

Preparedness Survey

Residential

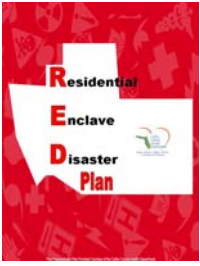
Enclosure

Disaster
Plan



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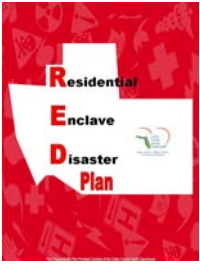


Residential Enclave Disaster Plan Preparedness Survey

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PLEASE COMPLETE A SEPARATE SURVEY FOR EACH ENCLAVE
Survey Telephone Helpline: 252-2631



Residential Enclave Disaster Plan

Preparedness Survey Introduction

Recent natural disasters prompted an increase in the development of emergency preparedness planning across many sectors, including public health. Successful preparation for natural disasters and emergencies requires the participation of a variety of organizations including the Collier County Health Department (CCHD), as well as schools, businesses, hospitals, and faith based organizations. Residential enclaves are distinct groups within the larger Collier County community and can be condo associations, mobile home parks, or the more traditional neighborhoods. A substantial percentage of our county's population lives in the many residential enclaves, providing an ideal opportunity for community outreach. The CCHD would like to facilitate a collaborative effort between public health and Collier County's residential communities by providing guidance and assistance in preparedness planning efforts.

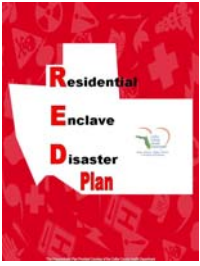
To engage in preparedness planning, CCHD has created the Residential Enclave Disaster (RED) Plan project. This project is tasked to help create a comprehensive emergency operations plan template providing tools and strategies for residential enclaves, working with community partners, to attain and maintain enclave preparedness. In its simplest interpretation, the RED plan is based on the concept of neighbors helping neighbors.

The many natural disasters such as Hurricane Charlie and Wilma, and the recent H1N1 Flu pandemic have demonstrated the need for seamless partnerships in preparedness planning within each county. In Collier County, our many residential enclaves provide a safe and consistent place for residents to remain self-sufficient, before, during, and following a natural or man-made disaster. These enclaves and the RED Plan are vital components in Collier County's community safety net.

Communities that choose to go RED are offered many beneficial preparedness tools including assistance with Continuity of Operations Plans, organization of their neighborhood healthcare and volunteer resources, as well as various preparedness training opportunities. A pillar of the RED Plan is a common information sharing system for enclaves in Collier County. Collierprepares.org, our preparedness website, provides accurate and timely information from the CCHD to the community. Communication is paramount to preparedness even when there are no imminent threats. Frequent communication between the RED plan communities and the CCHD can be as simple as public health educational messages, or as important as rapid dissemination of vital, accurate, public health safety information in the midst of a disaster.

During an emergency event, the responsibility for the overall coordination of Collier County's medical and health response, as well as the coordination of health resources from outside the local area, becomes the responsibility of the Department of Health Emergency Support Function (ESF) 8. In an effort to meet the requirements of ESF-8, the RED plan communities play a vital role in our area's overall preparedness. The exchange of information, resources, and emergency preparedness plans, will benefit Collier County's population in the event of a disaster. Collaboration between the CCHD and RED Plan communities is essential in order to provide public health services in the occurrence of a natural disaster or other emergency. During an emergency, RED plan communities will have the needed information, training, infrastructure and plan to meet the immediate needs of the residents, thereby increasing the community's ability to successfully survive a catastrophic disaster.

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How to Complete the Survey

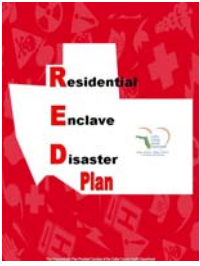
We must acknowledge that, in an attempt to develop a comprehensive survey, this tool is lengthy, but will cover the critical areas and information points needed to create a complete implementation plan to enhance the preparedness to manage a natural emergency or outbreaks of infectious disease. It is our goal to identify both strengths and weaknesses within the emergency response system and among Collier County's residential communities.

