

On-Site Management For Early Response Teams



Revised March 2010



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On-Site Management For Early Response Teams Resource Guide

“Do not neglect to show hospitality to strangers, for by doing that some have entertained angels without knowing it.”

Hebrews 13:1

Special thanks to UMCOR Consultants Barbara Tripp and Rick Hill for design of this guide and to Rev. Virgil “Butch” Huffman for his assistance in gathering the information.

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MISSION STATEMENT:

The mission of an On-site Manager is to provide assistance to an annual conference in establishing an environment appropriate and prepared to receive trained Early Response Teams. This environment will enable teams to carry out their mission of helping establish the presence of the church.

Early Response Team On-Site Management

Introduction

The early days after a disaster are critical to the safe and speedy recovery of an affected family or individual. As prominent members of most communities, the church is often turned to for that security and early assistance. A well prepared church can make a great difference to the well-being of a community.

But even the best prepared church can be overwhelmed by disaster. This guide has been created in an effort to assist those churches that find themselves in the midst of a disaster, and overwhelmed by the needs of the church and the community.

This guide is designed to train volunteers in helping those churches by assisting in establishing a process for receiving early response teams. It should be noted here that the key is to assist, not to take over. The disaster and the response still belong to the community in which it occurs.

An On-Site Manager (OSM) will help relieve some of the stress that affects the local community by taking over some of the disaster related responsibilities.

This guide will give a volunteer the tools and techniques to establish a temporary response center at a local church (or other facility as designated by the community) for the purpose of coordinating the work of the ERT's.

James 2:17

“So faith by itself, if it has no works, is dead.”

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Section I

Background Information

Phases of Disasters

I. Preparedness Phase: During preparedness communities are getting equipment and personnel prepared and trained to respond to an INCIDENT.

- The preparedness is an ongoing phase.

II. Response (Emergency/relief Phase): During and immediately after the incident, emergency personnel are providing rescue, accounting for survivors, mass care, and medical treatment.

- This phase is usually handled by professionals and not volunteers.
- This stage is left to emergency responders.
- As a church our emergency response should be to account for members of our church family, our neighbors, our loved ones and elderly and disabled people who may need help.

Relief Following the emergency, when it is safe to enter an affected area, immediate assistance is provided to survivors. The second part of the response phase is the relief. The relief phase is on average 10 times as long as the rescue phase.

- No repairs are done at this point, therefore few if any financial resource are needed.
- Faith organizations and nonprofits such as the Salvation Army and Red Cross will be providing food, shelter, and hot showers for survivors.
- The United Methodist Early Response Teams will begin during this stage providing a caring presence and a listening ear, helping prevent further damage to personal property, and removing debris.
- It is important that we be very careful in this phase and “do no harm,” Doing too much work may affect insurance payments, FEMA assistance or create future problems for the survivors.

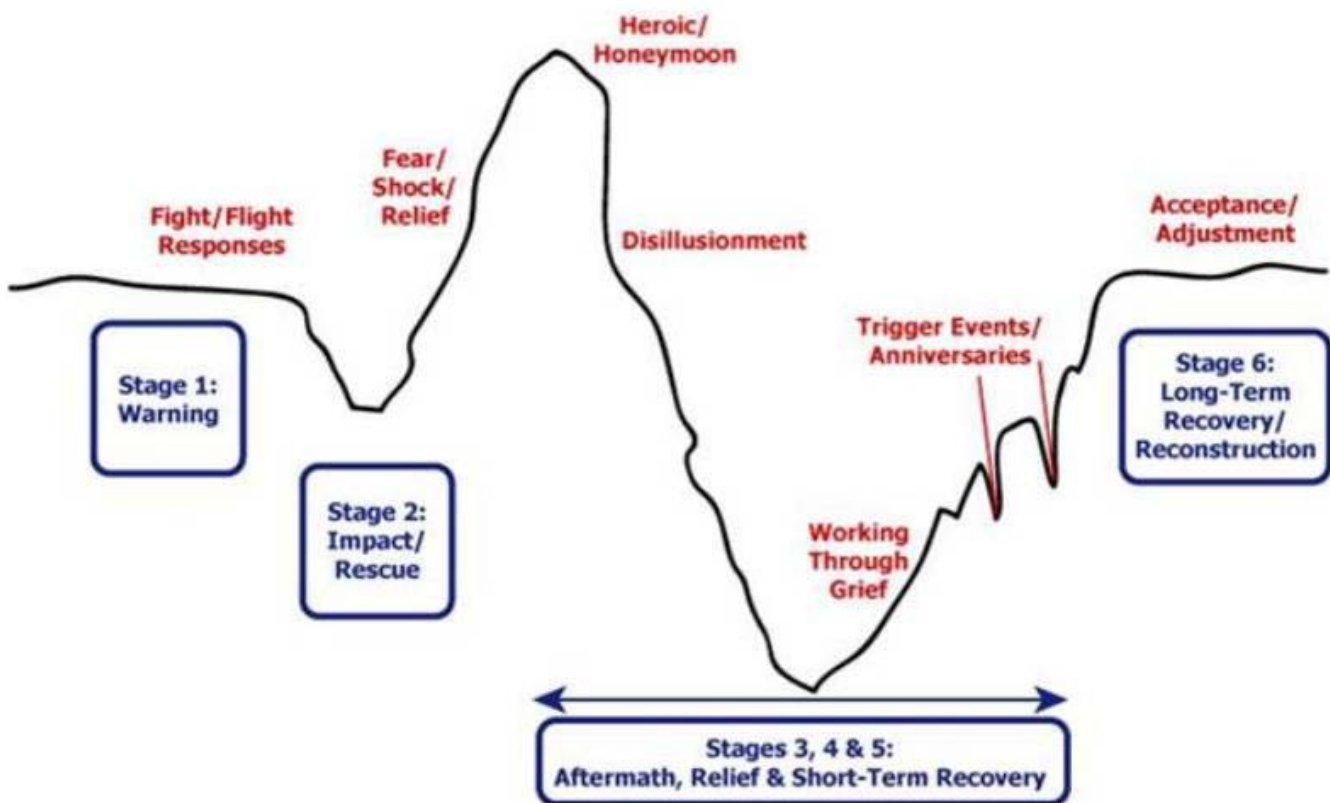
- This phase is fast paced, with long hours and many days of work at a time. It is very important that you take care of yourself and your family as well as those directly affected.

