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A group of people wearing red vests

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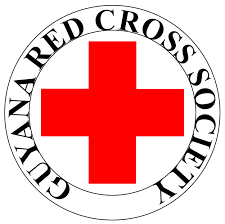
Community Disaster

Response Team (CDRT)

**Training Guide 2025**

## Acknowledgements

The International Federation of the Red Cross and Red Crescent Societies (IFRC) expresses gratitude to the Aruba Red Cross, Barbados Red Cross, Barbados Red Cross, Guyana Red Cross and the Sint Maarten Red Cross for their commitment to collaborating with the Caribbean Disaster Risk Management (CADRIM) Reference Centre. Together, we reviewed and revised the CDRT Training Material, enhancing its relevance and effectiveness in disaster response training. Your dedication exemplifies the spirit of connection within the humanitarian community, and we deeply appreciate your invaluable contributions.





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## Table of Contents

Introduction ………………………………………………………………………………………………………………. 4

Learning Outcomes …………………………………………………………………………………………………… 4

Prerequisites for this course ……………………………………………………………………………………… 4

Information Sharing ………………………………………………………………………………………………….. 5

Online Training Agenda .……………………………………………………………………………………………. 5

In Person Training Agenda..……………………………………………………………………………………….. 6

Training Evaluation ….……………………………………………………………………………………………….. 7

Attendance Policy ……………………………………………………………………………………………………… 7

Certificate Awards..……………………………………………………………………………………………..…….. 8

Participant Check List……..……………………………………………………………………………………….… 10

Tips for Participating in Online Training………………………………………………………………...….. 11

Adult Learning & Leadership……………………………………………………………………………………… 12

CDRT Roles & Structures.…………………………………………………………………………………………… 19

CDRT & Disaster Risk Management.…………………………………………………………………………… 23

Disaster Preparedness..……………………………………………………………………………………………… 35

Using Kobo Collect App……………………………………………………………………………………………… 41

Community Assessments…………………………………………………………………………………………… 41

Health in Emergencies..……………………………………………………………………………………………… 48

Shelter Management..………………………………………………………………………………………………… 56

Communication in Emergencies………………………………………………………………………………… 64

Two Way Radios.………………………………………………………………………………………………………… 69

Incident Management Systems Basics.………………………………………………………………….…… 72

## Introduction

The Community Disaster Response Team (CDRT) Training aims to improve the disaster preparedness skills of Red Cross staff and volunteers. Participants will learn important knowledge and practical skills to help their Red Cross branches respond more efficiently and effectively during emergencies.

The training will also emphasize teamwork, helping participants work well together during a disaster. Additionally, it will teach basic skills that can be shared with communities to use in emergencies, especially when help from responder agencies is delayed.

## Learning Outcomes

*At the end of this course, participants will be able to:*

* Increase the awareness and understanding of important disaster risk reduction terms and concepts.
* Increase knowledge and capacity to identify disaster risks within communities.
* Enhance facilitation skills and capability to lead engagement sessions with community volunteers.
* Increase understanding of CDRT teaching materials and the capacity to teach them.
* Provide community volunteers with the knowledge needed to develop and maintain a community response team.
* Provide community volunteers with the skills needed to work as a team to support response agencies before, during and after an emergency.

## Prerequisites for this course

Before attending the CDRT Training you must complete the below online courses and submit your certificates via email to [vanita.redoy@ifrc.org](mailto:vanita.redoy@ifrc.org). If you have already completed these courses there is no need to redo them, simply email your certificates.

The courses are as follows:

1. [**World of Red Cross and Red Crescent**](https://ifrc.csod.com/ui/lms-learning-details/app/course/b6931822-8670-4a23-91db-455e42cc8faf)
2. [**Stay Safe: Level 1 – Fundamentals**](https://ifrc.csod.com/ui/lms-learning-details/app/curriculum/5156b02a-ed87-45e6-b892-08dfb7c8c811)
3. [**Stay Safe: Level 2 – Personal and Volunteer Security in Emergencies**](https://ifrc.csod.com/ui/lms-learning-details/app/curriculum/26eb30ac-fadb-4fea-afac-143a6fc04d98)
4. [**Introduction to Child Protection**](https://ifrc.csod.com/ui/lms-learning-details/app/course/9844e314-90ac-4fed-88cf-d35c7ada2281)
5. **Code of Conduct** *(visit the training website to download:* [*www.bescastraining.org*](http://www.bescastraining.org)*).*

## Information sharing

A training website ([*www.bescastraining.org*](http://www.bescastraining.org)) has been created for participants to register and access all course material. Any additional documents shared by the facilitators will be uploaded to the site.

Other avenues to share information during the training include:

* **WhatsApp groups:** This platform will be used to share training updates, links, pictures, and examples from National Societies’ work, to increase collaboration between participants.

## Online Training Agenda

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates** | **Start Time** | **End Time** | **Modules** |
| Thursday, June 12, 2025 | 6:00pm | 6:30pm | Introduction to the CDRT Training |
| **6:30pm** | **6:45pm** | **Break** |
| 6:45pm | 8:00pm | Adult Learning and Leadership (facilitation & activities) |
| 8:00pm | 8:15pm | Closing |
|  |  |  |  |
| Tuesday, June 17, 2025 | 5:30pm | 7:00pm | CDRT Roles and Structures |
| **7:00pm** | **7:15pm** | **Break** |
| 7:15 PM | 8:30 PM | CDRT & Disaster Risk Management |
| 8:30pm | 8:45pm | Closing |
|  |  |  |  |
| Thursday, June 19, 2025 | 5:30pm | 6:45pm | Disaster Preparedness |
| **6:45pm** | **7:00pm** | **Break** |
| 7:00pm | 8:00pm | Using Kobo Collect App |
| 8:15pm | 8:30pm | Closing |
|  |  |  |  |
| Tuesday, June 24, 2025 | 5:30pm | 6:30pm | Community Assessments |
| **6:30pm** | **6:45pm** | **Break** |
| 6:45pm | 7:45pm | Community Assessments Continued |
| 7:45pm | 8:00pm | Closing |

## In Person Training Agenda

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates** | **Start Time** | **End Time** | **Modules** |
| **Friday, June 27, 2025** | 8:45am | 9:00am | Registration |
| 9:00am | 9:20am | Welcome Remarks |
| 9:30am | 10:30am | Health in Emergencies |
| **10:30am** | **10:45am** | **Break** |
| 10:45am | 11:45am | Health in Emergencies Continued |
| **12:00pm** | **1:00pm** | **Lunch** |
| 1:00pm | 2:00pm | Shelter Management |
| **2:00pm** | **2:15pm** | **Break** |
| 2:15pm | 4:00pm | Shelter Management Continued |
| 4:00pm | 4:15pm | Closing |
|  |  |  |  |
| **Saturday, June 28, 2025** | 9:00am | 9:30am | Recap Session Lead by participants |
| 9:30am | 10:30am | Communication in Emergencies |
| **10:30am** | **10:45am** | **Break** |
| 10:45am | 11:45am | Communication in Emergencies Continued |
| **12:00pm** | **1:00pm** | **Lunch** |
| 1:00pm | 1:45pm | Two Way Radios |
| 1:45pm | 2:45pm | Two Way Radios Continued |
| **2:45pm** | **3:00pm** | **Break** |
| 3:00pm | 3:45pm | Incident Management Systems Basics |
| 3:45pm | 4:45pm | Incident Management Systems Basics Continued |
| 4:45pm | 5:00pm | Closing |
|  |  |  |  |
| **Sunday, June 29, 2025** | 9:00am | 9:30am | Recap Session Lead by participants |
| 9:30am | 11:30am | Preparation for Field Simulation by Facilitators and Coordinators | Groups 1 & 2 Preparation |
| **11:30am** | **12:00pm** | **Lunch** |
| 12:30pm | 4:00pm | Field Simulation (Final Assessment) |
| **4:00pm** | **4:15pm** | **Break** |
| 4:15pm | 4:30pm | De-brief |

## Training Evaluation

Participants will be assessed using the following methods:

|  |  |  |
| --- | --- | --- |
| **Component** | **Percentage Weight** |  |
| **Post Test** | 30% | An individual quiz designed to evaluate how much you have learned throughout the training. |
| **Mentorship Evaluation** | 20% | Each group will be assigned a mentor who will observe your performance throughout the training. Individual scores will be given based on the following skills: *leadership, teamwork, application of knowledge, communication, problem-solving, and adaptability.* |
| **Simulation: Skills Assessment** | 20% | Group performance will be assessed during the final simulation, focusing on demonstrated skills such as *leadership, teamwork, application of knowledge, communication, problem-solving, and adaptability.* |
| **Simulation: Actions Assessment** | 30% | Groups will be evaluated on their ability to complete specific predetermined actions during the final simulation. These actions will not be disclosed to participants in advance. Observers and facilitators will monitor performance to determine whether the required actions are carried out. |

## Attendance Policy

To successfully complete this training and receive a certificate of excellence from the IFRC, participants are required to compile with the following guidelines:

* Complete the Pre and Post Quizzes
* Be present for all the sessions (online and in person) from start to end.
* Participate in all group/ individual activities and class discussions.
* Participate in the Final Day Simulation.
* Complete the participant evaluation form at the end of the course.

## Certificate Awards

Participants may earn a certificate based on their performance during the training. The levels of certification outlined below serve as formal recognition of each participant’s achievements and contributions to community disaster response efforts. These certificates also reflect the performance standards set by the training’s scoring system, providing clear expectations for success.

**Certificate of Excellence**

Awarded to participants who have demonstrated outstanding performance, initiative, and mastery of disaster preparedness and response skills throughout the training.

***Why it is Awarded:***

* Participant consistently received high scores (9–10) across all evaluation components.
* Consistently exhibited exemplary leadership, teamwork, application of knowledge, communication, problem solving adaptability and risk assessment skills.
* Excelled in communication, adaptability, problem solving, and risk assessment.
* Played a key role in team success and often supported or guided peers.

***Benefits:***

* Recognizes the participant as a top performer in disaster response readiness.
* Strengthens eligibility for team leader and trainer roles.
* May support applications for advanced training or specialized Red Cross programs.
* Enhances the participant's credibility in both internal and community-facing roles.

**Certificate of Achievement**

Awarded to participants who have demonstrated strong and consistent performance, actively applying the knowledge and skills gained during training.

***Why it is Awarded:***

* Scored between 7 and 8.9 in overall assessment.
* Performed well in practical activities and contributed meaningfully to team efforts.
* Demonstrated a good grasp of key disaster response principles and a readiness to apply them in community settings.
* Showed growth, potential, and reliability during the course.

***Benefits:***

* Highlights the participant’s readiness to support disaster response efforts effectively
* Encourages continued involvement and growth in the Red Cross network.
* Provides a foundation for future professional development and advanced learning opportunities.

**Certificate of Acknowledgement**

Awarded to participants who have actively participated in and completed the training, showing commitment to learning and improving their disaster response skills.

***Why it is Awarded:***

* Scored between 4 and 6.9 in overall assessment.
* Demonstrated basic understanding of training concepts and engaged in all required activities.
* May have needed some support during tasks but showed willingness to learn and contribute.

***Benefits:***

* Acknowledges the participant’s effort and dedication to building community disaster response capacity.
* Encourages continued engagement and further skill development.
* Serves as a stepping stone for future training or volunteer involvement in Red Cross programs.

**Certificate of Participation**

Awarded to participants who completed the training program and took part in team activities but showed limited demonstration of key disaster preparedness skills.

***Why it is Awarded:***

* Scored below 3.9 in overall assessment.
* Was present for training sessions and participated in basic activities.
* Demonstrated limited understanding or application of disaster response concepts and skills.
* May have struggled with teamwork, leadership, communication, or adapting to training exercises.
* Shows potential for growth with further support, practice, or future training.

***Benefits:***

* Acknowledges the participant’s effort and presence in completing the training.
* Encourages continued learning and participation in Red Cross volunteer programs.
* Provides a starting point for future involvement and personal development in disaster preparedness.
* May qualify participants for refresher or entry-level trainings to strengthen core skills.

