|  |  |  |  |
| --- | --- | --- | --- |
| Name of Facility |  | | |
| JEM Team |  | | |
| Date Completed |  | Facility Code  (EMO to do) |  |

**Emergency Facility Profile Questionnaire**

|  |
| --- |
| Information contained in this form is for use by the HRM Emergency Management Organization, Provincial Department of Community Services and the Canadian Red Cross to determine the suitability of a facility to be utilized as a potential emergency centre. Information is considered confidential and will not be released to outside parties without the consent of the facility.  ©2016 HRM EMO |

**Instructions:**

This form is broken down into several sections containing related information. When completing the form, it is not necessary to give all the data, or answer all of the questions. Complete what is appropriate or what information that you would want EMO to have on file.

The information provided in the form will be reviewed and assessed by EMO, Provincial Department of Community Services and/or the Red Cross and will assist emergency staff in determining the suitability of the facility to be utilized by EMO in an emergency and if utilized, in what capacity.

When completed, return the form to the following address:

Halifax Regional Emergency Management Organization

PO Box 1749

Halifax, Nova Scotia, B3J 3A5

**General Information:**

|  |  |  |
| --- | --- | --- |
| **Name of facility** | | **Civic address of facility** |
|  | |  |
| **Contact Person** | | **Daytime contact number** |
|  | |  |
| **Mailing address of facility** | | **Normal hours of operation for facility** |
|  | |  |
| **Primary (non-emergency) use of facility** |
|  |
| **Brief description of the facility** | | **After hours contact number(s)** |
|  | | **1.** |
| **2.** |
| **After hours contact procedures** | |  |
|  | | |
| **Is the facility opened year round?** | **Parking capacity - (Actual parking spaces or an**  **estimate of the number of vehicles the parking lot can hold)** | |
| Yes No |  | |

**Physical Information:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Physical dimensions Square footage, approx** | | | | | | **Number of levels** | | | | **How many rooms could be used by EMO?** | | | |
|  | | | | | |  | | | |  | | | |
| **Approximate sizes or square footage of each room** | | | | | | | | | | | | | |
| **Room 1** | | | **Room 2** | | | | **Room 3** | | | | | | **Room 4** |
| **Accessibility** | | | | | | | | | | | | | |
| **Access / Egress** | Yes No | | | | | | | | **Washrooms** | | Yes No | | |
| **Access to EMO allocated rooms** | | | | **If multi-floor, are there elevators, chair assist, etc.?** | | | | | | | | | |
| Yes No | | | | Yes No | | | | | | | | | |
| **Is there room that could be used as an area for comfort animals (pets)?** | | | | | **Water source** | | | | | | | | |
| Yes No | | | | | well (GPM if available) supply other: | | | | | | | | |
| **Potable water quality -** If not a municipal water supply, what is the quality of the drinking water and when was the last time it was tested? | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Is building alarmed?** | | **Does building have sprinklers?** | | | | | | **Year building was built?** | | | | **Building close to bus routes?** | |
| Yes No | | Yes No | | | | | |  | | | | Yes No | |

**Kitchen Facilities: Please put the amount of the following.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Ovens?** | | | **Range burners?** | | | **Number of Grills?** |
| Gas: Electric: | | | Gas: Electric: | | | Gas: Electric: |
| **Number of Refrigerators?** | | | | | **Number of Dishwashers?** | |
| Mini: Residential: Walk in | | | | | Commercial: Home: | |
| **Tables** | **Chairs** | **Place Settings** | | **Overall Kitchen Rating** | | |
|  |  |  | | Less than residential Residential More than residential | | |
| **Other information regarding kitchen** | | | | | | |
|  | | | | | | |

**Electrical:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type/size of electrical panel** | | **Parking Lot Lights** | **Circuit breakers or fuses** |
| 200 amp 400 amp 600 amp | | Yes No | Circuit Breakers Fuses |
| **Age of wiring** | | | |
| Same as building | See notes | | |
| Year upgraded |
| **Does the facility have a generator?** | | | |
| Yes No If yes, Fixed Portable | | | |
| **If yes, Make and Model and size** | | | |
|  | | | |
| **If yes, list areas served including elevator or other lift assists.** | | | |
|  | | | |
| **Is there a transfer switch? (If yes, describe)** | | | |
|  | | | |
| **Other information regarding electrical** | | | |
|  | | | |