III. Recovery Phase: Communities and individuals begin the long process of working towards a new normal. This phase generally last 10 times as long as the relief phase.

- This stage is much slower paced and more detail orientated.
- Long Term Recovery Groups are formed to assist unmet needs.
- Volunteers are again critical to the long term recovery process.
- During this phase rebuilding, advocacy, resource development, housing plans and long term planning happen.
- This phase can last a year or more.
- During this phase many times you will have to say “no”, “not now”, “not yet”, and “be patient”.

IV. Mitigation (Review Phase) At the completion of an agencies/organizations response to any particular incident, time should be spent reviewing the success of the response. If you are an emergency responder, you review after the emergency is over. If you are a long term recovery group (LTR) review is done when the response is officially closed.

- In the UMCOR system, a review and a closeout report are done when the response agency closes.
- UMCOR also recommends “tabletop” exercises, or scenario driven challenges to a conferences existing disaster response plan.
- An individual church needs to review its plan any time there is a shift in leadership within the church or an incident occurs. Tabletop type exercises can be effective in local churches too.
- Mitigation involves doing things in the church/community that will lessen the impact of future disasters. (Ex. Elevating homes in flood plains)



Section II

Response happens at many levels

1. The Local Church

The local church is most familiar with the affected community of which it is a part. The churches response plan should fit in with the community's response plans.

Churches can provide:

- Shelter
- Feeding location
- Donations and distribution center
- Housing for volunteers thus enabling Early Response Teams to enter the community
- Information

2. The Community

Disaster response in the community is lead by local emergency management personnel. A community needs to plan ahead as to who will provide:

- Shelters
- Feeding
- Distribution of donated materials
- Volunteer housing

3. The District

A district for the United Methodist Church is a collection of churches in a geographical area with a District Superintendent (DS) to oversee and guide the pastors and churches. When a church in the district is affected, the pastor must immediately inform the DS of the situation. The district can then assist the affected area by providing:

- Volunteer teams for cleanup and rebuilding
- Pastors to help the affected pastors
- Sheltering/feeding for evacuees

4. The Conference

Conference Disaster Response Committees work on behalf of the entire conference to plan, train, and respond to disasters. In the event of an incident, the plan is put into motion and people are assigned to perform the designated functions.

- Assessment of affected churches and personnel
- Recruitment of volunteers for all phases
- Long Term Recovery Plans (LTRP)
- Financial planning for LTRP
- Through the Bishop, invite outside assistance such as UMCOR and UMVIM

5. UMCOR

UMCOR builds relationships with other response groups at the national level. These relationships are interpreted for a conference on the local level. UMCOR also works with conference personnel to establish a conference response plan and to train to that plan. UMCOR provides for the local conference

- Funding both emergency and long term
- Materials resources
- Technical assistance
- Training for response programs
- Volunteers

6. UMVIM

Providing volunteers and volunteer management is a major function of UMVIM in disaster response. Volunteers can help a conference with

- Early Response Receiving areas
- Call centers
- Volunteer host sites
- Construction sites
- Coordinating teams

Section III

Deployment

How are OSM's deployed?

- At the invitation from UMCOR or the affected conference's UMVIM or Disaster coordinator for an OSM to come assist
- When it is in your own community

Circumstances that might require deployment?

- A church is so overwhelmed by the incident that no one locally is able to organize to receive the help
- A church where disaster response is not planned and no one locally has the skills to set up for teams
- A church where the Pastor has a calling in an area other than disaster response and needs relief or assistance

Why provide OSM's?

- It is an opportunity for service for those called by Christ to disaster response as a part of putting their faith into action
- It establishes the presence of the church in an active and compassionate role
- It fills a void locally where congregants and pastors are heavily impacted by the incident and not available to set up for relief
- It can help prevent "burnout" of those directly impacted by the incident by providing relief of duties

Qualities of a good OSM:

- Flexible
- Organizational ability
- Self Motivated/creative
- Compassionate
- Cooperative (willing to work with local population)
- Work team experience
- ERT trained (and experienced)

Section IV

ERT Host Site

One of the primary functions of the host site is to listen: to listen to the needs of the survivors, the surrounding community, the affected conference, and the incoming ERT's. Only by listening do we determine the most pressing needs and the manner in which we might most effectively meet those needs.

Once needs and methods have been determined, an On-Site Manager (OSM) needs to assist in the establishment of a hosting site for ERT's. Whenever possible, a host site should provide the following:

- I. Accurate information to teams outside the affected area**
- II. Relief for local people**
- III. Housing for the teams, Bath/shower facilities or their nearest location**
- IV. Materials resources**
- V. Assessment for homes/families that need ERT assistance**

I. Accurate Information

- The OSM will assist the conference ERT coordinator with the assignment of the ERT's.
- When teams call to confirm their arrival, the OSM will make assignments for housing and work sites and will provide as up to date information as is possible.
- Some information to share would include:
 - Where the team can stay or if the team needs to provide own accommodations
 - Where/when the team can eat or if team needs to provide own food
 - What materials they can bring to help out
 - What is the general condition of the area
 - What services are available (gas, groceries, supply stores, etc.)
 - What arrangements are available for bathing facilities

II. Relief for Local People

- If and when at all possible, be supportive of the pastors need for relief from disaster related work.
- Seek out information from other members of the church and the community. However, always remember it is the pastor's church..

II. Housing

- If at all possible, make arrangements for teams to sleep in the church or another building where privacy and some comfort can be found.
- Keep in mind that ALL ERT's are trained to be self-sufficient. Not having such accommodations available should not deter teams from coming.
- All overnight housing options must have bathrooms.
- Places that can be used include:
 - Churches
 - Schools that might be closed
 - Community Buildings
 - Hospitals with empty beds
 - Fire Stations
 - People's homes
 - Tents
- If you can arrange places for sleeping but have no showers, then locate showers and give the team directions. (Fire station, YMCA, pool, etc.)

IV. Materials Resources

- This may or may not be an option at your site
- If materials for clean up and home protection are available, create a system for assigning materials to incoming teams
- Always encourage a team to bring supplies and tarps
- Coordination of food, water, and cleanup supplies may also become a responsibility of your location.
- Work with the local congregation to set up a system for receiving, cataloguing, and distributing these supplies.

