



**National  
Voluntary Organizations  
Active in Disaster**

## POINTS OF CONSENSUS

### CLEAN UP, REPAIR AND REBUILD

National VOAD members agree to adhere to the following:

1. Cleanup and long term recovery assistance will be provided with dignity and in a respectful, non-judgmental, and nondiscriminatory manner.
2. Safety standards, including standards for handling of known hazardous materials, will be in place for field staff and volunteers prior to the start of work.
3. Support and engage with the communication and coordination systems in use in each community and promote a central and inclusive system for intakes, referrals, tracking and reporting of cleanup assistance.
4. Work will be done only upon written consent of the client. A clear scope of work will be agreed upon and signed before work begins.
5. Clients and residents will be encouraged and permitted to salvage any items before and during cleanup work.
6. Assist clients to repair and rebuild who have gone through a case management process consistent with the National VOAD Disaster Case Management Points of Consensus.<sup>1</sup>
7. Repairs and rebuilds will be done, at a minimum, in accordance with the International Residential Code and local codes, with local codes prevailing if there is a discrepancy between the two. We agree to aspire to the highest workmanship feasible.<sup>2</sup>

Members will encourage Long Term Recovery Groups to repair and rebuild above and beyond the International Residential Code and local codes. As a part of a larger commitment to our donors and the communities where we work we will adhere to the following guidelines:

- Repair and rebuild with materials and practices that are energy efficient.<sup>3</sup>
  - Mitigation practices will be used whenever possible to minimize the risk of future events.<sup>4</sup>
8. Repairs and rebuilds for disabled clients will be done in a way that gives the client needed access to the home. ADA standards, while not required under residential building code, should be considered and used whenever feasible.<sup>5</sup>
  9. Skilled construction person(s) will be available to supervise all volunteer work, and offer guidance throughout the long term recovery process.
  10. Local character of the client's community and cultural norms will be respected as they pertain to the repairing and rebuilding of the client's home. This may depend upon the resources available to the LTRG.

<sup>1</sup> For the National VOAD Disaster Case Management Points of Consensus see <http://www.nvoad.org/>

<sup>2</sup> For more information see <http://www.iccsafe.org/>

<sup>3</sup> For more information see Southface <http://www.southface.org/>, The Energy & Environmental Building Alliance <http://www.eeba.org/> and the U.S. Department of Energy <http://www1.eere.energy.gov/buildings/residential/>

<sup>4</sup> For more information see FEMA's Mitigation Best Practices (<http://www.fema.gov/plan/prevent/bestpractices/index.shtml>) and the Federal Alliance for Safe Home <http://www.flash.org/>

<sup>5</sup> For more information see <http://www.ada.gov/>

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# NATIONAL VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER POINTS OF CONSENSUS

