

## North Carolina Shelter Assessment Form

For Environmental Health Assessment in Shelters and Evacuation Centers  
Complete one form for each facility

<b>Assessing Agency:</b>	Assessing Agency <input style="width: 90%;" type="text"/>	Emergency contact # <input style="width: 90%;" type="text"/>
<b>Shelter Information:</b>	Shelter Type: <input type="checkbox"/> Community/Recovery <input type="checkbox"/> Special Needs <input type="checkbox"/> Other: <input style="width: 50%;" type="text"/>	
<b>Current Census #</b> <input style="width: 50%;" type="text"/>	American Red Cross Facility? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk/NA ARC Code: <input style="width: 50%;" type="text"/>	
<b>Staff #</b> <input style="width: 50%;" type="text"/>	Location Name and Description OR Designated Name of Facility <input style="width: 95%;" type="text"/>	
	Street Address <input style="width: 40%;" type="text"/> City(County) <input style="width: 30%;" type="text"/> Zip Code <input style="width: 15%;" type="text"/> GPS <input style="width: 15%;" type="text"/>	
	Date Shelter Opened: <input style="width: 15%;" type="text"/> / <input style="width: 15%;" type="text"/> / <input style="width: 15%;" type="text"/>	Date Assessed: <input style="width: 15%;" type="text"/> / <input style="width: 15%;" type="text"/> / <input style="width: 15%;" type="text"/> Time: <input type="checkbox"/> am <input type="checkbox"/> pm
	Reason for Assessment: <input type="checkbox"/> Preoperational <input type="checkbox"/> Initial <input type="checkbox"/> Routine <input type="checkbox"/> Other <input style="width: 20%;" type="text"/>	

I. FACILITY				V. FOOD and WATER					
1	Structural damage	Y	N	U	28	Preparation on site	Y	N	U
2	Security/law enforcement available	Y	N	U	29	Served on site	Y	N	U
3	Water system operational	Y	N	U	30	Safe food source	Y	N	U
4	Hot water available	Y	N	U	31	Adequate supply	Y	N	U
5	HVAC system operational	Y	N	U	32	Proper storage	Y	N	U
6	Adequate ventilation	Y	N	U	33	Appropriate food temperatures	Y	N	U
7	Adequate space per person	Y	N	U	34	Hand-washing facilities available	Y	N	U
8	Free of injury/ occupational hazards	Y	N	U	35	Safe food handling	Y	N	U
9	Free of pest or vector issues	Y	N	U	36	Dish washing facilities available	Y	N	U
10	Acceptable level of cleanliness	Y	N	U	37	Clean kitchen area	Y	N	U
11	Electrical grid system operational	Y	N	U	38	Adequate water supply	Y	N	U
12	Generator in use (type: _____)	Y	N	U	39	Adequate ice supply	Y	N	U
13	Indoor air temperature adequate	Y	N	U	40	Safe water source	Y	N	U
					41	Safe ice source	Y	N	U
II. SANITATION				VI. SOLID WASTE					
14	Adequate laundry services	Y	N	U	42	Adequate number of collection receptacles	Y	N	U
15	Adequate number of toilets	Y	N	U	43	Appropriate separation	Y	N	U
16	Adequate number of showers	Y	N	U	44	Appropriate disposal	Y	N	U
17	Adequate number of hand-washing stations	Y	N	U	45	Appropriate storage	Y	N	U
18	Hand-washing supplies available	Y	N	U	46	Timely removal	Y	N	U
19	Toilet supplies available	Y	N	U	47	Hazardous waste generated	Y	N	U
20	Acceptable level of cleanliness	Y	N	U	48	Medical waste generated	Y	N	U
21	Sewage system type:				VII. SLEEPING and CHILDCARE				
III. HEALTH and MEDICAL				49	Adequate number of beds/cots/mats	Y	N	U	
22	Medical care services on site	Y	N	U	50	Adequate supply of bedding	Y	N	U
23	Mental health care services on site	Y	N	U	51	Bedding changed regularly	Y	N	U
IV. COMPANION ANIMALS				52	Adequate spacing	Y	N	U	
24	Companion animals present	Y	N	U	53	Clean diaper-changing facilities	Y	N	U
25	Animal care available	Y	N	U	54	Adequate toy hygiene	Y	N	U
26	Designated animal area	Y	N	U	55	Safe toys	Y	N	U
27	Acceptable level of cleanliness	Y	N	U	56	Clean food and bottle preparation area	Y	N	U
					57	Adequate child care supervision	Y	N	U

**VIII. CRITICAL NEEDS or COMMENTS** (write on back if necessary)

# North Carolina Shelter Assessment Form Instructions

**Shelter type:** "Community/Recovery": general public. "Special Needs": population with specific medical requirements. "Other": relief workers base camp, etc.

**Reason for Assessment:** "Preoperational": before opening. "Initial": first assessment after opening. "Routine": assessments occurring on a regular basis (e.g., daily, weekly). "Other": occurrence such as an outbreak or a complaint.