V. Assessment

- Assessment can be done in several ways:
 - Door to door check
 - Community meetings
 - Local inspection reports
 - Family's requests
- Each residence must be verified and a waiver signed before sending a work team.
- Written work orders will help prevent misguided work and possible complications at a later date.
- Renters may be assisted but only with personal belongings

Work Team Orientation

The number one rule is that teams must be flexible. Not all items will apply to all sites. If you are unable to provide the housing, then teams will come to your site for orientation or you will go to their location.

I. Meet and Greet incoming teams

- This may be the OSM or a volunteer assigned this responsibility. They should be familiar with the community and the situation.
- Assign teams their accommodations location.
- Collect paperwork
 - Release of liability
 - Team Roster
 - Medical forms
 - Special needs

II. Orientation topics

- Disaster background and it's affect on community
- Remind ERT's of role and function and that they are part of a bigger picture
- Share devotion
- Go over housekeeping needs
 - Lodging locations
 - Bathrooms Showers
 - Daily schedules
 - Contact numbers
 - Worship services if available
 - Base Camp needs (helping keep the base camp respectable for all)
- Work Safety
 - Stress safety office responsibilities
 - Weather related issues such as dehydration, sun burn, heat stroke, etc.
 - Special needs such as masks, hazmat suits, respirators, etc.
 - No flip flops on work site!
 - Appropriate shoes for job
- Community/Homeowners

- Remind teams of importance of listening to home owners and share appropriate information about families
- Ownership of disaster situation is the local responsibility. Do not do things to harm that relationship. (Don't make it your disaster or minimize theirs)
- Explain the volunteer tracking system that you are using and it's importance to community
- Explain work site assignments to individual teams
- Share location for local needs: medical facilities, groceries, supplies, entertainment, etc.

Best Practices – Do's and Don'ts

1. You are coming into a place that is chaotic and lacking in basic comforts. Be flexible!
2. Always wear your ID! Always introduce yourself.
3. **Listen** Remember disaster ministry is more than bricks and mortar, listening is important to disaster survivors. Be patient with fellow workers who have good listening skills and spend time letting disaster survivor's vent. The service they provide is just as important to the survivor and their recovery as cleaning and debris removal.
4. Be prepared for disturbing sights of destruction and decay.
5. Be prepared to be overwhelmed by your experience
 - a. Be willing to admit you need to talk to someone about your experience.
 - b. Take care of yourself! Take plenty of breaks, drink water, etc. Watch after your fellow team members!
6. Be prepared to work within a system. As United Methodists we are a part of a disaster response system that includes FEMA, faith based organizations, and community organizations.
7. Be a team player, you may not have the whole picture. Bring any information concerning survivor's situation, resources, and needs to the host site. You are only part of the bigger picture.
8. Relief phase is a sprint; Things happen fast, decisions need to be made quickly
9. Remember we can't help everyone! We can't fix everything! Do your best and let God do the rest!
10. Be careful what you say. Do Not Make Promises! Clients are looking for help and may read more into your statements.
11. Know when to say "NO". Sometimes we can't help.
12. Know how to say "NO". Say no respectfully. Be careful to leave the survivors dignity intact. Be honest.
13. Be Flexible. Be prepared for change. Anticipate surprises, and don't expect things to work as planned.
14. Get to know where and how to refer survivors to community and recovery resources. Make appropriate referrals.
15. Don't judge others based on your experiences. Everyone reacts differently, even to the same experience.
16. Be aware of cultural diversity. Respect differences in people and understand you

may have to adjust your thinking to be helpful.

17. Priorities, Priorities, Priorities: They change constantly and sometimes have to be reshuffled more than once (even in a day). Change sometimes happens abruptly.
18. Overcome Client Resistance: Sometimes survivors have trouble trusting other agencies, government officials or strangers. Help them trust enough to get the assistance they need.
19. Verify Needs: Remember the RELIEF PHASE is to prevent further damage, not to make repairs. (During the later RECOVERY phase the process will require verification of income, resources, services already received, or need. Work will slow down and be decided on a case by case basis.)
20. Make the survivor your focus.
21. Confidentiality: Remember the information you are dealing with is important to the family and legally protected. Don't be tempted to share what was done or not done for other clients.
22. Listening can be one of the most valuable contributions you can make. You can be more help listening than giving advice.
23. Practice good boundaries: You will not like every client/team with whom you come in contact. Maintain a professional relationship as long as you are providing assistance.
 - We don't want to encourage inappropriate dependencies on our services
 - Don't inappropriately insert yourself into survivor's lives
 - Don't play favorites with clients
24. Last but not least TAKE CARE OF YOURSELF!
 - Find someone to talk to
 - Ask for support
 - Don't take your work home with you
 - Watch out for compassion fatigue
 - Do things that reenergize you

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Checklists

Questions to ask before departure

- Who is requesting the assistance with On Site Management?
- What do they need from you (be specific as possible)?
- How soon may I come?
- Where should I report and to whom (physical address and name)?
- Who will I be working with (local church? Community person/agency?)
- Is there a feeding station or shall I bring my own provisions including stove/pots/pans, etc?
- Is there a place for me to stay or should I bring my own accommodations?
- Are there public buildings/stores open?
- Are there any transportation issues (streets blocked? Gas availability?) and should I bring a car/truck or is one available there?
- Are there office type supplies on hand such as computers/printers/copier/paper?
- Anything special required to enter the disaster area (If so, what? Like ID badge or letter?)?

Things to take

- All personal needs: clothing, toiletries, bedding, medications, etc.
- Any food as needed due to circumstances
- Communication tools (computer, cell phone, etc.)
- Flashlight with extra batteries
- Forms: thumb drive/hard copies
- Loose leaf notebook for gathering information
- Map of area
- ERT Manual/OSM Guide
- Copier/printer/fax if necessary
- Chart paper is always handy for tracking teams and assignments (markers too)
- Bible!!

Upon Arrival at Site

Meet the person in charge

- Survey/tour the area involved around your site
- Talk/listen to the locals who have been there
- Get forms ready for use
- Organize assessment teams to gather job assignments and sign permission forms
- Get communication area organized to receive ERT requests and share accurate information.
- Establish an organizational chart for tracking work and assigning teams
- Recruit and train local people willing to help
- Don't forget to think logically:
- Are my personal belongings safe?
- Have I parked in a safe place?
- Have I been courteous and polite?
- Do I speak with authority and assurance?
- Am I being flexible and cooperative?