**Miscellaneous:**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **How many toilets are available** | | | | | **How many washbasins are available?** | | | | **Showers?** | | |
|  | Male | | | |  | Male | | | Yes No | | |
|  | Female | | | |  | Female | | | How many? | | |
|  | Handicapped | | | |  | Handicapped | | |  | | |
| **Telecommunications formats?** | | | | | | | **What is the primary heating source?** | | | | |
|  | TV |  | | Telephone | | |  | Electric | |  | Natural Gas |
|  | Radio |  | | Internet | | |  | Propane | |  | Oil |
|  | Other: | | | | | |  | Other | | | |
| **Waste water** | | | | | | | **Is there a floor plan available?** | | | | |
|  | Septic | |  | Municipal | | | Yes No (If yes, please attach) | | | | |
| Garbage Facilities | | | | | | | Are there any hazardous materials stored inside or outside on site (propane, etc.)? If yes, explain | | | | |
|  | | | | | | |  | | | | |

**Thank you for taking the time to fill out this questionnaire:**

|  |  |
| --- | --- |
| **Are there any community groups located with the facility that would be interested in volunteering in an emergency to assist?** | |
| Yes No | |
| If yes, provide names and/or contact info | |
| **Date Prepared** | **Completed by (Print Name)** |
|  |  |
| **Notes and special features:** | |
|  | |

**Background:**

The Halifax Regional Municipality does not normally provide an Emergency Social Services (ESS) function during an emergency response. ESS is provided under agreement by the provincial Department of Community Services (DCS). There are five primary emergency social services: **Registration and Inquiry (R&I), Lodging, Feeding, Clothing and Personal Services.**  As part of the provincial agreement, the municipality will provide the emergency lodging facility to allow the Department of Community Services to coordinate and provide the remaining emergency services. The provision of ESS by the province is not automatic at the discretion of the municipality, but rather a negotiated approach accomplished during an emergency response. Therefore, the province will supply ESS only at shelters agreed to by the Department at the time.

Emergency shelters are used as a last resort in an evacuation situation. Initially, residents are encouraged to seek shelter with friends, family, hotels or other alternate accommodations. H.R.M. and D.C.S. will assist in these endeavours. However, when emergency sheltering is required, there are three types of emergency facilities that may be established:

**Comfort Centres**

Comfort Centres, sometimes known as Warming Centres are primarily used for residents who are remaining in their homes but do not have full services such as electricity, heat, water, etc. The centre can provide a place to go to get light meals, pick up small amounts of needed items and attend to personal hygiene matters. Comfort centres do not remain open overnight and will not accept evacuees. Comfort centres are normally staffed and operated by the municipality and/or local volunteer organizations and are not run by the Department of Community Services, however the D.C.S. may assist in some cases with supplies like bottled water, for example.

**Reception Centres**

In an evacuation situation, residents can use a reception centre to provide a safe area of refuge to assess their individual situation and make temporary plans. The centre also allows the Department of Community Services through its partners, such as the Canadian Red Cross, to provide a registration and assessment service. In a reception centre, displaced residents can meet with evacuation officials to discuss personal needs and other issues such as security of the evacuated area, re-entry procedures, etc. It is normally at a reception centre that a determination is made on how many residents do not have an alternate temporary housing arrangement. If there are enough residents needing overnight accommodation, an emergency shelter may be set up. Reception centres are provided by the municipality and managed by the Department of Community Services. A reception centre may be open overnight, but by its definition, it does not offer sleeping accommodations. It is normally only used at the beginning of an event and sometimes it may turn into a shelter if the facility it is located in meets the needs of the evacuees. There is no requirement to have the reception centre and evacuation centre in the same facility.

**Evacuation Centres**

When sufficient numbers of residents are unable to remain in their homes and have no other source of temporary housing, a evacuation centre may be established. The facility, which may also be known as an evacuation shelter, is provided by the municipality and managed by D.C.S. It operates on a 24/7 basis and provides all of the Emergency Social Services including overnight sleeping arrangements. Essentially, the shelter turns into the evacuated residents home and therefore more attention is placed on security and issues around comfort and personal services that will be needed over the time the shelter is operational. Evacuation centres have more requirements for personal space, washrooms, expanded personal hygiene areas, as well as feeding. Food preparation may be done on site if the facility is properly equipped, or may be prepared off-site and served at the centre.