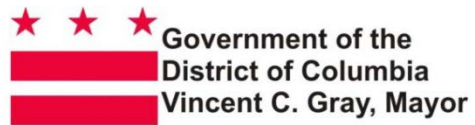


**District of Columbia**  
**Family Assistance Center (FAC) Plan**



## **Overview**

In a mass fatality event, the District of Columbia, as part of its overall response operations, shall establish a Family Assistance Center (FAC) at a pre-designated location. An FAC is essentially a hub for information collection, sharing, and human services regarding the missing or deceased in a public health emergency. This exchange of information will be between officials staffing the center and the family and friends of loved ones who have been affected by the event. This is a multi-agency operation coordinated by the DC Department of Human Services and supported by a number of other DC agencies and a cadre of volunteers that will be called upon to staff the center. The goal of the center is to collect antemortem information from family and friends of the missing and deceased; in order and reunite them, whether living or deceased. Once information is collected and reunification takes place, the FAC shall provide psychological first aid and other mental health services for the grieving friends and family of the deceased, if requested. The FAC is a caring environment to support family and friends of the deceased.

## **Purpose**

This plan serves as an appendix to the DOH Public Health Fatality Management Plan. The District Department of Human Services (DHS), as ESF-6 lead, will establish and be the lead for Family Assistance Centers (FAC). DOH, along with other District agencies and community partners will support the services being provided at the centers in the wake of a public health emergency.

## **Scope**

A Family Assistance Center will need to be established as quickly as possible in a mass fatality event, in order to provide a range of services to those seeking assistance regarding the status of their loved ones. The Department of Human Services, DC Office of the Chief Medical Examiner, Department of Mental Health, and Department of Health, DC Office of Victims Services, and the American Red Cross will all have roles and responsibilities in the services provided at the centers. The nature of the mass fatality event and type of hazards faced will determine when and where the FAC is established within the District.

## **Situations and Assumptions**

There are a number of identified hazards and events that could occur within the District resulting in a mass fatality event and activation of an FAC. It is important to note that a FAC will most likely not be established until 48 to 72 hours out from the onset of the event. Federal resources are not likely to be deployed until 48 hours into the event. However, the American Red Cross (ARC) will provide family reunification services post-event and before the decision to activate an FAC is made. The ARC will support mass care operations and stand up its "Safe and Well" registry. This registry allows victims to register into a database where family and friends are able to check on their status. ARC family reunification services taking place near the scene of the event may either be shut down or transitioned to District FAC operations as the response unfolds. Once all casualties have been removed from the scene and operations shift to recovery, the transition will take place to full FAC operations, coordinated by DC DHS. The Incident Commander, situated at the District Emergency Operations Center (EOC) will make the decision to begin this transition. ARC may continue to support DHS and its partners during FAC operations.

If there are incidents involving transportation, particularly airline accidents, the National Transportation Safety Board (NTSB) and/or the Federal Aviation Administration (FAA) and airline carrier may take the lead in establishing family assistance and reunification services. District agencies would most likely be called upon as support to these operations. If there is an event involving a Weapon of Mass Destruction (WMD, biological, or chemical weapons, the Federal Bureau of Investigation (FBI) may intervene as part of the criminal investigation and establish family assistance under their direction. It is likely that all District agencies involved in family assistance will be called upon by Federal assets to assist in these operations.

If it is a radiation, chemical, or biological event, it may extend the time to recover bodies, as the area may be too dangerous for operations.

### **Notification and Activation**

Initial notification for a mass fatality event will come from the Unified Communications Center (UCC) or MPD to the OCME. The request to establish a Family Reunification Center will come from the UCC or the DC Homeland Security and Emergency Management Agency (HSEMA) Watch Officer to DHS or the ARC.

If the ARC is the entity called upon to establish a Family Reunification Center, they will deploy a Disaster Response Team who will connect with the Incident Commander and coordinate which resources and type of support is needed. If it is the DHS who is first notified, the DHS Director or Emergency Response Coordinator may deploy a supervisor or a small task force to coordinate with the Incident Commander in regards to resources and support that is needed.