Volunteer Job Descriptions

Volunteer Job Descriptions for OSM Team

In many if not most cases, the OSM will be working alone or with a spouse. All functions will be preformed by that individual(s), especially in the beginning. There are occasions where some of the local population or members of the local church will have time to help. If that happens, thank God and be prepared to give them specific tasks. Keep in mind that daily meetings will be necessary to insure unity of purpose and consistency of services. Listed here are some of the responsibilities that may be shared.

Orientation

- Greet teams upon their arrival.
- Share the story of the work being conducted at this site; the disaster, its effect on this community, and on this church.
- Explain how the day goes at this site and what responsibilities the team will have.
- Collect any forms and fees.
- Show the team to their accommodations.(See orientation section of guide)

Phone operator

- Take work requests and assesses applicants' personal needs, give assistance and advice on resources available
- Share accurate information with teams calling to schedule times

Assessment

- Have the home owner sign an access to property form.
- Go into the field to determine needs with the goal being to take steps necessary to prevent further damage
- Advise clients of services available from governmental agencies and what UMOVIM and UM Disaster response organization can and cannot do for owners.
- Assess potential for safety issues for teams, advice on safety equipment needs for teams.
- Determine need for permits, rules for debris removal, possible tool list for teams...etc.

Work Scheduler

- Schedule teams according to need and ability for worksites.
- Advise teams on supplies needed, what services are available on site.
- In collaboration with the assessment person, assign locations for teams to work and stay, assigning team responsibility to host site (if
- multi team: set cleaning, food prep, devotional and debriefing schedules)
Work with teams to get the most work done with the skills available (split teams if needed).
- Send team packet including necessary forms.
- Team Recruitment would be done by UMVIM Coordinators in consultation with the Conference Disaster Response Team.

Data Entry/Record Keeper

- Accurate records can be a financial windfall in some disaster situations.
- Recording all volunteer hours, locations, and donations will help make that possible if the situation is available.
- Record keepers also file all forms for teams.

Other

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Damage Assessment

Home Damage Assessment Guidelines

1) CLIENT / ASSESSOR RELATIONSHIP:

- a. Call for an appointment.
 - i. General professionalism.
 - ii. Introduce yourself and your agency
 - iii. Confirm directions to property.
 - iv. Make sure they will be there with you during the assessment.
- b. Never go alone. Always have two people.
 - i. Two heads are better than one.
 - ii. There's safety in numbers.
 - iii. Three's a crowd and intimidating.
- c. Do the job right the first time.
 - i. Go prepared to take your time.
 - ii. Take good notes and use good handwriting. Days/weeks later, if you can't understand or read your notes they are no good.
 - iii. Be thorough. "Don't rush!!!"
 1. Makes a bad impression.
 2. Causes mistakes and missed items
 3. May require additional visits, for clarification.
 4. Bring a camera/take pictures. A picture is worth a thousand words.
- d. Communicate with client. Ask questions!
 - i. Ask about any special concerns they have about the property.
 1. They know property best.
 2. Allows assessors to find out valuable information
 - ii. Find something nice to say about the home.
 1. Largest investment most people make.
 2. Eases tension.
 - iii. Leave a name and phone number.
 1. They can remember who you are.
 2. They may think of additional concerns or questions.
 3. Circumstances might change.

General List of What an Assessor Should Not Do.

1. Do not promise anything!
2. Do not attempt to predict how long something will last (shingles, HWH).
3. Do not try to explain why something doesn't work.
4. Do not offer advice on the repair or material to fix it. (If floor joists are rotten, don't explain ways to repair or amount of material needed.)
5. Do not comment on the suitability, adequacy or efficiency of anything. (Keep opinions to yourself. If ceiling fan is too small, keep it to yourself.)
6. Do not comment about building codes. (They are constantly changing and different codes were probably in effect when the home was built.)
7. Do not comment on components or systems not able to be observed. (well, septic tank.)
8. Do not comment on presence of termites, rodents or insects. (Leave to the pros)
9. Do not speculate on repairs or cost of repairs while at the home. (Take notes, take pictures, ask questions, seek professional help.)
10. Do not do anything at the home that may be dangerous to you or others, the house or property. (If it doesn't look safe, it probably isn't.)

Dangers!

1. Electrical - Quick and sneaky!
 - a. Frayed service entrance cables.
 - b. Improper grounding.
 - c. Energized metal water pipes.
2. Asbestos - Not usually a problem unless disturbed. If so it requires proper handling and disposal.
3. Lead based paints - Not usually a problem unless disturbed or eaten by a child.
4. Mold - Probably our most common problem. If left unchecked, a major mold infestation can ruin your home and your health. A few types of mold are highly toxic. Mold rots wood.

Tools/Equipment

1. Good digital camera
2. Pen/Pencils
3. Assessment forms / Extra paper
4. Flashlight(s)
5. Coveralls
6. Dust mask / Respirator
7. Ladder or Binoculars
8. Electrical Testing Equipment
9. Moisture meter
10. Mold / Radon Testing

Permits

This is a sample from the NC Administration and Enforcement Requirements Code Book. You will need to check your states code book.

301.1 General. No person may commence or proceed with:

1. The construction, reconstruction, alteration, repair, movement to another site, removal, or demolition of any building.
2. The installation, extension, or general repair of any plumbing system.
3. The installation, extension, or general repair of any heating or cooling equipment system; or
4. The installation, extension, alteration, or general repair of any electrical wiring, devices, appliances or equipment

without first securing from the Inspection Department with jurisdiction over the site of the work each permit required by the North Carolina State Building Codes and other state or local law or local ordinance or regulation applicable to the work.

(General Statute 153A-357 and 160A-417)

Permits are good for six months (to start) Discontinue (twelve months)

Do not deviate from what is described on the permit documents.

If work costs exceed \$30,000 you must have licensed contractor.

Inspections

At a MINIMUM the following inspections shall be performed by the Inspection department:

1. Footing
2. Under slab
3. Foundation (Open Floor)
4. Rough-ins (Electrical, Mechanical, Plumbing)
5. Framing
6. Insulation
7. Final

Why Create a System?

1. A set pattern ensures that the assessor won't forget part of the inspection and be wasting time constantly running inside and outside.
2. Only a set established procedure will make a smooth inspection that covers all the bases.