## Participant Checklist

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Checklist** | **Completeness** | **Comments** |
|  | **Before Training** |  |  |
| 1. | Do you have a reliable computer with internet? | ☐Yes  ☐No  ☐Not Applicable |  |
| 2. | Do you understand how to use Zoom *(for e.g., log in to a session, raise your hand, unmute your mic or video, type in the chat box)*? | ☐Yes  ☐No  ☐Not Applicable |  |
| 3. | Have you completed the Pre Test questionnaire? | ☐Yes  ☐No  ☐Not Applicable |  |
| 4. | Do you have a general idea of what you want to discuss/focus your learning on before the training? | ☐Yes  ☐No  ☐Not Applicable |  |
|  | **During the Training** |  |  |
| 5. | Are you attending all sessions and participating in all group and individual activities/assessments? | ☐Yes  ☐No  ☐Not Applicable |  |
| 6. | Are you taking the opportunity to meet your classmates? | ☐Yes  ☐No  ☐Not Applicable |  |
| 7. | Are you accessing the training website for training/resource material and zoom links for each online session? | ☐Yes  ☐No  ☐Not Applicable |  |
| 8. | Are you speaking up and informing your facilitator if you do not understand the content that is being delivered? | ☐Yes  ☐No  ☐Not Applicable |  |
| 9. | Are you liaising with your group outside of the training sessions to prepare group work assessments? | ☐Yes  ☐No  ☐Not Applicable |  |
|  | **After the Training** |  |  |
| 10. | Have you completed the participant evaluation surveys? | ☐Yes  ☐No  ☐Not Applicable |  |
| 11. | Have you taken the knowledge learned and used it to support your National Society and communities? | ☐Yes  ☐No  ☐Not Applicable |  |

Tips for Participating in Online Training

|  |  |
| --- | --- |
| **Do** | **Do Not** |
| * Turn on your video and position your camera when speaking * Get the lighting right to make sure people can see you * A sound and video check before the session starts * Be mindful of your background noise: mute mic unless you are speaking * Be fully present, minimize distractions such as cell phone calls or email pop-ups * Listen to the views of others. * Speak clearly and slowly. * Consider the tone of what you say, and implied or unspoken meanings. * Communicate tactfully. * Give honest feedback while considering and respecting other people’s feelings and reactions. * Maintain eye contact when your web camera is on. * When your web camera is on and be mindful of your body posture/ gestures. * When presenting, make sure that your visual presentation is clear and understandable. * Make sure your full name appears on the screen (right click on your name to change if needed) | * Interrupt or cut your facilitator or other participants off when they give their views. * Ignore or show favour to any individual in your class/group. * Think you know best. Other participants/your facilitator may have unique or deeper knowledge. * Ramble. * Put people down or be defensive. * Fail to stop for breaks. It is important that you take a rest break when given. |

|  |  |
| --- | --- |
| **Online Module 1: Adult Learning and Leadership** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * Understand how to build effective teamwork and adapt to different personality types in disaster response training. * Learn how to communicate and work with different community groups, including the elderly, low-literacy learners, and young adults. * Explore simple ways to use technology to communication before, during and after a disaster with different community groups. |  |
| **Building Effective Teamwork in Disaster Response Training**  Building effective teamwork is necessary because CDRT members need to cooperate with each other, the local Red Cross, and other groups. Good teamwork helps build trust, cooperation, and shared responsibility. The following are some tips to help you build effective teamwork within community disaster response teams:   * **Start with clear team briefing:** Begin every activity or operation with a short but clear briefing. Explain the goals, tasks, safety concerns, and what everyone’s role is. A good briefing makes sure everyone is on the same page and avoids confusion during the response. * **Assign roles based on strength, not availability:** Try to match tasks to people’s skills, experience, and interests. For example, someone good with people might manage communication, while someone detail-oriented can handle logistics. This helps the team work more efficiently and confidently. * **Use a buddy system for pairing more experienced team members with less experienced ones:** This helps with training, builds trust, and ensures no one feels overwhelmed or left out. It also improves safety, especially in stressful or fast-moving situations. * **If personalities clash, pause and reassign tasks:** Disagreements can happen in any team. If two people aren’t getting along, take a moment to listen and calmly shift roles or responsibilities. Managing conflict early keeps the team focused and united. * **Practice inclusive communication within the team:** Make sure everyone’s voice is heard, including quieter members. Use simple language, ask for feedback, and check that everyone understands the plan. Inclusive communication builds respect and teamwork. * **Empower different team members to lead:** Give different people a chance to lead small parts of an activity. This helps build confidence and shows that everyone’s contributions matter. It also prepares more people to step up in future emergencies. * **Debrief after every session:** After each training or response, take time to discuss what went well, what didn’t, and what can be improved. A debrief helps the team learn and grow stronger together. |  |
| **Understanding Team Dynamics and Personality Types**  It is also helpful to understand how people think, behave and communicate. This way, you can adjust how you work with them to make sure everyone feels included and involved. The following are different personality types you may encounter in at a training:  **The Over-Participant:** Very excited, often dominating discussions or activities with lots of contributions.  **The Challenger:** Questions’ ideas, opinions, and approaches, often playing devil's advocate to stimulate critical thinking.  **The Expert:** Knows a lot about the topic. Often providing valuable insights and guidance.  **The Distracted:** Struggles to stay focused, easily lose interest during trainings, discussions, or activities.  **The Sleepy:** Appears drowsy or disengaged, often struggling to stay awake during trainings or activities.  **The Rookie:** New to the group or topic, lacking experience or knowledge about the topic being discussed.  **The Unpunctual:** Frequently arrives late to trainings or activities, disrupting schedules.  **The Wolf:** Tends to dominate discussions aggressively, disregarding others' opinions or views.  **The Ally**: Actively supports and encourages others within the group. |  |
| **The Importance of Leadership**  Leadership in disaster training is important because it helps guide, organize, and support the team before, during, and after a disaster.   * **Training builds strong leaders:** It helps people to become more confident and capable leaders. Increased knowledge helps people to know what to do and how to guide others. * **Leaders prepare communities to deal with a crisis:** In a disaster, trained leaders stay calm and act. They help everyone understand the plan, goals and roles. They show others what to do, where to go and how to stay safe. * **Promotes teamwork and trust:** leadership training teaches people how to work well with others. When people trust their leaders, they follow faster and feel safer. Leaders encourage respect and listening and helps to prevent conflict and keep everyone focused. * **Encourages fast, smart decisions:** Disasters often require quick thinking. Good leaders stay calm and help the team make safe and effective choices under pressure. Training teaches leaders how to make quick and wise decisions. * **Empower others to lead:** Leadership training is not just for one person on the team. It helps everyone feel strong, better prepared and ready to help in the future. * **Creates a culture of preparedness:** A trained leader talks about planning, safety and working together. This helps the whole community feel more prepared before a disaster happens. * **Saves Lives:** With strong leadership and good planning, more people survive and recover. Leadership in training is not just helpful, but it is lifesaving. |  |
| **Actions Of Effective Leadership in Training**   * **Shares what they learned:** A good leader is open and willing to pass on knowledge to the team. This helps everyone grow and ensures that information does not stay with just one person. * **Listens to others:** Leadership isn’t just about giving orders, it's also about hearing team members' ideas, concerns, and feedback. Listening builds trust and shows respect. * **Asks questions:** Strong leaders are curious. They ask questions to learn more, understand situations better, and show interest in others’ thoughts. It also sets a good example for the team. * **Practices new skills:** Effective leaders take part in training just like everyone else. They try new techniques, tools, or methods so they can improve and lead by example. * **Helps the team:** Leadership means being supportive, helping others when they are struggling, checking in regularly, and making sure no one is left behind. * **Stays positive:** Even when things go wrong, a good leader remains calm and encouraging. A positive attitude lifts team spirit and keeps people motivated during challenges. * **Takes responsibility:** Strong leaders own their actions, admit when they make mistakes, and work to fix problems. This builds trust and shows accountability. |  |
| **Skills of an Effective Communicator**  **Active listener:** Pays close attention when others speak, shows interest, respect and does not interrupt. Responds in a way that shows understanding.  **Feedback skills:** Gives helpful, respectful comments and can also accept feedback without becoming defensive.  **Confidence and staying calm:** Speaks clearly and with belief in what they are saying, while remaining calm—even under stress.  **Adjusts to changes easily:** Can change how they communicate based on the situation, audience, or challenges without losing focus.  **Open Mindedness:** Willing to hear different opinions, ideas, or feedback—even if they disagree. Listens without judgment.  **Non-Verbal Communication**: Uses body language (like eye contact, gestures, and facial expressions) that matches and supports their words. |  |
| **Communicating And Working with Different Community Groups**  Being adaptable in the way you communicate with different groups is important when conducting community trainings. |  |
| **Communicating with the Elderly**  **Best Practices:**   * **Use slower, clearer speech**: Also, make sure to use easy-to-understand language. * **Avoid technical jargon**: Use everyday examples (e.g., “your medication bag” instead of “emergency health kit”). * **Repeat key points**: Check-in and invite questions to ensure that everyone has fully understood the information.   **Tools and Techniques:**   * **Use voice notes,** visual aids, and hands-on demonstrations. * **Provide** **printed materials** in large fonts with images. * **Assign a** **“Tech Buddy”** (e.g., a youth volunteer) to assist with devices if needed. |  |
| **Communicating with People with Low Literacy**  **Best Practices:**   * **Use visual storytelling and verbal communication:** Don’t rely on wordy presentations or documents. * **Avoid written instructions**: Use demonstrations, videos and role-playing. * **Ask questions verbally**: Encourage discussions and questions.   **Tools and Techniques:**   * **Use videos in local dialect with no/limited text.** * **Incorporate props:** For example, an actual go-bag and let people touch, hold, and ask questions about each item. Say: This is a flashlight. When would we use it? * **Use group work:** This builds comfort and peer support. |  |
| **Communicating With Young Adults**  **Best Practices:**   * **Keep content interactive and fast-paced:** It’s important for them to feel engaged. * **Use peer-to-peer learning, tech tools and challenges.** * **Link training to real-life scenarios**: For example, job skills, protecting family etc.   **Tools and Techniques:**   * **Use Kahoot, TikTok challenges, or scenario-based group tasks:** For example, ask groups to create a 60-second video on how to secure a house before a storm. * **Incorporate mobile-friendly quizzes, short videos, and QR codes.** * **Give leadership roles to young people:** For example, leading a group discussion. |  |
| **Using Technology**  Using technology can also make learning better. It's important to know what tools, apps, and methods work well for online sessions. You can also mix tech with regular (in-person or paper-based) activities to keep everyone interested and involved.  Always make sure that everyone has a fair chance to participate, even if they’re not used to using technology. |  |
| **Using Technology with Elderly Participants**  **Challenges:** May not be tech-savvy, may have vision/hearing impairments, might not use smartphones often.  **How They Can Use Tech:**   * **Teach elders to use WhatsApp for Emergencies**: Show them how to send their location or a voice note to family if they’re in danger. * **Alternatively, CDRTs can prepare and send short, clear voice notes**: These voice notes can be used to explain disaster steps. For example, “Put your ID and meds in a waterproof bag. Keep it in an easy to reach place.” * **Train “Digital Buddies”**: Pair each elder with a younger family or community member who can help them with tech. |  |
| **Using Technology with Low Literacy Participants**  **Challenges:** Struggle with reading; need visual, hands-on, or oral formats  **How They Can Use Tech:**   * **Short Disaster Response and Preparedness Videos in Local Dialect:** Usepictures or actions but no text to describe examples or scenarios. * **Creation of a WhatsApp Group:** Use this to share voice messages and videos. * **Creation of a YouTube Channel:** Use QR code posters to direct participants to the YouTube videos and voice messages |  |
| **Using Technology with Young Adults**  **Challenges:** Distracted easily, but tech-savvy. Want engaging, short, social content.  **How They Can Use Tech:**   * **Gamified Mobile Friendly tools:** Use tools such as Google Forms, Quizzes Mentimeter, Quizizz or Booklet to create quizzes and polls. Check <https://www.mentimeter.com/blog/education/kahoot-alternatives> * **Create & Share Disaster Preparation and Response messages using Prep TikTok or Instagram Reels:** Challenge them to create a short video showing how to pack a go-bag or secure a roof. Use hashtags like #CaribbeanReady or #StormSafeChallenge to spread awareness and create engagement. |  |

