

**SAN DIEGO INTERFAITH DISASTER COUNCIL  
(IDC)**

**DISASTER PREPAREDNESS and  
EMERGENCY RESPONSE**

**Part II:  
WORKBOOK**

First published, October, 2010  
San Diego Interfaith Disaster Council  
Freely offered to interfaith organizations for their  
disaster preparedness efforts.  
Latest edition can be found on our website  
[www.sdinterfaithdisastercouncil.org](http://www.sdinterfaithdisastercouncil.org)

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## **II. ESTABLISHING YOUR TEAM**

**Step 1:**

**Identify the Emergency Coordinator Responsible for your plan:**

NAME	POSITION	EMAIL	Home Phone	Cell Phone

**Identify the Emergency Co-Coordinator:**

NAME	POSITION	EMAIL	Home Phone	Cell Phone

**Identify Planning Team Members:**

NAME	POSITION	EMAIL	Home Phone	Cell Phone

**Identify Additional Participating Department Heads / Committee Chairs / Resources:**

NAME	POSITION	EMAIL	Home Phone	Cell Phone

**Identify clerical support for the team:**

NAME	POSITION	EMAIL	Home Phone	Cell Phone

**Step 2:**

TOPIC	DATE	TIME	ROOM
I. Review Project Mission			
Review Team Members			
2. Step 3 schedule			
3.			
4.			
5.			
6.			

**Step 3:**

ACTIVITY	Plan	Completed
Review materials for distribution	Family Preparedness booklet *	
Determine dates for distribution	Date 1.	
	Date 2.	
Obtain materials - person responsible:		
Print follow up cards +		
Determine date for follow up cards	Date:	
Review data from follow up	Meeting date:	

\* Available: <http://www.sdcounty.ca.gov/oes/docs/FamilyDisasterPlan.pdf>  
858-715-2207

**Step 4:**

**Use the following chart to define your sequence, the individuals or groups who will complete it and the target reporting dates.**

<b>Component/ section</b>	<b>Sequence</b>	<b>Group / Individual</b>	<b>Follow up Date</b>	<b>Reference: Guidebook Page</b>	<b>Reference: Workbook Page</b>
Leadership identification / notification	1				
Initial Emergency Plan					
Financial Plan					
Communication Plan					
Facility Plan					
Continuity of Operations Plan					
Preparation for Response / Recovery					

### **III: FORMS / WORKSHEET TEMPLATES**

#### **A. LEADERSHIP**

##### **Leadership Identification:**

- Identify your leadership individuals and the various means to contact them in an emergency such as fire or earthquake.

	<b>POSITION</b>	<b>NAME</b>	<b>Primary EMAIL</b>	<b>Cell PHONE</b>	<b>Home PHONE</b>	<b>Work Phone</b>
<b>1</b>						
<b>2</b>						
<b>3</b>						
<b>4</b>						
<b>5</b>						
<b>6</b>						
<b>7</b>						
<b>8</b>						
<b>9</b>						
<b>10</b>						

This list needs to be available off site.

Date updated: \_\_\_\_\_ Next update due: \_\_\_\_\_

- Identify the leader or individuals to be notified in other specific (non emergent) situations.

<b>Situation</b>	<b>Position</b>	<b>Name</b>
Utilities failure		
Facilities problem		
Security issues		

**Denominational contacts:**

	<b>POSITION</b>	<b>NAME</b>	<b>Primary EMAIL</b>	<b>Cell PHONE</b>	<b>Home PHONE</b>	<b>Work Phone</b>
<b>1</b>						
<b>2</b>						
<b>3</b>						

## B. INITIAL EMERGENCY PLAN

**For Fire:**

Location of alarms	
Location of enunciator panel (fire location panel)	
Location of exits	Attach diagram with exits marked
Location of fire extinguishers (type)	Mark on diagram
Designated off site meeting place	

**Responses:**

911

Utilize fire extinguisher if immediately available.

Gas shut off valves are closed.

Close doors and windows between you and exit.

Exit and close door.

See page "Fire Prevention" section of the Guidebook, page 17.

**FOR EARTHQUAKE:** (use front pages in Yellow Pages book for references)

Safe places in facilities (windowless interior hallways, areas of reinforced structure)	
Location of internal supplies	
Water	
Food	
Blankets	

**Responses:**

Move immediately to safe area for "duck and cover."

Remain there until movement has stopped.

Anticipate aftershocks.

See Earthquake safety measure, Guidebook, pg 18.