## DISASTER CASE MANAGEMENT

1. Disaster Case Managers deployed by voluntary organizations play a unique role in the recovery of individuals and families. Voluntary organizations:
    - complement the services provided by governmental agencies; and
    - deliver Disaster Case Management services in fulfillment of their voluntary missions with respect for and knowledge of the local community.
  2. Disaster Case Management Standards provide voluntary organizations with guidance that promotes standardized delivery of Disaster Case Management services. Disaster Case Management Organizations establish policies and practices that reflect the National VOAD Disaster Case Management Values and Standards.
  3. Disaster Case Managers embrace the following underlying values for service:
    - Our commitment to caring and compassion for all people is the foundation for all we do.
    - Our work is accomplished in a respectful, non-judgmental, and non-discriminatory manner.
    - Trust, mutual respect, and equal partnerships of survivors and community service providers are essential elements of our work.
    - All people have inherent dignity, worth and autonomy.
    - Human relationships are essential to hope and healing.
    - Integrity is an essential component of our work and service in helping survivors navigate their recovery.
  4. Disaster Case Management is a time-limited process<sup>1</sup> by which a skilled helper (Disaster Case Manager) partners with a disaster affected individual or family (Client) in order to plan for and achieve realistic goals for recovery following a disaster. This comprehensive and holistic Disaster Case Management approach to recovery extends beyond providing relief, providing a service, or meeting urgent needs.
  5. The Disaster Case Manager serves as a primary point of contact, assisting the Client in planning and coordinating necessary services and resources to address the client's complex disaster recovery needs in order to re-establish normalcy. Disaster Case Managers rely on the Client to play an active or lead role in their own recovery.
  6. Disaster Case Management Organizations work together with community partners to overcome barriers which may otherwise prevent clients from accessing services and resources necessary for recovery.
  7. Disaster Case Management personnel are qualified as determined by the Voluntary Organization by life experience, skills, education, and training to access and coordinate services on behalf of clients. Disaster Case Managers may be Employees or Volunteers.
  8. Disaster Case Managers have specialized knowledge and skills regarding disaster recovery resources, advocacy and case presentation, assessment of the survivors and disaster recovery planning, the potential impact of the disaster on survivors' over-all well-being and ability to cope, and the recovery needs of vulnerable populations after a disaster.
  9. Disaster Case Managers and Organizations respect the client's right to privacy, protect client's confidential information, and maintain appropriate confidentiality when information about the client is released to others.
  10. In communities wherein multiple organizations provide disaster case management and supportive recovery services, technical systems should be used to reduce duplicative case management efforts and to facilitate coordination between organizations and systems across the continuum of care.<sup>2</sup>
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Outreach/Screening, Intake/Engagement, Assessment, Recovery Planning, Action and Advocacy, Monitoring, Closure  
NASW Social Standards for Social Work Case Management, 2013.

*The structure and definitions of the terms contained herein were originally published by the National VOAD, and were built upon the foundation of services provided by our member agencies. Please do not reproduce, store in a retrieval system, or transmit in any form or by any means, electrical, mechanical, photocopying, recording or otherwise without acknowledging the National VOAD which represents the long history these agencies have of providing services through all phases of disaster.*



## NATIONAL VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER POINTS OF CONSENSUS

### DISASTER EMOTIONAL CARE

In May 2005, the Emotional and Spiritual Care Committee of the National Voluntary Organizations Active in Disaster (National VOAD) approved points of consensus regarding provision of early psychological intervention for persons affected by disaster. The following statements about Early Psychological Intervention were included: Early Psychological Intervention is valued, has multiple components, requires specialized training to deliver, and represents one point of a continuum of emotional care. This Points of Consensus document was subsequently incorporated into guidelines for disaster emotional care by National VOAD member organizations.

In 2013, the National VOAD's Emotional and Spiritual Care Committee appointed a new subcommittee to write an updated list of agreed upon principles to guide both National VOAD organizations and community care providers to prepare for, respond to, and promote recovery from disaster. In the spirit of the National VOAD "Four C's" (cooperation, communication, coordination and collaboration), this document expands and replaces the 2005 Early Psychological Intervention Points of Consensus, complements the Disaster Spiritual Care Points of Consensus approved in 2009, and reflects current knowledge and ethical principles for disaster emotional care provision.

The following ten points of consensus are minimal standards, ethical, or operational principles specific to Disaster Emotional Care. To continue as a member of National VOAD, organizations are required to agree to abide by approved Points of Consensus. This document was presented by the Disaster Emotional Care subcommittee to the National VOAD Emotional and Spiritual Care Committee in May 2014. Guidelines to outline the implementation of the principles contained in this document are under development.

#### 1. Basic concepts of disaster emotional care

- a) Disaster emotional care is a valuable component of comprehensive disaster preparedness, response, and recovery.
- b) Disaster emotional care promotes resilience, helps mitigate long and short-term psychological consequences of disaster, and facilitates recovery.
- c) Disaster emotional care includes a range of supportive actions grounded in concepts of resilience and behavioral health.
- d) Disaster emotional care activities are informed by relevant research and established best practices.
- e) Disaster emotional care is not psychotherapy, nor a substitute for psychotherapy. However, it is often the first step that could lead to professional counseling and psychotherapy.
- f) Disasters significantly affect everyone and their communities, including individuals, family and social networks, rescue workers, health care providers, faith communities and spiritual care providers, impacted businesses, and vulnerable populations.
- g) People impacted by disaster will experience a range of emotional responses, of varying intensity and duration.
- h) People's emotional responses to disaster are influenced by a variety of factors, including degree of exposure, individual resilience, and recovery environment.
- i) Specialized training is necessary for effective disaster emotional care.