**Additional Notes:**

|  |  |
| --- | --- |
| **Online Module 2 – CDRT Roles and Structures** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * Understand CDRT Roles and Responsibilities – learning about different types of response agencies their roles and how CDRTs fit in and fill gaps in the National Response Systems, as well as gathering what is expected of a CDRT, before, during and after an emergency.​ * How to form a CDRT and team organization – How to organise a CDRT team based on skills set and deploy CDRT members based on resources, as well as services needed.​ * CDRT Structure and decision making – Understanding the CDRT reporting lines, operating lines and how decision are made in a timely manner to prevent loss and damage. ​ * CDRTs and response - assessing when CDRT intervention is needed, how to intervene, while prioritizing personal safety, what is required when responding and what type of reporting, as well as assessments are needed. |  |
| **CDRT National Governance Structure**  The National Structure will differ in the various National Societies. In some countries CDRTs report to the National Society, while in others, the CDRTs operate under the National or Local Disaster Office.  More information on the National Structure can be found in the CDRT Field Guide as well as the CDRT Minimal Standards and Sustainability Guide. |  |
| **The Steering Committee**  Members of the Steering Committee should include the National Disaster Organization as the Chair, the National Society as the Co-chair and members of three relevant partnering agencies (fire, medical, police/military, social development ministry and/or NGOs. |  |
| **The Chair**   * **Leads and oversees**​: Leads the steering committee and oversees all CRT activities.​ * **Builds** **the team**​: Develops and manages relationships and communication across the assigned priority areas. * **Strategic planning**, **Growth** **&** **Development**: Participates in ongoing strategic planning and seeks new opportunities for growth and development. * **Monitoring and Evaluation**​: Participates in monitoring and evaluating efforts within the priority areas. |  |
| **The Secretary/Treasurer**  It’s important to note that the person in this position is also responsible for fund raising activities. |  |
| **The Public Relations/Communications Officer**  This person must ensure inclusivity in all community engagements. |  |
| **The Training Officer**  This person must assess the training needs of the CDRTs and ensure that they receive additional training, including specialised trainings in any of the topics covered as well as ensure that refresher CDRT trainings are conducted. |  |
| **The Zonal Coordinator**  The Zonal Coordinator is the key liaison between the CDRT and the National Society/National Disaster Office. |  |
| **The CDRT Organisation for Community-Based Response**  It is important to note that CDRTs should work with the other established community organizations. The CDRT team structure needs to be flexible, so that it can expand or contract depending on the on-going assessment priorities determined by the Team Leader, and people and resources available. This expansion and contraction help ensure rescuer safety, doing the greatest good for the greatest number, manageable span of control and accountability of CDRT members.  The following points about CDRT structure are important:   * Each CDRT must establish an operational structure specific to its community and to the type of risk in coordination with its established community organisations. * A Community Disaster Response *Team Leader* is appointed to direct team activities. For CDRT volunteer activities and training, this person may be appointed by the community. * The location for coordination should be established by the Team Leader as the central point for command and control of the incident in consultation with the community. * The Team Leader may appoint members to assist with managing resources, services, and supplies (logistics). Team Leaders may also appoint members to collect and display information (planning) and collect and compile documentation. To maintain span of control, this delegation occurs as the organization expands. * The CDRT may operate as a single team that performs all activities as required or may be divided into smaller teams (under Operations) of at least three people to achieve specific goals developed (e.g., fire suppression, medical, search and rescue), with a leader for each. * In all situations, each unit assigned must have an identified leader to supervise tasks being performed to account for team members, and to report information to his or her designated leader. |  |
| **CDRT Role**  As mentioned in Module 2, CDRTs play a role in disaster preparedness, before a disaster occurs, through the education and training of communities, the development of disaster plans and evacuation plans and the establishment of early warning systems. It is important to note that CDRTs also play an integral role in each phase of the Disaster Management Cycle which helps with improving the overall resilience of communities.  The actions taken and led by CDRTs are vital to the resilience of a community. Therefore, by being first aid trained, doing community clean up, developing family emergency plans and having and testing a community disaster plan, at least once a year can reduce vulnerabilities and thus enhance capacities towards a better and vibrant community. These actions will enable community members to be more cognizant of their needs and become more involved in the overall process of resilience.  Note: CDRTs must also have a people’s centred approach and must therefore ensure the inclusion of vulnerable groups/individuals in the community in all actions taken. |  |
| **CDRT Role in Response**  When it comes to response and providing assistance, the CDRT organization should proceed in the following way after an incident:   * Following the incident, CDRT members take care of themselves, their families, their homes, and their neighbors. * If the plan calls for self-activation, CDRT members proceed to the pre-designated staging area with their disaster supplies. Along the way, they make damage assessments that would be helpful for decision making. * The Community Disaster Response Team develops the group to ensure effective communication. The CDRT Team Leader must prioritize actions and workload to maintain span of control, maintain accountability, and do the greatest good for the greatest number without placing CDRT members in harm’s way. * Information is collected and assessed (from CDRT members, emergency volunteers, and reports from working teams [e.g., search and rescue]). The CDRT organization should be flexible and evolve based on new information. * Following an incident, information and, therefore, priorities may be changing rapidly. Communication between the CDRT Team Leader and response teams ensures that CDRTs do not overextend their resources or supplies. * Effective emergency scene management requires the goals and objectives that are based primarily on the safety of rescue personnel. |  |
| **Rescuer Safety**  The question, “Is it safe for the CDRT members to attempt the rescue?” is very important.    Remember your safety and the safety of your team members are of utmost importance.  Be Safe! |  |

**Additional Notes:**

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| **Online Module 3: CDRT & Disaster Risk Management** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * Be more knowledgeable about the common disaster management terms. * Understand what a disaster and a hazard is. * Have an awareness and understanding of the common hazards. * Understand why these hazards affect households, communities, and countries. * Learn about climate change, climate change adaptation and Nature-Based Solutions. |  |
| **The Disaster Management Cycle**  The Disaster Management Cycle is continuous and can start at any of the following phases:  **Prevention:** Activities and measures to avoid existing and new disaster risks. While certain disaster risks cannot be eliminated, prevention aims at reducing vulnerability and exposure in such contexts where, as a result, the risk of disaster is removed. Examples include land-use regulations that do not permit any settlement in high-risk zones and immunization against vaccine-preventable diseases. Prevention measures can also be taken during or after a hazardous event or disaster to prevent secondary hazards or their consequences, such as measures to prevent the contamination of water.​  **Preparedness:** This is the knowledge and capacities developed by communities and individuals to effectively anticipate, respond to and recover from the impacts of disasters. Preparedness is based on a sound analysis of disaster risks and good linkages with early warning systems, and includes such activities as contingency planning, the stockpiling of equipment and supplies, the development of arrangements for coordination, evacuation and public information, and associated training and field exercises. These must be supported by formal institutional, legal, and budgetary capacities. The related term “readiness” describes the ability to quickly and appropriately respond when required.​  **Mitigation:** Disasters often cannot be prevented fully, but their severity can be deceased by implementing various strategies and actions.  Mitigation measures include structural mitigation which include engineering techniques and hazard-resistant construction as well as non-structural mitigation which include improved environmental and social policies and public awareness.  **Response**: Actions taken directly before, during or immediately after a disaster to save lives, reduce health impacts, ensure public safety, and meet the basic subsistence needs of the people affected.  **Recovery:** The restoring or improving of livelihoods and health, as well as economic, physical, social, cultural and environmental assets, systems and activities, of a disaster-affected community or society, aligning with the principles of sustainable development and “build back better”, to avoid or reduce future disaster risk.  **Rehabilitation:** The restoration of basic services and facilities for the functioning of a community or a society affected by a disaster. |  |

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| **Understanding What a Disaster and a Hazard is**  Participants will be given the definitions of a hazard and a disaster. They should also understand that hazard becomes a disaster when the impacted community or society is no longer able to cope using its own resources.  Whatever the cause, disasters all have several key elements in common:   * The event is relatively unexpected, with little or no prior warning or opportunity to prepare. * Available personnel and emergency services may not be available during the initial stages of a disaster because of demands for their services. * There are widespread effects that could last a long period of time. * Lives, health, and the environment are endangered. |  |

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| **Types of Hazards**  Hazards may be natural or caused by human actions, these can occur unexpectedly and may cover a limited or a wide-ranging geographic area.  They fall under the following categories: Hydro-meteorological, Biological, Seismic, Social Economic, Environmental, and Industrial Technological. |  |
| **Hurricanes**  Hurricanes are violent areas of low pressure forming in the tropical Atlantic Ocean from June to November. Hurricanes have winds of 75 miles per hour (mph) or more and are accompanied by torrential rains and along coastal regions storm surge. Hurricanes cause millions of dollars in damage when they affect the Caribbean.  **Hurricane Classification**  Hurricane strength is classified using the ***Saffir-Simpson Hurricane Damage Potential Scale***. This scale correlates hurricane strength to wind speed, and storm surge as seen below:   |  |  |  | | --- | --- | --- | | **Category** | **Wind speed (Miles Per Hour)** | **Storm Surge (Feet)** | | I - Minimal | 74-95 | 4-5 | | II - Moderate | 96-110 | 6-8 | | III - Extensive | 111-130 | 9-12 | | IV - Extreme | 131-155 | 13-18 | | V - Catastrophic | More Than 155 | More than 18 |   **Hurricane Watch:** Hurricane conditions (sustained winds over 74 mph) are expected in your area within 48 hours.  **Hurricane Warning:** Hurricane conditions are expected in the area within 36 hours.  More information can be found in the **CDRT Field Guide Section 1.3.3.** |  |
| **What To Do Before**   * Know what are a hurricane watch (hurricane conditions within 48 hours) and a hurricane warning (hurricane conditions within 36 hours). * Have a disaster kit which includes a portable radio and flashlight. * Ensure you have enough nonperishable food and water stored to last you up to 2 weeks. * Floodproof your home. * Keep trees and shrubbery trimmed. |  |
| **What To Do During the Watch and Warning Phase**   * Board up all windows. * Check batteries and stock up on canned food, medical supplies, and drinking water. * Bring outside objects indoors (e.g., garbage cans, lawn furniture, bicycles). * Listen to the advice of local officials and evacuate if told to do so. |  |
| **What To Do During a Hurricane**   * If you are not advised to evacuate, stay indoors and away from windows. * Stay away from flood waters; never drive through them. * Be aware of the calm “eye;” the storm is not over. |  |
| **What To Do After a Hurricane**   * Wait until an area is declared safe before entering. * Use a flashlight to inspect for damage including gas, water, and electrical lines and appliances. * Stay away from downed power lines. * If you smell gas or if there is a fire, turn off the main gas valve. Switch off individual circuit breakers (or unscrew individual fuses), then switch off the main circuit breaker (or unscrew the main fuse) * Use a portable radio for information from officials. * Stay out of flood waters. |  |
| **Earthquakes**  Earthquakes are the vibration of the rocks of the earth’s surface/ These can be mild – tremors or violent e.g., Haiti 2010. Earthquakes are measured by magnitude M1-4 mild; M5 moderate; M6 and above severe. Where in the earth’s crust the earthquake occurs is called the epicenter. This can be shallow or deep.  Always note the magnitude and the depth of the earthquake in earthquake alerts.  You should note that earthquakes strike without warning​. Earthquakes can happen at any time of the year, day, or night. Aftershocks may be as strong as the original earthquake.  **Earthquake Facts**   * Earthquakes strike without warning. * Earthquakes can happen at any time of the year, day, or night. * Aftershocks may be as strong as the original earthquake.   **Example of an earthquake alert**    **Earthquake Safety Tips**   * Drop, cover and hold. * Stay indoors if you're inside. Move away from windows. * If outdoors, move to an open area away from buildings, trees, and power lines. * If in a car, pull over safely and stay inside. |  |
| **Tsunamis**  Tsunamis are a series of giant waves generated by underwater disturbances such as earthquakes, volcanic activity, and submarine landslides.  **Characteristics of a Tsunami:**   * Wave lengths commonly exceed 100 km. * Deep-ocean velocities of up to 700 km/hour * A tsunami is often seen as a massive wall of water approaching land. * There is usually more than one wave and the first is often not the largest. * Tsunami waves are powerful and often contain dangerous debris such as boats, trees, and cars.   **Tsunami Warning Signs**   * See the water receding. * Feel a strong earthquake at the beach. * Hear a loud crashing noise coming from the beach.   If you notice or experience any of these warning signs – leave the area and go to higher ground immediately.  **Tsunami Warning System in Aruba**  Early Warning System has been established in Aruba. Eight poles were set up at:   * Light House * Plam Beach * APA (Port) * Brazil * Rooi Santo * Sasaki * Rumbastraat * Weg Fontein |  |

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| **What To Do Before**   * Learn the three-tsunami warning signs. * Learn the difference between a tsunami warning and a tsunami watch and find out which local authority is responsible for sending out alerts. * Find out if there are any early warning systems in place. * Have a family emergency and evacuation plan in place. |  |
| **What To Do During a Tsunami**   * If you are at the coast and you experience any of the warning signs, leave the area immediately. * Follow any evacuation orders issued by authorities and get to higher ground as soon as possible. * Take your animals with you if you can. * When at a safe place listen to the radio or TV for further updates and information. |  |
| **What To Do After a Tsunami**   * Listen to a portable radio or TV for information. * Let friends and family know that you are safe. * If evacuated, do not return to your home unless authorities say it is safe to do so. * Be aware of any secondary effects such as contaminated water, mudflows, damaged buildings, and roads etc. * Avoid any areas that may have been impacted. |  |