We have made every effort to facilitate the efficient completion of the survey:

- The survey is designed to be broken down by section, or area of focus, and allow for individual departments or persons to complete the sections.
- In the test box form fields (), simply type the requested answer.
- In the check box form fields (), simply click on the box that indicates your answer.
- The survey can be completed and submitted electronically. Simply e-mail back to Jefferson_Welle@doh.state.fl.us
- A telephone help line (732-2631) is available to answer inquiries about the survey questions, or about completing the survey.
- The questions contained in this survey are intended to assist the RED Plan project in assessing the state of preparedness of Collier County's enclaves, and are not intended to measure or rate <Name of Enclave>s.

We urge you to complete this survey promptly to ensure the needs and capabilities of <Name of Enclave> and the residents you serve are represented in the RED implementation plan.

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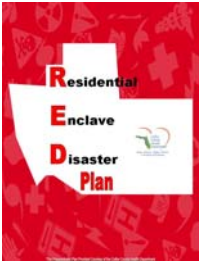
Preparedness Survey

Instructions

Survey Coordinator's Checklist

1. Identify a survey coordinator to organize <Name of Enclave>'s completion of the survey.
2. The survey coordinator's role is to:
 - Communicate the reasons and rationale for the survey within <Name of Enclave> and in the appropriate departments. This will help expedite survey completion.
 - Oversee the completion of the survey.
 - Read and refer to the glossary for definitions of terms as this may assist you in answering the questions.
 - Ensure that timelines and deadlines for section completion are met, and fax or call the survey helpline for hardcopy pick-up.
 - Coordinate survey information and act as a resource for the persons completing each section.
3. Upon receipt of the survey, determine the appropriate departments and/or persons to complete each section of the survey.
 - Establish internal deadlines for completion of the survey by departments and persons, and regular dates to follow up on the progress of the completion.
 - Photocopy of the survey to the person identified to complete the section.
 - Keep a list of assigned departments and persons receiving the section of the survey to be completed, to facilitate follow up and ensure deadlines are met.
4. Conducting the survey:
 - Read the entire survey document including the introduction, survey questions and glossary.
 - ALL questions should be answered with "yes", "no", "don't know" or "not applicable" by checking the appropriate box. Please make every attempt to find the information requested even though it requires a bit of research, investigation and follow-up. This will help make the survey information more pertinent and valid, assisting with the development of the implementation plan.
 - Follow up regularly with the departments/persons completing the survey to ensure timely and accurate completion.
 - Collect the responses for all the sections of the survey
 - a. Verify answers are present for all questions
 - b. Check for overall consistency of the answers.
 - c. Resolve inconsistencies prior to submitting the results
 - d. Call the help line at 732-2631 if you need assistance with answering the survey questions.
 - e. You can also contact the help line by email at Jefferson.Welle@doh.state.fl.us

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ENCLAVE INFORMATION

Parent Enclave or Corporate Name:

Enclave Site:

Address: Zip:

Telephone Number: Fax:

Enclave e-mail address: Enclave website:

Name of Person responsible for completing this survey:

Title of Person responsible for completing this survey:

Telephone number of person responsible for completing this survey:

E-mail address of person responsible for completing this survey:

Enclave Type (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Residential Enclave | <input type="checkbox"/> Tribal or Urban Indian Enclave |
| <input type="checkbox"/> Commercial Enclave | <input type="checkbox"/> Specialty Enclave
Type: |

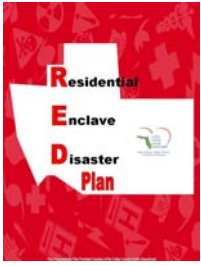
Enclave Category:

- Less than 100 units
- 100-500 units
- 500-1000 units
- More than 1000 units. Number:

Average Resident Volume for this Enclave:

- | | |
|--|--|
| <input type="checkbox"/> 100 – 2,999 | <input type="checkbox"/> 10,000 – 14,999 |
| <input type="checkbox"/> 3,000 – 4,999 | <input type="checkbox"/> 15,000 – 24,999 |
| <input type="checkbox"/> 5,000 – 9,999 | <input type="checkbox"/> 25,000+ |

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Residential Enclave Disaster Plan

Preparedness Survey

GENERAL EMERGENCY PREPAREDNESS

Please select the best answer as “yes,” “no,” “don’t know” or “not applicable” to the following questions pertaining to <Name of Enclave>’s disaster plan. (The disaster plan describes how the organization will establish and maintain a program to ensure effective response to disasters or emergencies affecting the residential environment. The plan should address four phases of emergency management activities: mitigation, preparedness, response, and recovery.)

	<u>Yes</u>	<u>No</u>	<u>DK</u>	<u>NA</u>
1. Has <Name of Enclave> identified how it will help the neighborhood and greater community in the event of an emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does <Name of Enclave> have an Emergency Preparedness Planning Team?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does <Name of Enclave> have a disaster plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the plan been reviewed and updated within the last 12 months?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Has the plan been distributed to affected parties?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Does the plan have an organizational structure and organized leadership (e.g., incident command system) during a disaster or emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does the plan make provisions for resident overflow and tracking?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the plan have contingencies for a mass influx of residents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Does the plan make provisions for vulnerable populations’ health needs (e.g., elderly, handicapped, children, mental health, substance abuse, homeless, HIV/chronic disease, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does the plan have a section for addressing security issues, including the provision of personnel to secure <Name of Enclave>?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Are specific persons or personnel assigned to a disaster response team?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Does the plan contain a section on bioterrorism preparedness?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Does <Name of Enclave>’s disaster plan have a provision to extend regular service hours in an emergency or disaster situation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, could you extend hours if you had additional finances and resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Does <Name of Enclave> have provisions for housing and feeding key personnel for 72 hours in the event of a significant disaster or terrorism event?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, could you make these provisions if you had additional finances and resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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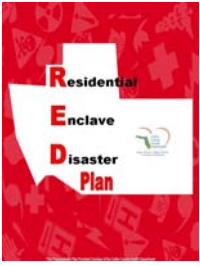


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GENERAL EMERGENCY PREPAREDNESS

	<u>Yes</u>	<u>No</u>	<u>DK</u>	<u>NA</u>
15. Does <Name of Enclave>'s disaster plan address increasing operational capacity (staff, space) by at least:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. 10%?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. 15%?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. 20%?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. If no, could you increase capacity if you had additional finances and resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Has <Name of Enclave>'s insurance been reviewed with a disaster in mind?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Does your plan have a provision for relocating services in the event the physical facility is inoperable? If yes, where and how?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Is <Name of Enclave> incorporated into any other disaster plan? If yes, please list:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Has <Name of Enclave> worked with the county to coordinate planning and response activities? If yes, please list:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Has <Name of Enclave> completed a safety checklist, identified hazards (i.e. Hazard Vulnerability Assessment) and developed an improvement plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Are specific personnel assigned to a bioterrorism response team?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Does <Name of Enclave> conduct or participate in an annual disaster drill?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Has <Name of Enclave> conducted or participated in a drill using a scenario with a biological or chemical agent exposure within the last two years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Is <Name of Enclave> included in your county's mass prophylaxis plan, providing resources such as personnel or facility space?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Has <Name of Enclave> identified which critical services and operations will be needed to continue during an emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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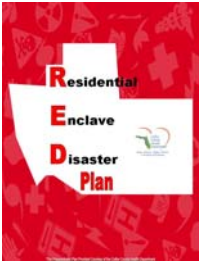
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POLICIES AND PROCEDURES

Please select the best answer as “yes,” “no,” “don’t know” or “not applicable” to the following questions with respect to policies and procedures that have been reviewed, revised, or implemented within the **last 12 months**.

