Introduction and Overview

UNIT 1

Welcome and Introduction

▸ Housekeeping

▸ Student Introductions

  ▸ Name
  ▸ Agency
  ▸ What do you want to get out of training

▸ Instructor Introductions

Course Outline

Unit 1 – Introduction and Overview

Unit 2 – National Incident Management System (NIMS)

Unit 3 – Preparing to Deploy

Unit 4 – Deployment

Unit 5 – Demobilization & Transitioning

Unit 6 – Exercise Scenarios

Unit 7 – Next Steps

Course Objectives

‣ Overview of FAST concept

‣ Explain the National Incident Management System (NIMS) and how it pertains to FAST members

‣ Explain how to prepare for a FAST deployment

‣ Describe the roles and responsibilities of FAST members

‣ Explain the resource request process

‣ Demonstrate how to use FAST forms

‣ Explain the demobilization process

Participant Guide:

FAST determines what individuals need to remain safe and independent in these sites and help procure the equipment or service needed.

FAST members will work side by side with shelter personnel and other emergency response workers to assist in identifying and meeting essential functional needs so that People with Access and Functional Needs can maintain their health, safety and independence during disasters.

FASTs will help Health Services distinguish among people who need assistance in maintaining their safety, health, mobility, independence, and emotional stability form those who have acute medical needs. Effectively meeting these needs reduces use of limited, expensive, intensive emergency medical services and hospitalization.

What FAST is not….

▸ Personal Care Assistants

▸ Replacement for Health Services/Nursing

▸ Replacement for Mental Health Services

▸ General Shelter Workers

FAST Mission

▸ Retention of independence and inclusion of affected individuals

▸ Strengthen community's disaster resilience

▸ Individuals may receive services needed at disaster service centers

▸ Reduce impact on medical support resources

Participant Guide:

Not all persons with disabilities or access and functional needs require medical help.

By strengthening a community's disaster resilience we are also able to reduce the impact on medical support resources.

Participant Guide:

Programs and services must accommodate all.

While California was focused on shelters when they created the program, NCEM will provide services at any Disaster Service Center that our local emergency management agencies want a FAST at, including but not limited to: evacuation shelters, general population shelters, reunification centers, family assistance centers, and disaster recovery centers.
NCCDD has helped NCEM move forward with the FAST Program by funding the travel expenses to go to California to take FAST training.

Thank you to the California Department of Social Services and the California Office of Emergency Services for sharing their FAST training content.

Types of Disaster Service Centers

▸ Evacuation/General Population Shelters

▸ State Medical Support Shelters (SMSS)

▸ Disaster Recovery Centers (DRC) - FEMA

▸ Multi-Agency Resource Centers (MARC) – State/local

▸ Family Assistance Centers (FAC)

▸ Reunification Centers

Participant Guide:

Disaster service centers can include, but are not limited to: evacuation shelters, general population shelters, disaster recovery centers, multi-agency resource centers, family assistance centers, reunification centers, etc.

While a FAST can be sent to any type of disaster service center or situation these are some of the main sites they will be deployed to.

These disaster service centers will be review further in Unit 3.

FAST and Functional Needs Support Services

Functional Needs Support Services (FNSS) enable individuals to maintain their independence in disaster service centers.

This includes:

- reasonable modification to policies, practices, and procedures
- durable medical equipment (DME)
- consumable medical supplies (CMS)
- personal assistance services (PAS)
- other goods and services as needed

Participant Guide:

People requiring FNSS may have physical, sensory, mental health, and cognitive and/or intellectual disabilities affecting their ability to function independently without assistance. Others that may benefit from FNSS include children, pregnant women, those with pre-existing medical conditions, those who are temporarily injured, and the elderly.

FAST Member Skills

▸ Two years of professional experience working with people with disabilities and others with access and functional needs

▸ Flexible, creative, problem solver

▸ Detail oriented

▸ Communicate both verbally and in writing

▸ Communicate effectively with all levels of shelter staff and shelter residents

▸ Ability to assess the needs of individuals

▸ Supports the FAST program mission

Participant Guide:

FAST members need to:
- Be able to communicate both verbally and in writing with shelter residents and other shelter staff
- Know how to assess the needs of people and use their experience to work with shelter residents
- Need to be creative, resourceful and able to quickly solve problems under quickly changing conditions

FAST Member Skills

▸ Expertise in or knowledge of one or more of the following:

- ▸ Aging
- ▸ Physical disabilities
- ▸ Chronic health conditions
- ▸ Independent living
- ▸ Assistive technologies
- ▸ Languages other than English

- ▸ Mental health
- ▸ Communication
- ▸ Substance use disorders
- ▸ Intellectual or other Developmental disabilities

Participant Guide:

FAST members should have experience working with individuals with disabilities and/or access and functional needs. Licensure is NOT required.

Why we use

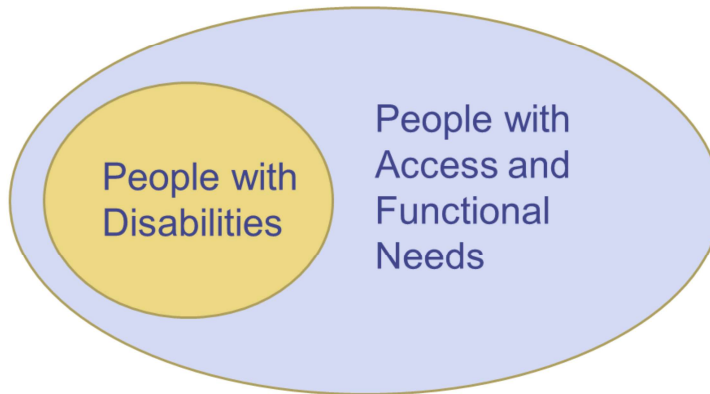"Access and Functional Needs"

Participant Guide:

Reason we have let go of the terminology "special needs".

- We hear it all the time- "special needs" and "vulnerable." Both terms do damage. When people with disabilities are thought of as "special," they are often thought of as marginal individuals who have needs, not rights. The word "vulnerable" has a similarly unfortunate effect. Vulnerable people must have things done for them; they're recipients, not participants.
- Don't think 'special' or 'vulnerable;' think 'universal access.'
- Integrate access into all aspects of emergency services: Transportation, sheltering, education, evacuation, etc.
- And remember that access is a civil right, not a favor or an amenity.
- Replace "special needs" with more flexible term: ACCESS & FUNCTIONAL NEEDS
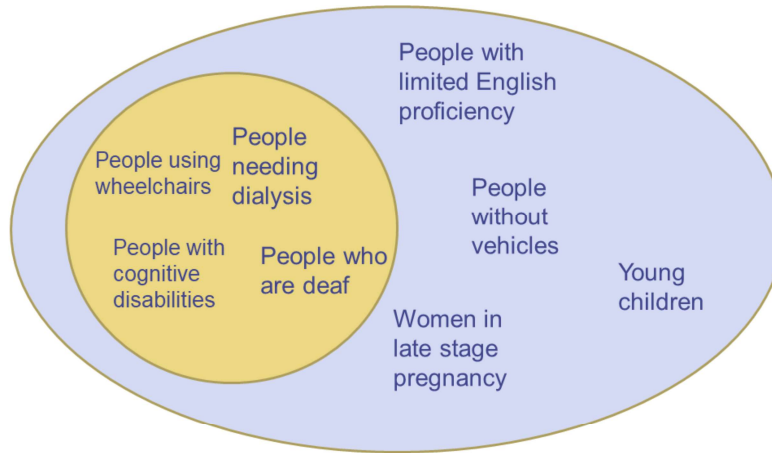
> **Access** – accommodations mandated by the Americans with Disabilities Act (ADA) and other Federal and State laws
> **Functional** – a condition the necessitates additional support

Access and Functional Needs

People with Disabilities

People with Access and Functional Needs

Access and Functional Needs

People with limited English proficiency

People using wheelchairs
People needing dialysis
People without vehicles
Young children
People with cognitive disabilities
People who are deaf
Women in late stage pregnancy

What is Access and Functional Needs?

C-MIST Framework

▸ **C**ommunication

▸ **M**aintaining Health

▸ **I**ndependence

▸ **S**afety and **S**upport Services, and **S**elf- determination

▸ **T**ransportation

Participant Guide:

- CMIST is about the functional challenges, not about identifying disabilities.
- A tool for identifying the functional needs of people before, during, and after a disaster by assessing their needs in the areas of Communication, Maintaining Health, Independence, Safety and Support Services and Self determination, and Transportation.

Exercise

Communication Challenges

▶ Deaf

▶ Hard of Hearing

▶ Speech Impaired

▶ Neurological or Cognitive Conditions

▶ Spoken Language Barriers

▶ Cultural Differences

Participant Guide:

There is a large, diverse population of people who cannot hear, see, or understand vital shelter information.

Information needs to be provided in ways people can understand and use.
- Oral
- Visual (signage, written word)
- Interpreters

Maintaining Health Challenges

Which should go to medical support shelter?

▸ Intravenous (IV) therapy

▸ Managing open wounds

▸ Power dependent equipment

▸ Dialysis

▸ Measles, tuberculosis and other contagious diseases

Participant Guide:

People with visible disabilities tend to be automatically, but often mistakenly, placed in this category. Access and Functional needs does not automatically mean they require a medical shelter.

Maintaining Health needs that require support that a general population is unable to provide can include managing unstable, terminal, or contagious health conditions that require observation and ongoing treatment; managing medications intravenous therapy, tube feeding and or regular vital signs; administering dialysis or oxygen; managing wounds, catheters or ostomies; and operating power-dependent equipment to sustain life.

Some Maintaining Health needs that can be supported in a shelter can include oxygen use, use of power dependent power equipment (such as CPAP machine, power wheelchairs, etc.), individuals who require dialysis treatment, individuals who uses catheters but doesn't require help, and individuals who are diabetic and can administer their own insulin.

As a FAST member, you may be an advocate for a person that does not need to go to a medical shelter but can stay in a general population shelter if their access and/or functional needs could be met.

Independence Challenges

▸ Mobility

▸ Functions of daily living

▸ Assisted care

▸ Service animals

Participant Guide:

Independence can be a key loss during a disaster. Be aware that those who had once been confident in their environment may now have lost some of that confidence. FAST Team members can help identify independence issues early.

Early disaster response intervention services may allow people to maintain their health, mobility, and independence in mass shelters. maintaining functional independence can include:
- Replacing essential medications,
- Replacing lost or adaptive equipment,
- Assisting with orientation.

The goal is to assist those needing help becoming more independent.

You are helping them regain confidence in meeting these challenges:
- Mobility – wheelchairs, walkers, canes
- Functions of daily living – dressing, bathing, eating
- Assisted care – medical issues, mental support, supervision, separation from regular support system
- Service animals – feeding and caring, separation due to being lost, wounded, or killed.

Safety, Support Services, and Self-determination Challenges

▸ Behavioral issues

▸ Cognitive disabilities

▸ Psychiatric conditions

▸ Children

▸ People who function adequately in familiar conditions but become disoriented in unfamiliar situations

Participant Guide:

Support for individuals who do not have or have lost adequate support from family or friends must be determined on a case-by-case basis.

Transportation Challenges

▸ Many people cannot drive due to:

- Lack of vehicle

- Lack of drivers license

- Age

- Disabilities

- Mobility

- Legal restrictions

▸ Some transportation requires special adaptation

Participant Guide:

During disasters, people with access and functional needs may need assistance with transportation.
- To shelters
- For medical care
- To Disaster Recovery Centers
- Eventually home

Americans with Disabilities Act

▸ The Americans with Disabilities Act (ADA) is a civil rights law that prohibits discrimination on the basis of disability in employment, state and local government programs, public accommodations, commercial facilities, transportation and telecommunications

▸ The ADA protects people of all ages who:

- ▸ Have a physical or mental impairment that substantially limits one or more major life activities or bodily functions
- ▸ Have a record of such impairment
- ▸ Are regarded as having an impairment

Participant Guide:

Patients who have a "record of an impairment" are those that have, for example, a history of cancer that is in remission

Those who are regarded as having an impairment can be a person who has a facial disfigurement from a burn. This person does not have a condition that causes a limitation but false assumptions may be made based on appearance.

State and Local Government Programs

▸ Title II prohibits discrimination on the basis of disability in **all services, programs, and activities provided to the public by state and local governments**

▸ Barrier removal is required when:

  ▸ No administrative or financial burden exists

  ▸ Removal of the barrier does not fundamentally alter the services offered

▸   Removal of the barrier does not pose a danger to others

▸   Barrier removal is determined on a case-by-case basis

▸   Title II entities must consider all available funding sources

"Americans with Disabilities Act Questions and Answers." United States Equal Employment Opportunity Commission and the Civil Rights Division, United States Department of Justice. Online http://www.ada.gov/q&aeng02.htm

For more information: www.ada.gov

Some ADA Requirements

▸ Accessible parking

▸ Accessible path of travel

▸ Doors do not require more than 5 lbs. of force to open

▸ Accessible signage

▸ Accessible restrooms

▸ Providing accessible communication at no cost

Participant Guide:

- Accessible path of travel
- Doors do not require more than 5lbs of force to open
- Accessible rest rooms
- Accessible signage
- Providing interpreters or other forms of effective communication

For more information: http://www.ada.gov/2010ADAstandards_index.htm

National Incident Management
System (NIMS)

UNIT 2

Unit 2 Objectives

▸ Describe the National Incident Management System (NIMS)

▸ Describe the Incident Command System (ICS)

▸ Describe where FAST members fit in the ICS structure during a disaster response

**National Incident Management System
(NIMS) and
Incident Command System (ICS)**

Why do Functional Assessment Support Team
(FAST) Members need to know this?

Participant Guide:

- North Carolina has implemented the National Incident Management System (NIMS) guidance, including the use of the Incident Command System (ICS).
- It will help you understand how FAST members fit into the ICS.
- It will help you understand the system within which resource requests are processed.

Participant Guide:

The National Incident Management System (NIMS) is a comprehensive, national approach to incident management that is applicable at all jurisdictional levels and across functional disciplines. It is intended to:
• Be applicable across a full spectrum of potential incidents, hazards, and impacts, regardless of size, location or complexity.
• Improve coordination and cooperation between public and private entities in a variety of incident management activities.
• Provide a common standard for overall incident management.

It provides a consistent nationwide framework and approach to enable government at all levels (Federal, State, tribal, and local), the private sector, and nongovernmental organizations (NGOs) to work together to prepare for, prevent, respond to, recover from, and mitigate the effects of incidents regardless of the incident's cause, size, location, or complexity.

It was established through Homeland Security Presidential Directive (HSPD) 5, which was issued on February 28, 2003. The purpose of this directive is to enhance the ability of the United States to manage domestic incidents by establishing a single, comprehensive national incident management system.

https://www.dhs.gov/publication/homeland-security-presidential-directive-5

NIMS Guiding Principles

▸ Flexibility

▸ Standardization

▸ Unity of Effort

Participant Guide:

Incident management priorities include saving lives, stabilizing the incident, and protecting property and the environment. To achieve these priorities, incident personnel apply and implement NIMS components in accordance with the principles of flexibility, standardization, and unity of effort.

Flexibility

NIMS components are adaptable to any situation, from planned special events to routine local incidents to incidents involving interstate mutual aid or Federal assistance. Some incidents need multiagency, multijurisdictional, and/or multidisciplinary coordination. Flexibility allows NIMS to be scalable and, therefore, applicable for incidents that vary widely in terms of hazard, geography, demographics, climate, cultural, and organizational authorities.

Standardization

Standardization is essential to interoperability among multiple organizations in incident response. NIMS defines standard organizational structures that improve integration and connectivity among jurisdictions and organizations. NIMS defines standard practices that allow incident personnel to work together effectively and foster cohesion among

the various organizations involved. NIMS also includes common terminology, which enables effective communication.

Unity of Effort

Unity of effort means coordinating activities among various organizations to achieve common objectives. Unity of effort enables organizations with specific jurisdictional responsibilities to support each other while maintaining their own authorities.

NIMS Components

▸ Preparedness

▸ Communications and Information Management

▸ Resource Management

▸ Command and Management

▸ Ongoing Management and Maintenance

Participant Guide:

Preparedness

Effective emergency management and incident response activities begin with a host of preparedness activities conducted on an ongoing basis, in advance of any potential incident. Preparedness involves an integrated combination of assessment; planning; procedures and protocols; training and exercises; personnel qualifications, licensure, and certification; equipment certification; and evaluation and revision.

Communications and Information Management

Emergency management and incident response activities rely on communications and information systems that provide a common operating picture to all command and coordination sites. NIMS describes the requirements necessary for a standardized framework for communications and emphasizes the need for a common operating picture. This component is based on the concepts of interoperability, reliability, scalability, and portability, as well as the resiliency and redundancy of communications and information systems.

Resource Management

Resources (such as personnel, equipment, or supplies) are needed to support critical incident objectives. The flow of resources must be fluid and adaptable to the requirements of the incident. NIMS defines standardized mechanisms and establishes the resource management process to identify requirements, order and acquire, mobilize, track and report, recover and demobilize, reimburse, and inventory resources.

Command and Management

The Command and Management component of NIMS is designed to enable effective and efficient incident management and coordination by providing a flexible, standardized incident management structure. The structure is based on three key organizational constructs: the Incident Command System, Multiagency Coordination Systems, and Public Information.

