

RECORDS DISASTER PREVENTION AND RECOVERY APPENDICES AND TEMPLATES

APPENDIX A PREPAREDNESS TEMPLATES

Appendix A provides a series of fill-in templates that, when completed, provide the authority, organizational structure and communications system for a records disaster response and recovery plan. It begins with a suggested agency records disaster policy statement to be signed by agency management. It stresses building a strong disaster recovery team, identifying supplemental assistance, communications, response and recovery forms, and mapping record locations by use of floor plans.

A-1 Records Disaster Policy Statement

Subject: Records Disaster Policy

Purpose: Establishes an agency-wide policy, plan and procedure for the protection of essential records from a disaster, and the recovery of _____ (insert name of agency) records damaged in a disaster.

Policy: The policy of _____ (agency name) is to insure that its essential records are identified and protected from natural and man-made disasters; and that procedures are in place, and tested, that will afford the most efficient and cost effective prevention of, response to, and recovery of all valuable agency public records damaged in a disaster.

Scope: This policy applies to all employees who create, receive and maintain _____ (agency name) records.

Responsibility: The _____ (insert name and title of agency head) has appointed _____ (employees name) as records disaster coordinator, with full authority to develop and implement plans for protecting agency essential records, and procedures for response to and recovery of records damaged in a disaster in conjunction with the agency Emergency Management Plan.

The coordinator will work with and through the records disaster recovery team composed of _____ (List members, as needed, based on the team organization in Part II, Chapter 2-E of the manual.) The team will assist in the development of all parts of the Records Disaster Plan and under the direction of the coordinator, will lead and participate in all response and recovery efforts.

All damaged records, regardless of office of origin, are to be recovered under the sole direction of the coordinator, or as the coordinator delegates to recovery team members.

Prepared by: *Insert name(s) of author(s)*

Approved and published: *(Insert name of governing body or authorizing official and date.)*

A-2 Introduction

Prepare a brief (three- to four-paragraphs) introduction to your plan, describing how the plan is organized (parts of the plan) and tips on its use.

A-3 Plan Distribution List

Name of Organization: _____

Date of Plan Completion: _____

Next Scheduled Update: _____

Set a date no more than 1 year in the future by which the plan should be updated

Distribution:

List all individuals or offices that receive copies of the plan (including those within your organization or agency as well as outside units, including but not limited to, fire and police departments, emergency service coordinators, and allied agencies) and locations of file copies. This will help ensure they receive copies of updates.

A-4 Organizing for Response

A-4-1 List of records disaster response and recovery team members

This list provides a quick reference of names and phone numbers for each member of the disaster team.

Show the names, phone numbers (office, home, cell phone, and pager), of each team member, department and assigned response and recovery task, i.e.: photography, inventory team, data entry, boxing, etc. Also, state the names and phone numbers of agency support offices or staff, such as personnel, finance, etc who may be called upon to acquire supplies, additional personnel or contracted services. Use those that apply to your organization.

Function Cell/Pager	Name	Work Phone	Home Phone
Recovery coordinator	_____	_____	_____
Records recovery coordinators	_____	_____	_____
(Specify department, office or recovery responsibility for each, i.e. photographer)			
Inventory/tracking data entry	_____	_____	_____
Photography	_____	_____	_____
Pack out – boxing	_____	_____	_____
Pack out – disposal	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Personnel manager	_____	_____	_____
Security head	_____	_____	_____
Data processing manager	_____	_____	_____
Financial manager	_____	_____	_____
Facilities manager	_____	_____	_____
Health and safety officer	_____	_____	_____

Add or delete as many as necessary to represent the departments and support functions of your agency

A-4-2 Team Member Responsibilities

Use this template for writing your own descriptions of disaster team members' jobs. Insert each position and its job description in this section. Refer to the list of suggested team members listed in Part II of the manual (sections B, C, and E) and the organization chart. Include the authority and responsibilities of the disaster recovery coordinator, each departmental coordinator and agency support staff. It is useful to have duties spelled out ahead of time so that members can be trained and prepared to immediately and effectively fulfill their respective roles.