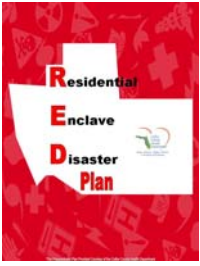
		<u>Yes</u>	<u>No</u>	<u>DK</u>	<u>NA</u>
26.	Are the following policies in place:				
	a. Security/lock-down policy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Personnel recall policy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Evacuation policy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Resident care during a disaster?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Reports of suspicious symptoms to the county health department?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27.	Are procedures in place in the event of a disaster for the following:				
	a. Handling residents who are exposed to biological or chemical events?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Isolating segments of the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Triage of residents to appropriate hospitals and other treatment centers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Addressing resident and situation confidentiality?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Acquisition and handling of suspect laboratory specimens?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Evidence collection and consultation with local law enforcement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	g. Personnel recall?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	h. Testing for exposure to biological or chemical agents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	i. Fire Safety?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	j. Emergency equipment repair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	k. Human waste disposal during the course of the emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	l. Response procedures for: managing finances, telephone logs, event records, injuries & follow-up actions, staff & volunteer accounting & family notification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28.	Are the following posted in visible locations:				
	a. First Aid signs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Facility evacuation Plan for each building?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. <Name of Enclave> Disaster Plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29.	Are mutual aid agreements established with other organizations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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FACILITIES, EQUIPMENT AND SUPPLIES

Please select the best answer as “yes,” “no,” “don’t know” or “not applicable” to the following questions with respect to the facilities, equipment and supplies.

		<u>Yes</u>	<u>No</u>	<u>DK</u>	<u>NA</u>
30.	Does <Name of Enclave> have provisions (location, equipment, supplies) for resident or staff decontamination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31.	Does <Name of Enclave> have any personal protective equipment, such as protective suits or kits, available to staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32.	Has <Name of Enclave> completed an emergency supply checklist and developed a supply needs plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33.	Does <Name of Enclave> have provisions for obtaining emergency back-up supplies from vendors, hospitals, county or any other alternative source?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If yes, from whom?				
34.	Does <Name of Enclave> have an emergency cache of supplies in case of a significant disaster or terrorism event?				
	a. Medical?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Pharmaceutical?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Water-one gallon for each staff and provisions for residents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Food-two days supply for each staff and provisions for residents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Flashlight and batteries, and extra batteries?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Radio with batteries, and extra batteries?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	g. Special tools, including 10 inch crescent wrench, are identified and Obtained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	j. Supplies for staff with special needs are identified and obtained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	i. Supplies (plastic bags, etc) for human waste?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35.	Has <Name of Enclave> established an equipment inventory?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36.	Does <Name of Enclave> have a generator for back up power?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37.	Does <Name of Enclave> have emergency lighting?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38.	Does <Name of Enclave> have fire safety equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39.	Has <Name of Enclave> secured heavy and expensive objects/furniture from falling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40.	Have the building structures and grounds been assessed; and are they secure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41.	Does <Name of Enclave>'s disaster plan address a primary site where chemically or biologically contaminated residents may come in an emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42.	How many miles is <Name of Enclave> from the nearest emergency department?				

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TRAINING AND PERSONNEL DEVELOPMENT

Please select the best answer as “yes,” “no,” “don’t know” or “not applicable” to the following questions with respect to training and personnel development.