After the initial assessment of the scenario and resource support, a Family Assistance Center (FAC) may need to be established within the District. The DHS Director or Emergency Response Coordinator will determine which facility will be used as the FAC and activate the necessary Memorandum of Agreement with said facility.

**Activation Checklist**

- Based on the incident size, number of victims, and other factors listed in the plan determine the approximate scale of the event

Incident Type \_\_\_\_\_  
Date \_\_\_\_\_ Time \_\_\_\_\_  
Approximate number of victims \_\_\_\_\_  
Estimated number of family/friend to arrive at FAC \_\_\_\_\_  
Estimated Incident size \_\_\_\_\_

- Logistics: review site assessment worksheets and select the location of the FAC facility

**FAC Facility Activation Information**

Facility Name \_\_\_\_\_ Date \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

- Identify services that will be provided at FAC (check all that apply)

- Reception/Registration
- Family Briefings
- Victim Information Services
- First Aid and Medical Care
- Disaster Mental Health Services
- Missing Persons Services
- Support Services
  - Childcare services
  - Translation/Interpretation Services
  - Social Services (List Below)

1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

- Finance/Administration: identify all staff and volunteers
- Logistics: identify and acquire all equipment and supplies needed for the FAC Facility
- Coordinate with partners and local agencies to fill any resource or staff needs
- Set-up FAC Facility
- Ensure Information Technology needs are met and tested (Television/Cable, Phones, Internet, Cell Phones, Fax Machines, Radios)
- Law Enforcement: establish and implement tactical security plan for the facility
- Open FAC Facility and coordinate messaging with Public Information Officer; location, hours, and services.

## **Social Services that may be required at a FAC**

*Not all services will be necessary at a FAC facility; the list below provides suggestions on possible social services that may be necessary*

- Animal Care
- Banking
- Basic Medical Care
- Benefits Counseling/Assistance
- Child/Youth and Family Services
- Communications (phone and internet)
- Crime Victims Assistance
- Disability Information
- Educational Services
- Employment Services
- Financial Assistance
- Financial Services
- Food Services
- Foreign Nationals
- Health Care Information Services
- Housing Assistance
- Identification Replacement Services
- Immigration Assistance
- Insurance Advocacy
- Labor Services/Union Assistance
- Laundry Services
- Legal Assistance
- Mail
- Material Goods/Personal Property Replacement
- Medical Assessment
- Physical Health
- Provision of Medications
- Public Benefits
- Relocation Assistance
- Senior Citizens Service
- Small Business Assistance
- Tax Benefits/Extensions
- Therapy Dogs
- Transportation
- Unemployment benefits
- Veterans Affairs
- Translation/Interpretation Services
- Workers Compensation

## Roles and Responsibilities

Agency	Roles and Responsibilities
Department of Human Services	Coordination of Family Assistance Center operations, including but not limited to: <ul style="list-style-type: none"> <li>• Reunification services</li> <li>• Food and water services</li> <li>• Temporary sheltering</li> <li>• Child care services</li> <li>• Communications services (telephone, internet, translation services)</li> <li>• Administrative tasks</li> <li>• Facility accommodations necessary for professional and appropriate interaction with next-of-kin</li> <li>• Engagement of community and faith based organizations/volunteers as needed to support operations</li> </ul>
Office of the Chief Medical Examiner (OCME)	<ul style="list-style-type: none"> <li>• Collection of antemortem data for identification of human remains</li> <li>• Management of data collection system</li> <li>• Conduct photo ID of decedents, if necessary</li> <li>• Gathering of belongings and personal effects to be given to family/friends of deceased</li> <li>• Press releases to media</li> </ul>
Department of Mental Health (DMH)	<ul style="list-style-type: none"> <li>• Grief counseling</li> <li>• Crisis intervention counseling</li> <li>• Follow-up for additional mental health services</li> <li>• Deployment of rapid response teams</li> <li>• Comprehensive Psychiatric Emergency Response Program</li> </ul>
Department of Health/Medical Reserve Corps (MRC)/Emergency Healthcare Coalition (EHC)	<ul style="list-style-type: none"> <li>• First aid services</li> <li>• Health screenings</li> <li>• Psychological first aid from mental health professionals within MRC</li> <li>• Provision of lay responders for center logistics</li> <li>• Patient tracking (EHC)</li> </ul>
Metropolitan Police Department (MPD) and Protective Services Police Department (PSPD)	<ul style="list-style-type: none"> <li>• Provision for security to family assistance centers</li> <li>• Death notifications to next of kin</li> </ul>
Mayor's Office of Victim's Services	<ul style="list-style-type: none"> <li>• Victim compensation services</li> <li>• Provide necessary referrals to community based organizations via internal database</li> <li>• Recovery of personal property/effects</li> <li>• Provide necessary referrals to Wendt Center for Loss and Healing</li> <li>• Forensic nursing services</li> </ul>
American Red Cross (ARC)	<ul style="list-style-type: none"> <li>• Provide reunification services</li> </ul>