Ongoing Management and Maintenance

Within the auspices of Ongoing Management and Maintenance, there are two components: the National Integration Center (NIC) and Supporting Technologies. The Department of Homeland Security's National Integration Center is responsible for managing the implementation and administration of the National Incident Management System (NIMS).
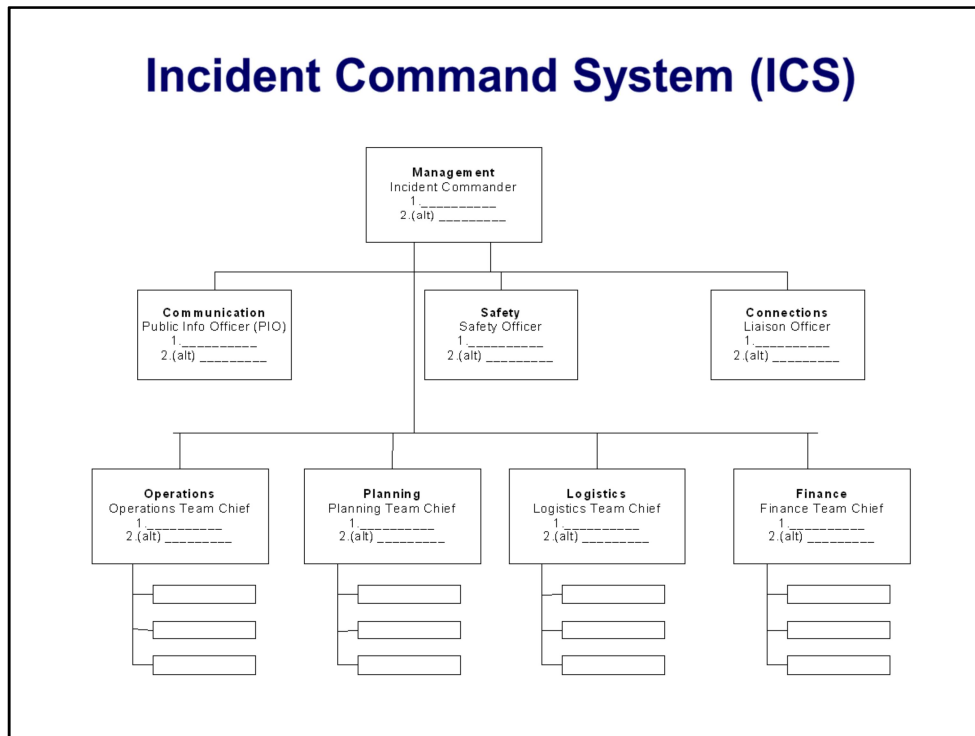
Benefits of NIMS

▸ Enhances organizational and technological interoperability and cooperation

▸ Provides a scalable and flexible framework with universal applicability

▸ Promotes all-hazards preparedness

▸ Enables a wide variety of organizations to participate effectively in emergency management/incident response

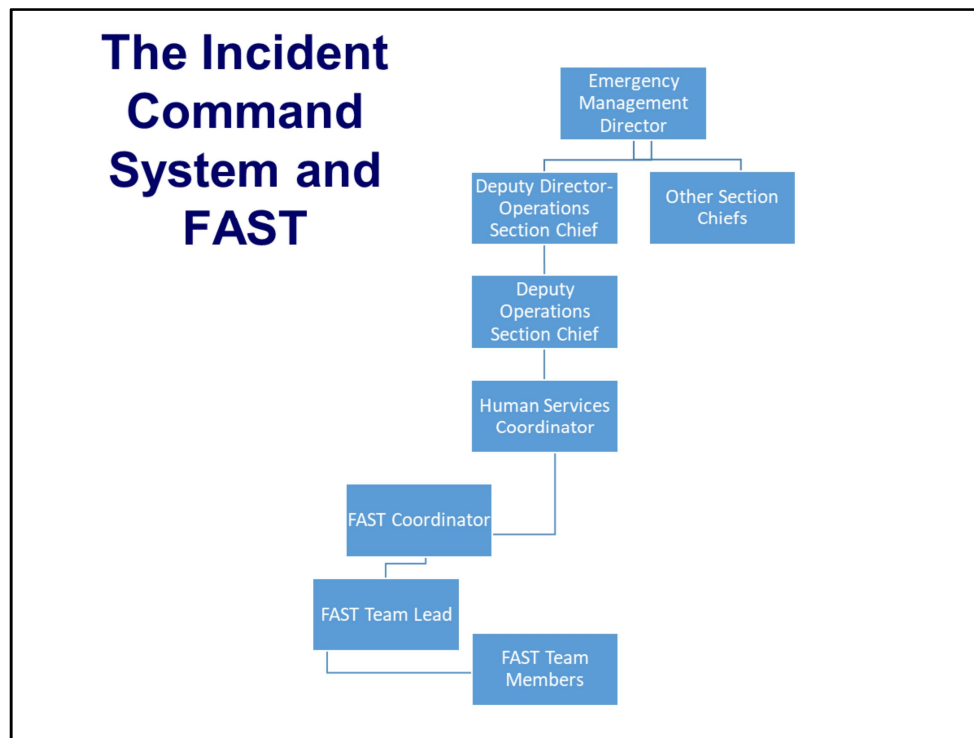▸ Institutionalizes professional emergency management/incident response practices

Incident Command System (ICS)

▸ A flexible, yet standardized core mechanism for coordinated and collaborative incident management

▸ Operates within a common organizational structure to enable effective, efficient incident management by integrating a combination of

  ▸ facilities,
  ▸ equipment,
  ▸ personnel,
 ▸ procedures, and
  ▸ communications

Participant Guide:

- ICS is a standardized approach to the command, control, and coordination of on-scene incident management that provides a common hierarchy within which personnel from multiple organizations can be effective.
- ICS specifies an organizational structure for incident management that integrates and coordinates a combination of procedures, personnel, equipment, facilities, and communications.
- ICS is used by all levels of government as well as by many non-governmental organizations and private sector organizations.
- ICS applies across disciplines and enables incident managers from different organizations to work together seamlessly.
- This system includes five major functional areas, staffed as needed, for a given incident: Command, Operations, Planning, Logistics, and Finance/Administration.

Incident Command System (ICS)

Management
Incident Commander
1 _____
2.(alt) _____

Communication
Public Info Officer (PIO)
1 _____
2.(alt) _____

Safety
Safety Officer
1 _____
2.(alt) _____

Connections
Liaison Officer
1 _____
2.(alt) _____

Operations
Operations Team Chief
1 _____
2.(alt) _____

Planning
Planning Team Chief
1 _____
2.(alt) _____

Logistics
Logistics Team Chief
1 _____
2.(alt) _____

Finance
Finance Team Chief
1 _____
2.(alt) _____

Participant Guide:

This organizational chart shows where FAST belongs in the Incident Command System (ICS) structure. The FAST program is housed under the Human Services Branch. The FAST Coordinator will report to the Human Services Coordinator during activations and provide updates to the FAST Program Manager. The FAST Team Lead will report directly to the FAST Coordinator. All FAST members will report to their assigned FAST Lead.
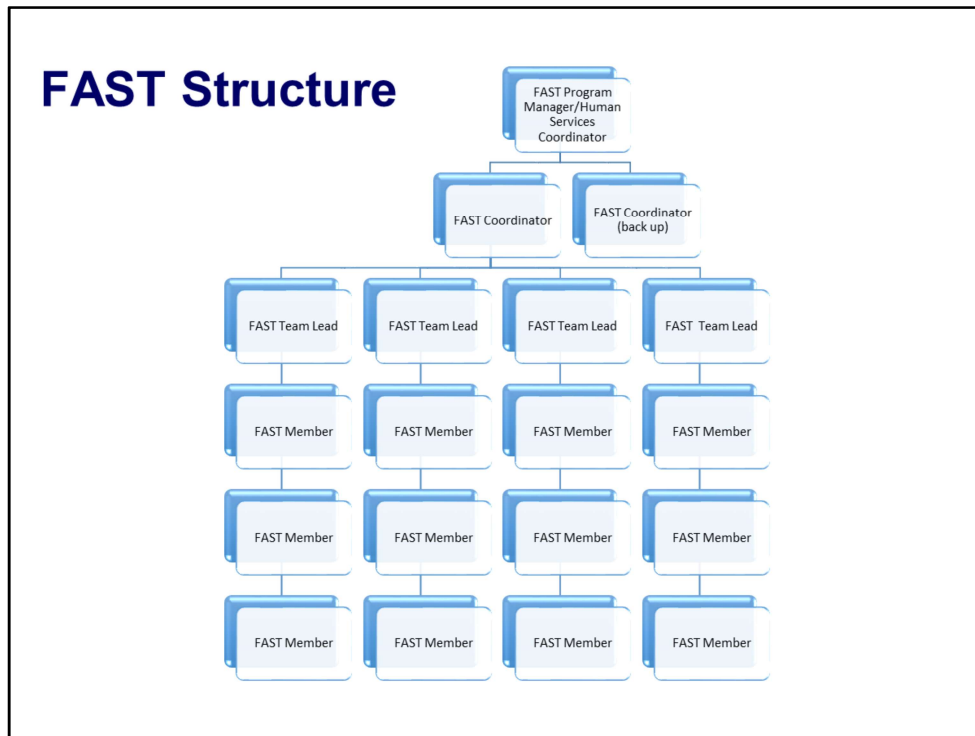
Participant Guide:

FAST Program Manager/Human Services Coordinator → FAST Coordinator → FAST Team Lead → FAST Member

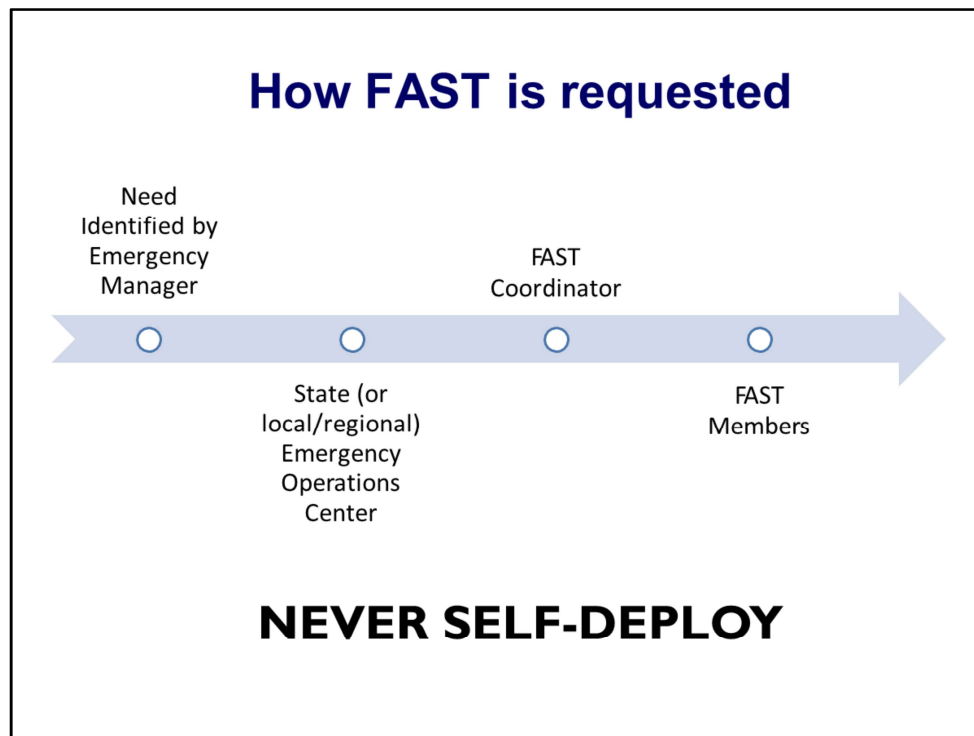1 Team Lead → 1 to 7 Members (to maintain span of control)

Preparing to Deploy

Unit 3

Unit 3 Objectives

▸ Explain process of alert and notification

▸ Demonstrate how to use the FAST Assignment form

▸ Discuss personal go-kits

▸ Discuss FAST go-kits

Participant Guide:

1. A Disaster Service Center Manager or the County Emergency Manager will identify a need for FAST members and a resource request will be made to the State Emergency Operations Center (EOC) through the County EOC.
2. At the SEOC the Human Services Coordinator will receive the request.
3. The Human Services Coordinator will communicate with the FAST Coordinator about what is being requested and the FAST Coordinator will alert and notify the FAST members and gather information on who will be able to deploy
4. The number of FAST members deployed or placed on-call will depend on the needs and size of the disaster service center.

Notification

➢ Notification will be in the form of a phone call, text, and/or email.

➢ First notification may put you in on-call status

➢ The information during the deployment notification call may be limited, but you will be told:

    1. The location you will report to
    2. When you will report to the location
    3. Who you will report to

Participant Guide:

The first notification call/text may come ahead of an expected disaster impact, like a hurricane, and will let you know that the team is in on-call status. This initial on-call notification call will give you time to prepare for deployment so you are able to immediately depart when you get the deployment notification call.

In a no warning disaster there may not be an on-call notification call. You may be asked to deploy on short notice.

Some information you want to make sure you get from the FAST Coordinator on the deployment notification call:

1. Team Lead's name and contact information (For Team Leads: Site Point of Contact's name and contact information; County (or Counties) Emergency Operation Center (EOC)/Emergency Management contact information
2. Location you will be working – name and address
3. The type of lodging and if there is power, internet access, safe area-roads or law enforcement barriers
4. Who you will be working with, the names and contact information of other FAST members. The FAST Coordinator may not have that information at the time of the call. You will be notified once your other team members have been confirmed.

5. What to take and if anything specific needed
6. Deployment duration
7. Work conditions

Reminder to bring personal sustaining kit. In the Reference Section the "FAST CHECKLIST – Go-Kit Review" document will help you get started on your Personal and FAST go-kit.

Preparing for deployment
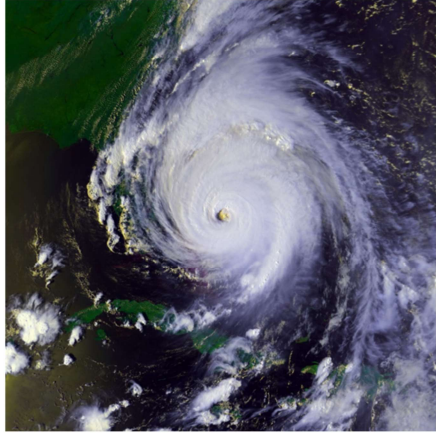
▸ Personal Go-Kit

▸ FAST Go-Kit

▸ Clearance from FAST Coordinator

▸ Approval from your agency/department

Participant Guide:

Have a FAST go-kit and a personal go-kit ready ahead of time which will allow for a quicker response to a deployment assignment.

Be in communication with FAST Coordinator to get cleared to deploy.

Personal Go-Kit

- ❑ Snacks and water
- ❑ Cash/credit cards
- ❑ Cell phone/charger
- ❑ Contact phone numbers
- ❑ Clothing
- ❑ Seasonal gear
- ❑ Personal hygiene items
- ❑ Ear plugs
- ❑ Medication
- ‣ **Remember – you may be deployed to austere working conditions**

Participant Guide:

The items in this slide are some examples of items you may want to put into your personal go-kit.

Only you know what you need to stay comfortable. Think about the items that you can't live without.

In the Reference Section the "FAST Checklist Go-Kit Review" document will help you get started on your Personal and FAST go-kit.

Suggested FAST Go-Kit Items

❑ Hard copy of forms
❑ Identification badges
❑ Office supplies
❑ Clipboard
❑ Magnifiers/pocket talkers
❑ Flash drive/laptop
❑ Phone/computer chargers
❑ Phone number list
❑ Spare batteries

Participant Guide:

Required equipment: Hard copy of FAST forms, FAST ID Badge, Pens, lockable file boxes (for Lead), phone number list given by the FAST Coordinator, cell phone with charger.

Program will provide FAST ID Badges to those who will need them in the field.
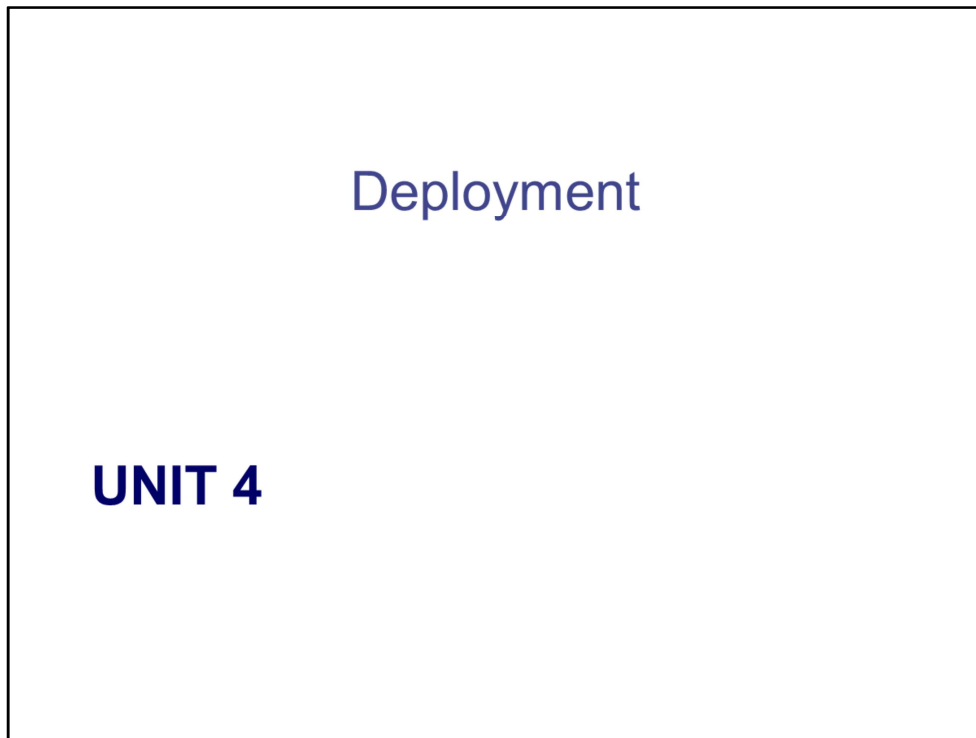
Media/Social Media Use

‣ Direct all media inquires to the NCEM Public Information Officer (PIO) or County PIO

‣ FAST members do not post about the response on their social media sites (Facebook, Twitter, etc.)

Deployment

UNIT 4

Unit 4 Objectives

▸ Describe roles and responsibilities of FAST members

▸ Describe the resource request process

▸ Discuss where resources come from

▸ Demonstrate how to use the Quick Notes, the Resource Request (ICS-213) and the ICS-214 form

▸ Describe how to assess, support and problem solve for individuals

▸ Provide basic overview of shelter operations

FAST
POSITION DESCRIPTIONS

FAST RESPONSE TEAMS

Participant Guide:

These are the locations that the FAST Response Teams will work.

These teams will stay at disaster services center locations on a short-term basis or long-term basis depending on the scope of the disaster. When staying short-term they can return as needed, but will generally work round-robin style at different shelters until needs have been addressed.

FAST Response Team Members

Help affected residents maintain their health, independence and safety by:

▸ Assessing the immediate needs of affected individuals

▸ Initiating support requests for equipment and/or supplies

▸ Ensuring services, equipment and/or supplies make it to the correct individual

FAST Response Team Members

Are expected to:

‣ Deploy to work assignment when requested

‣ Assess immediate needs of affected individuals with access and functional needs

‣ Initiate support requests

‣ Ensure resources are delivered to the appropriate individual

‣ Work with disaster service center staff

FAST Response Team Lead

▸ Initiate and maintain communication

▸ Coordinate information flow

▸ Lead and organize meetings

▸ Compile and organize paperwork

▸ Prioritize and track support requests

▸ Monitor distribution of requested resources

▸ Oversee the demobilization

▸ Communicate with FAST Coordinator

Participant Guide:

A FAST Lead:
- Is assigned or designated when a team deploys to a shelter
- Manages the FAST members at the disaster service center
- Initiate and maintain communication with the Site Manager and Disaster Health/Mental Health staff
- Coordinate information flow between FAST members and site staff (The Site Manager should identify the best method of communication, always ask before determining communication methods)
- Lead and organize FAST briefing meetings
- Compile and organize paperwork
- Prioritize and track support requests
- Monitor the distribution of resources and equipment
- Oversee the demobilization of the FAST members
- Communicate with FAST Coordinator to maintain situational awareness

FAST Coordinator Duties

‣ Work in the State Emergency Operations Center (Raleigh)

‣ Contact FAST members for deployment notification

‣ Monitor WebEOC Resource Tracker and respond to requests

‣ Collect and disseminate information to deploying FAST members

‣ Provide support to deployed FAST members

‣ Maintain daily contact with FAST Leads

Participant Guide:

Some of the duties of the FAST Coordinator include:
- Contact FAST members for deployment notification
- Monitor WebEOC Resource Tracker and respond to requests – you will be assigned resource requests where FAST is being requested by the counties.
- Collect and disseminate information to deploying FAST members – You will get this information from a variety of sources: The resource request, the Infrastructure Breakout Room (road conditions), and will work with the Logistics Coordinator to determine if hotel rooms are available when needed (lodging information).
- Provide support to deployed FAST members – if they have any challenges they need assistance with while in the field.
- Maintain daily contact with FAST Leads – This ensures the safety of our teams.
- Collect data from FAST Leads

A FAST Coordinator Job Aid is currently in the process of being created.