**Current Census:** Estimated number of persons, including workers, in shelter at the time of inspection.

**Number of Staff/Volunteers:** Number of persons working in the facility at the time of assessment.

## I. Facility

- 1 Structural damage: note damage to physical structure (e.g., roof, windows, walls, etc).
- 2 Security/law enforcement available: security guards or police officers available at facility site.
- 3 Water system operational: self-explanatory.
- 4 Hot water available: self-explanatory.
- 5 HVAC system operational: self-explanatory.
- 6 Adequate ventilation: facility well-ventilated and free of air hazards such as smoke, fumes, etc.
- 7 Adequate space per person in sleeping area:
  - a. evacuation shelters, 20 ft<sup>2</sup> per person;
  - b. general shelters, 40 ft<sup>2</sup> per person;
  - c. special needs shelters, 60–100 ft<sup>2</sup> per person.
- 8 Free of injury/occupational hazards: With regard to general safety, some examples include:
  - a. Is the facility free of frayed or exposed electrical wires, carbon monoxide hazards, hazardous materials, etc.?
  - b. Are on-duty staff and members wearing PPE?
- 9 Free of pest/vector issues: note presence of mosquitoes, fleas, flies, roaches, rodents, etc.
- 10 Acceptable level of cleanliness: self-explanatory.
- 11 Electrical grid system operational: self-explanatory.
- 12 If generator in use: check for appropriate location, capacity, adequate fuel and ventilation.
  - a. If yes, indicate fuel type: gas, diesel, solar, etc.
- 13 Indoor temperature (°F): temperature measurement from random inside location (ASCE standard for temperatures in buildings).

## II. Sanitation

- 14 Adequate laundry services: provided with separate areas for soiled and clean laundry.
- 15 Adequate # operational toilets: minimum 1 per 20 persons or as specified by sex.
- 16 Adequate # operational showers/bathing facilities: 1 per 15 persons.
- 17 Adequate # operational hand-washing stations: 1 per 15 persons.
- 18 Hand-washing supplies available: water, soap, and paper towels; if water is unavailable, hand sanitizers (at least 60% alcohol).
- 19 Toilet supplies available: toilet paper, feminine hygiene supplies, and diapers/pads for children and adults.
- 20 Acceptable level of cleanliness: self-explanatory.
- 21 Sewage system type: self-explanatory.

## III. Health and Medical

- 22 Medical care services available: If yes, list type of care available in comments section.
- 23 Counseling services available: If yes, list type of mental/social services available in comments section.

## IV. Companion Animals

- 24 Companion animals present: animals in facility.
- 25 Animal care available: animals have clean, fresh water and food.
- 26 Designated animal area: animals located away from people and separately housed.
- 27 Acceptable level of cleanliness: self-explanatory.

## V. Food and Water

- 28 Preparation on site: self-explanatory.
- 29 Served on site: self-explanatory.
- 30 Safe food source: food source from licensed contractor or caterer.
- 31 Adequate supply: self-explanatory.
- 32 Appropriate storage: food stored according to safe storage practices to prevent contamination or spoilage – refer to local code or US Food Code.
- 33 Appropriate temperatures: hot food kept above 135 °F; cold food kept below 40 °F. Or refer to local code or US Food Code.
- 34 Hand-washing facilities available: fixed or portable, as long as they are operational.
- 35 Safe food handling: food preparers are using gloves, avoiding cross contamination, using appropriate utensils, etc. – refer to local code.
- 36 Dishwashing facilities available: place to wash, rinse and sanitize kitchen utensils and cooking equipment.
- 37 Clean kitchen area: self-explanatory.
- 38 Adequate water supply: drinking water in range of 1–2 gallons/person/per day, for all uses 3-5 gallons/person/per day.
- 39 Adequate ice supply: sufficient to maintain cold food temperatures.
- 40 Safe water from an approved source.
- 41 Safe ice from an approved source.

## VI. Solid Waste

- 42 Adequate collection receptacles: minimum 1 (30-gal) container for every 10 persons.
- 43 Appropriate separation between medical/infectious waste and general refuse.
- 44 Appropriate disposal and labeling in approved containers.
- 45 Appropriate storage and separation from common areas.
- 46 Timely removal of waste – collected regularly.
- 47 Check all types of waste generated at facility (e.g., solid, hazardous, medical).
- 48 Check all types of waste generated at facility (e.g., solid, hazardous, medical).

## VII. Sleeping and Child Care

- 49 Adequate cots/beds/mats for each resident/staff.
- 50 Adequate bedding for each cot, bed, or mat.
- 51 Clean bedding available: self-explanatory.
- 52 Adequate spacing: at least 3 ft between cots/beds/mats.
- 53 Clean diaper-changing facilities: self-explanatory.
- 54 Adequate toy hygiene: toys cleaned with a nontoxic, approved disinfectant. Refer to local code.
- 55 Safe toys: should adhere to applicable age group standards.
- 56 Clean food/bottle preparation area: self-explanatory.
- 57 Adequate child/caregiver supervision ratio: a. birth-12 mos (3:1); b. 13-30 mos (4:1); c. 31-35 mos (5:1); d. 3 years (7:1); e. 4-5 years (8:1); 6-8 years (10:1); 9-12 years (12:1).

## VIII. Critical Needs or Comments

List any critical needs requiring public health follow-up or comments.