	<ul style="list-style-type: none"> <li>• Provide general and psychological first aid training for volunteers</li> <li>• Provide call center operations to receive calls from the public</li> <li>• Provide resources such as vehicles, tents, communications equipment, Disaster Response Teams and mass care volunteers</li> <li>• Works in coordination with DHS on provision on services (food, water, etc.)</li> </ul>
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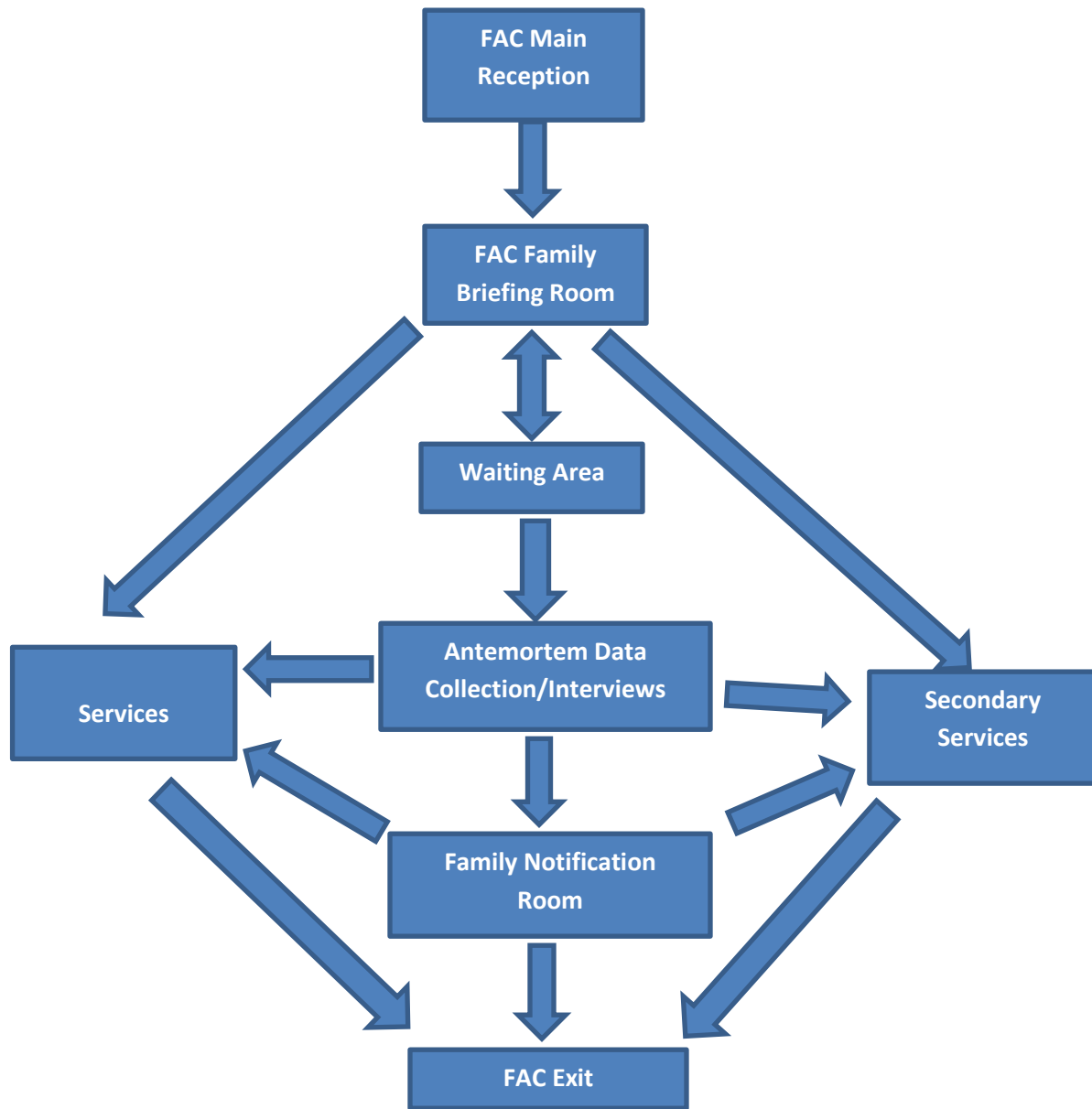
**\*NOTE:** Not all roles and responsibilities listed above will take place at the FAC. Some tasks are supportive to FAC operations and overall mass fatality operations within the District.

