheltenham Nursing Home, 5955 Bathurst St., Toronto 26 to families
Taara Nursing Home	Mississauga Road and Lakeshore	18:00-19:00	Friday evening	53 to Home for Aged in Toronto (Cummer House, Fudger House, Castleview Towers) 2 to families
Carmel Heights Home for the Aged	Dundas West and Mississauga Rd.	20:00-21:00	17:00 Friday	49 to E.C. Drury School for Deaf 22 to families
Sheridan Villa Home for the Aged	Mississauga	21:00-23:00	18:30 Tuesday	122 to Peel Manor Home for Aged, Brampton 67 to Peel Memorial Hospital, Brampton (heavy care) 19 to Knightsbridge Senior Citizens Centre, Brampton 38 to families
The Pines Home for the Aged	1231 Sayers Road	23:00	14:00 Saturday	20 to Kipling Acres, Toronto 20 to families

Nursing Homes and Homes for the Aged Evacuated (cont'd)

<u>Home</u>	<u>Location</u>	<u>Evacuated</u>	<u>Returned</u>	<u>Where and Numbers</u>
Oakville Extendicare Nursing Home	Oakville	01:00 Monday	18:00 Tuesday	132 to Hamilton Psychiatric Hospital 39 to Joseph Brant Hospital, Burlington (heavy care) 20 to families



evacuation was ordered by the Control Group, the responsibility for organizing the evacuation rested with Commissioner Crozier and his senior staff, including the administrators of the homes. Staff were called in to assist (again, there was no plan that required staff to call or report in during an emergency).

Residents of Homes for the Aged, who are generally in better health than nursing home residents, were moved primarily by bus or car to receiving institutions arranged by Social Services (Table 4.3) except for some "heavy care" people at Sheridan Villa who were taken to Peel Memorial Hospital by ambulance. The Villa received assistance from Scouts, the Lions Club, and neighbours in carrying out the evacuation. The Pines received help from Social Services staff and the neighbourhood fire department. Carmel Heights, which is run by the Carmelite Sisters, was evacuated by the Milton Optimists. Their President, Joe Barrett, who had been an administrator in senior citizens' services for Peel, contacted the home to offer help. He arranged for 25 of his club members to provide transportation for the residents by car to the E.C. Drury School for the Deaf in Milton. They brought the seniors home again at the end of the week.

Because Peel Regional Health and the Social Services are involved in providing nursing care to people in their homes, there were contacts between the Director of Nurses, Wynn Burrell, of Peel Regional Health; the Social Services, including administrators of the Homes for the Aged; St. Elizabeth Nurses; and District Director of the Peel Victorian Order of Nurses, Bonnie O'Neill. In the absence of an emergency plan, these contacts facilitated communication between these organizations to identify and provide nursing services where needed. Both Victorian Order of Nurses and Public

Health Nurses were sent to help the regular staff looking after Sheridan Villa residents, and to assist in their return.

Similar contacts in Halton led to their Public Health Nurses assisting at the E.C. Drury School in Milton.

#### 4.4.3. Residents of Group Homes and Institutions

Several group homes and institutions were evacuated in Mississauga and Oakville (Table 4.4). In all cases, the evacuation was carried out by the staff of the responsible agency. Residents of the group homes (Mississauga Childrens' Aid Society and Mississauga and Oakville Associations for the Mentally Retarded) were taken to the homes or cottages of staff, or were looked after by their families. The two large institutions (Syl Apps Training Centre and Oaklands Regional Centre for the Mentally Retarded) took their residents to similar facilities elsewhere.

In all but two cases, there was no pre-planned procedure for contact between staff and the responsible agencies, and there was no agency that had instructed families to contact them in case of emergency. In this emergency, most of the staff either phoned in on their own initiative, or were contacted, and families were able to contact, or be reached by, the agencies. In the latter case, this was made easier because the agencies' headquarters were not evacuated.

#### 4.4.4. People Receiving Special Care in Their Homes

The agencies providing special care in the home were unable to provide this during the evacuation, or contact their clients. Many of these people phoned the Victorian Order of Nurses or the Home Care Office and were referred to the appropriate service in the community to which they had evacuated. Special care people depended on their families to be evacuated from their homes.

Table 4.4 Institutions and Group Homes Evacuated

<u>Name and Number Evacuated</u>	<u>Location</u>	<u>Evacuated</u>	<u>Returned</u>	<u>Where Taken</u>
Children's Aid Society - 3 homes ( 20) - Foster homes (500)	Mississauga Mississauga Mississauga	Sunday Sunday	As area reopened	Homes and cottages of staff With foster parents
Mississauga Association for the Mentally Retarded - 3 Group Homes (26)	Mississauga	Sunday	Friday	To Brampton Group Home, with family, or to staff homes With family or to evacuation centres
- apartment living program (18)	Mississauga	Sunday	Friday	Staff in Toronto (including evacuees from Mississauga homes who went to Brampton)
- Brampton Group Home (17)	Brampton	Monday	Wednesday	
Oaklands Regional Centre (150) (Retarded)	Oakville (near Trafalgar Rd. & Lakeshore)	01:00 Monday	Wednesday A.M.	Three facilities in Hamilton and Vineland
Oakville Association for the Mentally Retarded - Group Home (12)	Oakville			
- Apartments (19)	Central Oakville ) Throughout ) Oakville )	01:30 Monday	Wednesday afternoon	Staff homes in Milton, Burlington, West Oakville
Syl Apps Training Centre (50)	Oakville-Trafalgar Gar Rd. & 8th Line	01:20 Monday	Tuesday evening	Sprucedale School in Simcoe

#### 4.5. EMERGENCY PERSONNEL

The hundreds of people working at the accident site - police, firemen, the EOCG, government and industry officials - and the police manning the perimeter of the evacuation and patrolling the empty city, had to be provided with food and hot drinks throughout the week.