The System

1. Inspect the EXTERIOR first. Then move to the INTERIOR.
2. As you inspect a house, you need to record your findings on a form. A pre-printed form helps ensure that you don't miss items and speeds up the inspection because you have most information already written.
3. Normally, three initial checks should be made before you start on the house:
 - General grade
 - Aerial utility (if applicable)
 - Grounding system, service, meter

EXTERIOR

- Specific grade
- Siding
- Roof
- Foundation/Skirting
- Columns/Posts
- Porches/decks
- **Crawlspace
- Support piers
- Plumbing/wiring
- Ductwork

INTERIOR

- Service Panel
- Water Supply
- HVAC
- Electrical
- Plumbing
- Kitchen/Bath(s)
- Appliances
- Doors/windows
- Floors/walls
- Attic

Most Common Sources of Errors

1. Arithmetic Errors - incorrect calculations of quantities and cost of materials.
2. Taking wrong measurements.
3. Materials / supplies improperly priced - correctly describe kind, quality, size and dimension.
4. Incorrect units of measure - square yards, cubic yards, square feet, board feet, lineal feet, etc.
5. Failure to visit the site. Let someone who has been to the site be the one to do the estimating.
6. Failure to consider codes and fees associated with the permit process.
7. Omitting items that may seem minor.
8. Overlook items. Again, don't rush!
9. Taking shortcuts in estimating - NO GUESSTIMATING!

**And there are plenty more! The best advice is to take your time. Double check your work!*

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Forms

Date _____

Recorder _____

Date Completed _____

Disaster Response – Individual Assistance Request

Name _____

Street Address (Damaged Home) _____

City, Zip Code _____

Phones: Home (____) _____ Work (____) _____ Cell (____) _____

Current Address (if different from above) _____

Current Phone Number (if different from above) (____) _____

Name of Contact Person & Phone who can reach you _____

(____) _____

Special Needs (Please indicate how many are in each family):

1. Elderly ____ 2. Single Parent ____ 3. Family ____

4. Medical (specify condition) _____

5. Handicapped (specify condition) _____

County _____ (UMC) District _____

Referred By _____ Relationship _____

Referral Phone Number (____) _____

Directions to Damaged Home _____

Needs _____

Other Agencies Contacted _____

**FEMA No. _____

Referral or Action Taken _____

Date Completed _____

Early Response Team Disaster Worksheet & Guide
 (Determining Priority Emergencies and Needs for Residents)

Name(Storm)_____ Type of Incident_____

Name Pastor/Rep _____ Tel: _____

Name Local UMC _____ City/Town _____ State_____

Ask these worksheet questions and others you feel are necessary in order to determine what priority emergencies and/or needs exist. Use common sense, good judgment, and bond with every resident. Be sincere, be caring, and be a listener. Don't make promises you can't keep and don't Evangelize. High priority includes: residences that are unsafe or that have been damaged, or are unsanitary, or that cannot be protected against theft. This includes flooded properties, roofs with holes in them, missing doors or windows, residences that cannot be accessed, and there is a need for shelter and food. **Low priority example:** a residence where fallen tree limbs need to be gathered and hauled away.

Yes No QUESTIONS (Complete all YES answers to 2 through 10 on page 2.)

- ___ ___ 1. Are there life threatening injuries/medical emergencies. **If Yes, call 911!**
- ___ ___ 2. Has your residence been damaged and to what extent?
- ___ ___ 3. Do you have electric power to your residence?
- ___ ___ 4. If no, are the electrical power lines down?
- ___ ___ 5. Are the residence doors or drive way or street blocked with debris?
- ___ ___ 6. Can you continue to live in your residence?
- ___ ___ 7. Do you have the list of agencies for follow up assistance?
- ___ ___ 8. Do you need help with other hurricane related problems?
- ___ ___ 9. Have you taken photos of damaged areas and personal property?
- ___ ___ 10. Have you contacted your insurance company?
- ___ ___ 11. Have you registered with FEMA (for declared disasters)?

Print Name Owner/Occupant Apt/No. Street Address Subdivision City/Town Co.

Type Dwelling: Home___ Duplex ___ Apartment___ Mobile Home ___

Home Phone: (____) _____ Cell Phone: (____) _____

No. Family Members _____

Ages of Children _____ Single Parent (Yes) (No)

No. Seniors _____

Special/medical needs _____ Age ____ Relationship _____

Special/medical needs _____ Age ____ Relationship _____

All needs and priority discussed with owner/occupant and worksheet delivered to church representative _____ Time _____ Date _____

PRIORITY: HIGH-MEDICAL ____ HIGH-OTHER ____ HIGH-RESIDENCE ____

LOW RESIDENCE ____

PRIORITY NO. LIST AND DESCRIBE FAMILY NEEDS IN CLEAR, BRIEF DETAIL.

CROSS REFERENCE QUESTIONS 1-10 HERE, EXPLAIN IN CLEAR, BRIEF DETAIL.

ER TEAM MEMBER COMPLETE YOUR NAME AND INFORMATION BELOW.

Your Name _____ Date: _____

Home Tel: (_____) _____ Cell Phone: (_____) _____

Home Church (_____) _____ Phone: (_____) _____

Right of Entry and Hold Harmless Agreement

Name of Home Owner(s): _____

Phone Number: _____ Cell phone: _____

Property Address/Description:

Right of Entry

I certify that I am the owner or an owner's authorized agent of the property described above. I grant, freely and without coercion, the right of access and entry to said property to [the voluntary agency], and its agents and contractors for the purpose of removal or clearance of debris and other exterior/interior hazards from residential property that pose an immediate threat to health and safety. Such remedial actions may include debris clearance from yards, clearing of downed trees on or threatening roofs or causing an impediment to safe property ingress/egress, and any other work or actions that improve conditions interior or exterior that pose an immediate threat to the property occupants' health and safety.

Hold Harmless

I understand that this Agreement does not impose any obligation on the [voluntary agency] to perform debris removal. I agree to hold harmless [the voluntary agency], its agents or contractors, for damages of any type whatsoever, either to the above described property or to persons situated thereon. I release, discharge, and waive any action, either legal or equitable, that might arise by reason of any action of the above entities, while removing storm/disaster-generated debris from the property. I will mark any sewer lines, septic tanks, water lines, and utilities located on the described property.