**Facility Logistics**

The location of the FAC will be a predetermined site by DHS and will be able to accommodate large numbers of people, as well as the range or services that will need to be provided. Additional smaller to medium size satellite sites shall be determined as back-ups or if the scenario necessitates the need for multiple centers to be established. The facility used as an FAC will need to have a number of amenities and types of equipment in order to meet the needs of all services the center will provide to the public. These amenities include but are not limited to:

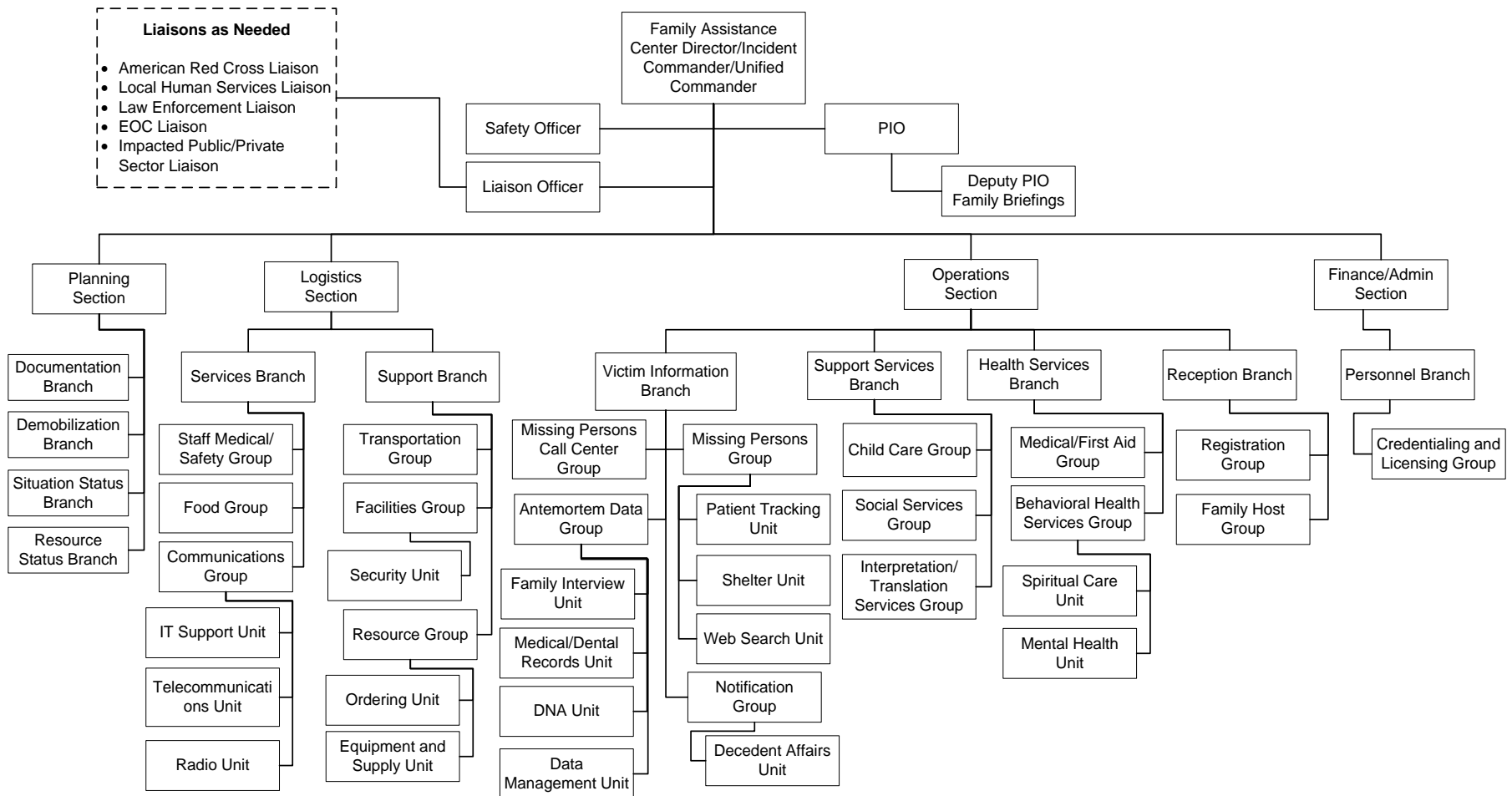
- Square footage large enough to accommodate large numbers of the public and staff
- Adequate number of rooms for all services (including quiet and private areas)
- IT equipment/Internet/Cable
- Telephones
- Parking
- Restrooms
- Handicap accessibility
- Electricity
- Water supply
- Heat/Air Conditioning