## 2. **Types of disaster emotional care**

Emotional care is provided across the disaster continuum from preparedness to response and recovery. Emotional care takes many forms, and emotional care providers are from diverse professional backgrounds.

Accepted types of disaster emotional care include, but are not limited to:

- Preparedness activities
- Assessment and triage activities
- Psychosocial support activities
- Early psychological intervention activities
- Recovery activities

## 3. **Capacity building, readiness and planning components of disaster emotional care**

Capacity building involves identifying and recruiting appropriate disaster emotional care providers. In order to deliver effective disaster emotional care, it is essential that providers engage in training and exercises, and become affiliated with a disaster relief organization. Disaster emotional care providers have an important role in planning and mitigation efforts and contribute toward building resilient communities.

## 4. **Local community resources**

Local providers of emotional care are an integral part of their communities pre-disaster and therefore are primary resources for also providing post-disaster emotional care services. Because local providers of emotional care are uniquely equipped to serve their communities, any emotional care services from outside the community support but do not substitute for local efforts. In this context, the principles of the VOA movement – cooperation, communication, coordination, and collaboration – are essential to the delivery of emotional care.

## 5. **Disaster emotional care and resilience**

Resilience is defined as the strengths of an individual or community to respond well to adversities. Resilience can be both inborn and developed, and most people are inherently resilient. Research suggests that most people impacted by a disaster will return to pre-disaster levels of functioning and some people will grow as a result of the experience. Disaster emotional care providers should encourage survivors to recognize and strengthen their resilience as a part of disaster emotional care intervention.

## 6. **Disaster emotional care in recovery**

In order for communities to fully recover and integrate the disaster into their history, emotional care is essential as part of a program of services. Disaster emotional care providers work with state and local recovery committees to offer services related to the disaster, encourage programs aimed at strengthening community resilience, and facilitate counseling and supportive services for persons in need. Pre-existing community programs are the primary emotional care providers whose capacity to serve the community will be acknowledged, supported, and strengthened.

## 7. **Disaster emotional care for the caregiver**

Providing emotional care in disaster can be an overwhelming experience. The burdens of caring for others in this context can lead to compassion fatigue. Understanding important strategies for self-care is essential for emotional care providers. Disaster response agencies have a responsibility to care for their own staff during all phases of disaster deployment and to model healthy work and life habits. Post-deployment support processes for emotional care providers are also essential.

## 8. **Disaster emotional care and its relationship to disaster spiritual care<sup>1</sup>**

Mental health professionals partner with spiritual care providers in caring for individuals and communities in disaster. Spiritual and emotional care are important components of comprehensive disaster care; these share some similarities but are distinct healing modalities. Spiritual care providers are important partners in referring individuals to receive care for their mental health and vice versa.

<sup>1</sup> See Light Our Way pp. 52-54

**9. Disaster emotional care and diversity**

As a foundation of disaster emotional care, providers respect diversity among colleagues in emotional and spiritual care and within communities served, including but not limited to race, ethnicity, culture, gender, age, sexual orientation, spiritual/religious practices, socioeconomic status, and disability. Disaster emotional care providers strive for cultural awareness and sensitivity, and adapt care strategies to address cultural differences in the individuals and communities they serve.

**10. Ethics and Standards of Care**

National VOAD members affirm the importance of professional standards of care and the obligation to follow legal and ethical guidelines. Adherence to common standards and principles promotes the delivery of effective and appropriate disaster emotional care.