**FOR OTHER RISKS as determined based on your facility:**

<b>RISK</b>	<b>RESPONSE</b>

**IDENTIFY OTHER RESOURCES:**

First Aid Kits	
AEDs (Automated External Defibrillators)	
Individuals who are AED trained	

**RESOURCE NUMBERS:**

**Date last updated: May, 2010 (every 6 months)**

	PHONE NUMBER
Police / Fire: emergent	911
Police/ Sheriff: non-emergent	
Fire: non-emergent	
Arson Hotline	1-800-633-2836
Water Department	
Gas / Power: SDG/E (Emergency/ Outages)	1-800-611-7343
Local social service agency	Ex: No. Coastal: Community Resource Center No Inland: Interfaith Community Services
Hazardous materials	1-619-338-2231
Poison Information Center	1-800-222-1222
Sexual Assault Crisis Hotline	1-800-479-3339
National Crisis Hotline	1-800 SUICIDE 784-2433
Suicide Crisis Line / Crisis Counseling	1-800-479-3339
National Suicide Prevention Lifeline	1-800-273- TALK (273-8255)
Domestic Violence Hotline	1-888-385-4657
Child Abuse Hotline	1-858-560-2191 1-800-344-6000
Elder Abuse/Dependent Adult	1-800-510-2020
Women's Resource Center: Dom. Violence & Rape Crisis Hotline	1-760-757-3500
Weather line	weather.com
Disaster information	<a href="http://www.sdcounty.ca.gov/oes/">http://www.sdcounty.ca.gov/oes/</a> ; 211 ** <a href="http://www.cpc.ncep.noaa.gov/products/predictions/threats/threats.gif">http://www.cpc.ncep.noaa.gov/products/predictions/threats/threats.gif</a>
Closest Pay phones:	1
(If they exist in your area)	2

**\*\* 211:** call for information about community, health or disaster services, examples:

Counseling, support groups, disaster info, health care, legal aid, volunteer opportunities and more.

**OTHER NEIGHBORHOOD RESOURCES:**

Identify local agencies, churches, stores, that might be available in an emergency.

NAME	PHONE / ADDRESS
Clinics	
Pharmacy	
Other faith based groups	

**PROCESS FOR BUILDING SHUT DOWN:**

Attach the diagram marked with the following:

- Your safe spots (windowless interior hallways or areas of reinforced structure)
- Exits
- First aid and survival kits
- Fire extinguishers
- Alarm controls
- Utility shut offs

**Utility shut offs: locations and directions.**

Electricity shut off	
Gas shut off	
Water shut off	

**Notifications to be made:**

<b>Utility</b>	<b>Phone #</b>	
Gas shut off		
Water shut off		
Electricity shut off		
Alarm shut off		
Use of fire extinguisher		

## Evacuation Processes:

During services	
During evening activities	
During "office hours"	
Notification of parents not on site	
Off site meeting place	

**Temporary Shelter:**

<b>Name</b>	<b>Address</b>	<b>Phone</b>	<b>Directions</b>

## C. COMMUNICATIONS PLAN

What to do in the event of an emergency:

### **Establish Communications:**

- 1.)** Make contact with your House of Worship (HOW) communicator or a member of the HOW leadership
  - a.) Use telephone as a first choice and Amateur ("Ham") Radio as a second choice.
  - b.) Use the regional primary Simplex Frequency of [insert frequency] or the alternate Simplex Frequency of [insert frequency]
  - c.) Use the regional organization and regional radio operator lists to assist in making contact.

### **Collect Information:**

- 2.)** Fill in the blanks on the worksheet for the affected locations. [If more space is needed, make a note "See Attached" and use the line letter as a reference].

### **Notify Regional Leadership:**

- 3.)** Contact your regional leadership contact person using the contact information on the Regional Organization list and pass information on the worksheet to regional leadership using telephone or Amateur Radio.

### **Communications Outside the Region:**

- 4.)** If the event requires communications outside the region in the San Diego area with [insert location here]
  - a.) In San Diego Area use the [insert name of repeater here] on [insert frequency here].
  - b.) If that repeater is not operational use the alternate repeater on [insert frequency here].
  - c.) If the alternate repeater is not operational use the output of the primary repeater simplex [insert frequency here].
- 5.)** If the event requires communications outside of the San Diego area, establish communications with the [insert location here].

- a.) Call the [insert location here] at [insert number here]. If unable to call contact a radio operator outside the area and have them contact the [insert location here] and give them the VHF and an alternate HF frequency.
  - b.) For VHF use the primary simplex frequency of [insert frequency here] or the alternate [insert frequency here].
  - c.) For HF use the frequencies listed for the various bands on the frequency list for HF communications.
- 6.)** If the event requires it establish communications with the headquarters in [insert location here].
- a.) Call the [insert headquarters position here] operator [24/7] [insert name and contact information] to notify them of the emergency and request aid.
  - b.) Contact the Emergency Response Coordinator [insert name and contact information] to notify them of the emergency and request aid.
  - c.) Contact the Emergency Communications Coordinator [insert name and contact information] to set up a schedule for HF communications.
  - d.) Contact the Assistant Emergency Communications Coordinator [insert name and contact information] to set up schedule for HF communications.
  - e.) If you are unable to call, contact a HAM radio operator outside the area and have the person contact your Headquarters by telephone to give them an HF frequency and an alternate frequency to pass on to the Communications Coordinator.