## Client Flow





# Scalable Org Chart for Family Assistance Center



## **Registration**

1. As families enter the facility have greeters present to show them to the reception area.
2. Families will check-in to the facility.
  - a. All family members must sign-in upon arrival.
  - b. Family members are required to produce government issued photo identification upon entry to ensure the identity of all visitors.
    - i. In the event that a family member does not have a government issued identification (minor children, undocumented persons, identification unavailable, etc.) reception staff, with the assistance of Law Enforcement, should take reasonable steps to ensure the identity of the individual.
  - c. Law Enforcement should be on hand to verify all identification and issue each person a badge. Badges should have a unique feature (e.g. color coding) and have a photo.
3. If this is the family member's first visit to the FAC they must complete a Family/Friend Registration Form.
  - a. If someone arrives at the FAC and is not looking for a family member notify security immediately.
4. Provide all family members with a Family Resource Packet.
5. Family Hosts should provide family member with a brief overview of the services provided at the FAC, a tour of the facility (if possible) and assist them with any immediate needs.
6. Translators/Interpreters should be on hand to provide assistance with the registration process if necessary.
7. Behavioral Health providers should be on hand at all times to provide assistance to families.
8. Security Personnel should be available for assistance if necessary.
9. All family members must return their badge upon leaving the FAC.

## **Forms to be completed (found in "Forms" section):**

1. Family/Friend Daily Sign-in Sheet
2. Family/Friend Registration Form

## **Reunification Services**

One of the primary goals of the Family Assistance Centers will be to reunite family members with those lost loved ones. It is important to note that this includes both the living and deceased, uninjured and injured alike. There will be two distinct groups requiring reunification services:

- 1) Missing persons who have been located (living or deceased) who have not yet been reunited with family/friends
- 2) Family/friends coming to the center in search of missing loved ones

Families may also need to be connected to specific disaster services once they have been reunited with living or deceased love ones. Those staffing the reunification service area will need to be prepared to make the appropriate referrals. All of those seeking reunification services should be protected from any media scrutiny throughout the process; showing respect for those grieving.

Unaccompanied minors might show up to the FAC seeking reunification with lost loved ones. An area for child care services should be established within the FAC.