North Carolina State Emergency Operations Center (SEOC)

Participant Guide:

Emergency Operations Center (EOC) is a central command and control facility that is responsible for carrying out the principles of emergency management functions during a natural or man-made emergency. The SEOC provides support to the local EOCs. This is where the FAST team will be requested and deployed from.

FAST Coordinator will be assigned to the Human Services Breakout Room when the SEOC is activated.

Participant Guide:

This is WebEOC, also referred to as NC Sparta - we use this system to track and maintain situational awareness during events. Only FAST Coordinators will have access to this system.

Request - State WebEOC

Assignment Information

Tasking Process: ⓘ   Originating Agency (County) > RCC MAC > RCC Operations > Operations Chief > Functional Lead > Assigned To User > **Task is (being) fulfilled**

Status	On Scene ⌄	Branch	Central	County-to-County Mutual Aid	☑
Assigned To Lead	Human Services Coordinator ⌄	Assigned To User	FAST Coordinator ⌄		

Notes: FAST Team members arrived safely and reported to Shelter manager

Past Notes:
FAST with two members deploying to Fike HS shelter. ETA 1300 hours on 5/23/19. Will report to POC at shelter.
Updated by Sheri.Badger at 5/22/2019 14:49:37
Working to fulfill request via FAST Coordinator
Updated by Alyson.Hill at 5/22/2019 12:10:14
RCC-Central MAC assigned to NCEOC functional lead – Human Services

Resource Request

Resource Type - Requested *required*	FAST Team	Request Generator ⓘ / Request Pump ⓘ	○ Yes ⦿ No / ○ Yes ⦿ No	Size ⓘ	
Group	⌄	Definition	⌄		
	NIMS Details / FEMA Typing	Type	⌄		
Quantity ⓘ	0	Need By Date/Time *required*	05/23/2019 12:06:11	Approximate Return Date/Time	

Resource Use *required*: 500 Harrison Drive Wilson, NC 27893. Current population at shelter is 143. Number of days requested: 3 or until assessments are complete. Staff shelter available at US Bankruptcy Court Building located at 1760 Parkwood Boulevard Wilson, NC 27893. Meals will be provided at both shelter locations.

Will Be Provided By Requestor

Lodging *required*	⦿ Yes ○ No	Estimated Daily Cost	
Fuel *required*	○ Yes ⦿ No		

Team Deploying to Disaster Service Center

▸ FAST Lead

  ▸ Check-in with the Site Manager

  ▸ Receive a briefing from Site Manager

  ▸ Connect with Health Services and Mental Health Services

▸ FAST Members

  ▸ Receive briefing from FAST Lead

Participant Guide:

The team will have met up at a pre-determined location selected by the FAST Lead if members are from the area. If the entire team is not in the area, then they will leave the lodging location together to go to the site. The FAST Lead will ensure that everyone on the team is present before departing to the site. If anyone is missing, the FAST Lead will contact that team member. If unable to do so, FAST Lead will contact the FAST Coordinator.

FAST Lead

- If everyone on the team is driving separately, make sure you account for all members once you arrive at the site.
- You will check-in with the Site Manager upon arrival at the site. If your assignment is a evacuation or general population shelter, you will ask the shelter staff at the registration area to call the Shelter Manager. Make sure you and your FAST members sign the Staff Sign-in Sheet at registration.
- If the Site Manager doesn't understand what FAST is/does, you will provide an overview of what the team is there to do and the processes the team follows.
- Explain to the Site Manager what process the team follows to obtain resources.
- If the Site Manager has any concerns with how the team operates, contact the FAST Coordinator so they can help resolve the concerns.

- Have the Site Manager give you a briefing on the current state of operations at the location.
- Be sure to document the Site Manager's contact information in the event you can't find them when they are needed. Give the Site Manager your contact information.
- At a evacuation or general population shelter, have the Shelter Manager connect you with the Health Services worker and the Mental Health Services worker. You many need to provide an overview to these workers of what the team is there to do and the processes the team follows.
- Have the Health Services and Mental Health Services workers give you a briefing and make sure you get the following information:
     - Their contact information (and give them your contact information)
     - Who in the shelter has had assessments done
     - For assessments done are there any identified needs, items, or services that the team can help obtain
     - Are there identified shelter residents that needs assessments done the team can help with
- Determine a plan of action with the Health Services and Mental Health Services workers. Let them know that the team will be monitoring all areas of the shelter for any potential needs that may arise from shelter residents. Also let them know that you are available to help them obtain items and services as needed. Explain to them the team's process for obtaining resources (covered later in this unit).
- You will then have a briefing with your team. This is covered on the next page.

FAST Members

- If required by the site, you will sign the Staff Sign-in Sheet.
- You will wait for FAST Lead to get briefings from the Site Manager and if assigned to a evacuation or general population shelter, from Health Services and Mental Health Services.
- You will be given a briefing by the FAST Lead. This briefing is cover on the next page.

FAST Member Briefing

▸ Given by the FAST Lead

▸ Current situation status

▸ Tasks/identified needs

▸ Process/procedures

▸ Assignments/coordination of FAST members

▸ High priority needs

▸ Operational period/length of shift

▸ Next briefing/meeting time

Participant Guide:

FAST Lead

• Share with your team all information that the Site Manager and if assigned to a evacuation or general population shelter, all information shared by the Health Services and Mental Health Services workers (current situation status and any tasks or identified needs).
• Remind team of the FAST operational process/procedures.
• Coordinate the team by giving out assignments. This could be based on shelter area and/or identified needs. Be sure to let the team know which, if any, identified needs are a high priority.
• Let the team know what time the shift will end.
• Let the team know what time and where to meet for the end of shift briefing.

FAST Member

• Use page two of the FAST Assignment form to take notes during briefing (this form was reviewed in Unit 3 and is located in the Resource Section).

Assess, Support and Problem Solve

▸ The main role and responsibility of FAST members is to:

    ▸ Assess needs

    ▸ Offer support

    ▸ Be creative in addressing the needs of shelter residents who have disabilities and/or access and functional needs

Participant Guide:

- The FAST Lead and Members will be working hand-in-hand with Site Manager, Disaster Health Services, and Disaster Mental Health Services to assess, offer support, problem-solve, and procure items and/or services for affected individuals.

- Don't be afraid to approach people and ask if they have any needs.

- Never arbitrarily decide what you think will work for the person with access and functional needs. Make sure there is a discussion with the individual on what they need.

Connecting with Affected Individuals

▸ Use a building layout map if available

▸ Ask site staff if they have already identified those in
   need of assistance

▸ Speak with affected individuals individually

▸ If needed, arrange to meet residents at specific times
   and/or locations

"Initiating conversations with disaster victims"

Participant Guide:

• Use a building layout map if available to get a feel of the site. If working a shelter
  they may have a separate dormitory map identifying where shelter residents are at
  in the dormitory. If at a disaster recovery center or family assistance center they may
  have a layout of the center available.
• Site staff may already have individuals identified for you to immediately help. Make
  sure you are still observing to identify anyone else who may need assistance.
• For privacy speak with affected individuals one at a time in a private area ,if
  available, or away from others.
• If deemed necessary, set up a schedule to speak to affected individuals.

Video of how to initiate a conversation with a disaster victim.
http://www.youtube.com/watch?v=zPZHJy7UHaw

Participant Guide:

The FAST On-The-Spot Assessment Strategies Checklist is tool that FAST members can utilize when conducting assessments. It provides a list of questions to help guide your assessments. Keep in mind that this is not an all-inclusive list of conditions/situations you may encounter when doing assessments.

This checklist was created by Pierce County Emergency Management in Washington State for their FAST program.

On-The-Spot Assessment Strategies Checklist

The following list may help to quickly identify resources, considerations or communication strategies to maintain the individual's independence. Remember, some individuals may have multiple needs, so be sure to check the complete list.

- ❑ Can the individual walk independently or what assistive devices does he or she use?
- ❑ Can the individual see? Is he or she blind or with low-vision?
- ❑ Can the individual hear?
- ❑ Can the individual speak and be understood?
- ❑ Can the individual understand English? If no, what language is understood?
- ❑ Can the individual comprehend? Is there a cognitive disability?
- ❑ Does the individual have medical needs?
- ❑ Does the individual require specialized equipment or assistive devices?
    - ❑ Braces, crutches, walker, wheelchair, motorized wheelchair
    - ❑ Cane for person who is blind or has low-vision
    - ❑ Service animal
    - ❑ Hearing aids or similar device
    - ❑ Portable oxygen tanks or generator

- ❑ Does the individual require constant care or supervision?
- ❑ Does the individual have a caregiver, friend or family member who assists him or her?
- ❑ Does the individual have a survival kit or "go bag" that includes a two-week supply of all current medications, medical equipment and supplies?
- ❑ Does the individual require electricity to maintain specialized equipment or assistive devices or refrigeration to store medications?
- ❑ Does the individual have a personal emergency health information bracelet, card, computer chip, file, or other source of information?
- ❑ Does the individual have a personal emergency contact list with names and phone numbers of family members, friends, doctors, insurance providers and hospital preferences?
- ❑ Does the individual have an emergency plan including shelter options?
- ❑ Does the individual have transportation needs?

FAST Resource Request Form (ICS 213)

▶ Use for each request

▶ Document request

▶ Track progress

▶ Keep copies for follow-up

Participant Guide:

- Use for each request
- Document request using detailed information
- Track progress
- Keep current

Once you identify and document items and/or services that the individual you are helping needs. You will give this form to your FAST Lead to put in the request for the items/services.

A copy of this form is located in the Reference Section located at the back of this manual.

All forms that you fill out on individuals needing assistance will be turned over to the FAST Lead when completed.
- Make a clear, prioritized request
- Determine how to get the resource the quickest
- Review and track all of the support requests submitted for that individual

FAST Lead – At the end of the shift you will take a picture of the front and back page of these forms. Recommend using an scanner app, such as Tiny Scanner (free edition), to

ensure that the picture is legible. You will be given direction from the FAST Coordinator on how and where to send them. They will be uploaded to the FAST SharePoint, which is accessible via smart phone, so FAST members going back to the site can follow-up with individuals to make sure they received the items and/or services that were requested on their behalf. The hard copy will be left with the agency running the disaster service center so they are aware what has been ordered and who gets the item and/or service when it gets to the site.

FAST Resource Request Form (ICS 213)

1. Incident Name (Optional):

2. To (Name and Position):

3. Requestor's Information:

  a. Name and Position: **c. Shelter Name:**

  b. Contact Information: **d. Operational Area:**

4. Subject:	**5. Date:**	**6. Time**

7. Message (Item Info):
  a. Describe what is needed:

  b. When is it needed?

  c. Does it come with anything, e.g. maintenance agreement?

  d. Intended user's name:

8. Delivery information:
  a. Deliver to (person):

  b. Address:

  c. Street intersection:

  d. Delivery Date/Time:

9. Approved by: Name:	**Signature:**	**Position/Title:**

10. Reply:

11. Replied by: Name:	**Signature:**

ICS 213	**Position/Title:**	**Date/Time:**

ICS 213 Resource Request Form

Purpose. The General Message (ICS 213) is used by the incident dispatchers to record incoming messages that cannot be orally transmitted to the intended recipients. The ICS 213 is also used by the Incident Command Post and other incident personnel to transmit messages (e.g., resource order, incident name change, other ICS coordination issues, etc.) to the Incident Communications Center for transmission via radio or telephone to the addressee. This form is used to send any message or notification to incident personnel that require hard-copy delivery.

Preparation. The ICS 213 may be initiated by incident dispatchers and any other personnel on an incident.

Distribution. Upon completion, the ICS213 may be delivered to the addressee and/or delivered to the Incident Communication Center for transmission.

Notes:

- The ICS 213 is a three-part form, typically using carbon paper; the sender will complete Part 1 of the form and send Parts 2 and 3 to the recipient. The recipient will complete Part2 and return Part 3 to the sender.
- A copy of the ICS 213 should be sent to and maintained within the Documentation Unit.
- Contact information for the sender and receiver can be added for communications purposes to confirm resource orders. Referee to 213RR example (Appendix B)

Block Number	Block Title	Instructions
1	**Incident Name** (Optional)	Enter the name assigned to the incident. This block is optional.
2	**To (Name and Position)**	Enter the name and position the General Message is intended for. For all individuals, use at least the first initial and last name. For Unified Command, include agency names.
3	**From** (Name and Position)	Enter the name and position of the individual sending the General Message. For all individuals, use at least the first initial and last name. For Unified Command, include agency names.
4	**Subject**	Enter the subject of the message.
5	**Date**	Enter the date (month/day/year) of the message.
6	**Time**	Enter the time (using the 24-hour clock) of the message.
7	**Message/Item Info**	Enter the content of the message. Try to be as concise as possible. a. Describe what is needed b. Time frame c. list items it comes with d. Write the name of the person the item is intended for. e. Other: place to put additional information if necessary.
8	**Delivery Information**	Enter the delivery information. a. Who is it being delivered to? b. Write the address to be delivered to. c. Write the street intersection d. Write the date and time of delivery
9	**Approved by** • Name • Signature • Position/Title	Enter the name, signature, and ICS position/title of the person approving the message.
10	**Reply**	The intended recipient will enter a reply to the message and return it to the originator.
11	**Replied by** • Name • Position/Title • Signature • Date/Time	Enter the name, ICS position/title, and signature of the person replying to the message. Enter date (month/day/year) and time prepared (24hour clock).

Participant Guide:

- Use for each affected individual you speak to
- Document request using detailed information
- Track progress
- Keep current

Once you identify and document items and/or services that the individual you are helping needs. You will give this form to your FAST Lead to put in the request for the items/services.

A copy of this form is located in the Reference Section located at the back of this manual.

All forms that you fill out on individuals needing assistance will be turned over to the FAST Lead when completed.
- Make a clear, prioritized request
- Determine how to get the resource the quickest
- Review and track all of the support requests submitted for that individual

FAST Lead – At the end of the shift you will take a picture of the front and back page of these forms. Recommend using an scanner app, such as Tiny Scanner (free edition), to

ensure that the picture is legible. You will be given direction from the FAST Coordinator on how and where to send them. When verified the FAST Coordinator has the information, delete from your phone.

Quick Notes			Page __ of ___
Client Name:			F-5
How to contact:			
Date/Time	**Needs**	**Plan**	**Outcome**

Quick Notes			Page __ of ___
Client Name:			
How to contact:			
Date/Time	**Needs**	**Plan**	**Outcome**

Quick Notes			Page __ of ___
Client Name:			
How to contact:			
Date	Needs	Plan	Outcome

ICS 214 – Activity Log

▸ Use to document key tasks you completed and any challenges you experienced during your shift

▸ Useful when reporting on lessons learned to FAST Coordinator

ACTIVITY LOG (ICS 214)

1. Incident Name:	2. Operational Period: Date From:	Date To:
	Time From:	Time To:
3. Name:	4. ICS Position:	5. Home Agency (and Unit):

6. Resources Assigned:

Name	ICS Position	Home Agency (and Unit)

7. Activity Log:

Date/Time	Notable Activities

| 8. Prepared by: Name: _____ | Position/Title: _____ | Signature: _____ |
| ICS 214, Page 1 | Date/Time: _____ | |

Participant Guide:

- The ICS-214 Activity Log is a form that will be used to document tasks that were completed and challenges you experienced during your shift.
- This form should be completed everyday.
- When deploying as a team, this form can be maintained by the FAST Lead. Team members will report their experiences with the lead so it can be documented in the form. The FAST Lead can also have every member on their team complete this form everyday.

A copy of this form and a completed sample form is located in the Reference Section located at the back of this manual.

Activity Log (ICS214)

1. Incident Name:	2. Operational Period: Date from: Date To: Time from: Time To:	
3. Name:	4. ICS Position:	5. Home Agency (and Unit):

6. Resources Assigned:		
Name:	ICS Position:	Home Agency (and Unit):

7. Activity Log:	
Date/Time:	Notable Activities

8. Prepared By: Name:	Position/Title:	
ICS 214, Page 1	Signature:	Date/Time:

Activity Log (ICS214)

Purpose. The Activity Log (ICS 214) records details of notable activities at any ICS level, including single resources, equipment, Task Forces, etc. These logs provide basic incident activity documentation,, and a reference for any after-action report.

Preparation. An ICS 214 can be initiated and maintained by personnel in carious ICS positions as it is needed or appropriate. Personnel should document how relevant incident activities are occurring and progressing, or any notable events or communications.

Distribution. Completed ICS 214s are submitted to supervisors, who forward them to the Documentation Unit. All completed original forms must be given to the Documentation Unit, Which maintains a file of all ICS 214s. it is recommended that individuals retain a copy for their own records.

Notes:

- The ICS 214 can be printed as a two-sided form.
- Use additional copies as continuation sheets as needed, and indicate pagination as used.

Block Number	Block Title	Instructions
1	**Incident Name**	Enter the name assigned to the incident.
2	**Operational Period** • Date and Time From • Date and Time To	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.
3	**Name**	Enter the title of the organizational unit or resource designator (e.g., Facilities Unit, Safety Officer, Strike Team).
4	**ICS Position**	Enter the name and ICS position of the individual in charge of the Unit.
5	**Home Agency** (and Unit)	Enter the home agency of the individual completing the ICS 214. Enter a unit designator if utilized by the jurisdiction or discipline.
6	**Resources Assigned**	Enter the following information for resources assigned:
	• Name	Use this section to enter the resource's name. For all individuals, use at least the first initial and last name. Cell phone number for the individual can be added as an option.
	• ICS Position	Use this section to enter the resource's ICS position (e.g., Finance Section Chief).
	• Home Agency (and Unit)	Use this section to enter the resource's home agency and/or unit (e.g., Des Moines Public Works Department, Water Management Unit).
7	**Activity Log** • Date/Time • Notable Activities	Enter the time (24-hour clock) and briefly describe individual notable activities. Note the date as well if the operational period covers more than one day. • Activities described may include notable occurrences or events such as task assignments, task completions, injuries, difficulties encountered, etc. • This block can also be used to track personal work habits by adding columns such as "Action Required," "Delegated To," "Status," etc.
8	**Prepared by** • Name • Position/Title • Signature • Date/Time	Enter the name, ICS position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).