A-4-3 Supplemental Personnel

If a disaster occurs that exceeds staff resources, supplemental personnel may be needed. This section lists possible sources of assistance.

The _____
[specify position(s) such as recovery coordinator, personnel manager, or other] will determine whether volunteers or temporary staff are needed, how many can be used, and qualifications or skills required for the tasks.

A-4-3-a Volunteers

1. The _____ *[specify responsible position]* will initiate contacts with civic groups, service organizations, etc.
2. The following have been identified as possible sources that might provide volunteers to assist with recovery operations: [In establishing contacts, consider organizations such as Boy/Girl Scouts, Elks, Kiwanis Club, Knights of Columbus, Rotary Club, VFW, and labor organizations]

Organization: _____

Contact Person: _____ Phone: _____

Back-up Contact: _____ Phone: _____

Notes: _____

3. If volunteers arrive on the scene without being solicited and the records recovery team is not prepared to use their services:
 - Take their names and phone numbers.
 - Decline their assistance, at least for now.
 - Advise them that they will be contacted if and when assistance is needed.
4. If volunteers arrive on the scene following a solicitation, _____ *[specify responsible position such as volunteer coordinator]* will register them:
 - Take the person's name and phone number.
 - Interview them to determine their suitability for recovery tasks: experience and knowledge, physical abilities and limitations.
 - Have each person complete a medical/emergency information form.
 - Depending on the advice of your insurance carrier or legal adviser, you may also wish to have volunteers sign a waiver of liability.
5. _____ *[specify position such as personnel manager or volunteer coordinator]* will establish and maintain a system for keeping track of time worked by each volunteer.
6. _____ *[specify position such as personnel manager, volunteer coordinator, or training instructor]* will provide necessary training to volunteers before they begin work.
7. Supervision and work conditions. Volunteers should receive direct and continuous supervision.
 - Volunteers will be assigned to a staff member, who will be responsible for his or her team of volunteers, oversee their work in the recovery operation, and insure their safety and welfare.
 - No staff member should be assigned more than six volunteers.

Volunteers, like other workers, should be given regular breaks and rest periods (and meals, if appropriate).

A-4-3-b Temporary Help Services

1. The _____ [*name position such as the personnel manager*] will initiate contacts with temporary help agencies if auxiliary workers are needed.
2. The following sources may be contacted regarding temporary workers: (In establishing contacts, consider organizations like Kelly Professional Services, Manpower, etc. If your organization has existing agreements, list them here and (if applicable) indicate purchase order numbers or other authorizations in the "Notes" section of each entry. Some large organizations may also have employment pools that can provide assistance with manual or low-skilled work. Replicate this template for the organizations you identify.)

Organization: _____
Contact Person: _____ Phone: _____
Back-up Contact: _____ Phone: _____
Notes: _____

A-4-3-c List of Agency Staff

Insert here a list of agency staff by:

Name
Position
Work phone number
Home address
Home telephone, cell phone, beeper/pager (With these and all other phone listings, if numbers are unlisted or confidential, do not use or post without prior approval).
Email address

A-5 Floor Plans

Insert floor plans that may be useful in a disaster situation, including:

Building and floor layouts, with rooms (with their correct room numbers), aisles, exits and entrances, windows, and evacuation routes.

Identify:

Records storage locations. Indicate location of each file cabinet or shelf unit by number. Associate that number with a content list, records inventory or retention schedule.

Salvage priorities. Identify records, by cabinet or storage unit number, that are essential and have not been otherwise protected or duplicated. Refer to your Essential Records Schedule or recovery priority list (see Appendix B-8).

Fire safety: locations of extinguishers, fire alarms, sprinklers, detectors, enunciator panel(s), etc.

Engineering and mechanical controls such as shut-offs and master switches for gas, electricity, water, HVAC system, and elevators.