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| **Volcanoes**  Volcanoes are vents or openings in the Earth's crust through which, hot, molten rock (called magma) and gases from the interior of the Earth are released.  **Volcano Effects:**   * **Pyroclastic Flows** – These contain a mixtures of ash, rock fragments and gas flow from a collapsed eruption column or lava dome. Most pyroclastic flows consist of two parts: a lower (basal) flow of coarse fragments that move along the ground, and a turbulent cloud of ash that rises above the basal flow. * **Lava Flows** - These are slow moving streams of molten rock that pour or ooze from an erupting vent. The lava is very viscous and does not flow far from the vent. * **Ash Fall -** Large quantities of ash produced during a volcanic eruption can be thick enough to destroy vegetation and cause aircraft, ship, and car engines to malfunction. They can also be very dangerous to people's health since even the finest fractions of ash may cause serious respiratory problems if they are inhaled. * **Lahars** - These are mixtures of volcanic water and rock fragments which rush down the slopes of a volcano and into the surrounding valleys. It should be noted that Lahars can occur with or without a volcanic eruption. * **Volcanic Gases** - Sulphur dioxide (SO2), and hydrogen sulphide (H2S) are present in toxic amounts close to the vent of an erupting volcano and may be present close to hot springs around any live volcano. |  |
| **What To Do Before an Eruption**   * Prepare a home evacuation or escape plan. * Keep insurance papers, important documents, and other valuables in a safe-deposit box or in a waterproof bag. * Have a family plan and choose a safe area in advance. * Have a portable radio, flashlight, and emergency supplies. * Listen to radio or TV for up-to-the-minute information from officials. |  |
| **What To Do During an Eruption**   * Keep listening to the radio or TV for information from officials. * Follow any evacuation orders issued by authorities. * Activate your family emergency plan. * If asked to stay indoors, ensure that all windows and doors are kept closed. * In the event of ashfall, seal your windows and door frames with wet rags. * Avoid low-lying areas. * Bring all animals and livestock in closed shelters. * Put all machinery inside a garage or cover them with large tarps. * Cover water tanks and other deposits so they do not become contaminated by ash. * If you have to go out, use mouth guards, long sleeve clothes, protective glasses, and a cap. |  |
| **What To Do After an Eruption**   * Listen to a portable radio or TV for information from officials. * Let friends and family know that you are safe. * If evacuated, do not return to your home unless authorities say it is safe to do so. * Stay out of the disaster area. * Do not use telephones except in emergencies. |  |
| **Floods**  A flood occurs any time a body of water rises to cover what is usually dry land. Floods have many causes, including heavy rain, hurricanes and river or gully failure. When flooding occurs, affected areas may sustain damage to structures and personal property, as well as severe damage to the environment in the form of soil erosion and deforestation, and damage to utilities and transportation systems.  Land along rivers and streams and coastlines are particularly susceptible to flooding. Under some conditions, however, even inland areas that are not normally threatened by flooding may be immersed.  **Types of floods**   * **Flash Floods**- Short intense burst of rainfall. * **Ponding** – Flooding in low-lying areas * **Coastal**- Flooding due to storm surges and tsunamis. * **River Floods** – Flooding due to moderate to heavy prolonged rainfall. * **Pluvial** – Flooding due to overwhelmed drainage. |  |
| **What To Do Before a Flood**   * Know the flood risk and the elevation of the area. * Prepare a home flood evacuation or escape plan. * Keep insurance papers, important documents, and other valuables in a safe-deposit box or in a waterproof bag. * Have a family plan and choose a safe area in advance. * Have a portable radio, flashlight, and emergency supplies. * Stock up on sandbags. * Move furniture and other items to higher levels. * Listen to radio or TV for up-to-the-minute information from officials. |  |
| **What To Do During a Flood**   * Use telephones only for life-threatening emergencies. * Evacuate, if necessary, and follow instructions. * Do not walk or drive through flood waters. * Stay off bridges where water is covering them. * Heed barricades blocking roads. * Keep away from waterways during heavy rain. If you are in a valley area and hear a warning, get to high ground immediately. * Keep out of storm drains and gullies. |  |
| **What To Do After a Flood**   * Listen to a portable radio for information from officials. * Boil drinking water before using (rolling boil for 10 minutes). * Use a flashlight to check for damage including gas, water, and electrical lines and appliances. * If you smell gas or if there is a fire, turn off the main gas valve. Switch off individual circuit breakers (or unscrew individual fuses), then switch off the main circuit breaker (or unscrew the main fuse). * Stay out of the disaster area. |  |
| **Man-made Hazards**  Man-made (i.e., anthropogenic, or human-induced) hazards are defined as those “induced entirely or predominantly by human activities and choices”.  This term does not include the occurrence or risk of armed conflicts and other situations of social instability or tension which are subject to international humanitarian law and national legislation. Technological hazards are normally considered a subset of man-made hazards. |  |
| **Vulnerability**  Vulnerability refers to the conditions that exist in a community that increase the risk of negative impacts.  **Types of vulnerability**:   * **Social vulnerability** – This refers to the social interactions between community members and the traditional values, customs, and beliefs of community. It also relates to the well-being of the community, such as sufficient access to goods and services and the existence of peace and security. Disability and the levels of literacy and education can also affect vulnerability. * **Physical vulnerability** – Poor design and materials used to construct buildings and homes makes these structures more prone to damage from disasters. * **Environmental vulnerability** – Poor farming practices, poorly planned urban and industrial development which results in the depletion or removal of natural resources, such as the removal of forested areas can increase vulnerability. * **Economic vulnerability** – Poorer communities and countries with less financial resources can be more negatively impacted by disasters. |  |
| **Risk**  Risk is defined as the probability of harmful consequences, or expected losses (deaths, injuries, property, livelihoods, economic activity disrupted or environment damaged) resulting from interactions between natural or human-induced hazards and vulnerable conditions.  **Risk Choices:**  You can do something to reduce your risk to hazards.   * **Accept risk** = the speed you drive your car, smoking, where you live. Sometimes we just have to accept risk.​ * **Reduce risk** – slower driving speed, build a house above the flood height, remove mosquito breeding sites. These actions can lower your exposure​. * **Avoid risk** – relocate to a safer area to avoid flooding. * **Transfer risk**- to someone else; usually by insurance.​   ​  These risk choices apply not only to communities but also to the work we do, medicine and health care as well as money matters​. |  |
| **Climate Change**  Climate change is a long-term change in the average weather patterns that have come to define local, regional, and global climates.  These changes come as a result of the burning of fossil fuels, deforestation and other harmful practices that increase the concentration of greenhouse gases (carbon dioxide, methane, and nitrous oxide etc.) in the atmosphere.  **Effects of climate change:**   * **Increase In Temperature** – The Intergovernmental Panel on Climate Change (IPCC) estimated that by 2100, the global average surface warming (surface air temperature change), will increase by 1.1 - 6.4 °C. * **Changes In Precipitation Patterns** – More precipitation is expected in higher latitudes while less precipitation is expected in most subtropical land areas. * **More Droughts and Heat Waves** – There will be more drought-affected areas as it is expected that hot extremes and heat waves will become more frequent. * **Stronger and More Intense Hurricanes** – The intensity, frequency and duration of hurricanes are expected to increase due to increases of sea surface temperatures. * **Sea Level Rise** – It is estimated that the sea level will rise by 18 – 59 cm by 2100. * **Increase Ocean Acidification** – The ocean naturally absorbs carbon dioxide from the atmosphere. The more carbon dioxide there is in the atmosphere, the more the ocean absorbs, and this is causing oceans to become more acidic which negatively impact corals and other marine animals and encourages the growth of algae and seagrass.   **Climate Change Adaptation:**  Climate change adaptation involves reducing risk and vulnerabilities by putting measures in place or by building the capacity of cities, communities, and individuals to cope with adverse climate impacts.  Climate change adaptation is therefore similar to disaster mitigation, and both must be done in order to reduce the risk and vulnerability to hazards such as hurricanes, thunderstorms, flooding and drought. |  |
| **Nature-Based Solutions**  The IFRC uses Nature-Based Solutions (NBS) to tackle climate change impacts and make communities stronger.   * **Nature as a Protector**: The IFRC uses nature, like plants and trees, to shield communities from disasters. For example, growing mangroves helps protect against storms. * **Green Ideas for Stronger Places:** The IFRC believes in 'green infrastructure'—making strong things (like buildings) that work with nature. For instance, using special pavements and green roofs to stop floods in cities. * **Growing Food with Nature (Agroecology):** The IFRC supports 'agroecology,' which means growing food by working with nature. It's like making friends with the environment. For example, planting trees with crops to make farming better. * **Smart Water Thinking**: The IFRC helps communities use water wisely. It's like taking care of water so everyone can use it. For instance, fixing places where water comes from, so there's always enough for everyone. * **Communities Taking Charge:** The IFRC believes communities can lead the way. We help people take care of nature around them. For example, communities planting more trees together to keep their area healthy. |  |

**Additional Notes:**

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| **Online Module 4 – CDRTs and Disaster Preparedness** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * Understand What Is Preparedness​ * Learn about Home & Community Preparedness​ * Learn about the CDRTs Role​ |  |
| **What is Preparedness?**  Activities and measures taken in advance to ensure effective response to the impact of hazards, including the issuance of timely & effective early warnings and the temporary evacuation of people and property from threatened locations.​ |  |
| **CDRT Preparedness Roles:**   * **Education and Training** – Community preparedness is about sharing information with your community and ensuring that they understand what can happen and what they can do. CDRTs can help educate the community on ways in which they can prepare for and respond to a disaster. When engaging with the community, it is important to know the facts and have evidence to support the need for community preparedness. * **Development of Disaster Plans** – Disaster plans such as a Family Emergency Plan and a Community Disaster Plan can help with reducing the risks and vulnerabilities faced as they contain strategies for mitigating and reducing the impacts of disasters. CDRTs can assist with the development of these plans. Testing plans is also important as it would help to identify any gaps that exist as well as help persons to understand their individual roles. * **Evacuation Plans** – Having an evacuation plan is essential to emergency planning. CDRTs can assist the community and individuals with developing evacuation plans. * **Establishing an Early Warning System** - A self-managed community-based early warning system can be established whereby persons from the community can receive timely communication about an emergency or disaster. The CDRT can engage with the community to establish an early warning system. * **Practice and Testing** – Test the disaster and evacuation plans created to determine any gaps and identify ways to improve overall resilience. |  |
| **Engaging with the community**  Remember the following: It is important to know the facts, have evidence to support the need for community preparedness.  When engaging the community about preparedness and the need to be prepared, do the following:   * Talk about past events and impact.​ * Highlight climate-related changes that are visible.​ * Use your creativity and innovation to get people’s interest. It is important to reach all the groups in your area. |  |
| **Community Mapping: Using The Roadmap to Resilience**  ​  The Roadmap to Resilience is a community driven process that allows the community to identify their hazards, vulnerabilities, threats, and capacities which are then measured against 6 resilience characteristics and 11 dimensions. |  |
| **The Six Resilience Characteristics**   * **Knowledgeable and healthy and can meet their basic needs:** Persons are aware of the various risks and vulnerabilities and their capacity to take actions to increase their resilience. Persons can meet their food, water, and shelter needs. * **Socially cohesive:** The existence of social groups within the community and the lack of major conflicts within the community. * **Economic opportunities:** Persons have access to livelihood opportunities and can cover their health, education and nutrition needs daily. * **Well maintained and accessible infrastructure and services:** Access to healthcare and education facilities and emergency services. * **Can manage its natural assets:** Natural forests, vegetation and wetlands are maintained. * **Is connected:** persons are aware of relevant policies and laws and how those can affect the community.   The community will then use this information to develop a community plan and engage with stakeholders such as its National Society to help with evaluating their plan. Remember that community plans should be shared with the local National Society and even the National Disaster Office. |  |
| **11 Dimensions of Community Resilience**    More information can be found in the Roadmap to Resilience v2 document in the Global Disaster Preparedness Centre webpage. |  |
| **Community Disaster Plan**  Communities that plan before a disaster will be more likely to be able to respond effectively to a disaster. So how can a CDRT help its community in doing this? First of all, it is important to know what a disaster plan is. Put simply, a disaster plan is a document that outlines how the community will deal with a disaster. It might look at the main hazards that are likely to affect that community and outline the actions that the community will take before, during and after​ this threat. Plans must be tested and evaluated to know if they work and how well they work.  Remember to incorporate the following in your community plans:   * Protect children, single women, and other people with vulnerabilities. * Determine responsibilities of evacuation for people with disabilities and elderly. | |  |
| **Community Mapping**  **Mapping risks, threats, and vulnerabilities**  CDRTs must be impartial and work with the community to identify the following:   * What are the major threats and hazards that could affect the community? * Identify Who and What would be affected. * What are the areas in the community most like to be impacted? * Who are the vulnerable persons (pay close attention to children, elderly especially those who live alone, pregnant women, persons with disabilities).   **Mapping resources and capacities**  Work with the community to identify the following:   * What are the things that your community has that can help it to be prepared or to response to a disaster? Make a list of them. These could be people with skills, shelter, equipment and so on. |  |
| **Family Emergency Plans**  In terms of a positive approach, it is important to give all the family members responsibility even if they have special needs or special considerations. This enhances their coping mechanisms and creates a sense of trust between the family members.  **Key Considerations:**   * Discuss what to do if advised to evacuate. * What will you do if you cannot leave home? * Practice what you have discussed. * Help the family plan how it will stay in contact if separated by disaster. * Pick two meeting places: * A location a safe distance from your home in case of fire. * A place outside your neighbourhood in case you cannot return home. * Choose an out-of-area family member or friend as a “check-in contact” for everyone to call. * Remember to plan for family members with special needs and pets.   **Actions to take after developing a Family Disaster Plan:**   * All family members should know & practice family disaster plan. * Know safe areas based on the hazard. * Know the nearest shelters. * Know the best escape route from the home. * Know the meeting places. * Know the numbers for response agencies (fire, police, and ambulance)   More information on Family Emergency Plans can be found in the CDRT Field Guide on the CADRIM website. A Family Emergency Plan Template can also be found on the website. <https://www.cadrim.org/tools> |  |
| **Disaster Supplies Kit**  **Everyone should stock up on disaster supplies in their homes. A disaster supply kit can have the following items:**   * Battery-operated radio and extra batteries * Flashlight and extra batteries * Canned or tinned foods * Cash, * Can opener, * Utility knife, Pliers, hammer, saw, cutlass/machete, nails (lg) * Essential medication * Store all important documents is a waterproof folder.   A full listing of the items that should be included in your disaster supplies kit can be found in the CDRT Field Guide. |  |
| **Evacuation Plan**  An evacuation involves moving persons who are threatened by a hazard to a safer location. It also includes moving persons back to their respective homes.  As part of the evacuation plan:   * Consider the needs of children and physically challenged individuals. * All family members must be informed of the plan. * The family must practice escape drills. |  |
| **Community Early Warning Systems (CEWS)**  CEWS - is an integrated system of hazard monitoring, risk assessment, communication and preparedness activities that enables individuals and communities to take timely action to reduce loss of life and damage to property in advance of a hazard impact or disaster.  An early warning system should be included in the Community Disaster Plan.  The most important thing is that early warning should lead to actions that save lives and reduce damage. Your community must be empowered to act once it is warned. Warning messages should be clear and logical and should be from a source that people respect and will respond to. It is about reaching the vulnerable in a timely manner and putting systems in place before so that people know what to do. |  |
| **Ensuring Inclusivity in All Plans**  When developing any plans, always engage with and take into consideration any requirements of people within vulnerable or marginalized groups.  Persons within these groups include women and girls, the elderly, low-income households, persons living with physical, sensory, or intellectual disabilities, persons with mental health disabilities, persons living with HIV/AIDS or other chronic illnesses, migrants, and survivors of sexual and gender-based violence. |  |

**Additional Notes:**

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| **Online Module 5 – Using Kobo Collect App** |