	<u>Yes</u>	<u>No</u>	<u>DK</u>	<u>NA</u>
43. Do staff members receive training in disaster awareness, preparedness and response?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Does the training include preparedness for chemical or biological terrorism events?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. Has staff been trained on the use of appropriate personal protective equipment for biological and chemical events?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Are annual “refresher” training classes in biological or chemical terrorism conducted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Is disaster training conducted during new employee orientation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. Do you evaluate the effectiveness of your disaster training programs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Have educational opportunities been provided to staff on specific procedures regarding biological and chemical incidents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Has staff been trained to identify and properly/safely remove contaminants?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Do training programs include preparation of staff for emotional and mental impacts of a significant disaster or terrorist attack?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. Are First Aid and CPR training given to staff and volunteers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Are documented fire drills held twice a year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. Are specific disaster drills (i.e., hurricanes) held once a year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. Have you developed any resident education materials regarding emergency preparedness?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, what languages?				
56. Have you provided training and self-assessments regarding emergency preparedness at home for:				
a. Staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Residents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Other members of the community?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. Is there a plan to screen and train volunteers who will assist in the event of a disaster?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Is there a plan to manage, screen and orient “on-the-spot” volunteers who arrive during a disaster?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Do you have staff attend trainings, on a regular basis, by CERT, Red Cross or the Collier County Health Department?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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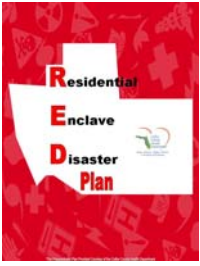
Residential Enclave Disaster Plan Preparedness Survey

COMMUNICATIONS

Please select the best answer as “yes,” “no,” “don’t know” or “not applicable” to the following questions with respect to communications.

	<u>Yes</u>	<u>No</u>	<u>DK</u>	<u>NA</u>
59. Does <Name of Enclave> have a pre-designated way to communicate with staff after-hours in an emergency (e.g., a telephone tree or group paging system)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Does <Name of Enclave> have high-speed internet access (other than dial up)? If yes, at what level:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. T-3 line	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. T-1 line	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. DSL/ISDN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61. Does <Name of Enclave> have secure offsite data backup capability for its information systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Are procedures in place for establishing emergency communications between <Name of Enclave> and Collier County Health Department?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Are procedures in place for establishing emergency communications between <Name of Enclave> and Collier County Emergency Operations Center?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. Are procedures in place for establishing emergency communications between <Name of Enclave> and hospitals and other partners? If yes, by whom:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
65. Is there a communication system in place for the county health department to quickly alert <Name of Enclave> residents to suspicious clusters of symptoms or disease outbreaks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
66. Does <Name of Enclave>'s disaster plan include informing the community and neighborhood about what services <Name of Enclave> will provide in the event of an emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
67. Does <Name of Enclave>'s disaster plan provide for communications with the public and media in bioterrorism events?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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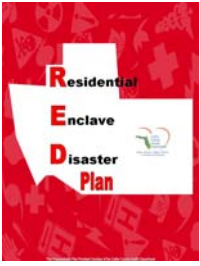
Residential Enclave Disaster Plan Preparedness Survey

COMMUNICATIONS

Please select the best answer as “yes,” “no,” “don’t know” or “not applicable” to the following questions with respect to communications.

		<u>Yes</u>	<u>No</u>	<u>DK</u>	<u>NA</u>
68.	Which of the following emergency communication systems do you have that are fully redundant with, or complimentary to, normal communications:				
	a. Internal two-way radios?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Cell phones?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Voice mail boxes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Satellite phones?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Wireless messaging?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Citizen’s Band Radio?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	g. Amateur radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	h. Health Alert Network (HAN)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	i. Other?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
69.	Have you been contacted by local emergency planners and/or government emergency managers about inclusion of <Name of Enclave> in community planning? If yes, by whom?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
70.	Rank the following needs as 1 through 6 in order of priority, with 1 being the top priority for <Name of Enclave>(s).				
	a. Planning and preparedness tools?				
	b. Communications				
	c. Supplies				
	d. Equipment				
	e. Training				
	f. Technical advice and information				

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Residential Enclave Disaster Plan Preparedness Survey

STAFFING

Please select the best answer as “yes,” “no,” “don’t know” or “not applicable” to the following questions with respect to staffing.

71.	Has a medical, special needs and disability assessment of staff been completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
72.	Has a staff support system (flexible or reduced work hours, counseling) been drafted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
73.	Have any of your staff agreed to volunteer their services in an emergency other than at your site (e.g., through the Disaster Service Worker program, Disaster Assistance Teams, American Red Cross or other program)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If yes, for whom?				

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