### **Worksheets:**

- Net Preamble (dialog) (Word DOC)
  - Contacts Worksheet (Excel XLS) \*
  - Other Contact Worksheet (Excel XLS) \*
  - Radio Operators (Excel XLS) \*
  - Communications Worksheet (Excel XLS) \*
  - Radio Log (Excel XLS) \*
- These documents are found in the tabs of the Communication Worksheet Excel documents.

# **THE (insert name of the regional level) EMERGENCY RAPID RESPONSE PLAN**

## **INTRODUCTION**

This (insert name of regional plan) Emergency Plan is designed as an adjunct to and slight modification of that part of existing (congregational) and (regional) emergency plans that concern communications between members, neighbors and (insert name of congregational leader such as pastor, bishop, etc.) in the initial stages of a major, far-reaching disaster. There are two parts to this possibly life and limb saving communication plan:

- Part 1) Early warning by "Telephone Tree" of impending disaster (Fire, flood, chemical or dirty-bomb attack)
  
- Part 2) Early check-up on families and assistance to victims by members in the neighborhood following a disaster; especially a severe earthquake.

Prior to the recent wildfires, we believed that government organizations would take care of these needs, but times have changed. We have recently, and will probably continue to face unprecedented disasters: firestorms, terrorist attacks and earthquakes. Civil authorities are warning us that they cannot deal with the biggest of these without the help of citizens. They say neighbors must depend upon neighbors and that is our plan.

Designed to work in almost any situation in which members can be of help, this plan uses key positions of leadership rather than key people. Leaders on every level can be replaced by appropriate substitutes. All that is required of congregational members is to be familiar with the plan, have their Emergency Congregational Directory and Map and be willing to serve.

Neighbors play a vital part in this plan. They may be the only ones who can provide immediate help to members, and we must help THEM when we can.

Following a devastating earthquake, Part 2 calls for Block Captains (who have been assigned specific geographic sections of their congregations) to check on families in their neighborhoods, seek help from neighbors for victims and report to their bishops. They in turn report to the (insert regional position).

Where a major disaster is not widespread, it is expected that nearby church members will give assistance to victims. A report of these actions by a participant should be made to the (insert name of congregational leader such as Pastor, Bishop, etc). When a Bishop deems it prudent, he may choose to send any available members to a troubled area to act as Captains.

## **MEMBER RESPONSIBILITIES FOLLOWING A MAJOR EARTHQUAKE-TYPE DISASTER**

Each of our congregations should be divided into about 8 parts, which are called "BLOCKS". One person who lives in that block is appointed Block Captain by the (insert name of congregational leader).

Blocks, in turn, should be divided into manageable sized "Sections" that can be walked by a person in about an hour and a half. This, of course, includes time spent knocking on doors of members' houses and inquiring about that family's well being, following a disaster. This means an area that would encompass about 10 congregational families. A block captain assumes full responsibility for one Section. One person from each of the other sections is appointed "Assistant Captain" of his section.

Following a MAJOR earthquake type emergency, in the absence of a Block Captain, an Assistant should take his place. He becomes an "Acting" Block Captain. A Block Captain is responsible for his own Section and ultimately all other Sections in his Block. If an Assistant is missing, the Captain will try to get a substitute by enlisting another responsible male or female member in that Section. Finding someone to call will be simple because each congregational family should have an EMERGENCY Congregational DIRECTORY. It should be attached to their regular Congregational Contact List. This directory lets members know phone numbers and addresses of all other members in their block and section. If no one is available, the Captain will not only inspect his own Section, but his other Sections as well. All families should check on their neighbors. If there is no captain around, someone in that family should assume the responsibility, get help as needed and report conditions to his (insert congregational leader here such as pastor, bishop, etc.).

Where practical, Captains and their assistants should take Block Captain Report Forms with them as they make their rounds. The forms make it easier for captains to compile and report information after they inspect their Sections. They should write names, addresses and other details on the backside of the form when there is no place on the front to do so. These notes should be numbered with the same numbers as those on the form entries to which they

refer. Non-members in distress are reported only on the backside of the form and NOT totaled. In a situation where no forms are available, Captains should use any available paper to make their reports.