ACTIVITY LOG (ICS214)

1. Incident Name: FAST Training	2. Operational Period: Date from: October 29, 2014 Date To: Time from: 08:00 Time To: 16:00	
3. Name: Judy L Harmon, Instructor	4. ICS Position:	5. Home Agency (and Unit): Single Resource - Harmon

6. Resources Assigned:

Name:	ICS Position:	Home Agency (and Unit):
Harmon, Judy L.	Class Instructor	Pierce County Emerg Mgmt
Peterson, Kim	Class Instructor	Community Connections
McKellar, Andy	Class Instructor	American Red Cross
Johnson, Nicole	Class Instructor	Pierce County Emerg Mgmt
Badger, Sheri	Class Instructor	Pierce County Emerg Mgmt

7. Activity Log:

Date/Time:	Notable Activities
5/22/13 – 07:30	Arrive at class to prepare, greet students, and assist with registration
08:30	Began to teach Unit 1 – Introductions & Overview
09:15	Break – (5 mins early)
09:30	Unit 2 – Background and Roles – K.Peterson taught
10:10	Had to evacuate the building due to a fire alarm
10:30	Re-entered the building with okay of fire dept.; Unit 2 was continued
10:50	Unit 3 – Working in the Shelter Environment began – A. McKellar and B.Nelson taught
11:00	Manager called and assigned me to work on a spreadsheet due by 11:30; was able to work on it from the class.
11:20	Completed assignment and provided to manager.
12:00	Took lunch break for 30 mins; answered emails; completed other work tasks.
13:00	Began to teach Unit 4 – National Incident Management System

CONTINUE WITH MAJOR ACTIVITIES, TASKS, AND/OR ASSIGNMENTS

8. Prepared By: Name: Judy Harmon Position/Title: FAST Instructor Signature:	
ICS 214, Page 1	Date/Time: October 29, 2014 16:00
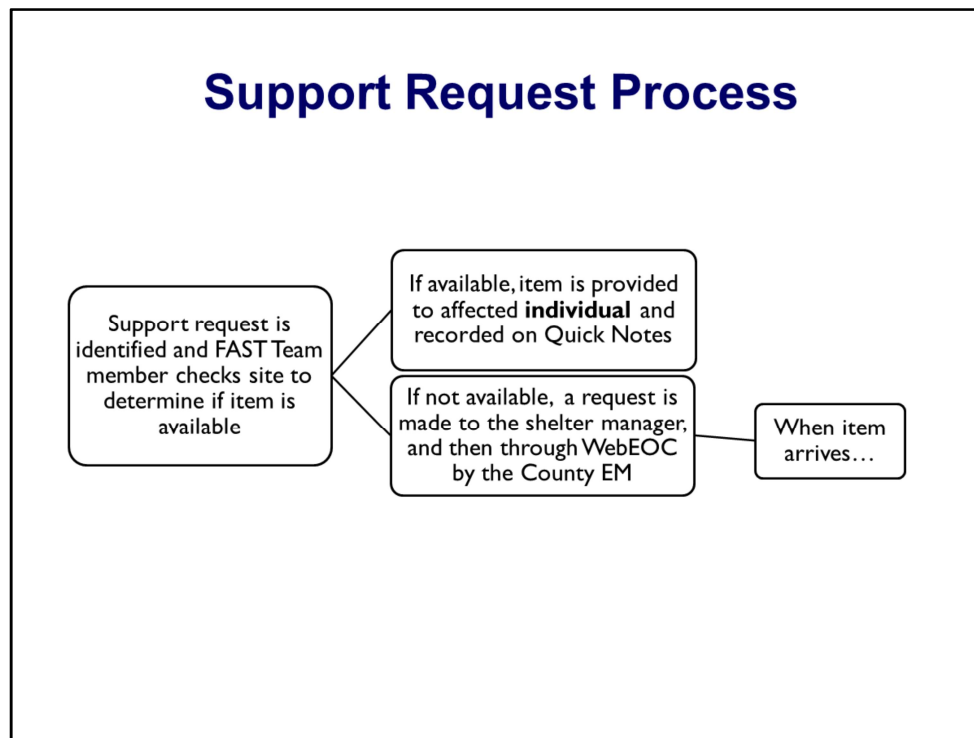
Participant Guide:

After notifying the disaster service center manager and ensuring they do not have the item needed the FAST Lead will send the resource request to the county emergency manager. If the local emergency manager doesn't have the item then he/she will push the resource request up to the SEOC to fill. The FAST Lead will keep the FAST Coordinator in the loop during this process.

When the item arrives it should be recorded in the FAST paperwork and delivered to the affected individual the item was requested for.

How to Make a Resource Request

▸ Request is made through the County EM with the disaster service center's manager knowledge

▸ Local Emergency Operations Center (or Regional Coordination Center RCC)

▸ State Emergency Operations Center

▸ Human Services works with Emergency Services, Business EOC, or Logistics to find the resource

▸ Resource sent to the disaster service center site

▸ FAST takes resource to individual it was requested for

Participant Guide:

1. After making the determination with the disaster service site manager (if at a shelter, include Health Services and Mental Health Services workers) that the item is not available on site or nearby, the FAST Lead will reach out to the County Emergency Manager to put in a resource request for the needed item or service.
2. If the County Emergency Manager can't fill the request from County resources then the County EOC will send a resource request to the State EOC.
3. At the State EOC, the Human Services Coordinator will work with the Emergency Services Coordinator, the Business EOC Coordinator, and the Logistics Coordinator to fine the resource requested.
4. Resource requested will be sent to the disaster service center site and the FAST Lead and FAST Member will ensure the item or service is delivered to the appropriate individual.

If the FAST Lead is unable to reach the County EOC, contact the FAST Coordinator for assistance.

Shelter Overview

Types of Shelters

▸ Evacuation Shelter

▸ General Population Shelter

▸ State Medical Support Shelter

▸ State Shelter

Participant Guide:

Evacuation Shelter

- Are usually used only for a short time (generally 24 to 48 hours) while a storm passes through an area.
- In most cases, it will not have cots or blankets for all residents (although some should be in place for those who need them most). Residents may be requested to bring their own sleeping bags, quilts, blankets, pillows, etc.
- Feeding, Health Services, and Mental Health Services will be provided.

General Population Shelter

- Opened after a disaster incident when people have been displaced from their homes and cannot return for an extended period of time.
- Will have cots and blankets, along with other necessities shelter residents will need.
- Feeding, Health Services, and Mental Health Services will be provided.

State Medical Support Shelter
- Can be opened ahead of a storm or after to meet the needs of individuals requiring specialized medical services to be administered by health care professionals.

State Shelter
- Is opened for out-of-state evacuees entering our State.
- This is opened when our State is not being affected by the storm OR when we are hosting a large number of out-of-state evacuees.
- Supplied and staffed at the same level as a general population shelter.

Sheltering Agencies

▸ County Department of Social Services

▸ State Department of Social Services

▸ County Department of Public Health

▸ State Department of Public Health

▸ American Red Cross

Participant Guide:

You will see a variety of agencies operating shelters during your deployment. In counties where the County Department of Social Services (DSS) starts sheltering operations, it is usually only for the first 72 hours then the American Red Cross will transition operations over to their shelter staff.

Some configurations you may see are:
• County agency operated – County DSS and County Public Health
• County agency operated with State support – State DSS Shelter Teams and/or State Public Health Nurses
• County agency operated with Red Cross support – One or more of the following: Shelter Manager, Health Services staff, Mental Health Services staff
• American Red Cross operated – All Red Cross shelter staff in all areas
• American Red Cross with County or State support – Nurses

Typical Shelter Activities

▸ Registration

▸ Dormitory Management

▸ Feeding

▸ Health Services

▸ Mental Health Services

▸ Information Dissemination

Participant Guide:

Registration

- The gate keepers of the shelter.
- General information is collected from shelter residents here.

Dormitory Management

- Oversees the dormitory area to ensure the safety of shelter residents.

Feeding

- Maintains the canteen area where snacks and water is available to shelter residents 24/7.
- Coordinates getting food from vendors.
- Responsible for serving the meals in a safe manner.

Health Services

- Conducts assessments to determine the medical and/or access and functional needs of shelter residents.

Mental Health Services

- Provides mental health support to shelter residents.

Information Dissemination

- Disaster information
- Shelter information
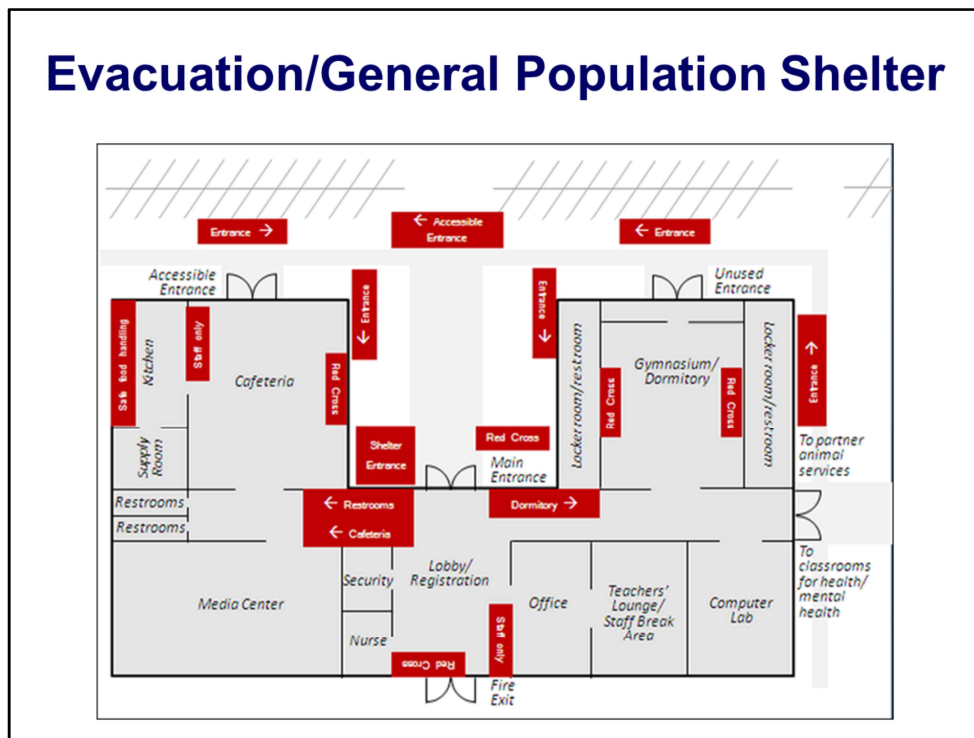
Instructor notes:

Participant Guide:

*Picture from American Red Cross Sheltering Fundamentals course.

Limitations

A segment of our community does require advanced care and accommodation beyond the scope and ability of general population shelters

Participant Guide:

While many people with access and functional needs can be accommodated in evacuation and general population shelters, it is important to recognize that are limits to the types of support services can provided.

The following conditions require further assessment to determine whether the individual is best served in a evacuation or general population shelter.

- Attendant medical care/continuous health care support;
- Advanced health conditions that require care, monitoring or support that they cannot manage for themselves or with the assistance of a self-provided caregiver;
- Physician-ordered observation, assistance or maintenance or custodial care;
- Life support equipment;
- Significant supportive nursing care;
- Advanced care due to recent surgery and/or medical treatment;
- Special equipment or services that are normally only found in a hospital.
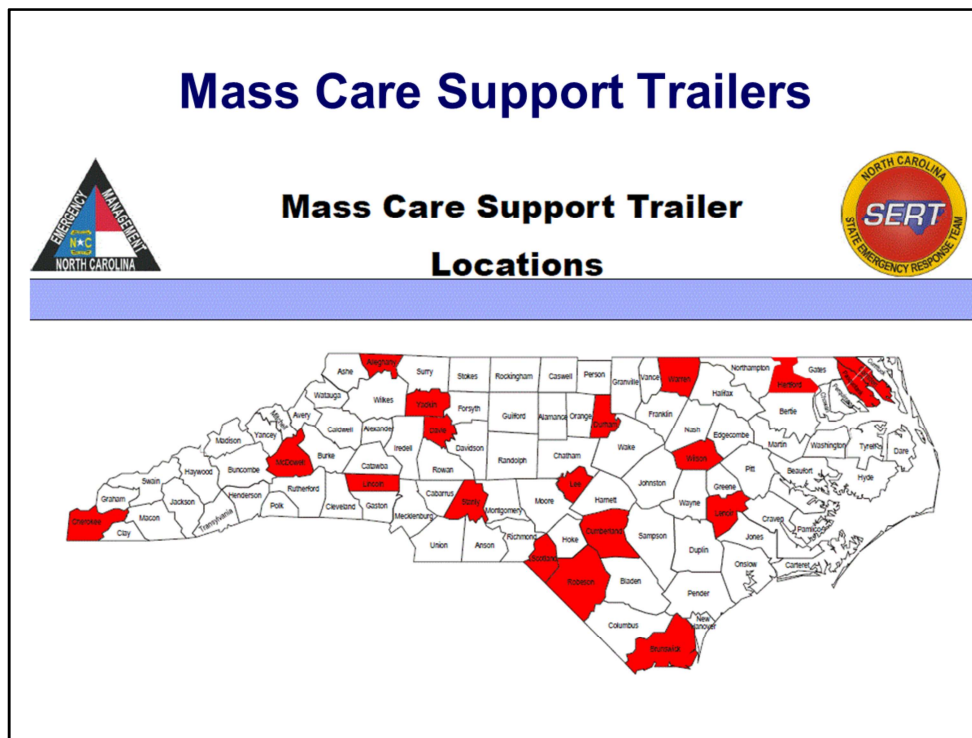
Participant Guide:

The shaded counties signify where a mass care support trailer is located. Those counties are Alleghany, Brunswick, Camden/Pasquotank, Cherokee, Cumberland, Davie, Durham, Hertford, Lee, Lenoir, Lincoln, McDowell, Robeson, Scotland, Stanly, Warren, Wilson, and Yadkin. The 18 trailers and the equipment inside them are the property of that county's emergency management agency. The County Emergency Managers can request to deploy a trailer that is in their county or if the county doesn't have one in their county they can request that a trailer from a nearby county be brought to them via county-to-county mutual aid.

The trailers contain the following items with weight limit where applicable (note that number of items may vary):

1 - 7"x12" Cargo Trailer
9 - Standard Folding Wheelchairs – 250 lbs.
1 - Heavy Duty Folding Wheelchair – 450 lbs.
2 - Portable Ramps 10 foot length – 800 lbs.
3 - Offset Canes – 250 lbs.
3 - Offset Canes with 6" foot – 250 lbs.
6 - Folding Blind canes
2 - Adjustable Adult walkers – 300 lbs.

2 - Adjustable Adult walkers with wheels – 300 lbs.
20 - Oversize cots – 300 lbs.
20 - Special Needs Cots -
1 - Hand truck
1 - Raised Toilet Seat – 250 lbs.
1 - Sliding Transfer Bench – 400 lbs.
2 - Portable Grip Bars – 130 lbs.
1 - Pro Slide (transfer board)
1 - Folding Shower Chair – 250 lbs.
5 - Magnetic Alarms
2 - 40 gallon Rubber maid containers with lids
1- 3M Home Dust Mask, 15-Pack
1 - Reusable Sleep Masks, 6-Pack
2 - Noise-cancelling Ear Muffs
1 - Gravity Feed Drinking Cup
1 - Gait Belt
1 - Duracell Portable Universal Charger
1 - Roll of Non-slip Dycem Film*
1 - Pack of 25 XL Adult Diapers
1 - High-side Divided Bowl/Plate
1 - Foam Tubing Assorted Pack
2 - Drop-Arm Commode Chair – 250 lbs.
1 - Show Me Communication Tool
1 - Rubbermaid Tote with Lid, 20-Gallon

Assessments

Participant Guide:

Common access challenges include:
- Feeding
- Mobility – walking, transferring, laying down, etc.
- Being able to access shelter sites and different areas within a shelter
- Communication
- Using the showers and restrooms INDEPENDENTLY

Participant Guide:

For people who are dependent on electricity:
- Place residents near outlets and assist them with making sure their equipment is charged
- Provide refrigeration for medications as-needed

People who rely on ventilators and/or other electrically powered medical devices may suffer adverse health consequences without their devices.

People who use power wheelchairs or scooters lose their mobility when batteries are not charged.

Participant Guide:

- MOST shelters have little to no privacy
- When possible, set up private areas.
- These can be used for: personal hygiene, catheter care and bowel/bladder care; for people with asthma, chemical sensitivities, allergies, weakened immune system (AIDS, diabetes or chemotherapy residents); and for disaster assistance and social services counseling
- If private rooms are not available, create a private area using tenting, fabric, tarps or other materials IF requested, do not assume people who have these conditions NEED them. Ask!
- Separate areas are helpful for residents who cannot be near animals, who require supervision and monitoring or people who have significant cognitive limitations
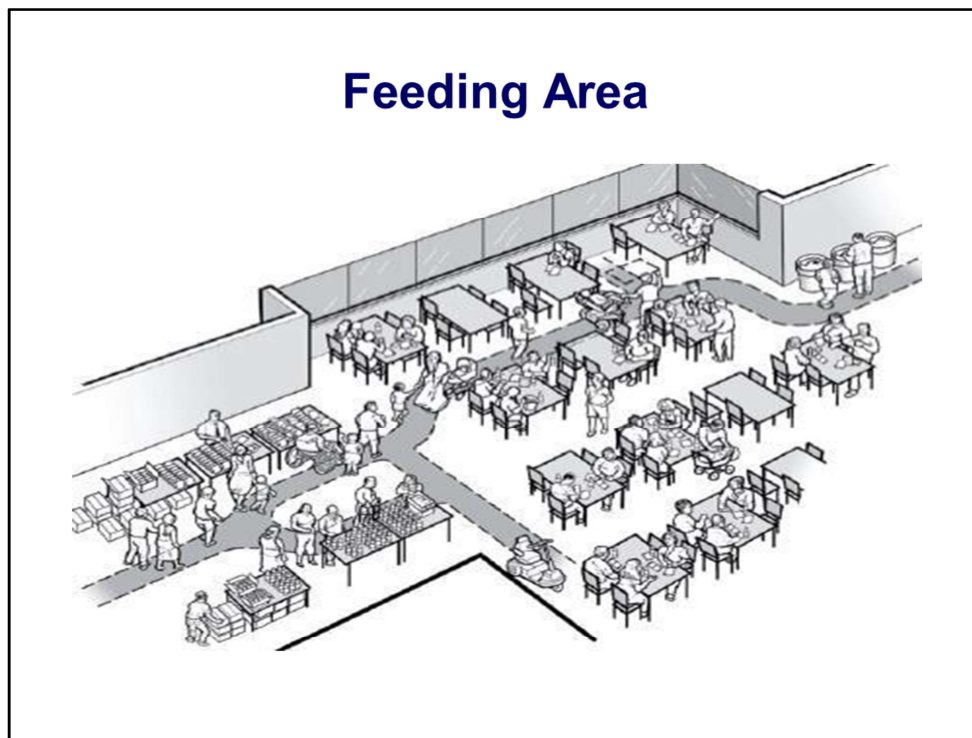
Feeding Area

Participant Guide:

- The eating area should be separate from the main dormitory
- Aisles should be accessible (at least 36 inches wide)
- Tables should be well spaced apart
- Table should be at a height accessible for wheelchair users
- Feeding supports may include both accessibility and/or dietary needs
- Many locations have the long folding tables with stools attached (ie, schools), so you may need to find tables and chairs like the ones in this picture.