## **Antemortem data collection**

OCME will lead the collection of antemortem through interviews with family/friends that enter the center, or by collection of medical and dental records. The Family Assistance Center Team Leader/Coordinator will establish the plan for antemortem data collection and entry plan. Family Interview Personnel will assist with data collection efforts within the center and Computer Specialists will be on hand for data entry, as well as electronic transfer of information to and from the Morgue Examination Center.

## **Family Notifications**

MPD will assume responsibility for death notifications to families and friends. This may need to be accomplished with assistance from mental health professionals (grief counselors) who are staffing the center. Family/friend notification shall only take place after confirmation from the Identification Team and approval from the Chief Medical Examiner. A release log will be utilized document the overall process and an individual release authorization form must be completed and placed in the individual Victim Disaster Packet. If personal effects of the deceased are not determined to evidence, they may be released to the family/friend along with the body. If the family/friends of the deceased request any type of mental health professional, they should be referred to the area of the FAC designated for grief counseling and mental health services.

## **Call center (311)**

A missing persons call 311 call center will be established out of the Family Assistance Center or other location TBD. This call center will be critical throughout the family reunification process. More than likely, family/friends of victim's will be seeking information about the status of said victim before they will seek any type of disaster services, such as grief counseling or spiritual services. Staff at the call center will receive calls from the public and provide answers based on pre-scripted messages. They will also be charged with collecting relevant antemortem data that will assist with identification of victims.

## Public Information

The public must be initially made aware of the establishment of the FAC, its location, mission and purpose. All details of the functions of the FAC must be clear and accurate; in order to avoid confusion and individuals with no needs related to the center showing up. The initial release regarding the FAC should include its role in missing person's identification, body release, and mental health services. The lead agency for the release of public information will be the Executive Office of the Mayor – Public Affairs. The coordinated release of information regarding mass fatalities and FAC operations will not take place within the actual FAC. All messages should be submitted and released through the Joint Information Center (JIC).

The following Public Information Officer (PIO) Cheat Sheet can be used or modified to particular specifications if necessary:

## PIO Cheat Sheet

This document is to be used to inform press briefings and media updates, but it is NOT a stand-alone document to be shared with the press. It should be completed using the judgment of the response staff, as not all items will be reported. All of the information below can be obtained from the Planning Chief of the Family Assistance Center

	Number in last operational period	Number to date
Number of families at the Family Assistance Center		
Number of families communicating with the FAC but not onsite		
Date/Time of last family briefing		
Number of calls to the Missing Persons Call Center		
Number of Missing Persons Reports received		
Number of reunifications facilitated through the FAC		

### Services Provided at the Family Assistance Center

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_

**Referral Services Provided Through the Family Assistance Center**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

**Number of Remains Recovered** \_\_\_\_\_

**Number of decedents identified and their families notified** \_\_\_\_\_

**Language that should not be used in communications**

- We know how you feel.
- Time heals all wounds.
- You should go on with your life.
- You will get over it.
- Others are worse off.
- Focus on the good times.
- The County cannot share that information. (Acceptable only if followed by why, and when the information will be available.)
- You do not need to know that
- What you do not know can't hurt you
- It was actually a blessing.
- You must be strong.
- It could have been worse.
- God never gives us more than we can handle

**Talking points concerning victim identification procedures**

- Fatality numbers are released only by OCME and only after confirmation.
- PIOs should not speculate on any procedures, including the need for an autopsy.
- PIOs should not assign timeframes for victim identification.
- Victims' names are only released after positive identification and notification of the family.
- Cultural considerations will be accommodated as often as practical

**Additional Comments** \_\_\_\_\_

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**Mental Health Services**

The Department of Mental Health (DMH) will be the lead entity within the FAC for provision of grief counseling and all mental health services required for family/friends of the deceased. DMH is able to provide surveillance, assessment, and psychiatric triage and stabilization, as well as give referrals to outside private or public services. DMH currently has 70 individuals at its disposal for rapid response teams

DMH staff and volunteers providing mental health and grief counseling should be trained in the field of disaster mental health services and certified as a disaster mental health services emergency responder.