Upon examination of a Section, Assistant Captains fill in their names, title, block and section numbers (1A for example) and totals on the forms. They then give the forms to their Block Captain who computes the grand totals and enters them on a separate form that bears his name, title and block number. The Block Captain then gives all forms to his (insert name of congregational leader such as Pastor, Bishop, etc.) or "Acting Bishop" at the Congregational Communication Center (Congregational Bldg. or Alternate Location A, B or C previously selected). Some representatives of the Emergency Management Team should be there also.

### **EARLY WARNING BY "TELEPHONE TREE" (Fire, Flood, Chemical Attack, etc.)**

The "Early Warning" plan should be implemented as soon as the (insert regional position) or his substitute learns of an impending regional threatening disaster.

(Insert regional position here such as The President telephones his Councilors), informs them of the danger and assigns each one a (name of congregational leader such as pastor, etc.) of a threatened congregation to warn. He then notifies his Regional Communication Specialist.

(Insert name of congregational leader) check their Congregational Emergency Directories and assign their councilors and Emergency Response Coordinators the specific Block Captains they are to call. The Captains call their Assistant Captains who in turn warn the families in their sections.

If this plan is practiced and implemented expeditiously, every family in the region can be called in much less than an hour.

Early Warning (wildfires): In the case of nighttime wildfires, only a part of a region may be threatened and time is critical. When notified of the fire and its location, the President or his substitute calls his Councilors, if needed, the affected (insert congregational position such as Pastor, Bishops, etc.) and his Regional Communications Specialist. Upon receiving the warning, (Insert name of Congregational leader such as Pastor, Bishops, etc.) determine which Sections are in the most immediate danger and who he should have do the calling. He then makes his calls and assignments

Bishop's Councilors, Emergency Response Coordinator and Captains, who have time to warn others, should be asked to call families in the most endangered sections. These Captains should then warn their own sections soon

after. It is imperative that calls to specific Sections, families or Captains be assigned to specific callers. That way there will be no confusion as to who was called and who was not. Each affected family should be called only once. Non-member families in fire- threatened Sections should also be called.

An example of a successful warning occurred during San Diego's "Cedar" fire when it swept into Wildcat Canyon early one morning. The lives of nineteen or more families were saved because of a single phone call that got through to a Captain. He barely had time to notify others and evacuate his family. Unfortunately he lost his home in the fire.

If this plan is thought through and practiced by leaders, many lives may be saved.

## **PLAN SUMMARY**

The Purpose of the Regional Emergency Response Plan is to:

- Save lives by giving members early warning of impending disaster.
  - Give or seek emergency, life-saving assistance to earthquake and other victims.
  - Report casualties and disaster conditions to church and other authorities.
1. Early warning by a bishop is given to ward members in a stricken area by means of a "Telephone Tree". The bishop and his assistants notify Captains by telephone. They in turn call their assistants or subs and proceed to notify the ten or so families in each of their sections. Within less than an hour, an entire ward (and stake) can be notified, if they are using the Emergency Congregational Directory.
  2. In the case of a midnight wildfire, Bishops (upon receiving warning) will see that those in immediate danger will receive the first phone calls from those notified to call.
  3. Where a disaster is limited in scope, a bishop may choose to send "captains", or others with Emergency Congregational Directories, to stricken locations to report on the well being of families in that area. While there, if conditions call for it, they should try to secure whatever emergency help they can from neighbors. Any available members in the neighborhood should assist the "captains."

4. Following a major earthquake, timely outside assistance for the injured is highly unlikely. Church members in stricken neighborhoods should take the initiative and seek emergency help from neighbors for those in distress. Appointed captains may be the first to respond. If they are unable to, other conscientious members should step in and serve in their places. The job is simple: Check on families in their "section" (refer to Emergency Directory). Seek help from neighbors if needed. See that reports on these families get to their bishop.

In each case, acting on information available, Bishops, welfare committees and other congregational members in leadership positions provide whatever aid is appropriate. Reports are made to the (insert name of regional position

**Net Preamble:**

QST, QST, QST Good evening, this is (say call sign)\_\_\_\_\_, my name is \_\_\_\_\_ and my location is in \_\_\_\_\_.

I am acting Net Control for the (insert name of organization such as East County ERC or Emergency Radio Communications Net).

**Net Information:**

We meet the (insert when you meet such as the first and third Sunday of every month at 8:15pm local time) on the primary frequency of (insert frequency such as 147.480 simplex or the alternate of 144.480) for the sole purpose of maintaining radio communications as part of our emergency Preparedness Program.

**Type of Net:**

- This is a directed net, so please do not transmit unless called upon.
- I will take late or missed members and visitors at the end of roll call.
- Is there any Emergency or priority traffic? Call signs please.