##### 4.5.1. Food Services

Peel Regional Police contacted Captain Robert Ratcliffe and requested that the Mississauga Salvation Army set up a mobile canteen near the accident site, very early on Sunday morning, 11 November. Their operation expanded during the day on Sunday to the provision of food to police Command Post number 2 at the Westdale Mall, on Dundas St. W. at Wolfedale Road (moved on Wednesday to Sheridan Mall). This operation continued all week. On Monday, after the boundary of the evacuation area had expanded, it became necessary to take food and hot drinks out to the police on point duty, as well.

The Salvation Army had 3 teams of 50 volunteers carrying out this operation from Monday, 12 November, on. They either made the food at their Cawthra Road Temple, or purchased it from restaurants. On Monday, when the Temple was evacuated for a day, the Etobicoke Temple became the centre of operations. The Salvation Army served 20,660 meals during the emergency. They were reimbursed from their National Emergency Fund.

At 11:00 Sunday, the North York Branch of the Red Cross arrived at the accident site itself with a mobile canteen. Within hours, they had opened the cafeteria of the Bell Building to feed the people at the site. They continued this

operation until the following Sunday afternoon on a 24 hour basis.

At first, the Red Cross either arranged for food from restaurants, particularly donations from McDonald's, or it was donated by churches. By Sunday evening, they were bringing food from the Evacuation Centres, particularly the Streetsville Secondary School. On Tuesday night, the Salvation Army began to bring in food to the site for the Red Cross to serve. The Red Cross looked after "between meal" feeding and beverages. Extra food was sent back out to Evacuation Centres that needed it. Six hundred meals were served "per sitting", including those served to police on the perimeter.

There were some problems in this feeding operation, stemming from confusion about who was responsible for what tasks. The Red Cross thought that they were also responsible for feeding the police on the perimeter. When the Salvation Army began to bring food in to the site, some of it was diverted to the perimeter, so that there was not enough for the people at the site. The Salvation Army were getting calls for more food when they were sure they had delivered enough. This caused some confusion and tension until Tom Huntley, of the Red Cross, Capt. Ratcliffe of the Salvation Army, and a police sergeant at the site sat down and came to an agreement that the Salvation Army would obtain and deliver the food, and the Red Cross would serve it at the site only.

The feeding operation was further confused early in the week when an over-zealous volunteer, representing himself to the Red Cross as a CP employee, said that he would arrange to provide food to the site. The Red Cross did not check out his credentials. He set himself up in a hotel and began to

order food to be delivered to the Red Cross at the site, charging it to CP Rail. Too much food started coming to the site. Suppliers, suspicious of the way the food was being ordered, alerted CP Rail, who quickly tracked him down and stopped his "operation".

#### 4.5.2. Health Care

Although the Brampton St. John Ambulance set up a first aid post early Sunday morning, it was decided, because of the danger, to ask them to leave, and not to have health care facilities on-site.

#### 4.6. EVALUATION

The community needs of the people evacuated in this emergency were, generally, very well met. The magnitude of the response was almost overwhelming in most of the areas for which it was required. What problems there were, did not have extremely serious consequences for the evacuees, and could be remedied in the future by improved emergency planning.

Within the many groups meeting community needs, there were varying degrees of organisation, sometimes specifically geared to emergency situations, and sometimes not oriented to emergencies but useful in this context.

Between these organisations, beyond informal contacts developed through work or previous experience in emergencies (usually at the municipal or regional level), there was no pre-planned, organised system of interaction. This led to some inconsistency in the adequacy of services offered and

some confusion, even friction, about who was "in charge" and what roles each was playing. The problems that resulted did not create any serious consequences for the evacuees but did, in some situations, create discomfort and difficulty for the organisations involved.

Between the Control Group and the organisations responsible for community needs, there were serious communication and organisational problems. The authorities were concerned with getting the people out safely and removing the danger. Once people were evacuated, there was no one person or agency in either group, under any emergency plan, which had responsibility for making sure that all community needs were being met. The Control Group did not ensure that such a person or agency was appointed during the emergency. Needs were met because certain organisations took responsibility on their own initiative. Where no initiative was taken, the need was not met. There was also limited feedback from these organisations to the Control Group.

Some people stayed in Evacuation Centres rather than go to hotels because they thought they might be going home at any time - this meant more services were required to look after evacuees. Those planning for the needs of the evacuees, particularly at the Centres, had to plan in advance. Thinking that the evacuation might be lifted at any time, complicated this planning process.

The choice of the International Centre as an Evacuation Centre was a poor one because it has inadequate facilities for this function. The choice would not have been made had the Peel Regional Social Services' list of potential Evacuation Centres been used.

Finally, the decisions in the early hours to use facilities close to the accident site as Evacuation Centres, led to the re-evacuation of 3 Centres. Some people were moved

twice, from Square One to Sherway Gardens and then on to a third Centre. This confused the registration system for evacuees, and meant that large numbers of evacuees arrived all at once at one Centre, overloading the registration system and causing organisational problems later. These early Centres were chosen before the geographical context of the danger was understood.