All personnel providing disaster mental health services will adhere to their individual scope of practice (e.g. functional role, knowledge, skill, authority, continuing education, ethics, licensure, and certification) and have participated in DC DMH Disaster Mental Health Responder Certification. Mental health services will be provided in a designated area that is quiet, private and away from other services being provided at the FAC.

### **Volunteers**

The FAC will need to be able to accommodate volunteers into the staffing and operations. Volunteers from the Medical Reserve Corps (MRC) will be called upon via DOH through DC Serves. These volunteers will be brought in based on expertise and can assist with a variety of operations including greeting, logistics (forms and registration), first aid, and psychological first or other mental health services. Spontaneous volunteers may show up to the FAC as well. A volunteer registration and credentialing area shall be designated to expedite the verification process and get volunteers folded into operations as quickly and efficiently as possible.

### **Family Briefings**

There should be regularly scheduled briefings with family and friends who have shown up to the FAC (once or twice daily if possible). Family and friends can be updated on response activity as well as have the opportunity to ask questions of FAC leadership. These briefings should occur in a large, private setting within the FAC. No members of the media or legal representatives shall be allowed to attend briefings.

The following is a sample agenda for a family briefing that can be modified as needed:

- Rescue and recovery efforts
- Victim identification efforts
- Investigation updates
- Site visits, memorial services
- Disposition and return of remains
- Return of personal effects
- Description of services available at FAC

### **Security**

There should be robust security provided at the FAC due to the large number of people that will be expected to show up for the services it provides. The DC Protective Services Police Department (PSPD) will be the designated security entity within the facility. Outside the facility, MPD will be in charge of perimeter security and any other issues that may arise that threaten the public's safety and well-being.

### **Cultural and Religious Considerations**

Each community is unique with many cultures and faiths. Accommodating cultural and religious practices is a critical part of Family Assistance Center planning and operations. It is critical to understand

the needs of different cultures and faiths by taking into consideration different aspects of their practices, to better serve the community at the family assistance center.

- Language
- Diet (including fasting)
- Dress
- Physical contact
- Medical treatment
- Daily acts of faith, major events
- Dying and death customs
- Resources (e.g. texts, facilities, etc.)
- Names

Assumptions should not be made about the particular practices of individual families based on religion or ethnicity.

Below is a list of instances in which cultural or religious practices should be considered and incorporated to better serve the community affected by the disaster.

- Memorial ceremonies, services and anniversaries
- Food preparation and consumption
- Communications with families (e.g. family interviews, family briefings, notifications)
- Resources (e.g. texts, cultural/religious leaders)
- Space for cultural or religious practices
- Behavioral Health and Spiritual Care

### **Demobilization**

The demobilization of the FAC will be dependent on the scale of the incident and will more than likely be a gradual wind down of operations. This can be triggered by local agencies no longer needing any assistance from outside resources or when all families and friends have been reunited with their loved ones, whether alive or deceased. Antemortem data that has been collected by OCME may need to be transferred to other sources, such as law enforcement agencies, for investigative purposes. It will be important to identify which specific data will be transferred and which agencies will need this data. Any equipment brought into the FAC from outside sources will be returned as they are no longer needed for specific operations.

It is important to note that even when the FAC operations conclude and the operation is shut down, those who have used the center's services may need ongoing support, whether it be financial or in the form of continued mental health support. These services will be incumbent upon the Mayor's Office of Victim's Services and Department of Mental Health.



## Demobilization Checklist

### General Guidelines that should be considered

- # clients seen/day
- # victims still to identify/locate
- Ability for other organization to handle current operation needs off site
- Need for daily briefings

### Criteria to consider for demobilization

- Family briefings are no longer needed
- Rescue, recovery investigations and identification have decreased to be able to be handled by another ongoing operation
- Less than 5 clients per day register at the FAC three days in a row
- Memorial services have been arranged for family and friends
- Provision for the return of personal effects has been arranged
- Ongoing case management and/or hotline number has been established if needed

Reason for demobilization: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Location/Name of FAC: \_\_\_\_\_