Please note that a separate Guide was created for this module. You can find this the Kobo Form Builder Guide in the Resources Section on the training webpage:

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| **Online Module 6 – CDRTs and Community Assessments** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * To define an assessment​ * The purpose of Assessments​ * Assessments: Before, During and After​ * To explain how to do an assessment​. * To define the key principles and things to avoid |  |
| **What is an Assessment?**  An assessment includes the collection and analysis of data, and the reporting of the information collected. It is important to note that assessments can be done before and after a disaster occurs. |  |
| **Purpose of an Assessment**  The purpose of a damage assessment and needs analysis is to assist emergency agencies in decision making.   * The first reason to conduct an assessment would be to determine if and how the CDRTs can respond or assist the community. * The information that is collected should be provided to emergency/responding organisations as it can assist with the decision-making process, especially as it relates to providing relief to affected persons including any additional needs of the vulnerable population.   **Remember:** Data only become useful information when meaningful, relevant, and understandable at particular times and places, for specific purposes. |  |
| **Types of Assessments**   * Community Mapping using the Roadmap to Resilience Approach * Damage Assessment and Needs Analysis (DANA) * Rapid Assessments (0 - 24 hours DANA) * Detailed Assessments * Ongoing Community Monitoring and Surveillance   **Note:** DANA is also used by the Government in most countries and by secondary response agencies such as Ministries of Social Welfare, Ministries of Health, and Ministries of Housing for example.​  ​ Persons with special needs should also be considered while assessments are conducted. The assessments need to have a brief, concrete but NEEDED protection, gender, and inclusion section. Two things to assess: protection issues present in the community (sexual gender-based violence, violence against children...) and who are the vulnerable groups present. This is an ethical commitment and a humanitarian requirement.​  **Key Areas to Cover When Doing Assessments**   * Health and Psychosocial Support * Water and Sanitation * Shelter * Livelihood, economic and infrastructural damage, including damage to the physical environment |  |
| **Assessments Done Before a Disaster**  The following are some examples of the type of information that can be collected before a disaster.   * What are the risks? * Who are the vulnerable persons within the community? * What resources are available? Note that resources can refer to equipment, people, and plans. * Where do people get information? * What channels of communication is popular in the community?   There is much that can be done where assessments are concerned prior to impact. Before a disaster, it is the best time to do your community mapping. (Disaster Plans, Evacuation, Early Warning Systems).​  Learn all you can about your community and anticipate the needs that you might have to response to in an emergency.  This information is usually captured when an Enhanced Vulnerability Capacity Assessment (eVCA) is done in the community.  **Note:** This information can be recorded in your CDRT plan. See the CADRIM website for the **CDRT Workbook**, which is a guide and workbook developed to help CDRTs develop a plan. |  |
| **Role of CDRTs Before a Disaster**   * **Get to know**the other players, agencies, and disaster personnel, get an understanding of what their information needs will be in an emergency​. * **Develop**your assessment strategy for your community. Work out different sampling methods, different methods of data collection etc.​ * **Get familiar**with the forms you will use and develop forms where needed​. * **Train** your team and practice, make sure you know what you will do and who will be responsible for what areas and tasks.   **Example of the Organisational Disaster Management Structure in Sint Maarten**    Knowing the structure will help you to understand the different agencies the Red Cross works with, in times of emergencies. |  |
| **Conducting Assessments After a Disaster**  Early in all emergencies, but especially in rapid onset disasters, there will be great uncertainty about the actual problems. In all kinds of emergencies, decision-makers need to start by developing a picture of where people are, what conditions they are in, what their needs and resources are, and what services are still available to them. At the outset of any emergency, initial assessments are designed to provide basic life-saving information in the shortest possible time.  **Information to Collect After a Disaster:**   * What Happened? ​ * Gather the details of the emergency​. * Who/What was affected and how? ​ * Demographics of the affected, number and conditions?​ * Who’s On the Scene? ​ * What are they doing, where are the gaps?​ * What Is Needed?​ * Identify stakeholders or partners that can assist. |  |
| **Damage Assessment and Needs Analysis (DANA)**  **The following are the components of a DANA:**  **Needs**  What is needed to save lives, alleviate suffering, and mitigate negative economic impacts. The gaps in access to goods and services created by the risks on life, health, basic subsistence and security. It defines the level and type of assistance required for the affected population. It also involves identifying which stakeholders and partners can assist with providing goods and services.    **Damage**  Concerns the effects of the disaster. It identifies the magnitude and extent of the disaster and its effects on local populations.  **Therefore, the DANA determines the following:**   * The impact of a disaster or events on a society * The needs for immediate emergency measures to save and sustain the lives of survivors, and * The possibilities for expediting recovery and development. |  |
| **Rapid Assessments**  It is a DANA that is conducted immediately after a disaster (within 24-72 hours). It provides information on needs, possible courses of action and resource requirements. A more detailed assessment will be carried out as the situation changes.  **Benefits:**  The information collected is needed for the development of an action and monitoring plan. The information helps decision-makers to:​  ​   * Choose priorities, objectives and identify intervention alternatives.​ * Determine if outside help is needed.​ * Implement response based on these objectives and alternatives.   The emergency needs assessment must address critical sectors or technical areas of concern. For example, water sources must be assessed, and nutritional status must be evaluated, as well as the condition of roads, and other infrastructure.  When focusing on these priorities, it is important to have a systematic approach—assessments should be planned to ensure that all relief sectors and all likely affected areas are covered.  You can find the DANA forms used by the Red Cross Aruba in the Resources Section of the training webpage. |  |
| **Detailed Assessments**  This is done by people who received specialised training in conducting assessments as the information gathered during a detailed assessment is analysed to make more high-level decisions and develop strategies.  **The Purpose of a Detailed Assessment**   * More realistically describe the needs of the most vulnerable * The forecast sector needs for the next 7-28 days and a projection for 1-3 months. * Define alternatives for reducing immediate risks. * Preparation of the longer-term Plan of Action * Revision of the Emergency Needs and Priority * Detail programming * Gauge local response capacity. * Decide how best to use existing resources for immediate relief. * Seek alternatives to response objectives and intervention |  |
| **Conducting an Assessment**  **Developing a Strategy**   * What type of information do you need? * Who is the target population (the areas and the number of households or individuals)? * Determine the data collection method (interviews, observations – checklist, focus groups, secondary sources, conducting an Initial Damage Assessment (IDA). * Consider the resources that are available (human, timing, and logistics) to conduct the assessment. |  |
| **Reporting**  Know who you are reporting to (CDRT Team Leader, National Society or NDO) and how you will get the information to those persons/organisations.  There should be coordination between the Red Cross and other agencies on the field and ensure there is teamwork and communication of roles and expectations.  Remember CDRTs play a support role to other agencies and must ensure they do no harm to agencies at work, avoid duplication of efforts while ensuring the affected population get assistance.  **When reporting, ensure that you describe the situation:**   * What has happened? * Number of people/households affected: injuries, deaths, and damage to livelihoods. * Who is on the ground responding currently: what are they doing? What resources are available? * What are the gaps: what resources and needed? |  |
| **Key Principles and Tips**  Be mindful of the following:   * Always get consent. * Introduce yourself properly and do not make promises. * Avoid any biases and encourage affected people to explain how they view the situation. * Be respectful at all times. * Try to identify gaps. * Try to collect information that is accurate and reliable. * Be inclusive as different groups and individuals would be affected differently and have different needs.   Remember assistance should be given based on needs. |  |
| **Ongoing Community Monitoring and Surveillance: Recovery Process**  During the recovery phase, the aim is to ensure there are improvements made, where appropriate, of facilities, livelihoods and living conditions of disaster-affected communities, including efforts to reduce disaster risk factors. (ISDR)  **Why Assess Here?**   * To see how people are coping. * How quickly is life returning to normal? * Rebuilding resilience and building back better * Monitoring of ongoing programmes and needs |  |
| **Working With Others**  Working with counterparts is not an option. It is a “must” in order to make things better. A clear and strong correlation exists between the quality.  **Definition of Counterparts:**  It is a relationship constructed by different actors united by motivation and a common vision with the purpose of planning executing cooperative activities according to clearly defined and accepted objectives. |  |