**Announcements:**

Are there any announcements for the Net?

**Roll Call:**

Roll call follows:

\_\_\_\_\_ (Area) Only give the area the first time for each area, after that just the Call Sign and Name \_\_\_\_\_ (Call Sign), \_\_\_\_\_ (Name)

**After Roll Call:**

That is roll call as I have it. Are there any late check-ins for the net?

- Are there any visitors to the net?
- Is there any further business for the net?

Hearing none I will close the net at \_\_\_\_\_ local time, this is \_\_\_\_\_ (Call Sign)

**COMMUNICATIONS PLAN WORKSHEET: Contact Information**

ORGANIZATION	TITLE	NAME	ADDRESS	CITY	ZIP	HOME PHONE	WORK PHONE	CELL PHONE	E-MAIL	THOMAS GUIDE	LATITUDE	LONGITUDE
									-			
	Local Leader								-			
	1st Counselor								-			
	2nd Counselor								-			
	Local Leader								-			
	1st Counselor								-			
	2nd Counselor								-			
	Public Affairs Director								-			

**This is a section from the content in the Excel Spreadsheet "Contact Information" for your house of worship. It is placed here so you can visualize the format. To use the form, retrieve it from the original Excel file. The file is labeled "Communications Plan Worksheet for IDC." This is tab 1.**

**COMMUNICATIONS PLAN WORKSHEET: Other Contact Information**

ORGANIZATION	TITLE	NAME	ADDRESS	CITY	ZIP	HOME PHONE	WORK PHONE	OFFICE PHONE	CELL PHONE	E-MAIL	THOMAS GUIDE
Local House of Worship	Leader										
										-	
	1st Assistant									-	
	2nd Assistant									-	
	Director of Emergency Response									-	
	Emergency Response Coordinator									-	

**This is a section from the content in the Excel Spreadsheet "Other Contact Information" for your house of worship. It is placed here so you can visualize the format. To use the form, retrieve it from the original Excel file. The file is labeled "Communications Plan Worksheet for IDC." This is tab 2.**

**COMMUNICATIONS PLAN WORKSHEET: Radio Operators**

Locale	CALL	NAME	ADDRESS	CITY	ZIP	HOME PHONE	WORK PHONE	CELL PHONE	E-MAIL	THOMAS GUIDE	LATITUDE	LONGITUDE
									-			
									-			
									-			
									-			
									-			
									-			

<p><b>NOTE 1:</b> First Responder</p> <p><b>NOTE 2:</b> CERT Team</p>	<p><b>NOTE 3:</b> Out of town (Dept. of Homeland Security)</p> <p><b>NOTE:</b> All phone numbers 619 except where noted.</p>	<p><b>Additional CERT Team members:</b></p> <p>Debbie</p> <p>Weldy</p>
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**This is a sample from the content in the Excel Spreadsheet "Ham Radio Operators " for your house of worship. It is placed here so you can visualize the format. To use the form, retrieve it from the original Excel file. The file is labeled "Communications Plan Worksheet for IDC." This is tab 3.**

**COMMUNICATIONS PLAN: Communications/Radio Log**

Locale	CALL	NAME	ADDRESS	CITY	ZIP	HOME PHONE	WORK PHONE	CELL PHONE	E-MAIL	THOMAS GUIDE	LATITUDE	LONGITUDE
									-			
									-			
									-			
									-			
									-			
									-			
									-			
									-			
									-			

<p><b>NOTE 1:</b> First Responder</p> <p><b>NOTE 2:</b> CERT Team</p>	<p><b>NOTE 3:</b> Out of town (Dept. of Homeland Security)</p> <p><b>NOTE:</b> All phone numbers 619 except where noted.</p>	<p><b>Additional CERT Team members:</b></p> <p>Debbie Weldy</p>
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**This is a sample from the content in the Excel Spreadsheet "Ham Radio Operators " for your house of worship. It is placed here so you can visualize the format. To use the form, retrieve it from the original Excel file. The file is labeled "Communications Plan Worksheet for IDC." This is tab 5.**

## COMMUNICATIONS WORKSHEET

Send to / Received from: \_\_\_\_\_

Location: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_ Local

<b>REPORTING</b>	<p>a.) Name of reporting officer _____</p> <p>b.) Title of reporting officer _____</p> <p>c.) Unit of the reporting officer _____</p> <p>d.) How the presiding officer can be reached . . . _____ _____</p>
------------------	---

<b>INFORMATION</b>	<p>e.) Description of the emergency . . . . . _____ _____</p> <p>f.) Location of the emergency . . . . . _____ _____</p> <p>g.) Magnitude of the emergency . . . . . _____ _____</p>
--------------------	--