Feeding Support Items

Participant Guide:

Items in the Mass Care Support Trailer that can help individuals maintain their independence in feeding include dycem file to help plate stay in place, divided bowl/plate to assist in eating, and the use of foam on items like utensils (could also be used on other items like toothbrushes) to help the person be able to grip the items themselves.
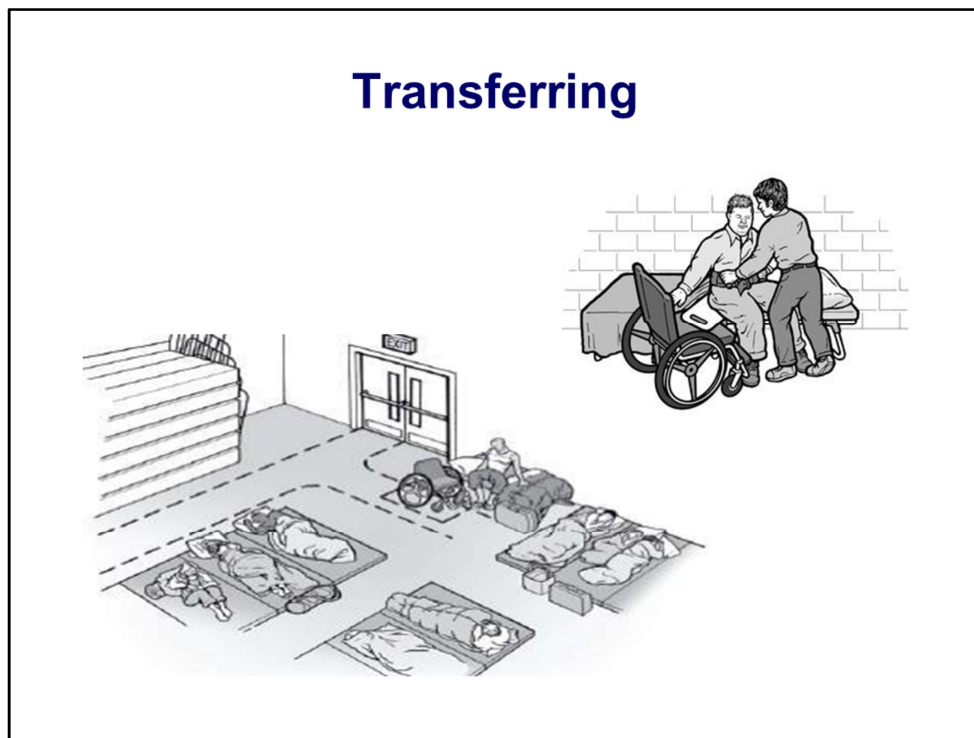
Transferring

Participant Guide:

- A preferred location for accessible cots may be against a wall – this helps to stabilize the cot and the wall can be used as a backrest
- A space of 36 inches wide along the side of the cot is necessary to transfer between a mobility device and the cot
- A transfer board and gait belt is on the Mass Care Support Trailers. Proper use of transfer board and belt should be taught to site workers, can use video link provided in the Training for Volunteers in Disaster Shelters By Medical Reserve Corps of Greater Kansas City Video List located in the Reference Section.

Personal Assistance Services

▸ Could be met by shelter staff if an individual is able to meet most of their other basic everyday needs

▸ If an individual needs help with all or most of their basic every-day needs, **a personal care assistant can be requested** (this is a resource request)

Participant Guide:

Even people who use personal assistance services in their homes can remain in a general population shelter if those service needs can be met.

When determining when a personal care assistant needs to be requested, several factors come into play. Below are just some of the many things you will need to consider.
- Does the individual only need help with an activity a couple of times a day? (i.e. transferring) If so, the shelter Health Services worker or other shelter staff may be able to help this individual.
- If an individual needs moderate assistance, is there enough shelter staff available to provide this level of support?
- Does the individual require assistance with all basic everyday needs?

Some types of personal care assistance:
- Medication Management
- Dressing
- Toileting
- Personal hygiene
- Feeding
- Communication

- Mobility
- Advocacy
- Completing forms
- Guiding- (around the shelter for blind and blind, or someone who is easily disoriented)

Participant Guide:

Information should be redundant and communicated in multiple different formats so as many people as possible receive the information as quickly as possible.

http://www.mass.gov/eohhs/docs/dph/emergency-prep/risk-communication/show-me-tool.pdf

Participant Guide:

- Pictures can be used to communicate when English isn't working.
- FAST members can help shelter staff with making sure signs are clear and understandable
- Use various sizes of pictures and text so shelter residents receive important information
- Post written comments of verbal announcements in specified areas and update frequently
- FAST members can assist shelter staff in acquiring sign language interpreters

The APP version of the Shoe Me tool can be found in Google Play and Apple's App Store. Search "Show me for Emergencies." You can choose different languages on the app.

Communicating with People with Intellectual Disabilities

▸ Treat all individuals with respect

▸ Use plain/simplified language, ie. concrete terms and ideas

▸ Repetition may be needed, however allow extra time for individual to respond before repeating (10-15 seconds)

Participant Guide:

Simplification of information can be helpful when working with people with intellectual disabilities.
(Caution- simplification can be mis-read by audience as less intelligent and we MUST avoid terms that demean others)

Refer to the Interacting with Individuals with Disabilities guide in the Reference Section in this manual. You can also find more information from June Kailes at this link:
http://www.jik.com/pubs/TipsForInteracting%20final%202.14.11.pdf

Communicating with People with Intellectual Disabilities

▸ Sometimes gestures or examples paired with speech can assist with understanding

▸ Ask individual to repeat back instructions to confirm understanding

▸ Speak directly to the person, engage family or support staff for assistance if needed

Participant Guide:

Simplification of information can be helpful when working with people with intellectual disabilities.
(Caution- simplification can be mis-read by audience as less intelligent and we MUST avoid terms that demean others)

Refer to the Interacting with Individuals with Disabilities guide in the Reference Section in this manual. You can also find more information from June Kailes at this link:
http://www.jik.com/pubs/TipsForInteracting%20final%202.14.11.pdf

Communicating with People Who Are Deaf, Deaf-Blind or Hard of Hearing

▸ Have a pen and thick black marker and paper (or white board) available

▸ Ask their preferred means of communication

▸ Speak in a normal tone of voice and pace

▸ Reduce ambient/background noise (move to a quieter space)

▸ Use gestures

Participant Guide:

- There are different degree of hearing loss – from mild hearing loss to profoundly deaf.
- Onset of hearing loss can be from birth to any age.
- Language development vary for each individual based on onset of hearing loss and also upbringing.
- Some may deny their hearing loss. Some may not be aware of their hearing loss.
- Some people may or may not advocate for their communication needs.
- ASL is first language for many people and English is second language – some people may have challenges communicating in English especially reading and writing.
- Not everyone knows sign language – ask what their communication preference is
- Individual assistive listening device to enhance amplification for hard of hearing understand speech via hearing aids equipped with a telecoil or receivers. Also there are some apps that can be downloaded to smart phones and tablets – earphones are required. Another option is to have contract with Video Remote Interpreting (VRI).

Deaf-Blind apply to those who have both at same time; varying degree of hearing loss and vision loss

- Black marker such as Sharpe – easier for people with low vision to read
- Can use dry erase board or device such as tablet or smart phone

- Print with finger on palm of deaf-blind person. Use caps only not lower case.

Communicating with People Who Are Deaf, Deaf-Blind or Hard of Hearing

▸ Use individual assistive listening device

▸ Avoid covering your mouth or face

▸ Talk directly to individual, not to the interpreter

▸ Reduce ambient/background noise (move to a quieter space)

▸ Print on palm (capital letters)

▸ Offer written information in alternative formats (large print, braille)

Participant Guide:

- There are different degree of hearing loss – from mild hearing loss to profoundly deaf.
- Onset of hearing loss can be from birth to any age.
- Language development vary for each individual based on onset of hearing loss and also upbringing.
- Some may deny their hearing loss. Some may not be aware of their hearing loss.
- Some people may or may not advocate for their communication needs.
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Deaf-Blind apply to those who have both at same time; varying degree of hearing loss and vision loss

- Black marker such as Sharpe – easier for people with low vision to read
- Can use dry erase board or device such as tablet or smart phone

- Print with finger on palm of deaf-blind person. Use caps only not lower case.

Communicating with People with Vision Loss or Blindness

▸ Always identify yourself

▸ When talking, say the name of the person to whom you are speaking

▸ Speak in a normal voice tone and say when you are moving from place to place

▸ Let the person know when you are leaving

▸ When offering directions use specifics, such as "left 100 feet" or clock cues

▸ Never grab, push or pull on a person who is Blind or has vision loss.

Participant Guide:

When interacting with patients with vision loss remember that there are varying degrees of vision loss.

It is best to take a guiding approach or use hand under hand. Tap them on the arm and allow them to take your elbow to be guided. Give them control by using your hand UNDER their hand to show them objects.

NEVER pet or distract a working service animal or canine companion.

When a service animal is present offer the opportunity to teach others about service animals and the proper way to interact in social situations.

Service Animals, Assistance Animals, and Companion Animals

▶ Service animals fall under ADA

▶ Assistance animals fall under FHA
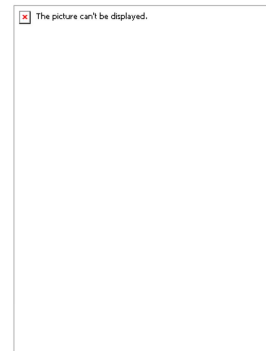
Service Animals (ADA)

▸ Service animals:

  ▸ Can be in all areas accessible to the general public
  ▸ Are not pets
  ▸ Must be housebroken and under control

▸ To determine if an animal is a service animal, you **may ask**:

  1. Is this animal required because of a disability?
  2. What task has this animal been trained to perform?

▸ You **may not ask** about a person's disability or require documentation

Participant Guide:

Staff may prohibit a service animal if
- It is out of control
- It is not housebroken
- There is a legitimate reason (e.g. animal will affect a medically sterile area)

People may need assistance when their service animal is not present.

For more information go to http://www.ada.gov/regs2010/service_animal_qa.pdf and see Welcoming Your Customers Who Use Service Animals document and Miniature Horses document in the Reference Section of the student manual.

Information in the slide is from: "Revised ADA Requirements: Service Animals," United States Department of Justice, http://www.ada.gov/service_animals_2010.htm

Assistance Animals (FHA)

▸ Person must have a disability

▸ If disability is not apparent, it is permissible to ask for a letter from a doctor or therapist

Participant Guide:

What is an assistance animal?

It is an animal that is not specifically trained, but may perform tasks or provide emotional support for the benefit of a person with a disability. An assistance animal is not a pet, but it can be a cat, dog, bird, monkey, or other type of animal. This rule, under the Fair Housing Act, applies only to shelters, as they are considered domiciles, and not to other disaster service centers.

**Observe and Identify
Access Issues**

What are some solutions?

Observe and Identify Access Issues

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Access Solutions

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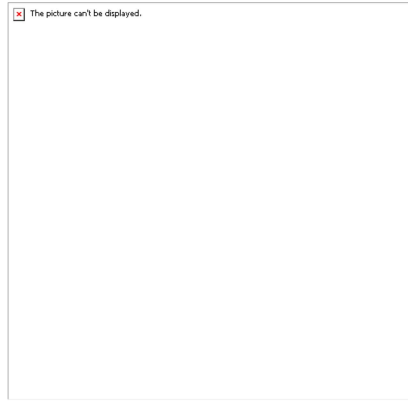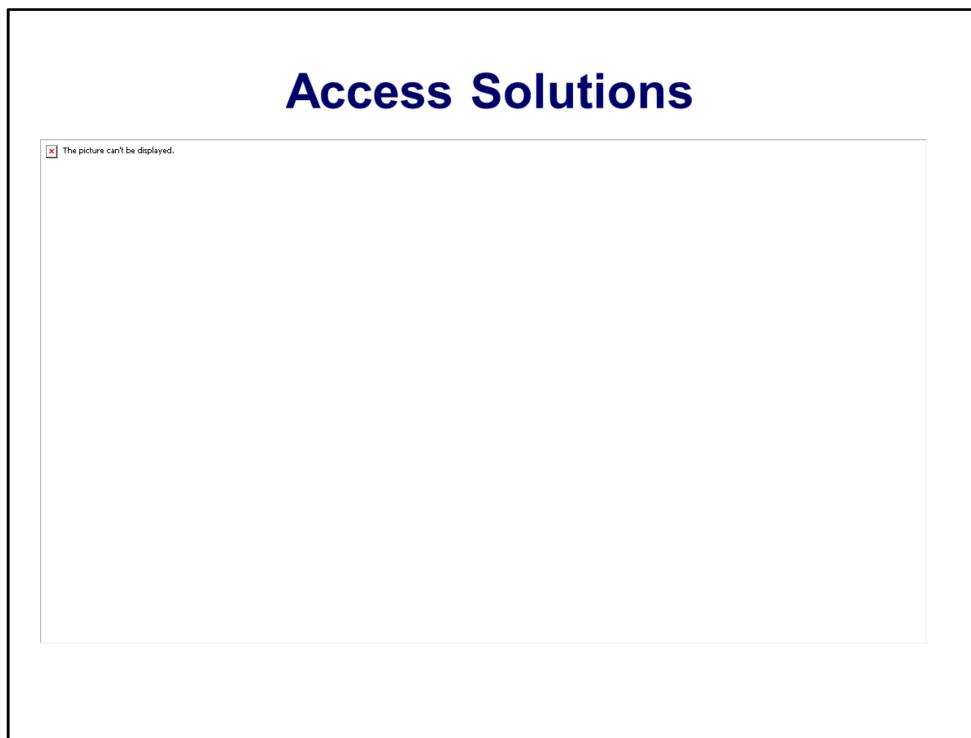
Participant Guide:

The shaded area shows the accessible route around the dormitory:
- There are areas specific for accessible beds and cots.
- Pathways are wide and not cluttered.

Observe the site to determine what areas are most accessible and what areas may need modifications.

Pay special attention to emergency exit doors and mark these as accessible exits for people in the location or other gathering place using signage.

Observe and Identify Access Issues

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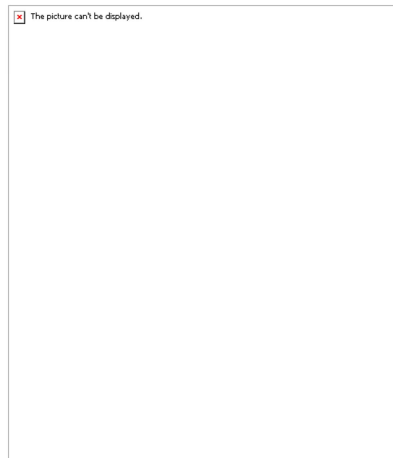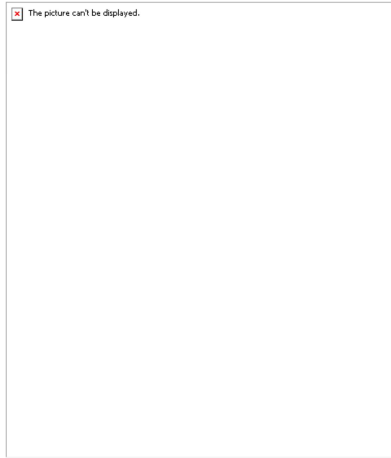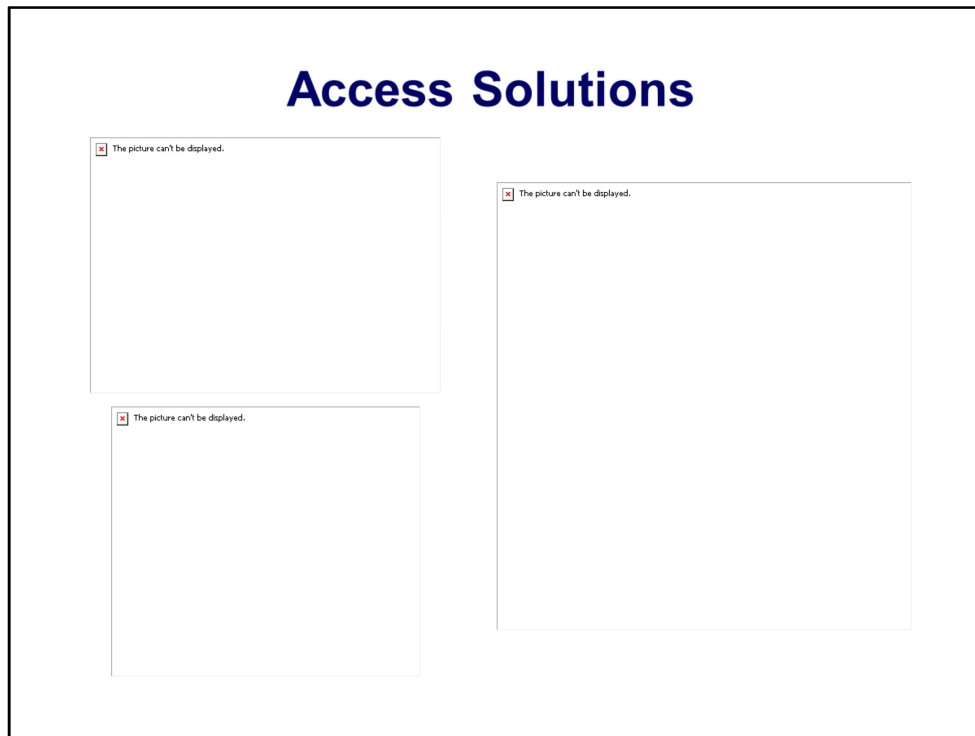
Participant Guide:

FAST team members may need to request a ramp.

Participant Guide:

Possible solutions
- Rent accessible portable bathrooms and sinks
- Build a ramp to access the bathrooms if accessible portables are not available
- Rent accessible portable showers, if needed.

At least one set of toilets must be accessible to individuals who use a wheelchair, scooter or other mobility devices

Observe and Identify Access Issues

Participant Guide:

- FAST members can request accessible cots or blow up mattresses
- Position cots further apart
- Accessible routes should be at least 36 inches wide, smooth surfaced and free of steps
- Accessible cots have a sleeping surface of 17 to 19 inches above the floor
- Individuals who use a wheelchair, scooter or other mobility device should sleep near their family or other companions
- Accessible cots are designed for easy transfer from a wheelchair and are easier to access for people with mobility limitations (High, wider, steadier) and have higher weight capacities than standard cots (450 pounds and above)
- FAST members may have to instruct site workers on how to do safe transfers. Guidance on this will be in the Interacting with Individuals with Disabilities guide in the Reference Section in this manual.

Compare and Contrast

Participant Guide:

Which is better? Compare and contrast.

- Remind staff about the positioning of interpreters for the media and for affected individuals at the disaster service center.
- Observe to ensure that affected individuals are able to receive information they need in the formats offered at the site.
- FAST members should remember that news updates need to be available in multiple formats.

Demobilization & Transitioning

UNIT 5

Demobilization/Transition of FAST

▸ Demobilization and transitioning is overseen by the FAST Lead

▸ FAST members are responsible for:

  ▸ Establish priorities

  ▸ Return equipment

  ▸ Give all paperwork to the FAST Lead

Participant Guide:

This unit discusses the demobilization/transition process of FAST
- Demobilizing is a term used when your assignment is coming to an end
- Transitioning is when the team is finished at one shelter location and is going to another shelter location
- FAST members establish priorities pertaining to the work that they have been doing
- Each FAST member needs to organize their paperwork and turn in to the FAST Lead and return all equipment they have been issued/using.

FAST Lead Responsibilities in Demobilization and Transitioning

▸ Provide debriefing to the FAST members

▸ Get briefing from FAST members on what worked/what didn't work

▸ Collect and organize all documentation/paperwork

▸ Provide briefing to the Site/Shelter Manager

▸ Get documentation to FAST Coordinator and Site/Shelter Manager (or Red Cross Health Services)

▸ Oversee the demobilization or transitioning of FAST members

▸ Debrief to the FAST Coordinator on lessons learned

Participant Guide:

It is the FAST Leader's responsibility to oversee the demobilization and transitioning of the FAST members.