**Additional Notes:**

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| **In-Person Module 7 – CDRTs And Health in Emergencies** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * Learn The Effects of Disasters on Health & Vulnerable Groups​ * Identify Common Diseases in Emergencies​ * Understand CDRT’s Role in Risk Assessment Activities​ * Obtain Information on Preventive measures For Communicable Diseases​ * Understand The Basics of Triage |  |
| **Health**  In recent times we have seen an increase in biological hazards, a prime example of which is the COVID-19 pandemic. CDRTs must therefore understand and prepare for certain epidemic outbreaks in their community.  There is another aspect of health in emergencies, which is the administering of first aid to victims of a disaster. In a disaster, there will be more victims than rescuers and immediate help from first responders may not be available.  Health can be defined as a state of complete physical, psychological, and social well-being and not simply the absence of disease or infirmity.  **Note:** Contact your National Society to become First Aid Certified. |  |
| **Effects Of Disasters on Health**  **Increased communicable and non-communicable diseases & disease epidemics:** Disasters can lead to poor sanitation, contaminated water, and overcrowded shelters — creating conditions where diseases like diarrhoea, respiratory infections, and skin infections can spread quickly. At the same time, people with **chronic conditions** (like diabetes, asthma, or high blood pressure) may not have access to medication or regular care, making their conditions worse.  **Poor Nutrition:** Large scale disasters can lead to a disruption of the food supply — markets may close, transportation may stop, and stored food may spoil or get damaged. This leads to limited access to healthy food  **Lack of proper shelter and protection:** People may lose their homes and life-saving medications which increase the risk of injury or illness.  **Negative impact on mental health:** Living through a disaster can be very traumatic. People may feel fear, anxiety, grief, sadness, or hopelessness. Loss of loved ones, property, or jobs can cause long-term emotional distress. If mental health support is not available, these effects may go untreated.  **Poor access to health care:** Health facilities may be damaged or overwhelmed during a disaster. Roads may be blocked, and electricity or water may not be available. This makes it difficult for people to get medical help, refill prescriptions, or attend regular check-ups, especially in isolated or rural areas |  |
| **What are we Looking For?**  Decision makers need adequate, sufficiently accurate and reliable information at the appropriate time to enable them to make informed decisions – both at strategic and operational levels​.  The following are some important questions to ask before a disaster happens:   * Who is the most affected? * What are some of the health concerns? * Where are the most affected located? * How can they be impacted? |  |
| **Vulnerable Groups**  Disasters can negatively impact the physical and mental health of people in many ways and people within vulnerable groups can be more negatively impacted than others. These people should be identified when developing community plans and include:   * Pregnant And Lactating Women * Children Under the Age of Five * Older Persons * People With Disabilities * People Living with Chronic Diseases Such as Diabetes & HIV/AIDS * Minority Ethnic Groups |  |
| **Risk Factors**  The following are some factors that can exacerbate the impacts of a disaster on health:   * Poor Access to Safe Water & Adequate Food * Overcrowding * Underlying Conditions * Poor Sanitation & Hygiene Practices * Seasonal Changes * Lack Of Access to Treatment * Low Levels of Immunity * Displaced Populations |  |
| **Role of CDRTs in Health Emergencies:**   * Assist with Community Preparedness. * Be aware of outbreaks and contacting relevant health officials. * Assist with the mobilization of CDRT members and volunteers to respond when needed. * Help educate the community. * Evaluation. * Assist with treating life-threatening conditions such as airway obstruction, bleeding, and shock (if first aid trained). |  |
| **Assessing Risk**  **Community Risk Assessment-** Detect signs and symptoms corresponding to human, animal or environmental health risks or events in your community.  **Rapid Assessment** – By allowing for volunteers in communities to report on health situations, we can ensure that the right help is provided, in the right place and the right time.  **Surveillance** – is the systematic detection and reporting of events of public health significance within a community by community.  After some disasters, the ability of the health sector to respond to diseases is overwhelmed. ​In select cases Red Cross volunteers may be called upon to assist local health authorities in collecting data about a specific disease and its spread. ​  ​  Even where Red Cross volunteers do not have a formal surveillance role it is important to report symptoms that you see to relevant field officers. (e.g., many cases of diarrhea in one shelter.)​  ​  All people who report illness should be referred to the nearest health clinic. |  |
| **Non-Communicable Diseases (NCDs)**  NCDs are health conditions which cannot be spread from one person to another, they usually require ongoing treatment. Common types of NCDs include cardiovascular diseases, diabetes, cancer, and chronic lung diseases.  **Impacts of Disaster on Persons with NCDs**  Disasters can lead to the deterioration in health of persons with an NCD as a result of:   * Direct physical injury. * Loss of access to prescribed medication * Lack of water and food can add to physical and psychological stress * Lack of access to health services   **How Can Persons with NCDs Prepare:**   * Include a backup supply of prescribed medication in your disaster kit. * Store appropriate non-perishable foods in your disaster kit. * Include instructions for emergency care in your family emergency plan.   CDRTs can include persons with noncommunicable diseases in the registry of vulnerable persons in the community. This can be done in the CDRT Workbook. |  |
| **Spread Of Communicable Diseases**  Communicable diseases spread from one person to another or from an animal to a person. The spread often happens via airborne viruses or bacteria, but also through blood or other bodily fluids. ​The terms infectious and contagious are also used to describe communicable disease. |  |
| **Human to Human** |  |
| **Animal to Human** |  |
| **Plant to Animal**  Diseases can spread from plants to animals through two ways, either by eating unwashed fruits and vegetables or by touching contaminated fruits then touching your eyes or mouth with your fingers. |  |
| **Air-borne -** This is when germs spread through the air, for example H1N1, measles and tuberculosis.  **Water-borne-** Persons can become sick by ingesting or touching contaminated water, such as gastroenteritis and cholera. Infection with water-borne diseases most often result in diarrhea. The most severe threat posed by diarrhea is dehydration. Diarrheal diseases can be spread easily in overcrowded conditions with poor access to sanitation and safe water and poor hygiene.  **Vector-borne** - A vector is a disease carrying agent, usually an insect or animal and can be a major cause of sickness and death in many disaster situations. The main vectors for disease transmission include mosquitoes, ticks, fleas, and rats.  **Direct Contact** - These types of diseases can be transmitted when an infected person has direct bodily contact with an uninfected person. Contact diseases can also be spread through the contact with an infected person’s environment or personal items. |  |
| **Preventative Measures**  **Proper Sanitation Methods -** Compromised sanitation facilities and lack of clean water supplies create ideal conditions that encourage the spread of water-borne and vector-borne communicable diseases and therefore ensuring proper sanitation measures is crucial after a disaster.  These methods include:   * Safe excreta disposal. * Proper solid waste collection and disposal. * Proper burial of corpses and destruction of animal carcasses. * Proper washing of fruits and vegetables before eating. * Do not eat raw or undercooked meat or eggs. * Eliminate/reduce standing water where mosquitoes are likely to breed.   **Personal Hygiene Methods** - Ensuring your own personal hygiene is another major way to reduce the risk factors that result in disease. |  |
| **Life Threatening Conditions**  Experts agree that over 40 percent of disaster victims could be saved by providing simple medical care. In a medical emergency, airway obstruction, bleeding, and shock are life-threatening conditions (“killers”) that can result in death if not treated immediately. |  |
| **Triage**  When working in a disaster with multiple casualties, the first goal is *Simple Triage and Rapid Treatment* (START). START is a process where victims are classified into one of four categories based on the severity of their injuries. It includes the treatment for life-threatening conditions (airway obstruction, bleeding, and shock) and the treatment for other less urgent conditions. **Please note that this is done by medical professions.**  Triage is a French verb, meaning “to sort.” Victims are evaluated, sorted by immediacy of treatment needed, and set up for immediate or delayed treatment. |  |
| **Performing a Triage Evaluation**   * ***Step 1: Stop, Look, Listen, and Think***: Before you start, stop and size up the situation by looking around and listening. THINK about your safety, capability, and limitations, and decide if you will approach the situation and how. * ***Step 2: Conduct Voice Triage:*** Begin by calling out, “Emergency Response Team. If you can walk, come to the sound of my voice.” If there are survivors who are ambulatory, instruct them to remain at a designated location, and continue with the triage operation. (If rescuers need assistance and there are ambulatory survivors, then these survivors should be asked to provide assistance.) These persons may also provide useful information about the location of the victims. * ***Step 3: Start where you stand and follow a systematic route***: Start with the closest victims and work outward in a systematic fashion. * ***Step 4: Evaluate each victim and tag them:* “Acute”** (immediate assistance) or **“non acute”** (can wait for help).   Remember to evaluate the wounded walking. |  |
| **Establish A Medical Treatment Area**  Select site and set up treatment area as soon as injured victims are confirmed and categorised.  When determining best location(s) for treatment area, consider:   * Safety of rescuers and victims * Should be upwind, uphill and upstream, if possible, for the hazard zones/areas. * Should be accessible by transport vehicles * Should be expandable so you can scale-up if needed * Most effective use of resources |  |
| **Four Treatment Areas**   * “I” for Immediate care * “D” for Delayed care * “M” for Minor injuries/walking wounded * “DEAD” for the morgue  |  |  | | --- | --- | | Immediate “I” | Victim has life-threatening injuries (airway, bleeding, or shock) | | Delayed “D” | Injuries do not jeopardise victim’s life: treatment can be delayed | | Minor “M” | Walking wounded and generally ambulatory | | Dead | No respiration after two attempts to open airway | |  |
| **Process For Managing Mass Casualty Event**   * Victims are evaluated. * Victims are sorted by urgency of treatment needed. * Victims are set up for immediate or delayed treatment. |  |
| **What To Do When**   |  |  | | --- | --- | | **Level Of Damage** | **Actions To Take** | | Light Dame | Assess in place | | Moderate Damage | Rescue victims and move to collection point first  Triage here  Move to treatment area | | Heavy Damage | Do not go in  Conduct voice triage only | |  |
| **Triage Pitfalls**  **No team plan, organization, or goal:** When there is no clear plan, team structure, or shared understanding of the goal, triage becomes chaotic. Responders may work individually instead of together, leading to confusion, duplicated efforts, or missed patients. A clear plan ensures patients are quickly assessed, prioritized, and moved through the system efficiently.  **Indecisive leadership:** Triage requires fast decision-making. If the team leader is unsure or hesitant, it causes delays in assigning roles or categorizing patients. This can lead to life-threatening delays for those who need urgent care. Strong, confident leadership is key to effective triage.  **Too much focus on one injury:** Responders sometimes focus too long on one patient — especially if the injury is dramatic or emotional. But triage is about quickly identifying who needs help first, not treating every injury on the spot. Over-focusing on one case can cause other critical patients to be overlooked.  **Treatment (rather than triage) performed:** Triage is about sorting patients by priority, not giving full treatment at the scene. If responders begin treating patients instead of tagging and moving on, it slows down the process. This can result in delayed care for others who are in greater danger and reduce the overall effectiveness of the response. |  |
| **Contact your National Society to learn more about Basic First Aid and to become certified.** |  |

**Additional Notes:**

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| **In-Person Module 8 – Shelter Management** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * Understand What is a Shelter.​ * Learn the Types of Shelters.​ * Learn about the Basic Considerations that Should be Provided by a Shelter.​ * Learn about Opening an Alternative Shelter or Pre-activation Activities. * Learn the Standards for Shelter Capacity.​ * Learn the Rules of a Shelter.​ * Learn about the Challenges Faced by Shelters.​ * Learn how to Close a Shelter or De-activate a Shelter. |  |
| **Shelter Management**  The national disaster office is usually responsible for the management of shelters. The NDO trains and appoints shelter managers to designated public buildings. However, communities may be cut off from access to the designated shelter and will have to improvise set up an alternate shelter in their neighbourhood.  **What is a Shelter?**  A shelter is a secure habitable covered living space providing privacy and dignity for those within it. Shelters should provide more than just relief. It should also provide protection from climate, ensure privacy and dignity and be a safe place. Shelters should also ensure resistance to ill health and spread of diseases, support family and community life after an emergency and provide communal coping strategies. |  |
| **Types of Shelters**  There are two types of shelters:   * **Single host shelters:** At the homes of relatives, friends and neighbours. * **Community or Collective shelter:** schools, churches, public buildings, camp sites, others.   **Single Host Shelters**  These are provided by family and friend of those affected, as well as in communities where there are persons who are able to offer their homes to shelter individuals/families. It is important that CDRTs take these into consideration the situation when evacuations are imposed by a sudden disaster or where evacuation is planned.  **Advantages:**   * Living needs are available. * There are fewer organizational problems and health concerns. * It can be implemented in a timely manner.   **Disadvantages:**   * Generally, these are not identified during the evaluation of damage. * They can be overlooked for assistance. * The do not generate as much social pressure. It alters the lifestyle of the host family.   Shelterees should return to their homes and normal daily lives as soon as the immediate threat has passed, and authorities say it is safe to do so.  **Community or Collective Shelter**  This is offered in permanent facilities like community centers, schools, religious buildings, stadiums, public or private buildings, in buildings like shops provided to groups of families and individuals with damaged homes.  **Advantages**   * Centrally located within the community. * In some cases, it does not require much re-organization. * It is a focal point for aid delivery aid delivery.   **Disadvantages**   * May not always be ideal as an emergency shelter. * The building and its surroundings may be dangerous. * Can result in major overcrowding and exert social pressure. * If the number of persons in the facility is large, there is usually limited privacy. * Occupation of the building as a shelter can result in damage to the facility and its resources and delay the restoration of this service. |  |
| **All Shelters Should**   * **Provide Relief:** Focus is on saving lives, include rapid shelters such as tents and shelter kits. * **Provide More Than Relief:** Provide protection from climate, preserve dignity and provide safety and security * **Shelters Should Also:** Enhance resistance to ill health and spread of disease, support family and community life during an emergency and communal coping strategies |  |
| **Role of CDRTs in Shelter Management**   * Encourage community members to learn the location of the shelters. ​ * Educate the community about putting together a “grab and go” bag that can be taken with them to a shelter.​ * Educate community members about the rules and regulations that should be followed at a shelter.​ * Identify high risk families/individuals and review this information with them.​ * Maintain periodic contact with other CDRT members to review roles and responsibilities.   **Before a disaster:** As a CDRT member the aim is to reduce the shelter risk in your community through on-going improvements in construction and infrastructure that will reduce your community’s susceptibility to such risk.  **After a disaster**: Shelter management should always seek to empower those affected to rebuild not just their homes (building) but their livelihoods and their community as well. Partnering with the affected populations as well as other key partners is the best way to achieve this.  **Note:** On the islands, Shelter Management falls under the purview of the Government but the Red Cross has been supporting the Government with this function. |  |
| **Opening a Shelter**  In impromptu circumstances CDRTs may be responsible for opening a shelter to a community. Once permission is granted to open an alternative shelter the following should be done:​   * Inspect the building/shelter- check that essential facilities and equipment are in place and functioning (running water, toilets, communication system, electricity). Make note of any equipment that might be needed and share this with response agencies.​ * Determine and allocate spaces for shelterees- how many persons could be accommodated at the shelter. Sphere guidelines outlining space requirements will be discussed later in the presentation. ​ * Coordinate with state agencies for obtaining, transporting, receiving and storing supplies at the shelter. Proper inventory and careful checking for expiration dates and defects in canned food items are very necessary. * Support team mobilization.​ Periodic contact with support team, especially before the hurricane season, is very necessary to update them on their roles. * Establish & maintain contact with relevant response agencies and interest groups. It is extremely important to be in constant contact with the appropriate authorities such as NGO's, PVO's, CSM, the Red Cross, EOC and other relevant government departments and agencies.​ * Set up meetings to coordinate tasks with other CDRT members/volunteers.​ Meetings are necessary to coordinate task. For example, prepare lists of potentially vulnerable families for the shelter; draw up rules and regulations for shelterees; prepare activities and equipment for the shelter and enlist the support of the shelterees in managing the shelter. * Obtain all necessary forms.​ * Develop a list of shelterees needs and priorities. * Set up meetings to coordinate tasks- Draft rules and regulations for shelterees; prepare activities and equipment for the shelter and enlist the support of the shelterees in managing the shelter.​ * Meet with shelterees to abreast them of the rules of the shelter so they will know what to expect. |  |
| **Key Considerations**   * Food & Nutrition * Health​ * Water & Sanitation​ * Creating A Safe Environment for Children & Other Vulnerable Groups​ * Security​ * Physical Space​ * Accessibility By Persons with Disabilities​ * Access to Psychosocial Support |  |
| **Sphere Standards for Shelter Capacity**  Shelters are places of refuge and must not endanger any of the occupants. Care must be taken to minimize overcrowding and occurrences of unhealthy environments. The following guidelines are provided to ensure basic levels of comfort and safety.  **Sleeping Accommodation**   * The occupancy load for the building and each floor should be obtained and must never be exceeded. * Minimum floor space of 3.5 sq. metres (110 sq. ft.) per person. * Minimum distance of 75 cm (2.5 ft.) between beds. The number of persons to be supported by the shelter must be determined from the occupancy load and the minimum floor space. * Minimum of 1 blanket and bedding (floormat, mattress cot etc.) per person.   **Water Requirements**   * 2.5 – 3 litres per person per day for drinking. * 2- 6 litres per person per day for hygiene practices. * Minimum of 15 litres per person per day.   **Food Requirements**   * Designate a proper staging and storage area for meals. * If food is being cooked on site, ensure there is a clean kitchen or designate a suitable area where meals can be prepared. * Consider dietary restrictions.   **Washing Facilities**   * Privies for male and female must be separate. * 1 toilet per 20 shelterees with separate toilets for males and females. * Toilets should be at a maximum distance of 50 m (150 ft.) from building. * One (1) hand wash basin per 10 persons. * One (1) shower per 30 persons. * Local public health authority requirements may be more stringent and would therefore supersede these guidelines. * Ensure accessibility of washing facilities to persons with disabilities.   **Health and Sanitation**   * Access to hygiene products including menstrual and incontinence products. * Access to mosquito nets where needed. * Establish a private area where shelterees can access psychosocial and mental health support and medical services. * Access to hand sanitizer and face masks. * Ensure all COVID-19 health protocols are followed. |  |
| **Shelter Rules and Needs**  All existing laws of the country remain enforced at shelters.  The following are some additional rules that should be obeyed by shelterees:  **Fire Safety**   * No dangerous weapons, liquids, or other safety hazards shall be kept by shelterees. * No smoking will be permitted inside the shelter. The rules on this may differ as some shelters do not permit smoking at all. * No alcoholic beverages will be consumed within the shelter area. * No drugs are allowed.   **Health and Sanitation**   * Shelter floors and yard area shall be kept clean and swept free of waste materials. * Sleeping areas shall be kept clean and tidy at all times. * Dispose of solid waste containers in designated areas and ensure proper disposal of these often. * Ensure water is available to maintain hygiene (bathing, laundering and toilet duties, etc.). * Bathroom and washing facilities should be kept clean.   **Other Rules**  ​   * No livestock and pets (some shelters may allow pets to be kept outside).​ * No loud music.​ * No boisterous or discourteous behaviour.​ * Shelterees leaving the shelter for any period of time must sign out and in at the registration area. * Do not leave children unattended and keep track of children. * Remember the existing laws of the land remain enforced at shelters. |  |
| **Challenges Faced in Shelters**   * **Privacy** – Families, women and girls need privacy. Arrangements should be made to offer privacy and protection to these persons. Some uninhibited shelterees have engaged in sexual acts in the presence of other shelterees therefore codes of conduct and enforcement arrangements are necessary in shelters. * **Reluctance To Leave** – Shelterees who benefit from public and private goodwill are sometimes reluctant to leave but arrangements/encouragement for closing the shelters are necessary. * **Fear Of Discrimination** - Migrants often live in marginal areas prone to hazard impact and will need collective shelters. Unfortunately, they may be reluctant to use these facilities due to discrimination, abuse, or fear of deportation. In an emergency the most vulnerable must be protected. * **No Shelter Recovery Policy for The Landless** - National policies on shelter and recovery often omit the landless and socially outcast. Arrangements for these shelterees are slow in coming. * **Indigent & Poor Have Little Resources** - National shelter policy often requires the shelterees to bring resources to the location. The indigent & poor have few resources to bring to the shelter. Some prefer to avoid the safety of shelter rather than face the humiliation arriving without resources. * **Security** – Special arrangements are needed to protect those vulnerable to discrimination, abuse, and harassment. It is important that shelters provide a safe space for children and vulnerable groups. Security should also be provided against the presence of illegal drugs and weapons. * **Water & Sanitation** – May buildings used as shelters are not usually equipped for occupation for more than a day. Special arrangements for water and sanitation are required for the operation of shelters. * **Food** - Shelterees may often not have food for the duration and this need arranged. Long-term sheltering, for example in the case of a volcanic eruption, requires special arrangements to give privacy to families and encourage self-sufficiency. |  |
| **Reporting Shelter Activities**  A shelter log is maintained by the shelter manager to document problems, solutions, and other important information throughout the shelter operation. CDRTs can discuss issues with the shelter manager and contribute to the shelter log.​   * **​**Support the shelter manager with preparing and providing statistics on the number of shelter residents, as required by the government and aid agencies. ​ * Requirements for reporting population could change over the course of a relief operation. |  |
| **Closing a Shelter: Deactivation**  Successful shelters create a sense of calm, security, routine and predictability. Closing the shelter may cause some negative feelings as it disrupts the routine and predictability residents have come to expect. Accurate, complete and consistent communication with shelter volunteers, residents and the community will mitigate the negative impacts of closing a shelter.  Prior to closing the shelter, keep the following items in mind:   * Communicate all plans with the government, aid agencies and community partners well in advance of the actual closing. * Identify other shelter facilities in case the current shelter has to be closed e.g. schools. * Communicate the confirmed shelter closing date to shelter residents. Only give out confirmed statements. Do not communicate speculative information, such as planning information.   **Closing A Shelter**  **Evacuation of Shelter Completed**   * Rehabilitation arrangements completed for shelterees.​ * Necessary transportation arranged​ * Shelterees signed out.   **Administrative Details Completed**   * Volunteer staff debriefed.​ * All forms completed (Registrations, requisitions, inventories).​ * Activity log completed. ​ * Final reports written.   **Shelter Building Cleaned and Restored**   * Remaining supplies and equipment returned​ * Shelter inspected by the facility manager.​ * Damage to structure repaired/reported​. * Shelter cleaned. |  |