A-6 Forms

In this section place copies of forms you may need in a disaster, such as records recovery tracking system forms, damage assessment forms, recovery checklists, inventory forms, packing lists, requisitions, purchase orders, etc.

Initial Damage Assessment Report

The purpose of an initial damage assessment is to determine the type and extent of the disaster so that the proper level of response can be mobilized.

Damage Site Location	Date and Time of Occurrence	Total Volume of Records
City hall, 1 st floor, room 105	April 27, 2003	3-4dr cabinets or 16 cu. ft.

Type and Extent of Damage		Volume of Records
Water damage minimum (one or more edges wet or damp)	x	3 drawers = 6 cu. ft. Cabinet 4
Water damage moderate (edges wet, water wicked into document text)	x	6 drawers = 12 cu. ft. Cabinets 2,3
Water damage severe (papers soaked throughout, in standing water)	x	3 drawers = 6 cu. ft. lower drs cabinets 2,3,4
Mold	x	3 lower drawers Cabinet 2,3,4,
Fire damage minimum (smoke, soot, lightly charred edges)	<input type="checkbox"/>	
Fire damage moderate (edges heavily charred, paper discolored, brittle)	<input type="checkbox"/>	
Fire damage severe (papers charred beyond edges, very sooty, extremely brittle)	<input type="checkbox"/>	
Fire damage burnt (Burned into center of papers)	<input type="checkbox"/>	
Contamination	<input type="checkbox"/>	

Declaration: No response required Emergency Disaster X

Field Notes:

DETAILED DISASTER RECOVERY WORKSHEET

RECORD SERIES TITLE VOLUME	LOCATION OF DAMAGE SITE Cabinet, drawer or shelf & box numbers	TYPE OF RECORD <input type="checkbox"/> Loose Papers in Folders <input type="checkbox"/> Photo prints <input type="checkbox"/> Books or Binders <input type="checkbox"/> Microfilm /Film <input type="checkbox"/> Electronic	PACK-OUT location:
PREVIOUSLY SECURED AS AN ESSENTIAL RECORD? YES <input type="checkbox"/> No <input type="checkbox"/> (See Essential Records Schedule)		RECOVERY PRIORITY (Circle priority, with 5 being the highest) 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	

TYPE, EXTENT OF DAMAGE, AND RECOVERY TREATMENTS

<p>Fire Damaged Paper Records</p> <p><input type="checkbox"/> Minimum damage (smoke, soot, lightly charred edges)</p> <p>Recovery Treatments</p> <p><input type="checkbox"/> Clean gently with soft brush</p> <p><input type="checkbox"/> Humidify</p> <p><input type="checkbox"/> Re-file in clean folders</p> <p><input type="checkbox"/> Other</p> <hr/> <p><input type="checkbox"/> Severe damage (papers charred beyond edges, very sooty, extremely brittle)</p> <p>Recovery Treatments</p> <p><input type="checkbox"/> Separate pages</p> <p><input type="checkbox"/> Remove surface soot and dirt</p> <p><input type="checkbox"/> Copy or microfilm</p> <p><input type="checkbox"/> Discard originals</p> <p><input type="checkbox"/> Burnt</p> <p>Recovery Treatments</p> <p><input type="checkbox"/> Infrared photography</p> <p><input type="checkbox"/> Discard</p>	<p>Water Damage – Paper Records</p> <p>Recovery Treatments</p> <p><input type="checkbox"/> Remove excess water</p> <p><input type="checkbox"/> Place records in containers</p> <p>Small collection</p> <p><input type="checkbox"/> Recovery Treatments</p> <p>Other</p> <hr/> <p>Large collections pack-out to:</p> <p>Recovery Treatments</p> <p><input type="checkbox"/> Freeze to stabilize or dry</p> <p><input type="checkbox"/> Freeze dry</p> <p><input type="checkbox"/> Desiccant de-humidification dry</p> <p><input type="checkbox"/> Thermo-vacuum dry</p> <p><input type="checkbox"/> FILMS: Place in containers of clean cool water, send to re-processor</p> <p><input type="checkbox"/> Electronic:</p>
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Some treatment actions may not be necessary or other actions may be necessary. See MANUAL PART III and APPENDIX C.