Date _____

Name of Home Owner (print) _____

Signature of Home Owner _____

Home Owner ID (photo ID, type) _____

Name of Volunteer (Group) _____

Volunteer Team Leader signature _____

I&R Visitation Record (Pre- Case Management) For Preliminary Walkthrough and Assessment

Date of visitation: _____ No one home Will call again

When? _____

How many days/weeks/months since initial disaster impact? _____

This was the (1st, 2nd, 3rd, etc) call on this address/family. _____

I&R Worker's name and phone number: _____

FAMILY NAME: _____

Names(s) and approximate age(s) of person(s) visited: _____

Visitation Site; (pre-disaster home, shelter, etc) _____

Pre-disaster address: _____

Post-Disaster Address: _____

Name(s), approximate age(s), relationships of other person(s) in household:

Describe losses, injury, type of home, etc.: _____

Has client registered for FEMA Number? Yes No NA

Urgent Needs: _____

Others Notes: _____

I&R Worker Action Taken: _____

Home Assessment

Pay Attention to BOLD areas

Date _____

| General | |
|--|--------------------------------|
| <p>NAME: _____</p> | <p>Directions to property:</p> |
| <p>ADDRESS: _____</p> | |
| <p>Home () _____</p> <p>Work () _____</p> <p>Cell () _____</p> <p>E-Mail () _____</p> | |
| <p>FAMILY CONSTRUCTION REQUESTS:</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> | |
| <p>CONSTRUCTION TYPE: <input type="checkbox"/> Site built <input type="checkbox"/> Modular <input type="checkbox"/> Mobile home/trailer <input type="checkbox"/> Combination <input type="checkbox"/> Other _____</p> <p>NOTES: _____</p> | |
| <p>HOME SIZE: <input type="checkbox"/> n/a Square Footage _____ # of Bedroom _____ # of Baths _____</p> <p>NOTES: _____</p> | |
| <p>UTILITIES: Electrical <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> None</p> <p style="padding-left: 40px;">Electrical service <input type="checkbox"/> Overhead <input type="checkbox"/> Underground Meter Location _____</p> <p style="padding-left: 40px;">Water <input type="checkbox"/> Well <input type="checkbox"/> Municipal <input type="checkbox"/> None</p> <p style="padding-left: 40px;">Sewage <input type="checkbox"/> Septic <input type="checkbox"/> Municipal <input type="checkbox"/> Outhouse <input type="checkbox"/> None</p> <p>NOTES: _____</p> | |
| <p>Lay of Land: <input type="checkbox"/> n/a <input type="checkbox"/> flat <input type="checkbox"/> on a slope <input type="checkbox"/> sunken area Notes: _____</p> <p>Adequate water drainage from house: <input type="checkbox"/> n/a <input type="checkbox"/> no <input type="checkbox"/> yes Notes: _____</p> <p>Standing water under house: <input type="checkbox"/> n/a <input type="checkbox"/> no <input type="checkbox"/> yes Notes: _____</p> <p>NOTES: _____</p> | |

Delivery of materials: n/a no yes, location: _____
 Worker's parking: n/a no yes, location: _____
 Portable toilet: n/a no yes, location: _____
 Storage container: n/a no yes,
 location: _____
 NOTES:

Pests: none observed dogs snakes wasp/bees/hornets rats termites or ants Other

SAFETY CONCERNS: n/a If applicable, please note:

EXTERIOR

FOUNDATION (N/A NEED REPAIR)
 TYPE: concrete slab raised slab block (solid) block (pier) wood pilings
 combination other _____
 UNDERPINNING: n/a block wood vinyl metal none other _____
 VENTILATION: n/a adequate * inadequate (*Recommend repair)
 VAPOR BARRIER: n/a no yes
 SUMP PUMP: n/a no yes
 CLEARANCE UNDER HOUSE: n/a (if applicable, note # of _____ inches)
 CRAWL SPACE OPENING: n/a no yes, location _____
 REPAIR NOTES:

SIDING (N/A NEED REPAIR)
 TYPE: n/a vinyl brick block wood masonite cement board stucco asbestos
 aluminum combination other _____
 REPAIR NOTES:

PORCHES, DECKS AND STEPS (N/A NEED REPAIR)

DECKING TYPE: n/a wood concrete combination other _____

*HANDICAPP RAMP NEEDED? no yes (if yes, give location and height from ground to floor level)

Location: _____ Height: _____

REPAIR NOTES:

WINDOWS AND DOORS (N/A NEED REPAIR)

WINDOW TYPE: n/a wood vinyl other _____

DOOR TYPE: n/a wood metal fiberglass other _____

REPAIR NOTES:

ROOF (N/A NEED REPAIR)

ROOF TYPE: n/a asphalt rolled wood metal combination other _____

ROOF SIZE: n/a LENGTH _____ WIDTH _____ TOTAL AREA _____ SLOPE _____

VENTILATION: n/a adequate *inadequate (*Recommend repair)

Location of ventilation visible: none roof gable soffit

GUTTERS: n/a no yes NOTES: _____

DRIP EDGE: n/a no yes NOTES: _____

FLASHING: n/a no yes NOTES: _____

CHIMNEY: n/a no yes NOTES: _____

REPAIR NOTES:

ELECTRICAL: (N/A NEED REPAIR)

SERVICE CABLE/METER BOX: n/a acceptable UNSAFE need repair

BREAKER/FUSE PANEL BOX: n/a acceptable UNSAFE need repair

LIGHT FIXTURES: n/a UNSAFE missing need repair

SWITCHES/RECEPTACLES: n/a UNSAFE missing need repair

REPAIR NOTES:

MECHANICAL: (N/A NEED REPAIR)

HVAC TYPE: n/a window unit split package none other _____

AIR CONDITIONING: yes no

HEAT: yes no

HEAT SOURCE: gas electric kerosene wood coal other _____

REPAIR NOTES:

PLUMBING: (N/A NEED REPAIR)

SUPPLY PIPE TYPE: n/a pvc copper metal black plastic other _____ not visible

PLUMBING FIXTURES: n/a acceptable UNSAFE need repair

VISIBLE LEAKS: n/a none yes, location _____

REPAIR NOTES:

INTERIOR

FLOORS (N/A NEED REPAIR)

FLOOR TYPE: n/a dirt OSB boards linoleum/rug carpet hardwood
 ceramic tile combination other_____