**Additional Notes**

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| **In-Person Module 9 – Communications** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * Understand communication​. * How to communicate effectively.​ * Understand Community Engagement and Accountability (CEA). ​ * Assess barriers to effective communication​. * Learn to communicate in times of disaster​. |  |
| **Communication**  A process by which information is exchanged between individuals through a common system of symbols, signs, or behaviour. In its simplest form, it can be defined as an exchange of information. |  |
| **Communicating Appropriately**  Good communication skills and the transfer of accurate and reliable information is important in every phase of disaster management.  **CDRTs must consider:**   * Preferred method of communicating in the community. * Timeliness of communicating (how to get information to the right people fast). * Vulnerable Groups. * Appropriate communication tools. |  |
| **Community Engagement and Accountability (CEA)**  It is important to ensure communication and participation of community members in any programmes or operations being done. It is important to engage communities to address unhealthy and unsafe practices and to encourage them to speak out about issues that affect them and influence decision makers to implement positive change.  CEA is an approach used by the Red Cross to ensure that communities are at the centre of the work being done by integrating communication and participation throughout programme cycles and operations.  Visit the IFRC Community Engagement and Accountability Hub for more information on CEA. |  |
| **Importance of CEA**   * Leads to better, more effective programming. * Improves acceptance and trust. * Feedback and complaints are useful for improving systems. * Help save lives. * Empower people and build community resilience. * Supports positive behavior and social change. * Recognises the community as experts and partners. * Supports the NS to fulfil their auxiliary role. * Contributes to “do no harm” programming. * Helps to manage community expectations. |  |
| **Communicating Before a Disaster**  It is important to engage with communities before a disaster strikes to help them become better prepared and more resilient. CDRTs can help communities by increasing their knowledge of the hazards that can affect them and what they can do to better protect their properties, livelihoods and prevent loss of lives.  CDRTs can also guide discussions with communities to help them identify their risks, vulnerabilities and develop community plans that can make them better prepared.  Keep the following in mind when engaging with the community:  Ensure Community Participation and Feedback  When engaging with communities share honest, timely and accessible information which meet their needs and are relevant to them.   * **Ensure representation from all parties** in the community including men and women, persons with disabilities and the elderly and ensure that all are treated fairly. Also Promote open discussions and establish a feedback system where community members can voice their opinions. * **Encourage Behaviour and Social Change Communication**. Encourage open communication that allows insight into the perceptions and behaviours of different groups. This can help CDRTs understand how to approach the communities and what messages to use that will encourage communities to adopt safer and healthier practices. * **Use Community-Based Information to Help with Advocacy.** Community members are experts on the challenges that affect them and their solutions, but they can find it difficult to make their voices heard by the relevant authorities or organizations. CDRTs can help communities to understand how to use their knowledge and information to speak out about the issues that affect them and make their voices heard to influence decision-makers to take action. |  |
| **Communicating During a Disaster**  CDRTs can help empower the community to provide information for community early warning to a hazard, give field updates to assist agencies in coordinating proper response and truly represent the needs of the community which can then be filtered upward and communicated to National Disaster Offices, first responder agencies, who can then coordinate for regional assistance and resources if required.  When communicating in disasters, we must ensure we consider these things when sending messages:   * Provide timely, accurate, lifesaving information to the affected population using local media. * Provide information intended to save lives and prevent further challenges. * Provide information on what to do to help protect their homes and families. * Provide information on where to get assistance. * Provide information regarding their legal rights and who is in charge. |  |
| **Communication Barriers**  Be aware of the following barriers:   * **Linguistic and cultural diversity**. The Caribbean population speaks many languages (English, Spanish, French, Creole, Dutch, etc.) and represents a range of community and societal structures. * **Exposure to a range of hazards.** Many of the stakeholders expressed concern that while disaster risk reduction information tends to focus on a dominant hazard, namely, hurricanes, the region is exposed to a wide range of hazards, including tsunamis, floods, earthquakes, volcanic eruptions, and landslides. * **Small and relatively undiversified economies**. The Caribbean economy is highly dependent on coastal resources, for import of critical staples and for economic outputs, such as the tourism and shipping industries. The lack of economic and capital diversification magnifies the impact of disasters on smaller economies with fewer resources to absorb the consequences of hazards and finance the recovery from disaster. * **Variable access to, and use of ICT technologies**. Some areas of the Caribbean rely on Internet- based resources, mobile telephony, social media, and the like to communicate DRR information. Other areas lack access to Internet connectivity and must communicate information by other means. * **Variations in demography** strongly influence the use of technology, with youth more likely to engage online and older adults less likely to do so, even when connectivity is available. Roughly two-thirds of the region’s population is under the age of thirty. |  |
| **Developing a CDRT Communications Plan**  When it comes to disasters, obtaining and sharing accurate information can help save lives, prevent further challenges, and protect homes and livelihoods. It is important to develop a simple communication plan which outlines:   * How CDRTs are activated. * How CDRTs communicate with each other. * Who and how CDRTs can communicate with the National Society. * Who and how CDRTs can communicate with the National Disaster Office. * Identify other relevant stakeholders and identify who, how and when these stakeholders should be contacted.   **Note:** You can use the CDRT Workbook to guide this process. |  |
| **Effective Communication Tips**   * Be simple. * Clearly communicate the threat. * Provide a call to action. * Be accessible. * Reach out to as many people as possible. * Never cause harm or create a panic. * Coordinate with others. |  |
| **Modes of Communication**  The following are some of the methods through which disaster messages can be shared and received:   * **Runner:** Individuals carrying messages from one person to another in a different location. * **Landline Telephones:** Analog and digital phones connected to physical lines. * **Cell Phones:** Digital phones connected by signal transmitted by cellular phone towers. * **Two-way Radios**: Handheld, mobile, or base-station radios used for communicating on radio frequencies which may require a licence from your local communications authority. * **Electronic:** Computer-based communications that may be transmitted over the internet or with runners via USB drives. |  |
| **Working With Others**  When working with other agencies or groups:   * Be aware of information being circulated it can become contradictory and disruptive causing isolation and fear among the affected communities. * Find out if there is an existing CEA group and join. This allows for sharing of information and improved planning on needs and state of local media and communications. * Coordinate with other departments in your NS and be aware of the information shared as this will provide for better CEA involvement. |  |

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| **In-Person Module 10 – Two Way Radios** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * Understand what a two-way radio is * Understand the basics of using a two-way radio |  |
| **Two-Way Radios**  Relaying information using traditional modes of communication such as via landline phones, cell phones or using the internet may not be possible after a disaster. When CDRTs are called out to assist, they might be asked to use a two-way radio.  It is a communications mode that does not rely on external power supplies or physical communications infrastructure. This makes two-way radios a good communications mode during an emergency.  Two-way radios include a variety of devices and are often defined by the frequencies (or channels) they are designed to operate on. Radios capable of more powerful transmissions typically require a license.  **How They Work**  Two-way radios operate by transmitting and receiving on certain frequencies. No one owns or has exclusive rights to a frequency, but the Federation Communications Commissions determines who can use them and when.  On radios, frequencies are typically divided into several discrete channels. Since only one person can speak on a channel at a time, more channel availability means that more conversations can happen in the area. Each team istypically assigned a channel to use as part of the communications plan. |  |
| **Terms You Should Know**  **Frequency:** This is the basic part of how radios work. Radios send and receive invisible waves called electromagnetic waves, which move at different speeds (frequencies). When you tune a radio to a certain frequency, it can pick up or send out signals on that channel.  **Channel:** This a pre-programmed Frequency on a radio device that allows for rapid switching to pre-programmed networks.  **Network:** A defined use of a given Frequency that is used by a set of Call-signs to communicate with one and other for a designated purpose.  **Call-Sign:** A Call-sign is a keyword designed to uniquely identify radio operators/Base Stations/Institutions e.g., Papa 1.  Call-signs also provide increased security in the event that communications are compromised as they mask the identity or capabilities of an element.  **Termination:** The Termination is the ending word of a transmission. You should never use ‘Over’ and ‘Out’ together.  “Over” signals that this transmission has ended but a response or acknowledgment is expected to the communication.  “Out” signals that the transmission has ended AND that no further response is expected. |  |
| **Tips on Using a Two-Way Radio**   * Select a channel.​ * Listen for “traffic” first to see if the channel is clear.​ * If the channel is clear press the Push-to-talk button to speak.​ * Speak across the radio microphone rather than directly into it.​ * Keep the antenna in a vertical position when talking.​ * Release the push-to-talk button when done speaking. * Keep your messages short and to the point. |  |
| **Phonetic Alphabet**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | A​ | Alfa​ | J​ | Juliet​ | S​ | Sierra​ | | B​ | Bravo​ | K​ | Kilo​ | T​ | Tango​ | | C​ | Charlie​ | L​ | Lima​ | U​ | Uniform​ | | D​ | Delta​ | M​ | Mike​ | V​ | Victor​ | | E​ | Echo​ | N​ | November​ | W​ | Whiskey​ | | F​ | Foxtrot​ | O​ | Oscar​ | X​ | X ray​ | | G​ | Golf​ | P​ | Papa​ | Y​ | Yankee​ | | H​ | Hotel​ | Q​ | Quebec​ | Z​ | Zulu​ | | I​ | India​ | R​ | Romeo​ | ​ | ​ | |  |