Notes:

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	Box	Record Series Title/date	Original	Value	Type of	Extent of	Keep	Freeze to	Recovery	Fumigate	Repair	Date Sent	Date	Returned	Date
2	No		Location		Damage	Damage	Discard	Stabilize	Method		Clean		Returned	to Office	Destroyed
3															
4	1 --4	Payrolls 1988-93	bldg 1	5	WF	3	K	N	FD	Y	Y	13-Apr-03	18-Apr-03	18-Apr-03	
5	5	Gen. Ledger 1990-98	bldg 1	5	W	2	K	N	IA	N	N	14-Apr-03	19-Apr-03	19-Apr-03	
6	6--8	vouchers over 6 yrs old	bldg 1	5	F	5	D	N	N/A	N	N	15-Apr-03	N/A		16-Apr-03
7															
8															
9															
10															
11															
12															
13															
14															
15															
16															
17															
18															
19	Legend														
20		Essential Record Value	High=5	Low=1											
21		Type of Damage	W=water	F=fire	M=mold	FW=fire & water	C=	conta	mination						
22		Extent of Damage	High=5	Low=1											
23		Keep or discard	K=keep	d=discard											
24		Freeze to Stabilize	Y=yes	N=no											
25		Recovery Method	IA=Interleaf	/air	D=desiccant	FD= freeze dry	VF=vacuum freeze	TV=thermo vacuum							
26		Fumigate	Y=yes	N=no											
27		Repair	Y=yes	N=no											
28															

A-7 Operation Center

Identify the spaces you could use for recovery operations. Include offices and operational spaces equipped with desks, phones, and other basic equipment, as well as spaces you could use for rinsing, air-drying, and other salvage activities. Pre-identify some areas within your building, but also identify some off-site spaces such as:

- Public buildings: armories, schools, etc..
- Private meeting facilities: Elks, Girl or Boy Scouts, or other service organizations.
- Church buildings.
- Commercial property that is for rent or lease.
- Rented tents, trailer homes (such as used on construction sites), etc..

Outline the procedures you would use to transfer office equipment and supplies, as well as telephone, electricity, and other services in the spaces, if they do not have them already

A-8 Communications Plan

Outline your plans for communicating with staff members, particularly members of the records disaster recovery team. Outline a strategy for notifying them of routine emergencies, but also list the systems and alternatives that can be used when telephone service is disrupted due to earthquake, flood, or other disasters.

In most cases, telephone systems and other communication services will be operating routinely when recovery procedures are initiated. Once the _____
[specify recovery coordinator or other staff authorized to initiate the Disaster Plan] declares a disaster and initiates the plan, notification of team members will precede according to the following plan:

1. The _____
[specify recovery coordinator or other staff member] will notify the following:

List the agency officers in the order you want them notified. It would be typical for first-phase notification to include the chief administrator, chief safety officer, records manager, data processing manager, and financial liaison.

Name/Title	Office phone	Home/cell phone

Full contact information for each is available in the List of Agency Staff in **Appendix A-4-3-c**. List the disaster recovery team members that need to mobilize to respond to the records disaster.

Name	Office phone	Home/cell phone

(See Appendix A-9 for a list of other organizations that should be notified in case of a major disaster).

A-9 Emergency Contact Numbers

Name	Phone: Workday	After-Hours
Ambulance		
Building Maintenance		
Agency Emergency Management Officer		
Doctor		
Emergency Management Division of the WA Military Department	(360) 438-8639	Toll Free: (800) 258-5990
FEMA		
Fire Department		
Hospital		
Insurance Agent		
Police/Sheriff		
Risk Manager		
Security Office		
Security System Co.		
State Patrol		
Telephone Co.		
Utilities: Electric		
Utilities: Gas		
Utilities: Water/Sewer		
Utilities: Other		
WA State Regional Archives:		
Other:		