GENERAL CONDITON: n/a acceptable UNSAFE yes, need repair (if yes, give location)

Location:_____

WATER INFILTRATION VISIBLE: n/a yes, need repair (if yes, give location)

Location:_____

REPAIR NOTES:

WALLS (N/A NEED REPAIR)

WALL TYPE: n/a sheetrock paneling plywood other_____

GENERAL CONDITION: n/a acceptable UNSAFE yes, need repair (if yes give location)

Location_____

WATER INFILTRATION VISIBLE: n/a yes, need repair (if yes give location)

Location_____

REPAIR NOTES:

CEILINGS (N/A NEED REPAIR)

CEILING TYPE: n/a sheetrock paneling plywood other_____

GENERAL CONDITION: n/a acceptable UNSAFE yes, need repair (if yes give location)

Location_____

WATER INFILTRATION VISIBLE: n/a yes, need repair (if yes, give location)

Location_____

REPAIR NOTES:

Miscellaneous

Smoke Detectors: no yes (min of two) working not working, need batteries/replacing

NOTES:

Carbon monoxide detectors: n/a no yes working not working, need replacing

NOTES:

Kitchen countertops: n/a acceptable not acceptable, need repair (please specify)

NOTES:

Appliances: n/a appliances need repair/replacement

Washer _____

Dryer _____

Stove _____

Microwave _____

Refrigerator _____

Dishwasher _____

NOTES:

Supply Summary Sheet

Please list **quantities** of all material needed. **Do not** include useable items remaining on job site.

| LUMBER | | | |
|-------------------------|----------------------------|---------|---|
| FINISHED | | TREATED | |
| Qty | SIZE | Qty | SIZE |
| | 1" x 4" x _____ ft | | 1" x _____" x _____ ft (decking) |
| | 1" x 6" x _____ ft | | 2" x 2" (porch railing) |
| | 1" x _____" x _____ ft | | 2" x 4" x _____ ft |
| | 2" x 2" x _____ ft | | 2" x 6" x _____ ft |
| | 2" x 4" x _____ ft (studs) | | 2" x 8" x _____ ft |
| | 2" x 4" x _____ ft | | 2" x 10" x _____ ft |
| | 2" x 6" x _____ ft | | 2" x 12" x _____ ft |
| | 2" x 8" x _____ ft | | 4" x 4" x _____ ft (posts) |
| | 2" x 10" x _____ ft | | Lattice (3' x 8' or 2' x 8' or 4' x 8') |
| | other | | other |
| | | | |
| | | | |
| ROUGH CUT LUMBER | | | |
| | 1" x _____ sq ft | | |
| | 2" x _____ sq ft | | |
| | other | | |
| | | | |
| | | | |
| | | | |

| NAILS, SCREWS, BOLTS | | | | | |
|-----------------------------|------------------------------|-----|---------------------------------------|-----|--------------------------------|
| Qty | ITEM | Qty | ITEM | Qty | ITEM |
| | 20d (____ lbs) | | Lag bolts (size _____) | | Sheetrock screws (____ length) |
| | 16d (____ lbs) | | Neoprene roofing (for tin) | | Spiral flooring nails 16d |
| | 12d (____ lbs) | | Ring shank nails (for Lauan flooring) | | Spiral flooring nails 8d |
| | 10d (____ lbs) | | Roofing nails (shingles/rolled) | | Spiral galvanized siding nails |
| | 8d (____ lbs) | | Screws (size _____) | | Tacks |
| | 6d (____ lbs) | | Sheetrock nails (size _____) | | |
| | Bolts (6") w/washer & nuts | | | | |
| | Finishing nails (size _____) | | | | |

| MATERIALS | | | |
|------------------|--|-----|--|
| Qty | ITEM | Qty | ITEM |
| | Anchor bolts | | Rebar |
| | Cap blocks | | Ridge vent (10' sections) |
| | Carpet (12' x ____ ft, color - _____) | | Ridge cap (10' sections for tin roof) |
| | Concrete (2 ½ 80lb bags per 20" x 20" x 8" pad) | | Roof cement |
| | Corner board | | Roof coat |
| | Door – exterior (rough opening =) | | Glass (size) |
| | Door – interior (rough opening =) | | Glazing compound |
| | Door hinges (3 for ext, 2 for int) | | Glue |
| | Door knob | | Gravel (_____ yrds or tons) |
| | Doorstop (length - _____ in.) | | Greenboard (4' x 8' ½") |
| | Downspout (guttering) | | Guttering (10' sections) |
| | Downspout elbow | | Guttering connections |
| | Downspout ties | | Guttering ends |
| | Drainage pipe (10' sections) | | H clips |
| | Drip edge (10' sections) | | Insulation 4" (16" or 24" for walls) |
| | Felt paper (1 roll = 400 sqft) | | Insulation 6" (16" or 24" for ceiling) |
| | Flashing-aluminum (size _____) | | Insulation (blue foam) _____ 1" or _____ 2" |
| | Foundation vent (size _____) | | Joint compound (or mud) |
| | Gable vent and screws | | Lawn ties |
| | Linoleum or carpet strip (length _____) | | Lightening rods (for floor insulation) |
| | Liquid nails | | Linoleum (12' x _____ ft., color - _____) |
| | Mesh tape (not for corners) | | Rope |
| | Mop | | Sand paper |
| | Mortar | | Screen (size _____) |
| | OSB (4' x 8' x ¾ " tongue & groove) | | Sheetrock (4' x 8' x ½") |
| | OSB (4' x 8' x ½") | | Shims |
| | Paint – exterior (color -) | | Shingles (3 bundles=100 sqft) color _____ |
| | Foundation (color -) | | Siding (type & size _____) |
| | Interior (color -) | | Silicone caulk (color - _____) |
| | Porch & deck (color -) | | Soffitt vents and screws (size _____) |
| | Stain (for) | | Spikes and ferrels |
| | Paint thinner | | Staples (size) |

| | | | |
|---|--------------------------|--|---------------------------------|
| | Paper tape (for corners) | | Threshold (size) |
| | Plastic | | Tin (3' x) |
| | Plywood (4' x 8' x 1/2") | | Trash bags |
| | Plywood (4' x 8' x 3/4") | | Underpinning (3' x 5' sections) |
| | Push points | | Vinyl tile (12" x 12") color - |
| | Railroad ties | | Window (rough opening = |
| ELECTRICAL (list specific needs) | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Comments/Additional Notes/Diagrams

Early Response Screening Form

Today's Date: _____ Person filling out form: _____

Name: _____

Church/Organization: _____

Conference _____ District _____

Jurisdiction _____

Mailing Address: _____

City, State, Zip Code: _____

Contact Information:

Home _____ Work: _____

Cell _____ E mail _____ Fax: _____

SCREENING QUESTIONS Are you a team or an individual?