The FAST leader will:
• Schedule and lead the briefing of the FAST members including lessons learned for that site location
• Collect and organize all documentation/paperwork from the team
• Brief the site manager on filled resource requests and those that remain pending (you will send a copy of the FAST Resource Request form to the FAST Coordinator and give the original to the Site Manager)
• Oversee demobilization or transition of FAST members
• If transitioning to another shelter location, give team members relevant information such as address of location
• Brief the FAST Coordinator, give lessons learned

Briefing

▸ Completed prior to demobilization or transitioning

▸ Review status of resource requests

▸ Review outstanding needs of affected individual

▸ Review equipment in use

▸ Lessons learned (positives and challenges)

Participant Guide

The FAST Leader should organize a briefing with the team.
- The briefing should review the status of any affected individuals remaining in the shelter as well as a review of any equipment that has been assigned to an affected individual. Include the Site Manager in this briefing area
- Should have a discussion during briefing on the lessons learned during the deployment (positives and challenges).
- If transitioning, ensure that team members have the correct address for the next shelter location

FAST Coordinator Demobilization

▸ Human Services Coordinator will decide when to demobilize FAST from SEOC duties

▸ Turn over paperwork to Human Services Coordinator

▸ After Action Report

Participant Guide

The FAST Leader should organize a briefing with the team.
- The briefing should review the status of any affected individuals remaining in the shelter as well as a review of any equipment that has been assigned to an affected individual. Include the Site Manager in this briefing area
- Should have a discussion during briefing on the lessons learned during the deployment (positives and challenges).
- If transitioning, ensure that team members have the correct address for the next shelter location

Exercise Scenarios

UNIT 6
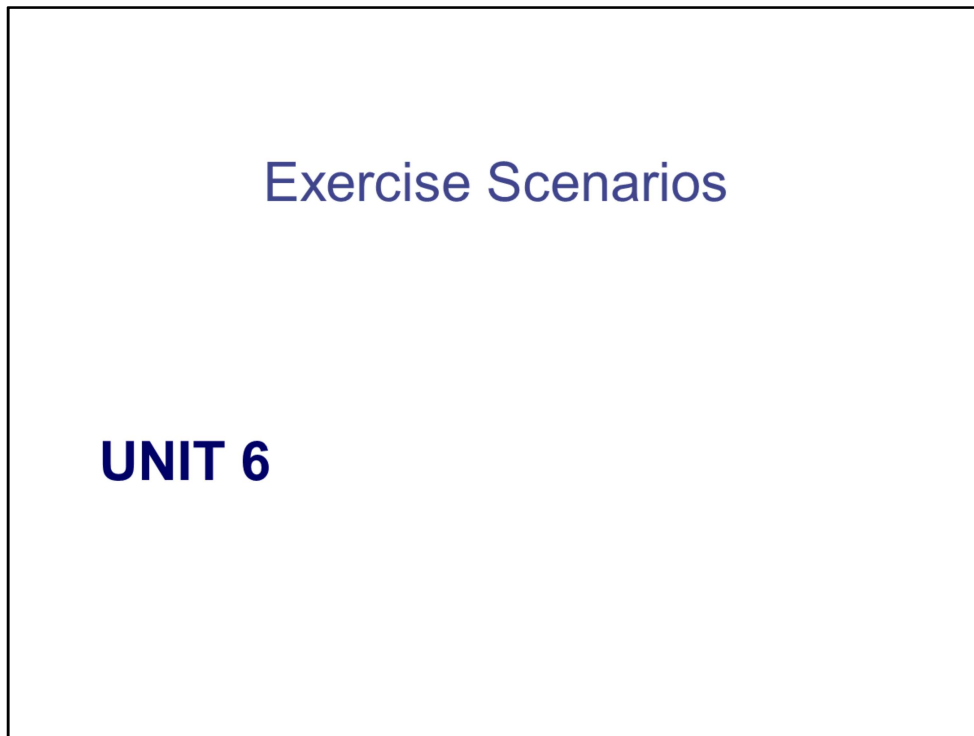
Instructor notes:

Pass out the exercise scenario handouts to the participants. Follow directions in your Exercise Facilitation Guide. Be sure to read through the Exercise Facilitation Guide before you teach this course. Allow approximately 45 minutes total to work on scenarios and to report out.

Exercise Scenarios

30 minutes to work on scenarios

30 minutes for all groups to report out

Next Steps

UNIT 7
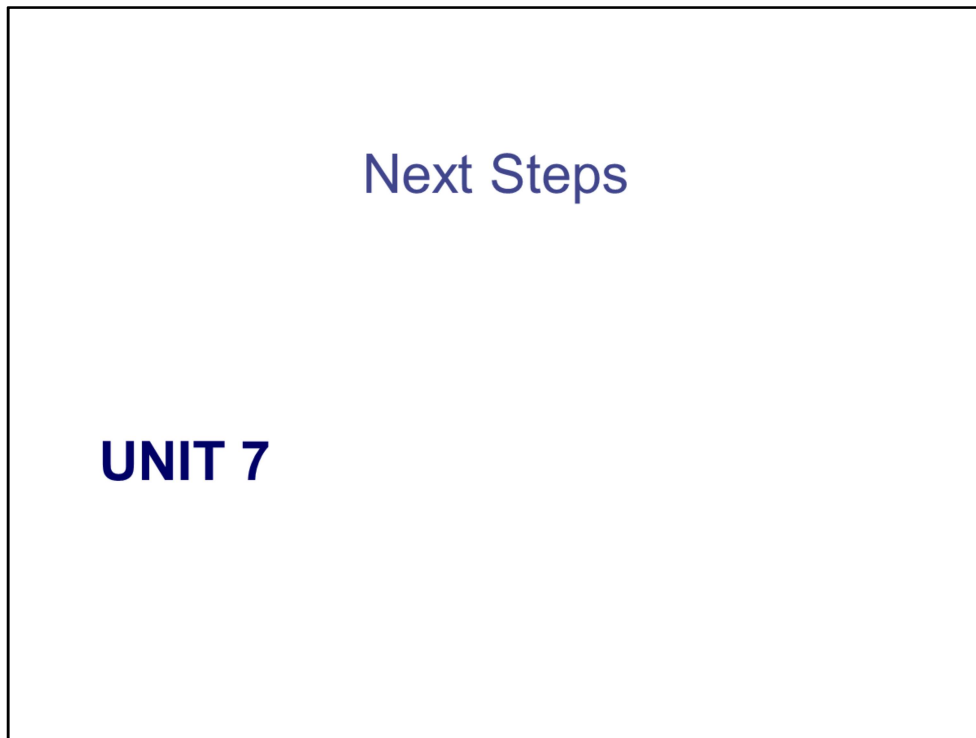
Required Training

▶ Show proof of passing FEMA Incident Command Systems (ICS-100, 200 & 700) within the past five years

    ✓ https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c

    ✓ https://training.fema.gov/is/courseoverview.aspx?code=IS-200.c

    ✓ https://training.fema.gov/is/courseoverview.aspx?code=IS-700.b

▶ Complete an employer MOU, if needed

▶ Take the American Red Cross Training

    ✓ Shelter Fundamentals training (online or in person)

    ✓ Shelter Manager Training (available online, preferably in person)

Member Sustainment Training

▸ Participate in quarterly FAST Member Trainings (in person or webinar)

▸ Participate in quarterly notification tests (deployment alerts)

▸ Participate in shelter trainings and/or exercises when available

▸ Complete yearly reviews, post-deployment hot washes, and/or surveys

Participant Guide

The FAST Leader should organize a briefing with the team.
- The briefing should review the status of any affected individuals remaining in the shelter as well as a review of any equipment that has been assigned to an affected individual. Include the Site Manager in this briefing area
- Should have a discussion during briefing on the lessons learned during the deployment (positives and challenges).
- If transitioning, ensure that team members have the correct address for the next shelter location

Recommended Training

‣ Training for Volunteers in Disaster Shelters By Medical Reserve Corps of Greater Kansas City video list

‣ Participate in shelter exercises when available

‣ General Information about Shelters video list

‣ IS-241.B: Decision Making and Problem Solving

‣ IS-242.B: Effective Communication

Participant Guide

The FAST Leader should organize a briefing with the team.
- The briefing should review the status of any affected individuals remaining in the shelter as well as a review of any equipment that has been assigned to an affected individual. Include the Site Manager in this briefing area
- Should have a discussion during briefing on the lessons learned during the deployment (positives and challenges).
- If transitioning, ensure that team members have the correct address for the next shelter location

Contact Information

Sheri Badger
NCEM Disability Integration Specialist
FAST Program Manager

Sheri.badger@ncdps.gov
919-825-2568 desk
919-675-3278 cell

Participant Guide:

Questions about FAST Program should be directed to Sheri Badger.

FAST Forms	
1	American Red Cross Shelter Dormitory Registration Form and Instructions
2	American Red Cross CMIST Worksheet
3	Quick Notes
4	Quick Notes example
5	Suggested Traveler's Checklist
6	Before you go
7	Team Member Pre-Deployment Checklist
8	NC FAST Activation and Deployment Standard Operating Guidelines
9	Deployment Checklist
10	GO Kit – Suggested Contents
11	Hardship Code Definitions
12	Relocation Checklist
13	FAST Resource Request Form (ICS 213)
14	Activity Log (ICS 214)
15	Sample Activity Log (ICS 214)
16	On-the-spot Assessment Strategies Checklist
17	Instructional videos list
18	American Red Cross EDGE registration
19	North Carolina Centers for Independent Living contacts/map
20	NC FAST Member Requirements

Shelter Dormitory Registration Form Instructions

Use the *Shelter Dormitory Registration Form* to collect information about clients who are staying in the shelter dormitory. Complete the *Shelter Dormitory Registration Form* as completely as possible during initial registration. Registration forms are stored securely in the registration area during a shelter operation. Information from this form is not released to anyone but the client without the client's permission, except under exceptional circumstances. When the shelter is closing, give all copies of the *Shelter Dormitory Registration Form* to the shelter manager for proper disposition according to current record retention policies.

This job tool should be used in conjunction with the following doctrine:
- Sheltering Standards and Procedures
- Job Tool: Operating a Shelter

Complete this form following the steps below:

1. Enter the first date the form was used.
2. Consult with the shelter manager to identify the "DR Number" and the "Shelter Name/Location."
3. **Make the following OBSERVATIONS:**
   a. Does the client or a family member appear to be in need of immediate medical attention, too overwhelmed or agitated to complete registration, or a threat to themselves or others?
      o If YES, STOP the registration process and do one of the following:
         ▪ If situation is critical, call 9-1-1, and notify health services and the shelter manager.
         ▪ Contact health services and/or mental health worker on site.
         ▪ If no health or mental health resource on site, direct concern to shelter manager.
      o If NO, continue the registration process.
   b. Does the client have a service animal, use a wheelchair/walker, or demonstrate any other circumstance where it appears they may need help in the shelter?
      o If YES, acknowledge their need and offer assistance. This may include contacting a health services worker. Contact shelter manager for additional support, when needed.
4. **Ask the following QUESTIONS:**
   a. Is there anything you or a member of your family needs right now to stay healthy while in the shelter? If not, is there anything you know you will need in the next 6-8 hours?
   b. Do you/family member have a health, mental health, disability, or other condition about which you are concerned?
      o If YES to either question, continue registration process, and do the following:
         ▪ Identify what assistance the client needs. Acknowledge their need, and offer assistance.
         ▪ If their need is medical or mental health, or you need help providing assistance to the client:
            ▪ Contact health or mental health services worker on site;
            ▪ If no health or mental health workers on site, contact shelter manager for follow-up;
            ▪ If the shelter manager is not available, or if the shelter manager instructs you to, list clients who have a "yes" response on the Shelter Referral Log;
            ▪ Give the Shelter Referral Log to workers from Disaster Health Services, Disaster Mental Health, or Disaster Spiritual Care or to the shelter manager when they arrive.

5. Complete the *Household Information* section:
   a. List the last name of the family's head of household or the last name provided by the head of household that will be used to identify the family.
   b. Enter the number of individuals in each age group being registered as part of this family. If additional family members arrive later, add them to the same registration form.
   c. Enter the family's pre-disaster address.
   d. If the family is moving to a different city after the disaster, list post-disaster address (if known).
   e. Enter the primary contact phone number for the family.
   f. Enter an alternate contact phone number for the family.
   g. Enter the primary email address to contact the family.
   h. List the primary language spoken by the family.
      - If the primary language spoken by the family is not English, list any family members registered in the shelter who do speak English. Family members who speak English may be able to translate for non-English speaking family members.
   i. Enter the method of transportation used to get to the shelter. Examples: public transportation, private vehicle, walked, dropped off. This information is useful in planning if clients will need transportation to appointments, planning for transportation when the shelter shuts down, and security patrols in the parking lot.
      - If the client is parking a personal vehicle in the shelter parking lot, enter the license plate number and state. This is helpful when security is patrolling the lot for safety.
6. Complete the *Individual Family Members* section:
   a. If there are more than 6 family members, list additional family members on the back of the registration form or on an additional sheet of paper attached to this form.
   b. Enter the family member's name.
   c. Enter the family member's age.
      - This is helpful for demographic reporting and for planning age-appropriate services and activities within the shelter.
   d. Enter the family member's gender: "M" for male or "F" for female.
      - This is helpful when demographic reporting is required and for planning gender-appropriate services and activities within the shelter.
   e. Enter the date that the family member arrived at the shelter for the first time.
   f. If the shelter is using cot numbers, enter the cot assigned to the member once assignments are made.
      - This is often done after initial registration. If cot numbers are not assigned, this field is left blank.
   g. Enter whether or not the family member wants to help in the shelter: "Y" for yes or "N" for no.
      - Assure clients that volunteering to work in the shelter is not a requirement. If they do want to volunteer, connect them with the shelter manager, staff services, or the person assigned to event-based volunteers within the shelter.
   h. Enter the date that the family member leaves the shelter for the last time.
      - If this client is leaving temporarily, use a temporary marking system to indicate that they are not at the shelter.
   i. Enter any notes requested by the operation regarding client departure. This often includes the address where the client is going to be staying and/or other post-disaster contact information.
7. Have the client initial yes or no to each statement:
   - Someone in the household is required by law to register with a state or local government agency.
      o Clients may ask what this question means. If they do not know what it means, it is likely that they do not have to register.
      o If they answer "yes," discreetly contact the shelter manager. The shelter manager talks to the client privately to understand the nature of the registration requirement and follows steps outlined in the Job Tool: Operating a Shelter to ensure safe and equitable shelter services for all Red Cross clients.

- o If they answer "no," but continue to ask about what this question means, explain briefly and without elaboration that there are a number of reasons why an individual might need to register with a government agency, and for the safety and dignity of all clients, the shelter manager handles those situations confidentially.
- Someone in the household is a veteran or active military.
  - o If they answer yes, refer them to available veteran and military resources
- I agree to have my information shared with other agencies providing disaster relief services.
  - o For example, another non-government agency may have disaster relief assistance that would benefit the client, or FEMA may be providing individual assistance in a large disaster.

8. Have the client sign to acknowledge that the family has read the [Shelter Client Welcome Handout](#) or had it read to them.
9. Print your name or sign legibly in case there is a need to follow up with any questions.

11. Dormitory Registration

Date: _____ Incident/DR#: _____ Shelter Name/Location: _____

Observations:
1. Does the client or a fa... overwhelmed or agita...
2. Does the client have a... appears they m...

Questions:
1. Is there anything you or a member of your family needs right now to stay healthy while in the there ... y will need in the next 6-8 hours?

65+yrs:

Primary Language: _____ If not English, Family Member present who speaks English: _____

Method of Transportation: _____ If personal vehicle–plate #/Sta... ...ity purposes only): _____

...RMATION

...rival ...te	Rm./ Cot	Volunteer? (y/n)	Departure Date	Departure Notes:

____Yes ____No   Someone in the household is required by law to register with a state or local government agency.

____Yes ____No   Someone in the household is a Veteran or Active Military.

____Yes ____No   I agree to have my information shared with other agencies providing disaster relief services.

By signing here, I acknowledge that the information on this form is accurate, I have initialed the three statements above, and I have read/been read and understand the *Shelter Client Welcome Handout*:

Signature:_____ Date: _____

Shelter Worker Name/Signature:_____

DCS JT RES Shelter Dormitory Registration Form V.1.0 2016.07.18

Annotation callouts:

TIP: Fill out the header on a master form, then make copies for use during the same incident at the same shelter.

If "YES," STOP the registration process and do one of the following:
- If situation is critical, call 9-1-1, and notify health services and the shelter manager.
- Contact health services and/or mental health worker on site.
- If no health or mental health resource on site, direct concern to shelter manager.

If "YES," acknowledge their need, and offer assistance.

Tally age groups to facilitate efficient shelter population counts.

If "YES" to either question, continue registration process, and do the following:
- Identify what assistance the client needs. Acknowledge their need, and offer assistance.
- If their need is medical or mental health, or you need help providing assistance to the client:
  - Contact health or mental health services worker on site;
  - If no health or mental health workers on site, contact shelter manager for follow-up;
  - If the shelter manager is not available, or if the shelter manager instructs you to, list clients who have a "yes" response on the **Shelter Referral Log.**

When appropriate, family members who speak English may be able to translate for the head of household.

It helps to know if the family needs transportation to appointments, planning transportation as shelter is closing, and identifying vehicles in the lot.

In shelters where cot numbers are used, add cot assignment information as it becomes available.

Connect clients who wish to help in the shelter with the shelter manager or staff services.

Include post-disaster contact information if available.

Have client initial yes or no to each statement.

See Job Tool: Operating a Shelter for more information.

Sign or print legibly.

Shelter Dormitory Registration

Date: _____ Incident/DR#:_____ Shelter Name/Location:_____

Observations:
1. Does the client or a family member appear to be in need of immediate medical attention, appear too overwhelmed or agitated to complete registration, or a threat to themselves or others?
2. Does the client have a service animal, use a wheelchair/walker, or demonstrate any other circumstance where it appears they may need help in the shelter?

Questions:
1. Is there anything you or a member of your family needs right now to stay healthy while in the shelter? If not, is there anything you know you will need in the next 6-8 hours?
2. Do you/family member have a health, mental health, disability, or other condition about which you are concerned?

HOUSEHOLD INFORMATION

Family Name (Last Name):	# Family members registered:
	0-3yrs: 3-7yrs: 8-12yrs: 13-18yrs: 19-65yrs: 65+yrs:

Pre-disaster Address:	Post-disaster Address (if different):

Primary Phone:	Other Phone:	Email:

Primary Language:	If Not English, Family Member Present Who Speaks English:

Method of Transportation:	If Personal Vehicle, Lic. Plate #/State (for security purposes only):

INDIVIDUAL FAMILY MEMBER INFORMATION (for additional names, use back of page)

Name (Last, First)	Age	Gender (M/F)	Arrival Date	Rm./ Cot	Volunteer? (y/n)	Departure Date	Departure Notes:

____Yes ____No   Someone in the household is required by law to register with a state or local government agency.

____Yes ____No   Someone in the household is a veteran or active military.

____Yes ____No   I agree to have my information shared with other agencies providing disaster relief services.

By signing here, I acknowledge that the information on this form is accurate, I have initialed the three statements above, and I have read/been read and understand the *Shelter Client Welcome Handout*:

Signature:_____ Date:_____

Shelter Worker Name/Signature:_____

American Red Cross

Date:	Client/Family Name:	County/State:
Location in Shelter:		Interviewer:

This document covers possible considerations for access and functional needs. It is not all-inclusive, but serves as a guideline for referral purposes.