Disaster emotional care services should incorporate the principles of:

- Personal and professional integrity
- Accountability and responsibility
- Recognition of the boundaries of one's competence
- Respect for people's rights and dignity, including privacy and self-determination
- Promotion of safety and protection of people affected by disaster

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# NATIONAL VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER POINTS OF CONSENSUS

## DISASTER SPIRITUAL CARE

In 2006 the National Voluntary Organizations Active in Disaster's Emotional and Spiritual Care Committee published Light Our Way to inform, encourage and affirm those who respond to disasters and to encourage standards insuring those affected by disaster receive appropriate and respectful spiritual care services. As a natural next step following the publication of Light Our Way and in the spirit of the NVOAD "Four C's" (cooperation, communication, coordination and collaboration), the Emotional and Spiritual Care Committee then began working to define more specific standards for disaster spiritual care providers. The following ten "points of consensus" set a foundation for that continuing work.

1. **Basic concepts of disaster spiritual care<sup>1</sup>**  
Spirituality is an essential part of humanity. Disaster significantly disrupts people's spiritual lives. Nurturing people's spiritual needs contributes to holistic healing. Every person can benefit from spiritual care in time of disaster.
2. **Types of disaster spiritual care<sup>2</sup>**  
Spiritual care in disaster includes many kinds of caring gestures. Spiritual care providers are from diverse backgrounds. Adherence to common standards and principles in spiritual care ensures that this service is delivered and received appropriately.
3. **Local community resources**  
As an integral part of the pre-disaster community, local spiritual care providers and communities of faith are primary resources for post-disaster spiritual care. Because local communities of faith are uniquely equipped to provide healing care, any spiritual care services entering from outside of the community support but do not substitute for local efforts. The principles of the National VOAD - cooperation, coordination, communication and collaboration - are essential to the delivery of disaster spiritual care.
4. **Disaster emotional care and its relationship to disaster spiritual care<sup>3</sup>**  
Spiritual care providers partner with mental health professionals in caring for communities in disaster. Spiritual and emotional care share some similarities but are distinct healing modalities. Spiritual care providers can be an important asset in referring individuals to receive care for their mental health and vice versa.
5. **Disaster spiritual care in response and recovery<sup>4</sup>**  
Spiritual care has an important role in all phases of a disaster, including short-term response through long-term recovery. Assessing and providing for the spiritual needs of individuals, families, and communities can kindle important capacities of hope and resilience. Specific strategies for spiritual care during the various phases can bolster these strengths.

<sup>1</sup> See Light Our Way pp. 52-54. <sup>2</sup> Ibid. <sup>3</sup> Ibid. <sup>4</sup> Ibid.

**6. Disaster emotional and spiritual care for the care giver**

Providing spiritual care in disaster can be an overwhelming experience. The burdens of caring for others in this context can lead to compassion fatigue. Understanding important strategies for self-care is essential for spiritual care providers. Disaster response agencies have a responsibility to model healthy work and life habits to care for their own staff in time of disaster.<sup>5</sup> Post-care processes for spiritual and emotional care providers are essential.

**7. Planning, preparedness, training and mitigation as spiritual care components<sup>6</sup>**

Faith community leaders have an important role in planning and mitigation efforts. By preparing their congregations and themselves for disaster they contribute toward building resilient communities. Training for the role of disaster spiritual care provider is essential before disaster strikes.

**8. Disaster spiritual care in diversity**

Respect is foundational to disaster spiritual care. Spiritual care providers demonstrate respect for diverse cultural and religious values by recognizing the right of each faith group and individual to hold to their existing values and traditions. Spiritual care providers:

- refrain from manipulation, disrespect or exploitation of those impacted by disaster and trauma.
- respect the freedom from unwanted gifts of religious literature or symbols, evangelistic and sermonizing speech, and/or forced acceptance of specific moral values and traditions.<sup>7</sup>
- respect diversity and differences, including but not limited to culture, gender, age, sexual orientation, spiritual/religious practices and disability.

**9. Disaster, trauma and vulnerability**

People impacted by disaster and trauma are vulnerable. There is an imbalance of power between disaster responders and those receiving care. To avoid exploiting that imbalance, spiritual care providers refrain from using their position, influence, knowledge or professional affiliation for unfair advantage or for personal, organizational or agency gain.