<b>STATUS OF MEMBERS</b>	<p>h.) Numbers of members injured . . . . . _____ _____</p> <p>i.) Numbers of members missing . . . . . _____ _____</p>
--------------------------	---

PROPERTY DAMAGE	j.) Numbers of members dead ( <b>See note below</b> ) _____ _____
	k.) Status of the full time representatives . . . . . _____ _____

PROPERTY DAMAGE	l.) Location of damage done to Church property _____ _____
	m.) Extent of damage done to Church property _____ _____
	n.) Location of damage done to member property _____ _____
	o.) Extent of damage done to member property _____ _____

ACTION	p.) Actions taken to help those in distress . . . . . _____ _____
	q.) Needed assistance that is unavailable locally _____ _____

Comments: \_\_\_\_\_

**To use this form, retrieve it from the original Excel file, labeled "Communications Plan Worksheet for IDC, tab 4.**

**EMERGENCY CONGREGATIONAL DIRECTORY**

**Emergency House of Worship Directory**

**Block Captain:** \_\_\_\_\_

**Captain's Phone:** \_\_\_\_\_

**Assistant Captain:** \_\_\_\_\_

**Assistant's Phone:** \_\_\_\_\_

**Section:** Block 7B--Lawson Valley

<b>Name</b>	<b>Street Address</b>	<b>Home Phone</b>	<b>Cell Phone</b>	<b>Work Phone</b>

\*Denotes Block Captain    \*\* Denotes Assistant Block Cpt

**This is a section from the Excel Spreadsheet for your house of worship. It is placed here so you can visualize the format. To use the form, retrieve it from the original Excel file labeled "Emergency Congregation Template for IDC."**

**INDIVIDUALS WHO CAN/ARE WILLING TO RESPOND TO FACILITY TO CHECK ON THE CAMPUS:**

NAME	EMAIL	HOME PHONE	CELL PHONE	WORK PHONE

**INDIVIDUALS WHO WILL RECEIVE NOTICE THROUGH REVERSE 911:**

NAME	EMAIL	HOME PHONE	CELL PHONE	WORK PHONE

**HAM RADIO OPERATORS IN YOUR FACILITY:**

NAME	PHONE	Ham Radio Code

**REMOTE PHONE #:**

Phone number: \_\_\_\_\_

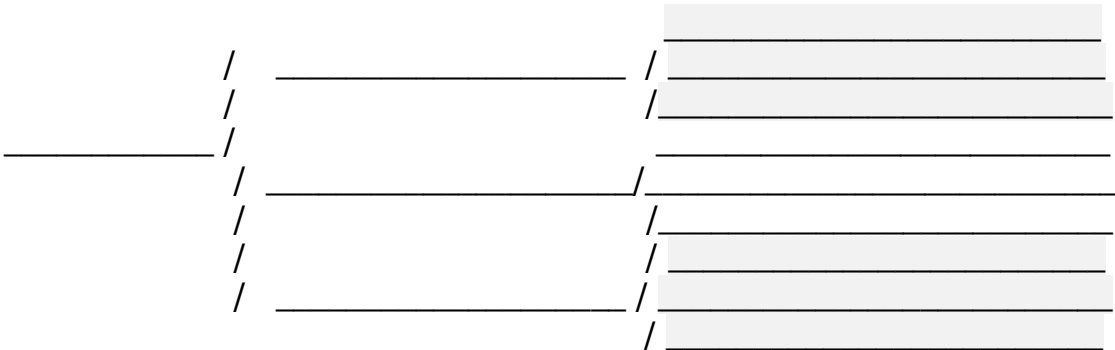
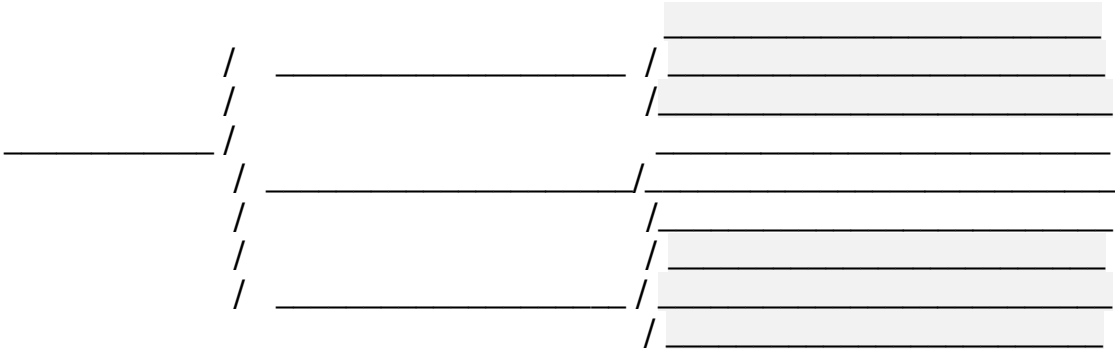
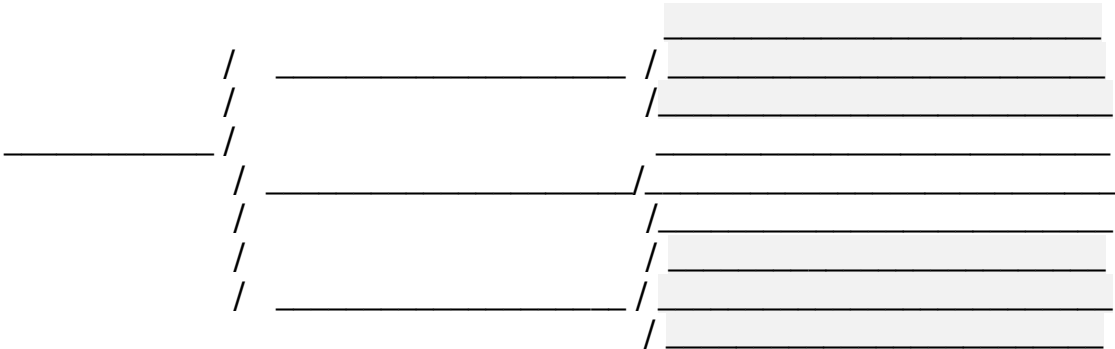
Password to enter a message: \_\_\_\_\_