COMMUNICATION

NEED:	ACTION:
☐ Access to auxiliary communication service	☐ Provide written materials in alternative format (Braille, large and high contrast print, audio recording, or readers) ☐ Provide visual public announcements ☐ Provide qualified sign language or oral interpreter ☐ Provide qualified foreign language interpreter
☐ Access to auxiliary communication device	☐ Provide access to teletypewriter [TTY, TDD, or CapTel] or cell phone with texting capabilities; pen and paper.
☐ Replacement of auxiliary communication equipment	☐ Provide replacement eyeglasses ☐ Provide replacement hearing aid and/or batteries

MAINTAINING HEALTH

NEED:	ACTION:
☐ Special diet ☐ Food Allergies_____(type)	☐ Provide alternative (low sugar, low sodium, pureed, gluten-free, dairy-free, peanut-free) food and beverages; _____ (diet type)
☐ Medical supplies and/or equipment for every day care (including medications) *not* related to mobility *For replacement eyeglasses or hearing aid, see Communication* *For assistive mobility equipment (e.g., wheelchair), see Independence*	***Refer to Disaster Health Services*** *to provide or procure one or more of the following:* ☐ Replacement medication ☐ Wound management/dressing supplies ☐ Diabetes management supplies (e.g., test strips, lances, syringes) ☐ Bowel or bladder management supplies (e.g., colostomy supplies, catheters) ☐ Oxygen supplies and/or equipment
☐ Assistance with medical care normally provided in the home ☐ Allergies (environmental or other high risk) _____(type) *For medical treatments that are **not** normally provided in the home (e.g., dialysis), see Transportation*	***Refer to Disaster Health Services*** *to assist with one or more of the following:* ☐ Administration of medication ☐ Storage of medication (e.g., refrigeration) ☐ Wound management ☐ Bowel or bladder management ☐ Use of medical equipment ☐ Universal precautions / infection prevention and control (e.g., disposal of bio-hazard materials, such as needles in sharps containers)
☐ Support for pregnant women ☐ Support for nursing mothers; ☐ Infant care availability	☐ Provide support by ongoing observation ☐ Provide support and/or room for breastfeeding women ☐ Assure diaper changing area is available
☐ Access to a quiet area	☐ Provide access to a quiet room or space within the shelter (e.g., for elderly persons, people with psychiatric disabilities, parents with very young children, children and adults with autism)
☐ Access to a temperature-controlled area	☐ Provide access to an air-conditioned and/or heated environment (e.g., for those who cannot regulate body temperature)
☐ Mental health care (e.g., anxiety and stress management)	☐ ***Refer to Disaster Mental Health Services***

INDEPENDENCE

NEED:	ACTION:
☐ Durable medical equipment for individuals with conditions that affect mobility	☐ Provide assistive mobility equipment (e.g., wheelchair, walker, cane, crutches) ☐ Provide assistive equipment for bathing and/or toileting (e.g., raised toilet seat with grab bars, handled shower, bath bench) ☐ Provide accessible cot (may be a crib, inclined head or other bed type)
☐ Power source to charge battery-powered assistive devices	☐ Provide power source to charge battery-powered assistive devices
☐ Bariatric accommodations	☐ Provide bariatric cot or bed
☐ Service animal accommodations	☐ Provide area where service animal can be housed, exercised, and toileted ☐ Provide food and supplies for service animal
☐ Infant supplies and/or equipment	☐ Provide infant supplies (e.g., formula, baby food, diapers, crib)

SERVICES, SUPPORT AND SELF-DETERMINATION

NEED:	ACTION:
☐ Adult personal assistance services ☐ Child personal assistance services *Incl. general observation and/or assistance with **non-medical** activities of daily living, such as grooming, eating, bathing, toileting, dressing and undressing, walking, etc.*	☐ Identify family member or friend caregiver ☐ Assign qualified shelter volunteer to provide personal assistance services ☐ Contact local agency to provide personal assistance services ☐ Coordinate childcare support such as play areas; age-appropriate activities; equal access to resources.

TRANSPORTATION

NEED:	ACTION:
☐ Transportation to designated facility for medical care / treatment ☐ Transportation for non-medical appointment	☐ Coordinate provision of accessible shelter vehicle and driver for transportation ☐ Contact local transit service to provide accessible transportation

Housing Challenges			
Pre-disaster homeless	Yes	No	
Pre-Disaster Precariously housed	Yes	No	
Pre-Disaster HUD housing occupant	Yes	No	Pre-disaster Address:

Actions:
☐ No needs identified
☐ Contact Shelter Manager
☐ Contact Disaster Mental Health Services
☐ Agency, *please provide agency name*_____

☐ Other_____

Followup/Resolution/date_____

Disaster Health Services (name/signature/date)_____

Quick Notes			Page __ of ___
Client Name:			
How to contact:			
Date/Time	**Needs**	**Plan**	**Outcome**

Quick Notes			Page __ of ___
Client Name:			
How to contact:			
Date/Time	**Needs**	**Plan**	**Outcome**

| Quick Notes | Page ___ of ___ |

Client Name: Beth Allen

How to contact:

Date/Time	Needs	Plan	Outcome
5/12/12	Seeing eye dog, food-kibble for dog. Cot for the client	Call possible open stores have someone pick up the food. Extra cots are at the warehouse. These can be picked up.	Obtain a cot and received dog food.

Quick Notes	Page __ of ___

Client Name: Mary Myer

How to contact: 206 406-1055

Date	Needs	Plan	Outcome
11:00am	Has allergies and arthritis needs hydrocortisone, zertec, waterpills(laxis 80x1)	find out were supplies are, call the doctor.	Did receive the medication

SUGGESTED TRAVELER'S CHECKLIST

Work Equipment/Info

- ☐ FAST manual-needed sections
- ☐ Pager
- ☐ Spare batteries
- ☐ Cell phone/charger
- ☐ Phone calling card (for pay phone)
- ☐ Support contact numbers (see above?)

Clothing

- ☐ Blouses
- ☐ Shirts
- ☐ Pants (cargo pants-lots of pockets)
- ☐ Underwear
- ☐ Jacket
- ☐ Light raincoat
- ☐ Sweater
- ☐ Socks
- ☐ Walking shoes
- ☐ FAST vest
- ☐

Accessories

- ☐ Day pack or fanny pack

Seasonal Gear

- ☐ Sunglasses
- ☐ Sunscreen
- ☐ Bug Repellant
- ☐ Hat/head cover
- ☐ Umbrella
- ☐ Boots

Notions

- ☐ Tooth brush
- ☐ Tooth paste
- ☐ Dental floss
- ☐ Skin Cleanser
- ☐ Bar soap
- ☐ Moisturizer
- ☐ Compact Mirror
- ☐ Deodorant
- ☐ Shampoo
- ☐ Hair brush/comb

Documents

- ☐ Travel documents
- ☐ Picture Identification
- ☐ Guidebooks of the area (AAA)
- ☐ Maps – Thomas Brothers
- ☐ FAST ID card
- ☐ Cash

Miscellaneous

- ☐ Paper, pens
- ☐ First aid kit
- ☐ Prescription medications
- ☐ List of generic names for prescription drugs
- ☐ OTC medications
- ☐ Chap stick
- ☐ Hand sanitizer
- ☐ Laundry soap??
- ☐ Sewing kit
- ☐ Travel alarm
- ☐ Mini flashlight
- ☐ Battery operated radio
- ☐ Food*
- ☐ Water**

Other Needs

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

*   Easy to carry quick energy foods, such as fruit snacks, beef sticks, jerky.

**   In some cases, it may be difficult to obtain water once deployed.

NOTE: Carry-on flight bag should contain at least change of clothes, medicines, and documents

BEFORE YOU GO…

Be sure to have the following information:

- ☐ Deployment length
- ☐ Report to?
- ☐ Work with whom?
- ☐ What are your duties?
- ☐ Who is in charge?
- ☐ Where am I staying?
- ☐ What are the conditions: electricity, sleeping, access, weather, and communications?

BEFORE YOU GO…

Be sure to have:

- ☐ Directions/address
- ☐ Money – Cash
- ☐ Supervisor approval
- ☐ Contact name numbers
- ☐ Laptop/charger
- ☐ Cell phone battery extra charger
- ☐ Maps/GPS
- ☐ Personal items (see Suggested Traveler's Checklist)
- ☐ Clothes for 10 days
- ☐ Medication
- ☐ Picture ID
- ☐ FAST ID
- ☐ Business cards
- ☐ Seasonal Clothes
- ☐ FAST vest

Team Member
Pre-Deployment Checklist

☐ Where am I going to work?_____

_____

☐ What do I need to take? _____

_____

☐ Who will I be working with? _____

_____

☐ How do I get there? _____

_____

☐ How long will I be there? _____

_____

☐ Is there food there, water, can I come home at night? Showers? _____

_____

☐ Email, phone, computers? _____

_____

☐ Who am I going to be working for?_____

_____

☐ What if I get sick while I am there?_____

_____

☐ What am I going to do? _____

_____

☐ Who am I representing / what skills are needed? _____

_____

North Carolina Functional Assessment Support Teams (FAST)
Activation and Deployment Standard Operating Guidelines

DATE	April 2019
PURPOSE:	To provide guidance to FAST members on activating and deploying a Functional Assessment Service Team (FAST) from the state.
GENERAL INFORMATION:	Functional Assessment Service Teams (FASTs) are deployed as the shelters open and work until no longer needed. They may work at only one shelter or they may support several shelters. FASTs support the process of acquiring potential resources for people with access and functional needs. These resources may include durable medical equipment (DME), consumable medical supplies, communication access and personal assistants.

FAST members have trained in basic Incident Command System (ICS) principles, and while deployed at a shelter will use standard resource request ordering processes.

FAST may be requested by Shelter managers, Emergency Management, the Emergency Operations Center (EOC), or designated representatives. The request will come through WebEOC.
    a. Need to provide location of shelter(s).
    b. Need to provide POC and contact information.
    c. Need to be able to identify and provide housing arrangements.

If the FAST request cannot be filled at local or regional level, request will be pushed to State Emergency Operations Center (SEOC) Mass Care Functional Lead.

SEOC Mass Care Functional Lead will assign to FAST Coordinator.

FAST Coordinator will begin deployment process and respond to requestor for details. |
| **PROCEDURES:** | 1. Activation: *Know Before You Go!*

Always remember to keep your contact information updated.

    a) FAST Coordinator will identify FAST members in TERMS Team Management System, and will notify, requesting availability for deployment.

    b) Deciding if you are ready to go
       ☐ Your family is prepared and you have a plan for care of children, pets, etc
       ☐ Your employer has agreed that you can be away from your job site for the duration of your deployment
       ☐ Your Go-Kit is ready to grab
       ☐ You have all the information you need to arrive at the shelter site.

    c) FAST Coordinator notifies available FAST members for deployment through TERMS notification system. Information shared will include:
       ☐ Where is the Shelter?
       ☐ What time am I expected to arrive?
       ☐ How long am I needed?
       ☐ Who will I be reporting to?
       ☐ Who will I be working with?
       ☐ Will I be able to come home daily or will I be staying overnight? |

☐ What are the conditions of the shelter? Communications? Electricity?
☐ *See Team Member Pre-Deployment Checklist*

2. FAST Deployment
   a) Arrival at Shelter Site
      ☐ Meet the Unit Leader and the rest of the team
      ☐ Meet the Shelter Manager
      ☐ Don FAST badge and blue vest
      ☐ Set up work space

   b) Duration of Deployment
      ☐ Always be cognizant of your surroundings, situational awareness
      ☐ Take a break when you need it!
      ☐ Identify general access issues of shelter; report any issues to Unit Leader and/or Shelter Manager
      ☐ Identify Access and Functional needs of Shelter population
         (a) Use On-the-Spot Assessment Form
         (b) Document all interactions with shelter clients using ICS 214 and/or Quick Notes
      (2) Keep track of hours deployed using FAST Time Sheet.

3. Resources

   a) Requesting resources not available in the shelter or trailer
      ☐ Use standard resource requesting process to request ALL external resources: Document as much information as possible, including where to get the resources needed to expedite acquisition
      ☐ Use ICS 214 and Quick Notes forms to document all action taken
      ☐ Resource request is routed through the Unit Leader or Shelter Manager to local, area branch office or SEOC.

   b) Remember the shelter site may have some resources available. Always ask shelter staff first if something is available before requesting from the EOC. Unit Leader will establish resource request process with shelter manager.

   c) Communicate with client waiting for requested resource or receiving resource
      ☐ After request has been submitted, follow-up with client awaiting resource; communicate any issues from EOC/SEOC as diplomatically as possible.
      ☐ Document all conversations with client using ICS 214 and/or Quick Notes
      ☐ *Please note: any protected health information should not be documented on any FAST forms. Document need, but must not document diagnoses.*
      ☐ Submit completed documentation to Unit Leader

4. Documentation
   ☐ All forms and documents will be gathered by Unit Leader to be submitted to FAST coordinator
   ☐ Use provided forms to track all notable activities and submit to Unit Leader upon completion. The forms include: ICS 214, and Quick Notes (see back of forms for detailed instructions).

	5. FAST Demobilization
	   a) When team is no longer needed, the Team Unit Leader will contact the FAST Coordinator.
	     i) Information to communicate:
	       ☐ When the demobilization will be complete
	       ☐ When everyone is expected home.

Attachments:

Contact Numbers:

Name	Position/Responsibility	Desk	Cell
Sheri Badger	FAST Coordinator	919-825-2568	919-675-3278

Deployment Checklist

In preparation for deployment, FAST members should:

☐ Pack personal items needed while on assignment (see attachment for suggested items) for a 10-15 day deployment.

☐ Check on what the capacity is for your FAST coordinator (or supervisor) to get cash advances, hotel/car/flight arrangements.

☐ Get a hard copy list of important/key telephone numbers and program them into your cell phones. It's very useful to have them loaded into a cell phone as wells as a copy to keep with you.

☐ Pack FAST-related materials needed while on assignment, including FAST ID badge and any other administrative forms needed from the FAST website.

Before deployment, be sure to have the following:

☐ The Point of Contact (POC) at the site and contact info, the address, phone number.

☐ Ask the person who is deploying you if there is any other information that is available about where you will be working
   o Lodging, power, internet access, area-roads, law enforcement barriers
   o Hazard code information to help decide whether to accept the assignment
   o Estimated length of deployment
   o Who to report to and who is in charge
   o What will your duties be

☐ Names and contact info, including pager, cell phone number, email address and land line number if available, of other FAST members that will be assigned to the same site.

☐ Get maps of the vicinity and location of deployment work site and hotel before deploying and carry hard copy maps because computer generated maps are not always reliable. Thomas Guides are still a good resource unless roads are closed or no longer exist.

☐ Resource or mission tasking number and information. No FAST should self-deploy. The FAST coordinator or your supervisor should have the mission tasking information for our assignment.

☐ FAST member should stay in regular contact with your supervisor or FAST coordinator while deployed. For example, the FAST member should provide your Department Point of Contact (DPOC) with the phone numbers of their deployment work site, mobile phones, and hotel.

GO Kit – Suggested Contents

Be sure to have:

- [ ] Forms- travel, time keeping, manuals
- [ ] Office supplies: Pencil, pen, blank paper, clipboard, paperclips, scotch tape, and stapler
- [ ] Credit cards AND cash since ATMs may not be functioning
- [ ] FAST ID card
- [ ] Emergency numbers, your department's office numbers, your fellow FAST members phone numbers, email addresses-hard copy
- [ ] Flash drive
- [ ] Spare batteries
- [ ] Laptop with car charger
- [ ] FAST vest

Hardship Code Definitions

C1. Water Disruption: The regular water system of the area may be affected by the disaster. This may result in the lack of public water service in shelters, hotels and work sites. The water may be unsafe to drink, requiring special precautions or use of bottled water. Other inconveniences could include: Inoperable restroom facilities, limited shower/bathing facilities and the need to carry water supplies for personal use.

C2. Power Outage: Power outages may be widespread, sporadic and of an undetermined duration during a disaster. This may affect electric and/or gas utilities. The result may be no lights and no use of electrical appliances, including office machines, computers and cooking facilities. The power outage could also affect the use of elevators, heating, air conditioning, water pumps, traffic signals, communication sources and equipment with rechargeable batteries, as well as required health care equipment (e.g., CPAP machine — assists with sleep apnea).

C3. Limited Food Availability: The relief operation may not be able to accommodate special dietary needs, and the food choices may be limited. Military rations may be the only source of food. Working and living locations may be isolated from nearby food sources. The demanding work schedules may not allow for regularly scheduled meals.

C4. Extreme Heat and/or Humidity: Temperatures may average over 90 degrees Fahrenheit, and/or high humidity may be present. Air conditioning may not be available in housing or at work sites. Heat and humidity could affect those with a variety of conditions including asthma, chronic obstructive pulmonary disease (COPD), skin disorders and photosensitivity reactions from certain medications. Humid climates can increase bacterial or fungal growth, making a healthy immune system essential.

 C5. Extreme Cold: Disasters in a cold climate could include average temperatures below freezing and adverse conditions such as snow, sleet, ice, and so on. This could cause various health issues and may make some medical conditions worse. Adequate heating may not be available in housing or at work sites. Travel and driving will be affected.

C6. Housing Shortages: Staff may have to share rooms with other workers, which may provide little or no privacy. The housing may be dormitory style with shared bathroom and shower facilities. There may be occasions when staff will be housed in a shelter for relief workers or, depending on the damage to the infrastructure; workers may be placed in shelters housing disaster clients.

C7. Working Conditions: In some situations, the working environment can cause hardships. Work areas that are tight, noisy and/or perceived to be unsafe can be stressful for members. Field assignments may include walking on uneven or slippery terrain, walking long distances, getting in and out of vehicles multiple times, accessing homes, using stairs without handrails and working in tents. The conditions may require endurance and stamina, and the assignment may include long work hours

C8. Limited Health Care Access: Following a disaster, particularly in remote locations, the community infrastructure can be affected so that normal health care systems, including emergency medical services, are not in place or are difficult to access. In some medically underserved areas advanced cardiac life support, specialized procedures and medications are not available. This can cause a hardship for people with chronic medical conditions who might need a hospital or a doctor's attention. In some rural or island locations there may already be a shortage of specialized medical assistance that members may need on an ongoing basis due to certain disease processes. This hardship code includes members who have medical conditions that require frequent monitoring or have recurrent exacerbations.

C9. Extreme Emotional Stress: Many stressors can occur during a disaster. Members may witness sickness, serious injury, distressed victims, death or mass casualties and destruction. Members may also be exposed to victims expressing grief, anger and frustration. There may be personal safety issues and possible recurrence of the disaster. Absence from personal support systems may contribute to these stressors.

C10. Travel Conditions: Travel on the relief operation may be difficult. Roads may be congested, partially impassible or single lane. The relief operation covers a wide area and staff may routinely spend hours in transit while on the relief operation and then spend additional time commuting from their assigned work location to their housing. Due to the disaster, street signs may be missing and locations may be difficult to determine.

C11. Transportation Limitations: Transportation to the relief operation may be complicated and difficult. The travel arrangements may require use of alternate routes, unusual or multiple connections, noncommercial/military carriers or assignment through a staging area. On the relief operation, transportation may be scarce, with options limited to walking, mass transit, van pool or car pool with three or more people. Transportation may also involve watercraft or small commuter planes that require physical agility to board.

C12. Air Quality: Certain disasters may involve elements such as smoke, dust, ash and poor air quality. These have the potential of aggravating respiratory conditions such as COPD, emphysema and chronic asthma. Additionally, operations that include flooding increase the potential for mold and mildew, which may trigger allergic reactions, reactive airway disease (RAD) and asthma.