Disaster response will not be used to further a particular political or religious perspective or cause – response will be carried out according to the need of individuals, families and communities. The promise, delivery, or distribution of assistance will not be tied to the embracing or acceptance of a particular political or religious creed.<sup>8</sup>

**10. Ethics and Standards of Care**

NVOAD members affirm the importance of cooperative standards of care and agreed ethics. Adherence to common standards and principles in spiritual care ensures that this service is delivered and received appropriately. Minimally, any guidelines developed for spiritual care in times of disaster should clearly articulate the above consensus points in addition to the following:

- Standards for personal and professional integrity
- Accountability structures regarding the behavior of individuals and groups
- Concern for honoring confidentiality\*
- Description of professional boundaries that guarantee safety of clients\* including standards regarding interaction with children, youth and vulnerable adults
- Policies regarding criminal background checks for service providers
- Mechanisms for ensuring that caregivers function at levels appropriate to their training and educational backgrounds\*
- Strong adherence to standards rejecting violence against particular groups
- Policies when encountering persons needing referral to other agencies or services
- Guidelines regarding financial remuneration for services provided

<sup>5</sup> Ibid. <sup>6</sup> Ibid. <sup>7</sup> Church World Service "Standard of Care for Disaster Spiritual Care Ministries" <sup>8</sup> Church World Service "Common Standards and Principles for Disaster Response" \*See Light Our Way p. 16

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## **NATIONAL VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER POINTS OF CONSENSUS**

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### **DONATIONS MANAGEMENT**

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- 1-The mission of donations management is to provide a comprehensive process that organizes the giving, receiving and distribution of both solicited and unsolicited (or undesignated) donated cash and goods so that the maximum benefit is derived for the disaster survivors or people in crisis
- 2-The donations management process will treat disaster survivors with respect, courtesy and non-discrimination.
- 3-The principles of the four "Cs": Cooperation, Communication Coordination, and Collaboration should be exercised at all times.
- 4- Donations management activities span the four phases of emergency management: preparedness, response, recovery and mitigation.
- 5- Donations (cash, donated goods and services) with cash being best should primarily go to Voluntary Organizations Active in Disaster (VOAD).
- 6- The donations management function should work to assist communities and donors to donate responsibly through education, relationship building and sharing of donations management best practices.
- 7- Messaging to the public (donors, communities, partner organizations, etc.) is critical to success and must be well structured, timely, planned and well coordinated to address the combined informational needs of explaining how to donate cash, goods and volunteer services.
- 8- Plans should fully utilize voluntary organizations and partner organizations to manage donated goods through their strategic and unique skill sets.

9- Donations management uses a team approach engaging government, voluntary, community based organizations, businesses, and faith-based organizations.

10- Donations management uses a flexible approach that adapts to changing size, scope, cultural and local conditions before during and after an event.

11- Donations management will use information management systems that include but are not limited to the National Donations Management Network (NDMN) Tool.

12- Voluntary organizations agree to partner with state and local governments, which have key leadership roles in policy making and in the management of donated cash goods and volunteer services.

13- Fiduciary accountability, responsibility and transparency are key components of a comprehensive donations management plan.

14- Strategic and proper use of facilities is essential to good donations management. Facility types include but are not limited to: PODs, staging areas, warehouses, collection centers, distribution centers, and transportation/ technology hubs.