Date/Time of Demobilization: \_\_\_\_\_

### Demobilization Tasks

- Create a demobilization plan for the FAC and get approval
- Set a date and time for closure and communicate this with all partners and client's families
- Address outstanding case management needs and long-term follow-up with families
- Coordinate final meeting with partners and government agencies
- Coordinate messaging for public about demobilization
- Update missing persons call center or recorded message
- Break down the FAC facility
  - assign partners to demobilization tasks
- Follow-up report of FAC operations
- Debrief staff and volunteers

## Forms

### Family/Friend Registration Form

*Use this form if no electronic/database registration system is available*

#### Disaster Victim Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_  
\_\_\_\_\_

**For Multiple Disaster Victims of the Same Family, Use Additional Forms and Cross Reference with Victims Name at Bottom of this Page**

#### *1. Presenting Family Member/Friend Name*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

SS# (optional) \_\_\_\_\_ Relationship to Victim \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Photo Identification Verification (type/#/State/County) \_\_\_\_\_

Medications/Medical Needs?  Yes  No

If Yes, Indicate Medication Needs \_\_\_\_\_  
\_\_\_\_\_

Physician's Name \_\_\_\_\_ Physician's Phone # \_\_\_\_\_  
\_\_\_\_\_

Next of Kin to Disaster Victim?  Yes  No

If No, Name of Next of Kin \_\_\_\_\_

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### *2. Presenting Family Member/Friend Name*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

SS# (optional) \_\_\_\_\_ Relationship to Victim \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Photo Identification Verification (type/#/State/County) \_\_\_\_\_

Medications/Medical Needs?  Yes  No

Victim Name \_\_\_\_\_ It Yes, Indicate  
Medication Needs \_\_\_\_\_

Physician's Name \_\_\_\_\_ Physician's Phone # \_\_\_\_\_

Notes \_\_\_\_\_

**3. Presenting Family Member/Friend Name**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

SS# (optional) \_\_\_\_\_ Relationship to Victim \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Photo Identification Verification (type/#/State/County) \_\_\_\_\_

Medications/Medical Needs?  Yes  No

It Yes, Indicate Medication Needs \_\_\_\_\_

Physician's Name \_\_\_\_\_ Physician's Phone # \_\_\_\_\_

Notes \_\_\_\_\_

**4. Presenting Family Member/Friend Name**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

SS# (optional) \_\_\_\_\_ Relationship to Victim \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Photo Identification Verification (type/#/State/County) \_\_\_\_\_

Medications/Medical Needs?  Yes  No

If Yes, Indicate Medication Needs \_\_\_\_\_

Physician's Name \_\_\_\_\_ Physician's Phone # \_\_\_\_\_

**Victim Name** \_\_\_\_\_

Notes \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***5. Presenting Family Member/Friend Name***

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

SS# (optional) \_\_\_\_\_ Relationship to Victim \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Photo Identification Verification (type/#/State/County) \_\_\_\_\_

Medications/Medical Needs?  Yes  No

If Yes, Indicate Medication Needs \_\_\_\_\_

Physician's Name \_\_\_\_\_ Physician's Phone # \_\_\_\_\_

Notes \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Next of Kin Information***

Has Next of Kin arrived at the Family Assistance Center?  Yes  No

NOK Last Name \_\_\_\_\_ First Name \_\_\_\_\_

SS# (optional) \_\_\_\_\_ Relationship to Victim \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone numbers \_\_\_\_\_

Medications/Medical Needs?  Yes  No

If Yes, Indicate Medication Needs \_\_\_\_\_

Physician's Name \_\_\_\_\_ Physician's Phone # \_\_\_\_\_

Notes \_\_\_\_\_

**Victim Name** \_\_\_\_\_

**Source**

Information regarding Next of Kin provided by: \_\_\_\_\_

Relationship to Next of Kin: \_\_\_\_\_

**Family/Friend Daily Sign-in Sheet**

*Use this form if a digital credentialing/ badging system is not available*

**Victim Name**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Date	Time of Arrival	Family Member Name (please print)	Signature	Time of Departure