**DISASTER RESPONSE TEAM MEMBERS:**

	<b>POSITION</b>	<b>NAME</b>	<b>Primary EMAIL</b>	<b>Cell PHONE</b>	<b>Home PHONE</b>	<b>Work Phone</b>
<b>1</b>	Coordinator					
<b>2</b>	Co- coordinator					
<b>3</b>	Media Liaison					
<b>4</b>						
<b>5</b>						
<b>6</b>						
<b>7</b>						
<b>8</b>						
<b>9</b>						
<b>10</b>						



**COMMUNICATIONS TREE**





**OUT OF TOWN CONTACTS WHO HAVE PHONE TREES:**

NAME	EMAIL	HOME PHONE	CELL PHONE	WORK PHONE

**PHONE NUMBERS IN YOUR FACILITY:**

(Type = hard wired, cell phone, hand held, pay phone)

TYPE	LOCATION	NUMBER

## D. COMMAND POST / OPERATIONS CENTER

LOCATION:	
DESIGNATED PHONES:	
Radios	
LOCATION OF SUPPLIES:	
Bulletin boards	
Maps	
Markers / post its	
Manual	

## E. FACILITY PLANNING

**Individuals who have placed their cell phone # on the reverse 911 system for the church property. <http://www.readysandiego.org>**

Name	Cell Phone #

**Individuals who will check on the facility after a community disaster or incident.**

Name	Email	Home Phone	Cell Phone

**Reporting structure for these individuals: (after their assessment of the facility.)**

[ ] same as the Leadership Notification on page \_\_\_\_

Or:

Name	Email	Home Phone	Cell Phone

## FACILITY CHECK LIST

**Purpose:** This checklist is designed to assist the individual who is checking your campus buildings after a disaster, e.g. an earthquake.

<b>Prior to coming:</b>	Bring hard soled shoes Protective eye wear (goggles) Gloves Crescent wrench (gas lines)	
<b>When you arrive:</b>	Are there any individuals visible?	Focus on rescue.
	If you have a preschool, check that first.	
<b>Look at each building prior to entering:</b>	Is there any obvious structural damage? Examples: sagging or tilting walls, roof lines, broken beams.	If yes, do not enter. Turn off power to the buildings.
<b>Do you smell or hear gas?</b>	If yes, turn it off with the wrench.  Open windows/doors to exhaust the gas. Do not enter the building until the gas smell has dissipated	
<b>If no obvious structural damage:</b>	Proceed to check each building. Check exterior for broken windows.	
	Check interior:	
	Broken windows	
	Broken electrical units	Unplug these.
	Equipment that has been damaged	Turn these off or unplug.
	Water leaks	
	Broken or damaged pipes	
<b>Wild Fire Approaching:</b>	Move any outside gas grills to an open area.	
	Check that all doors and windows are closed and locked.	