When and where did you attend an Authorized ERT class?

If you are an individual:

Do you have experience? _____

Are you ready to work alone or do you need to be with a team? _____

What type of work are you prepared to do? _____

When are you available? _____

Do you need shelter? _____

If you are a team:

Do you have disaster experience? ____ yes ____ no

What type of work are you prepared to do? _____

When are you available? _____

Do you need shelter? _____

COMMENTS _____

OFFICE USE ONLY:

STATUS

Opened _____ Initial Contact _____ Working _____

Dispatched _____ Referral _____

FOR OFFICE USE ONLY

Type Training _____

Type Experience _____

Expertise _____

Team Size _____

Equipment _____

Date to Arrive _____ How Long? _____

Team Leader Contact Information

Cell: _____ Other: _____

Dispatched to: _____

Assigned: _____

Next Communication:

Team will call back _____

Call Center to call back _____

Conference will call back _____

other _____

Participant Liability Release Form

Please read before signing, as this constitutes the agreement as a volunteer and the understanding of your working relationship as a volunteer with The United Methodist Church _____ Conference Disaster Recovery.

I, _____ acknowledge and state the following:

I have chosen to travel to perform cleanup/construction work designed to repair or replace homes.

I understand that this work entails a risk of physical injury and often involves hard physical labor, heavy lifting and other strenuous activity; and that some activities may take place on ladders and building framing other than ground level. I certify that I am in good health and physically able to perform this type of work.

I understand that I am engaging in this project at my own risk. I understand that this is a "grass roots" activity to support individuals adversely affected by Hurricane/flood disaster or are receiving assistance to repair or replace substandard housing or working in a warehouse environment. I assume all risk and responsibility for any damage or injury to my property or any personal injury, which I may sustain while involved in this project, and related medical costs and expenses.

In the event that my supervising organization arranges accommodations, I understand that they are not responsible or liable for my personal effects and property and that they will not provide lock up or security for any items. I will hold them harmless in the event of theft or for loss resulting from any source or cause. I further understand that I am to abide by whatever rules and regulations may be in effect for the accommodations at that time.

By my signature, for myself, my estate and my heirs, I release, discharge, indemnify and forever hold The United Methodist Church _____ Conference, together with their officers, agents, servants and employees, harmless from any and all causes of action arising from my participation in this project, and travel or lodging associated therewith, including any damages which may be caused by their negligence.

SIGNATURE _____ DATE _____

DATES of WORK TEAM or DATES COVERED by THIS Liability

STREET ADDRESS _____ CITY _____
STATE _____ ZIP _____

PERSON to CONTACT in CASE of EMERGENCY _____ PHONE _____

WITNESS _____

ORGANIZATION OR CHURCH NAME _____

Medical Information for Individual Volunteers
(Every Volunteer Needs to Fill Out This Form)

Please complete the following and give to mission leader.

TEAM LEADER SHOULD RETAIN THIS FORM ON SITE TO USE

1. IN CASE OF EMERGENCY.
2. Name _____ Dates of trip _____
3. Blood type _____
4. information about any prescriptions I use:
5. I am allergic to: _____
6. Name of contact person _____
 - a. Street Address _____
 - b. City _____ State _____ Zip _____
 - c. Phone (work) _____ (Home) _____ cell _____
 - d. Relationship to volunteer _____
7. My health insurance company is _____
8. Policy number _____
9. Physical limitations or concerns:
10. I am diabetic: Yes _____ No _____
11. I have a history of seizures: Yes _____ No _____
12. Name of family physician _____ phone # _____
13. I consider myself healthy enough to fulfill my responsibilities on the mission team.
 - a. Yes ___ No ___

I, _____ (volunteer's signature), authorize
_____ (team leader) to consent to any necessary examination,
anesthetic, medical diagnosis, surgery, or treatment and/or hospital care rendered under the
general supervision and on the advice of any physician or surgeon licensed to practice medicine
by the state in which they practice, during the duration of the trip identified above and further
authorize the release of medical information from my personal medical records for the following
purpose: _____ but I do not give permission for any
other use or re-disclosure of this information.

Your Conference Disaster Response Information
Disaster Response Facilities Survey

Church Name: _____

Church address:

City State Zip Code

Church Phone: _____ Fax: _____ EMail:

Parsonage phone: _____

Disaster Response Coordinator: _____

Phone: _____ EMail: _____

Does your church have a Disaster Preparedness Plan? Yes No

In the event of a disaster, would your church be willing to house volunteers? Yes No

Number of persons that can be accommodated: _____

Are separate sleeping areas available if necessary for male/female:

Yes No

Cooking facilities available: Yes No

Showering facilities available: Yes No

(**Note:** Please specify whether the shower facilities are in the Church, in the homes of congregational members or with local facilities in the area i.e. high school, National Guard Armory, Fire Department, YMCA, Boys' or Girls' Club, etc.)

List any daily limitations of facility use: (i.e. Day Care, UMW, UMM, UMYF, Bible study, other):

Indicate which other programs your church is willing to participate with:

Early Response Training Damage Assessment Training

Casework Training Volunteer Management

Disaster Response Covenant

We, the Administrative Board/Council of this Church, join in the community of God's people through the Disaster Response Plan for a Christ centered response to the needs of all people in the event of a disaster. We understand that this plan may call upon us to participate as a part of the United Methodist Church at large for the ongoing wellbeing of God's people. This covenant is made to express our bond together as a community of interest in the nurture of all of God's people. We hereby express our intention to participate to the best of our ability in the event of any disaster in which we are called upon to be a part of the Disaster response plan.

Chairperson Administrative Board/Council

Pastor

Work Site Amenities

Project:

Contact Person:

Housing:

Medical Facilities:

Volunteer Fire Department:

Nearest Dental Office:

Nearest Gas Station:

Nearest Grocery:

Nearest Restaurant:

Fast food:

Recreation:

Notes