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| **In-Person Module 11 – CDRTs & Incident Management** | |
| **CONTENT** | **NOTES** |
| **Objectives**   * Understand the basics of Incident Management * Understand the principles of tactical and strategic incident management * Identify 5 major management functions * Identify the different roles and functions in ICS * Understand the principle of Span of Control * Identify the facilities used in ICS * Practice setting up a sample scene control layout |  |
| **What Is Incident Command Systems?**  The Incident Command System (ICS) is a standardised, organised structure used to manage emergencies and disasters of any size. It helps different agencies and teams work together smoothly by clearly defining roles, responsibilities, and communication procedures.  **Therefore, it is:**   * Standardized, on-scene, all-hazard incident management concept. * Allows its users to adopt an integrated organizational structure. * Has considerable internal flexibility. * A proven management system based on successful business practices. * The result of decades of lessons learned in the organization and management of emergency incidents in the US.   **Some of the key features are:**   * Clear roles and responsibilities: Everyone knows who is in charge and what their role is. * Structured communication: Team follows a chain of command and share information clearly. * Flexible and scalable: Can be used for small incidents (house fire) or large disasters (hurricane or earthquake) * Allows for smooth coordination between teams: Helps the national disaster office, the red cross, police, fire, health, and other organisations work as one team. |  |
| **Weaknesses Addressed By ICS**  **Lack of accountability, including unclear chain of command and supervision:** In many emergency situations, it may not always be clear who is in charge or who reports to whom. This can lead to confusion, delays, and unsafe actions. Therefore, the ICS is used to establish a clear, structured chain of command. Every responder knows who they report to and the roles and responsibilities of everyone.  **Poor communication, including system and terminology problems:** agencies may use different radios, jargon, or reporting styles. This creates confusion and slows response. With the ICS, everyone speaks the same operational language, so that information can be easily shared among different agencies.  **Lack of an orderly, systematic planning process:** Without a clear plan, teams may act randomly or duplicate efforts. ICS includes a step-by-step planning cycle that ensures that goals are clear, resources are used effectively, activities are coordinated, and progress is regularly reviewed and adjusted.  **No common, flexible, predesigned management structure:** Each disaster may have a different setup, leading to confusion and inefficiency. ICS provides a modular and flexible structure that can be adjusted to fit any size or type of incident (from small fire to major hurricane) and scale up or down based on the situation’s needs.  **No predefined methods to integrate interagency requirements into the management structure and planning process:** Different agencies (fire, police, Red Cross, etc.) often work separately, causing duplication or gaps. ICS offers a unified command and joint planning model where all agencies work under one coordinated structure and resources, roles, and information are shared effectively. |  |
| **What Is ICS Designed to Do**   * Meet the needs of incidents of any kind or size. * Allow personnel from a variety of agencies to meld rapidly into a common management structure. * Provide logistical and administrative support to operational staff. * Be cost effective by avoiding duplication of efforts. * ICS has been tested in more than 30 years of emergency and non-emergency applications, by all levels of government and in the private sector in the US. |  |
| **ICS Features**  **ICS Organisation:** The ICS has a clear and flexible organizational structure that is used during emergencies. It is built around five key functional areas: Command, Operations, Planning, Logistics and Finance/Administration.  **Common Responsibilities:** All ICS personnel share a basic set of responsibilities which includes using clear and consistent communication, following the chain of command, completing assigned tasks and reporting back as well as ensuring personal and team safety.  **Incident Action Plan:** An IAP is a written or verbal plan that outlines the incident objectives, operational strategies, resources and assignments, safety considerations and communication protocols. The IAP ensures that all team members are aligned and working toward the same goals. It can be updated daily or as the situation changes.  **Incident Facilities:** These are physical locations set up to support emergency response operations. They can include:   * **Incident Command Post (ICP):** Central hub for command staff and decision-making. * **Staging Areas:** Where personnel and equipment wait for deployment. * **Base:** Primary location for logistics and administration support. * **Camps:** Where personnel can rest, eat, or receive care. * **Helibase/Helispots:** For helicopter operations.   These facilities help organize response efforts, reduce chaos, and ensure that resources are ready when and where they’re needed.  **Span of Control:** This refers to the number of people or units one supervisor can effectively manage. In ICS, the ideal span of control is 1 supervisor to 3–7 personnel, with 5 being the optimal.  It is important because it keeps things manageable and prevents information overload, supports clear communication and promotes effective supervision and decision-making. |  |
| **Five Major Management Sections**  **Incident Command:** This is the central leadership role in the ICS structure. The Incident Commander (IC) is responsible for overall management of the incident.  **Operations Section:** This section is responsible for directly managing all tactical response operations. It is the “boots on the ground” function of ICS. Key responsibilities include:   * Develop and manage the Operations Section. * Develops and implements strategies and tactics. * Work very closely with other members of the Command and General Staff to coordinate tactical activities.   **Planning Section:** This section focuses on information gathering, analysis, and future planning for the incident. Key responsibilities include:   * Gathers and analyzes information. * Gathers, analyzes, and disseminates intelligence and information. * Manages the planning process. * Compiles and develops the Incident Action Plan. * Manages the activities of Technical Specialists. * Works closely with the Incident Commander and General Staff.   **Logistics Section:** This section provides support and resources to all other parts of the response operation. Key responsibilities include:   * Provides resources and services to support the incident. * Develops portions of the IAP. * Contracts for goods and services.   **Finance/Administration Section:** Handles the financial, legal, and administrative aspects of the incident. Key responsibilities include:   * Negotiate contracts. * Time keeping for personnel and equipment. * Documenting and processing claims. * Tracking costs. |  |
| **ICS Organisational Components**  **Divisions:** Divide incident geographically, led by a supervisor.  **Groups:** Describe functional areas of operation, led by a supervisor.  Branches: Used when the number of Divisions or Groups exceeds the span of control and can be either geographical or functional, led by a director.  **Task Forces:** Mixed resources with common communications reporting to a Leader.  **Strike Teams**: A set number of resources of the same kind and type with common communications reporting to a Leader.  **Single Resources:** Individuals, a piece of equipment and its personnel complement, or a crew or team of individuals. |  |
| **Role Of the Incident Commander**   * Has overall responsibility for managing the incident, sets objectives and priorities. * Must be fully briefed and should have a written delegation of authority. * Personnel assigned by the Incident. * Commander has the delegated authority of their assigned positions. * Only position that is always filled and may appoint command staff.   Strong leadership is crucial for clear direction, quick decision-making, and maintaining order in stressful or chaotic situations. |  |
| **Expanding The Organisation** |  |
| **Example Of the Sint Maarten Organisational Structure** |  |
| **Command Staff**  **Public Information Officer:**   * Advise the Incident Commander on information dissemination and media relations. * Serve as the primary contact for anyone who wants information. * Serve external audience and internal audience. * Obtain information from the Planning Section. * Coordinate with other public information staff. * Obtain information from the community, the media, and others.   **Safety Officer**   * Ensures responder safety. * Advises Incident Command on safety issues. * Minimizes employee risk.   **Liaison Officer**   * Gathers information about support agencies. * Coordinates for agencies not in command structure. * Provides briefings and answers questions**.** |  |
| **Communications With ICS**  The ability to communicate within the ICS is critical. The following are tips for easy communication:   * Use standard, common terminology. * Avoid jargon. * Use standard ICS position titles and facility names. * Develop a communications plan and protocols specific to the incident. * Determine flow path for communications.   Communications Discipline   * Observe strict radio/telephone procedures. * Use plain English in all communications. * Limit radio and telephone traffic to essential information only. * Follow procedures for secure communications as required. |  |
| **Roles And Authorities of the ICS**  **Review assignment:** Understand your mission clearly: what is expected of you and your team. Confirm your role, team composition, and responsibilities. Clarify the geographic area, timeline, and boundaries of your assignment.  **Establish A Clear Understanding of Your Decision-Making Authority:** Know what decisions you can make independently, and which require approval from supervisors or partner agencies. Be clear on your scope of authority — for example, can you assign tasks, authorize resource use, or speak to the media? Avoid confusion or duplication by communicating your role to other teams.  **Determine Procedures for Contacting Your Headquarters or Home Office:** Know who your main contact person is within your organization. Establish regular check-in times and preferred communication methods (radio, email, satellite phone). Understand how to escalate issues or request additional resources if needed.  **Handover Protocol from the Red Cross to the Government:** Plan for a structured transition of responsibilities from Red Cross to local or national government agencies when the time comes. Document ongoing activities, outstanding needs, and partner contacts. Ensure transparency and continuity so no critical gaps are left during the handover.  **Identifying Purchasing Authority and Procedures:** Clarify what you are authorized to purchase or procure, and up to what amount. Follow financial accountability procedures: keep receipts, record purchases, and use approved vendors when possible. Understand the emergency procurement protocols specific to your organization and the ICS context.  **Determine How Food and Lodging Will Be Provided:** Know whether your team will be self-sufficient or rely on host agencies or shelters for accommodation and meals. Identify meal arrangements and safety protocols (e.g., dietary restrictions, water quality). Arrange for secure, safe lodging that aligns with the safety needs of your deployment. |  |
| **Check-In At the Incident**  **Ensure personnel Accountability:** Check-in helps incident managers know who is on-site, their roles, and their status. This accountability prevents confusion or duplication of tasks, ensures everyone is safely tracked and supports an organized response structure.  **Track Resources:** This allows incident managers to track how many people are available, know what skills and equipment are present and ensure resources are not overcommitted or underutilized.  **Prepare Personnel for Assignments and Reassignments:** This allows responders to receive briefings on the current situation, safety updates, communication procedures, and incident maps.  **Locate Personnel in Case of an Emergency:** During an emergency managers need to know exactly who is in the field and where. Check-in records allow fast headcounts and enable rescue coordination if needed.  **Establish Personnel Time Records and Payroll:** For volunteers or deployed staff check-in marks the official start time of duty. It ensures accurate tracking for payroll, compensation, or reimbursements. It also helps maintain legal and insurance documentation.  **Plan for Releasing Personnel:** Knowing when and where personnel have checked in helps plan their rotation or release ensures staff do not work beyond safe limits. Allows relief staff to be prepared and prevents unexpected shortages during transitions.  **Organise The Demobilisation Process:** Demobilization is just as important as mobilization. Check-in data allows leaders to coordinate an orderly exit of teams, return borrowed equipment and complete final reports and evaluations. |  |
| **Initial Incident Briefing**  Briefings received and given should:   * Situation assessment. * Specific job responsibilities. * Coworkers. * Work area. * Eating and sleeping arrangements. * Instructions for obtaining additional supplies, services, and personnel. * Operational periods/work shifts. * Required safety procedures and PPE. |  |
| **Incident Record Keeping**  Keeping a proper record is crucial in times of disasters. These records will be shared with other first responder agencies. The following are tips when it comes to keeping a proper record:   * Print or type all entries. * Enter dates by month/day/year format. * Enter date and time on all forms and records. Use local time. * Fill in all blanks. Use N/A as appropriate. * Use military 24-hour time. * Section Chiefs and above should assign a log keeper (scribe). |  |
| **Incident Demobilisation**  Incident demobilisation refers to the release and return of resources that are no longer required and is a planned process. It comprises of the following:   * Complete work assignments. * Brief replacements, subordinates, and supervisor. * Follow check-out procedures. * Provide follow-up contact information. * Return incident-issued equipment. * Complete post-incident reports, critiques, evaluations, and medical follow-up. * Resolve payment and/or payroll issues. |  |
| **Final Day Simulation Exercise roles** | |
| **CDRT Leader/Incident Commander**  **Description:** This person is in charge of leading and coordinating the response. This person is also responsible for sharing information (injects) with the rest of the team and assign the responsibilities of other team members. This person must also keep the National Society updated on new developments and actions being taken by the team members.  **Skills:** Must have strong leadership, communication and decision-making skills. Must be able to work well under pressure. Must have strong technical knowledge of the CDRT materials and understand of what is required to coordinate a response. |  |
| **Data Collectors**  **Description:** These persons are tasked with conducting Damage Assessments and Needs Analysis (DANA) and identifying the type of assistance that is needed by community members. These persons must also keep the CDRT Leader/Incident Commander updated on immediate assistance needed in the field.  **Skills:** Must have strong leadership, communication and decision-making skills. Must be able to work well under pressure. Must have strong technical knowledge of the CDRT materials and understand of what is required to coordinate a response. |  |
| **Safety Personnel**  **Description:** This person is in charge of assessing the safety levels of new developments and advising the CDRT Leader/Incident Commander is it is safe to dispatch team members in the field. This person will assist the CDRT leader/Incident Commander with coordinating medical support.  **Skills:** Must be first aid trained and have good leadership, communication and coordination skills. Must be adaptable and have strong decision-making skills. |  |
| **Community Liaison Personnel**  **Description:** This person is in charge of communicating with communities and should lead the community assessments being conducted. This person is charged with ensuring that teams dispatched in the field keep the CDRT Leader/Incident Commander updated on developments and activities being taken.  **Skills**: Must have strong verbal and non-verbal communication skills. Must have some stronger leadership skills and experience with collecting data. Must be adaptable and have strong decision-making skills. |  |
| **Shelter Manager**  **Description:** This person is in charge of opening and leading the team that sets up and manages the shelter. This person must keep the CDRT Leader/Incident Commander of any developments and assistance needed at the shelter.  **Skills:** Must have strong technical knowledge of shelter management and setting up a shelter. Must have strong leadership, coordination and decision-making skills. |  |
| **Shelter Personnel**  **Description**: This person assists the shelter manager with setting up and managing the shelter and liaising with the shelterees.  **Skills:** Must have a good understanding of shelter management. Must have good communication skills and be adaptable. |  |
| **First Aid Medical Team**  **Description:** These persons are tasked with treating injured persons in the field and keeping the Safety Personnel informed of new developments and field activities, including the number of persons injured and treated).  **Skills:** Must be first aid trained and have strong technical knowledge of identifying and treating various injuries. Must be knowledgeable about safely moving victims from one place to another. |  |

**Additional Notes:**