C13. Lifting Limitation: Various disaster work assignments require members to lift and carry heavy items. If members attempt to lift and carry more than they are physically able, they may injure themselves or worsen already existing conditions. This code should be used when a member is not physically able to lift or carry the amount required by a specific activity. Occasionally, a member may be asked to lift and carry when it is not a normal part of his or her activity. In these cases, each member is responsible for knowing his or her lifting limitations and avoiding harmful situations on disasters, regardless of the work assignment.

Demobilization Guidelines

☐ Be clear from the beginning if this is a release or could you be eligible for reassignment.

☐ Who has the ability and/or responsibility for releasing or reassigning you?

☐ Have you spoken to your supervisor or the person that assigned you about the release?

☐ What is the expectation for the check out process of the shelter manager or the person that you have been working with on the shelter management staff?

☐ Are all the documents that you need to complete before your departure done?

☐ Have you briefed the person that is taking your place or assuming your responsibilities?

☐ Are your travel arrangements in order?

☐ Have you returned any equipment/supplies that belong to the incident/shelter?

☐ Is your vehicle road-worthy and safe?

☐ Is your route home and ETA known by someone?

☐ Is it safe to travel given the disaster conditions?

☐ Are you sufficiently rested to travel the distance that you need to?

FAST Resource Request Form (ICS 213)

1. Incident Name (Optional):

2. To (Name and Position):

3. Requestor's Information:

  a. Name and Position: **c. Shelter Name:**

  b. Contact Information: **d. Operational Area:**

4. Subject:	**5. Date:**	**6. Time**

7. Message (Item Info):

  a. Describe what is needed:

  b. When is it needed?

  c. Does it come with anything, e.g. maintenance agreement?

  d. Intended user's name:

8. Delivery information:

  a. Deliver to (person):

  b. Address:

  c. Street intersection:

  d. Delivery Date/Time:

9. Approved by: Name: **Signature:**   **Position/Title:**

10. Reply:

11. Replied by: Name: **Signature:**

ICS 213	**Position/Title:**	**Date/Time:**

ICS 213 Resource Request Form

Purpose. The General Message (ICS 213) is used by the incident dispatchers to record incoming messages that cannot be orally transmitted to the intended recipients. The ICS 213 is also used by the Incident Command Post and other incident personnel to transmit messages (e.g., resource order, incident name change, other ICS coordination issues, etc.) to the Incident Communications Center for transmission via radio or telephone to the addressee. This form is used to send any message or notification to incident personnel that require hard-copy delivery.

Preparation. The ICS 213 may be initiated by incident dispatchers and any other personnel on an incident.

Distribution. Upon completion, the ICS213 may be delivered to the addressee and/or delivered to the Incident Communication Center for transmission.

Notes:

- The ICS 213 is a three-part form, typically using carbon paper; the sender will complete Part 1 of the form and send Parts 2 and 3 to the recipient. The recipient will complete Part2 and return Part 3 to the sender.
- A copy of the ICS 213 should be sent to and maintained within the Documentation Unit.
- Contact information for the sender and receiver can be added for communications purposes to confirm resource orders. Referee to 213RR example (Appendix B)

Block Number	Block Title	Instructions
1	**Incident Name** (Optional)	Enter the name assigned to the incident. This block is optional.
2	**To (Name and Position)**	Enter the name and position the General Message is intended for. For all individuals, use at least the first initial and last name. For Unified Command, include agency names.
3	**From** (Name and Position)	Enter the name and position of the individual sending the General Message. For all individuals, use at least the first initial and last name. For Unified Command, include agency names.
4	**Subject**	Enter the subject of the message.
5	**Date**	Enter the date (month/day/year) of the message.
6	**Time**	Enter the time (using the 24-hour clock) of the message.
7	**Message/Item Info**	Enter the content of the message. Try to be as concise as possible. a. Describe what is needed b. Time frame c. list items it comes with d. Write the name of the person the item is intended for. e. Other: place to put additional information if necessary.
8	**Delivery Information**	Enter the delivery information. a. Who is it being delivered to? b. Write the address to be delivered to. c. Write the street intersection d. Write the date and time of delivery
9	**Approved by** • Name • Signature • Position/Title	Enter the name, signature, and ICS position/title of the person approving the message.
10	**Reply**	The intended recipient will enter a reply to the message and return it to the originator.
11	**Replied by** • Name • Position/Title • Signature • Date/Time	Enter the name, ICS position/title, and signature of the person replying to the message. Enter date (month/day/year) and time prepared (24hour clock).

Activity Log (ICS214)

1. Incident Name:	2. Operational Period: Date from: Date To: Time from: Time To:	
3. Name:	4. ICS Position:	5. Home Agency (and Unit):

6. Resources Assigned:		
Name:	ICS Position:	Home Agency (and Unit):

7. Activity Log:	
Date/Time:	Notable Activities

8. Prepared By: Name:	Position/Title:
ICS 214, Page 1	Signature: Date/Time:

Activity Log (ICS214)

Purpose. The Activity Log (ICS 214) records details of notable activities at any ICS level, including single resources, equipment, Task Forces, etc. These logs provide basic incident activity documentation,, and a reference for any after-action report.

Preparation. An ICS 214 can be initiated and maintained by personnel in carious ICS positions as it is needed or appropriate. Personnel should document how relevant incident activities are occurring and progressing, or any notable events or communications.

Distribution. Completed ICS 214s are submitted to supervisors, who forward them to the Documentation Unit. All completed original forms must be given to the Documentation Unit, Which maintains a file of all ICS 214s. it is recommended that individuals retain a copy for their own records.

Notes:

- The ICS 214 can be printed as a two-sided form.
- Use additional copies as continuation sheets as needed, and indicate pagination as used.

Block Number	Block Title	Instructions
1	**Incident Name**	Enter the name assigned to the incident.
2	**Operational Period** • Date and Time From • Date and Time To	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.
3	**Name**	Enter the title of the organizational unit or resource designator (e.g., Facilities Unit, Safety Officer, Strike Team).
4	**ICS Position**	Enter the name and ICS position of the individual in charge of the Unit.
5	**Home Agency** (and Unit)	Enter the home agency of the individual completing the ICS 214. Enter a unit designator if utilized by the jurisdiction or discipline.
6	**Resources Assigned**	Enter the following information for resources assigned:
	• Name	Use this section to enter the resource's name. For all individuals, use at least the first initial and last name. Cell phone number for the individual can be added as an option.
	• ICS Position	Use this section to enter the resource's ICS position (e.g., Finance Section Chief).
	• Home Agency (and Unit)	Use this section to enter the resource's home agency and/or unit (e.g., Des Moines Public Works Department, Water Management Unit).
7	**Activity Log** • Date/Time • Notable Activities	Enter the time (24-hour clock) and briefly describe individual notable activities. Note the date as well if the operational period covers more than one day. • Activities described may include notable occurrences or events such as task assignments, task completions, injuries, difficulties encountered, etc. • This block can also be used to track personal work habits by adding columns such as "Action Required," "Delegated To," "Status," etc.
8	**Prepared by** • Name • Position/Title • Signature • Date/Time	Enter the name, ICS position/title, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).

On-The-Spot Assessment Strategies Checklist

The following list may help to quickly identify resources, considerations or communication strategies to maintain the individual's independence. Remember, some individuals may have multiple needs, so be sure to check the complete list.

- ❏ Can the individual walk independently or what assistive devices does he or she use?
- ❏ Can the individual see? Is he or she blind or with low-vision?
- ❏ Can the individual hear?
- ❏ Can the individual speak and be understood?
- ❏ Can the individual understand English? If no, what language is understood?
- ❏ Can the individual comprehend? Is there a cognitive disability?
- ❏ Does the individual have medical needs?
- ❏ Does the individual require specialized equipment or assistive devices?
    - ❏ Braces, crutches, walker, wheelchair, motorized wheelchair
    - ❏ Cane for person who is blind or has low-vision
    - ❏ Service animal
    - ❏ Hearing aids or similar device
    - ❏ Portable oxygen tanks or generator

- ❏ Does the individual require constant care or supervision?
- ❏ Does the individual have a caregiver, friend or family member who assists him or her?
- ❏ Does the individual have a survival kit or "go bag" that includes a two-week supply of all current medications, medical equipment and supplies?
- ❏ Does the individual require electricity to maintain specialized equipment or assistive devices or refrigeration to store medications?
- ❏ Does the individual have a personal emergency health information bracelet, card, computer chip, file, or other source of information?
- ❏ Does the individual have a personal emergency contact list with names and phone numbers of family members, friends, doctors, insurance providers and hospital preferences?
- ❏ Does the individual have an emergency plan including shelter options?
- ❏ Does the individual have transportation needs?

Training for Volunteers in Disaster Shelters
By Medical Reserve Corps of Greater Kansas City
(all videos are captioned unless otherwise noted)

Initiating Conversation with Disaster Victims	http://www.youtube.com/watch?v=zPZHJy7UHaw	3 min 27 sec
Confidentiality	http://www.youtube.com/watch?v=3ciK3Yve5Wk	3 min 34 sec
Cultural Sensitivity	http://www.youtube.com/watch?v=EZFIUrxL9KA	4 min 34 sec
Body Mechanics	http://www.youtube.com/watch?v=kAF0uTLGkJo	3 min 49 sec
Universal Precautions	http://www.youtube.com/watch?v=4BqchDJ6T18	4 min 2 sec
Personal Care Items	http://www.youtube.com/watch?v=VpK7mpo7yiE	4 min 47 sec
RUN. HIDE. FIGHT. Surviving an Active Shooter Event – English (Not Captioned)	http://www.youtube.com/watch?v=5VcSwejU2D0&list=PL4A1B248B1426D392	5 min 56 sec
Heimlich Maneuver	http://www.youtube.com/watch?v=so_HSzO6keI	2 min 23 sec
Using a Cane or Crutches	http://www.youtube.com/watch?v=vN5UMv3lh1g	6 min 4 sec
Assisting a Blind Person	http://www.youtube.com/watch?v=Z74h-tesl8c	4 min 7 sec
Assisting a Deaf Person	http://www.youtube.com/watch?v=mlZMPWrynHQ	2 min 44 sec
Working with Children in a Shelter	http://www.youtube.com/watch?v=3JE-L9MLW24	4 min 10 sec
Mental Health	http://www.youtube.com/watch?v=9w-bHItDuEg	4 min 38 sec
Autism Spectrum Disorder	http://www.youtube.com/watch?v=lIOOCbrhAnM	3 min 11 sec
Attention Deficit Disorder	http://www.youtube.com/watch?v=tz-kR36Eyqs	3 min 7 sec
Use of a Sliding Board	http://www.youtube.com/watch?v=lKcgBSJX_1E	3 min 24 sec
How to Use a Wheelchair (Not captioned)	http://www.youtube.com/watch?v=juCsjOGTLGM&list=PL4A1B248B1426D392	2 min 33 sec
Transferring From Bed to Wheelchair	http://www.youtube.com/watch?v=gKg9PmEqtMM	3 min 40 sec

General Information about Shelters
(videos are NOT captioned unless otherwise noted)

These videos have varying elements about shelters or shelter living that may introduce FAST Members to what to expect when responding to a shelter.

Sound Shake Shelter Drill 7-10-10	http://www.youtube.com/watch?v=H8U0xvv_dwI	4 min 29 sec
Setting up Lionville Middle School shelter	http://www.youtube.com/watch?v=Xx3ZlPERRnY	47 sec
Rutgers University Offers Shelter During Hurricane Sandy	http://www.youtube.com/watch?v=5KaHX64MqF8	2 min 42 sec
Josh Lockwood Visits Red Cross Hurricane Sandy Shelter on Long Island	http://www.youtube.com/watch?v=H7zoKitQ72Q	4 min 2 sec
Stamford shelters busy	http://www.youtube.com/watch?v=pIEODg-K6ys	1 min 47 sec
SandPaper, Hurricane Sandy Relief: shelters	http://www.youtube.com/watch?v=7dYGmNKqrw8	2 min 8 sec
Pleasantville High School Shelter	http://www.youtube.com/watch?v=cE6uc7iagds	2 min 21 sec
NJ family evacuated to makeshift shelter	http://www.youtube.com/watch?v=V477ZRK3CbA	
Joplin Red Cross Shelter Transitioning to Smaller Location	http://www.youtube.com/watch?v=cIcTsKPy6yw	1 min 2 sec
Red Cross shelter open in Northampton	http://www.youtube.com/watch?v=WOf2CDZoFXc	2 min 16 sec
Go Behind the Scenes at a Red Cross Shelter	http://www.youtube.com/watch?v=Zr5M0_WPpHA	3 min 57 sec
Hero Service Dog in Minot Red Cross Shelter	http://www.youtube.com/watch?v=6SXmo4-24ww	2 min 38 sec
Meet Zeke, a very adorable shelter resident	http://www.youtube.com/watch?v=DKyyN8kU3iA	52 sec
Squirrels Find Shelter from Hurricane Sandy	http://www.youtube.com/watch?v=ejF6MalNck8	1 min 49 sec

American Red Cross | EDGE — Extended Enterprise Registration

Who is it for?

Military Families

Staff not in Red Cross@Work

Community Partners

Who isn't it for?

Employees & Volunteers

How do I register?

START

Go to
http://bit.ly/ext_register

Complete the fields indicated on your screen.
Please note that required fields are marked with *****

If you are not affiliated with Disaster Cycle Services or Service to the Armed Forces, select **N/A** for Region

The username box will automatically populate with your email address

When choosing your password, please note the password requirements at the bottom of your screen

Fill in the "CAPTCHA" at the bottom of your screen

FINISH

Click the "Log In" button

How do I access EDGE?

After registration, you can access EDGE at the following link:
https://arc.csod.com

North Carolina
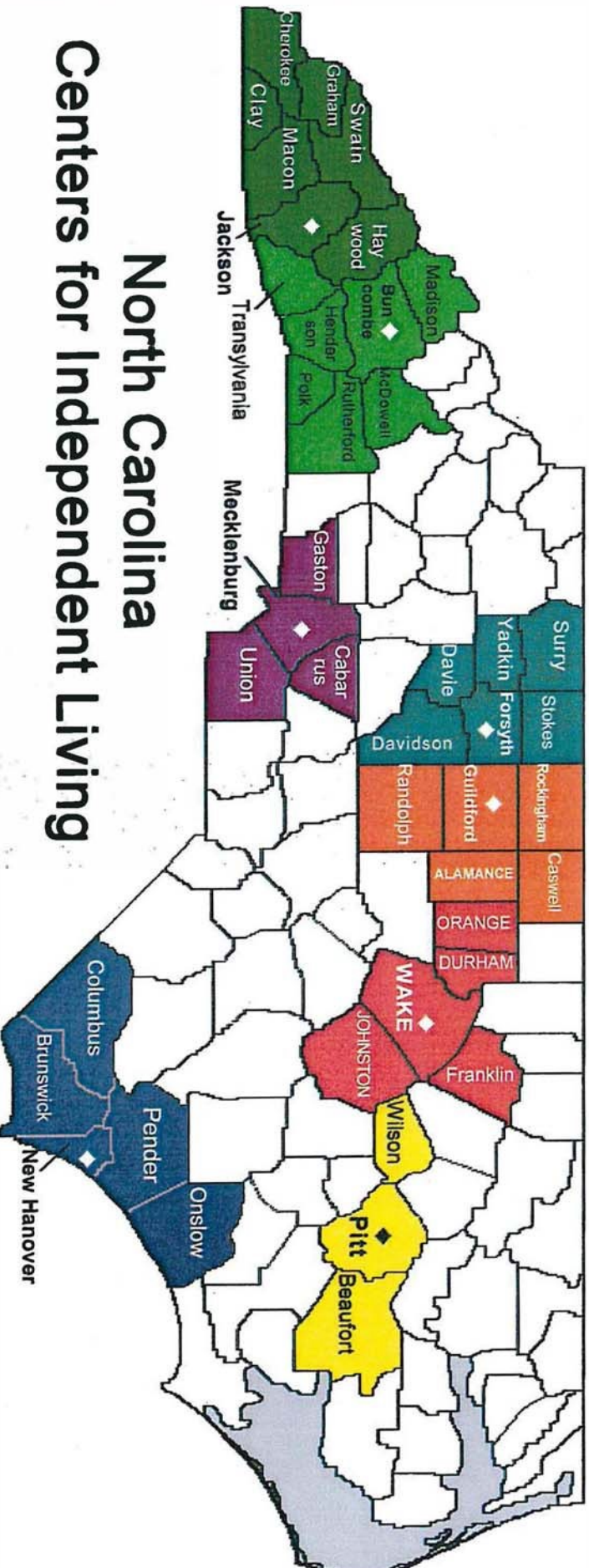# Centers for Independent Living

The Adaptables
7744 N. Point Blvd
Winston-Salem, NC 27106
(336) 767-7060
Since 2001
theadaptables.com

Joy A. Shabazz CIL
221 Commerce Place,
Suite D
Greensboro, NC 27401
(336) 272-0501
Since 1992
shabazzcil.org

Alliance of Disability Advocates
3725 National Dr. #105
Raleigh, NC 27612
(919) 833-1117
Since 2003
alliancecil.org

Disability Advocates & Resource Center
702-A John Hopkins Dr.
Greenville, NC 27834
(252) 355-6215
(888) 541-7227
Since 2008
darcnc.org

Disability Partners
(Sylva)
525 Mineral Springs Dr.
Sylva, NC 28779
(828) 631-1167
Since 1995
disabilitypartners.org

Disability Partners
(Asheville)
108 New Leicester Hwy
Asheville, NC 28806
(828) 298-1977
Since 1999
disabilitypartners.org

Disability Rights & Resources
5801 Executive Center Drive,
Suite 101
Charlotte NC 28212
(704) 537-0550
Since 1980
disability-rights.org

disAbility Resource Center
5041 New Centre Dr.
Suite 210
Wilmington, NC 28403
(910) 815-6618
Since 2008

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North Carolina FAST Member Requirements

Approval Process

- ☐ Fill out FAST application form (include specialty, work history, etc.)
- ☐ Attend one-day FAST member training
- ☐ Verify two years professional experience in one or more social service disciplines (this can be a letter from a supervisor, a resume, or job description)
- ☐ Submit to background check or submit proof of background check from current employer
- ☐ Participate in interview by FAST panel – the interview will include questions about background, commitment, willingness, and abilities
- ☐ Receive official FAST certificate
- ☐ Receive FAST vest and identification card
- ☐ Choose level of participation (state, regional, county)

Within 6 months

- ☐ Show proof of passing FEMA Incident Command Systems (ICS-100, 200 & 700) within the past five years
    - o https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c
    - o https://training.fema.gov/is/courseoverview.aspx?code=IS-200.c
    - o https://training.fema.gov/is/courseoverview.aspx?code=IS-700.b
- ☐ Complete an employer MOU, if needed
- ☐ Take the American Red Cross Shelter Fundamentals training (online or in classroom) and the Shelter Manager Training (available online, but preferably in person)

Member Sustainment Training

- ☐ Participate in quarterly FAST Member Trainings (in person or webinar)
- ☐ Participate in quarterly notification tests (deployment alerts)
- ☐ Participate in shelter trainings and/or exercises when available
- ☐ Complete yearly reviews, post-deployment hot washes, and/or surveys