## F. CAPITAL & FINANCIAL TOOLS

### FINANCIAL PROCESSES

#### BANK ACCOUNTS

BANK NAME	ACT NUMBER	PHONE #	SIGNATORS

#### CREDIT CARDS

COMPANY NAME	CARD #	PHONE #	CARD LIMITS	AUTHORIZED SIGNATORS

**INSURANCE  
AGENT**

<b>Name</b>	
<b>Address</b>	
<b>City, State, zip</b>	
<b>Phone #</b>	
<b>Cell phone #</b>	
<b>Fax #</b>	
<b>Website</b>	

**POLICIES**

<b>TYPE of Insurance</b>	<b>Policy #</b>	<b>Coverage</b>	<b>Deductibles</b>	<b>Policy Limits</b>

Dates coverage reviewed / due to be reviewed:

\_\_\_\_\_





## COMPUTER INVENTORY

### HARDWARE

Hardware *	Model	Serial #	Date purchased	Company purchased from	Cost	Location

\*Specify: CPU, monitor, printer, keyboard, mouse, etc.

### SOFTWARE

Name of Software	Version	Serial / Key #	Disc or Download	Date Purchased	Vendor	Cost	Location

**SECURITY SYSTEMS**

**Data Security and Backup:**

Lead staff or contractor	
Emergency contact telephone	
Alternate contact telephone	
Email	
Back up records stored on site here	
Back up records stored off site here	
Virtual records stored here	
Virtual records back up contact	

**Asset Security:**

Lead staff or contractor	
Emergency contact telephone	
Alternate contact telephone	
Email	

**Functions that will revert for paper processes during the emergency**

FUNCTION	LOCATION OF BACK UP FORMS





## G. CONTINUITY OF OPERATIONS PLAN (COOP)

**REVIEW YOUR TEAM:**  same team       complete if a new team

NAME	ORGANIZATION	EMAIL	Home Phone	Cell Phone

**REVIEW YOUR MEETING SCHEDULE:**

TOPIC	DATE	TIME	ROOM

**PLAN OF SUCCESSION:**

SEQUENCE	NAME	FUNCTIONS RESPONSIBLE FOR
1		
2		
3		
4		
5		
6		



**NEEDS / RESOURCES FOR THESE PRIORITIZED FUNCTIONS:**

NEED	RESOURCES

**STAFF NEEDS FOR THESE PRIORITIZED FUNCTIONS:**

STAFF	POTENTIAL BACK UP SYSTEM

**MISSION CRITICAL FILES, RECORDS : (FEMA)**

VITAL RECORD/FILE/DATABASE	FORMAT: (hard, electronic)	Pre-positioned At Alternate Facility	Hand Carried to Alternate Facility	Backed up at third facility

**OFFSITE LOCATION FOR BACKUP OF VITAL RECORDS, DOCUMENTS,  
PHOTOGRAPHS OF YOUR VALUABLES AND CAPITAL ASSETS:**

TYPE OF DOCUMENTS	LOCATION	WHO HAS ACCESS?

**ALTERNATE LOCATIONS:**

**Alternate Location #1:**

Name:

Address:

Phone:

Contact:

Name:

Phone:

Cell phone:

Email:

Pre-arranged agreement?

Number and type of personnel needed:

Site Assessment:

Supplies in place:

Supplies to be supplied:

Time to Set up:

**Alternate location #2:**

Name:

Address:

Phone:

Contact:

Name:

Phone:

Cell phone:

Email:

Pre-arranged agreement?

Number and type of personnel needed:

Site Assessment:

Supplies in place:

Supplies to be supplied:

Time to Set up:

**Neighbors:**

ORGANIZATION	NAME	CONTACT INFORMATION

## **H. RESPONSE TO YOUR COMMUNITY**

(See Guidebook pages 29-30, Appendix pages 16-20)

### **WHAT ARE YOUR RESOURCES AND STRENGTHS?**

#### **CONSIDER:**

What are your roles and functions for your members in time of a disaster?  
What essential services must be maintained?  
What other services can you and do you want to provide for your members and the community?

#### **ORGANIZATIONAL DISASTER MISSION STATEMENT:**

Define a clear and meaningful statement to define your role after the disaster.

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**V. FOLLOW UP and TRAINING**

<b><u>ITEM</u></b>	<b><u>DATE DUE</u></b>
Review and update full plan annually by team / committee	_____
Review Emergency Responses with staff 2x	_____
Review plan with new leadership members annually.	_____
Review plans with members 2 x/ year.	_____
Schedule personal preparedness day annually. (Sept)	_____
Review emergency response component and Evacuation components with ushers/ group leaders.	_____
Review plans with childcare providers as required with drills.	_____
Update phone rosters monthly.	_____
Update phone lists: Emergency Plan, pg -----	_____
Review status of vital files, records, data bases Date due:	_____