15- The National VOAD Donations Management Committee supports the donations management function through information dissemination, policy/plan development and training. 2

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# National Voluntary Organizations Active in Disaster

COOPERATION | COMMUNICATION | COORDINATION | COLLABORATION

## Long Term Recovery Group Committee Points of Consensus

The long-term recovery phase of disaster response is the period of time following a disaster in which the affected community works to establish a “new normal” state of living. This work is best done through a long-term recovery group (LTRG), “a cooperative body that is made up of representatives from organizations working within a community to assist individuals and families as they recover from disaster.”<sup>1</sup> While there are many components of long-term recovery and many different ways to organize a long-term recovery group, the goal is always the same: “to unite recovery resources with community needs in order to ensure that even the most vulnerable in the community recover from disaster.”<sup>2</sup> Therefore, the National VOAD Long-Term Recovery Group Committee offers the following points of consensus to communicate what local LTRG leaders can expect from members of the VOAD network.<sup>3</sup>

1. Affirming the critical role of LTRGs in whole community recovery, VOAD members support the formation and operation of local LTRGs by modeling the four Cs of the VOAD movement: cooperation, communication, coordination, and collaboration.
2. VOAD members offer services and resources without discrimination, looking to local representatives and the LTRG in order to serve with sensitivity to local cultural diversity.
3. VOAD members support the empowerment, resourcing, and development of local leadership, according to the purview of their respective response activities.
4. VOAD members offer their experience and expertise for the shaping of goals, policies, and guidelines and honor decisions made by the LTRG.
5. VOAD members offer their services and resources through the LTRG when possible, according to the priorities and guidelines established by the LTRG.
6. VOAD members honor a system for the fair, unbiased and need based distribution of resources and services in order to avoid the duplication of benefits and the creation of redundant structures, coordinating their efforts for the good of the affected community.
7. VOAD members model best practices for financial accountability, responsibility, client confidentiality and transparency in their communications with LTRG leaders and members.

<sup>1</sup> National Voluntary Organizations Active in Disaster, *Long-Term Recovery Guide* (2012), 6. . and *Long-Term Recovery Quick Reference Guide*(2012)

<sup>2</sup> Ibid.

<sup>3</sup> For more detailed information, see “Organizing a Long-Term Recovery Group” and “Long-Term Recovery Administration.” *Long-Term Recovery Guide*, 6-15.



# National Voluntary Organizations Active in Disaster

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8. VOAD members work with the leadership of the LTRG to resolve any conflicts and move the recovery forward.
9. VOAD members partner to stimulate a timely recovery for the benefit of disaster-affected persons and communities in accomplishing their recovery plans and to provide assistance with the development of local LTRG leadership and resource capacity.

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<sup>1</sup> National Voluntary Organizations Active in Disaster, *Long-Term Recovery Guide* (2012), 6, and *Long-Term Recovery Quick Reference Guide* (2012)

<sup>2</sup> Ibid.

<sup>3</sup> For more detailed information, see "Organizing a Long-Term Recovery Group" and "Long-Term Recovery Administration," *Long-Term Recovery Guide*, 6-15.

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## NATIONAL VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER POINTS OF CONSENSUS

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### MASS CARE

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Mass Care services in a disaster are intended to minimize the immediate, disaster-caused suffering and address the urgent needs of people through the provision of food, shelter, supplies and other support services. These provisions are intended as supplemental to individual preparedness.

Mass Care providers will:

1. Be transparent and collaborate with non-governmental organizations, government agencies and the private sector to provide Mass Care services.
2. Determine the scope, scale, type and duration of Mass Care services based on the impact of the disaster, community demographics, culture, economy and geography of the affected region and respond accordingly.
3. Provide care with dignity and respect, in a non-judgmental, confidential and non-discriminatory manner.
4. Provide services in a manner that ensures the safety, security and well-being of all, particularly children, youth and older adults.
5. Strive to offer reasonable accommodations for people with disabilities and functional needs.
6. Provide a safe place for individuals and families. Respect for the cultural and religious differences of residents will be maintained. Consideration will be given for the care of household pets.
7. Distribute food in a responsive, transparent and equitable manner. Every effort will be made to ensure meals meet the cultural, ethnic, religious and dietary needs of the affected individuals.
8. Distribute relief supplies in an equitable and coordinated manner while placing priority on items related to basic survival, health and sanitation.

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The National Volunteer Organizations Active in Disasters (VOAD) recognizes that volunteers are inherently valuable and, when properly coordinated, make up an essential part of the human resources needed to respond to disasters of all magnitudes. In times of disaster, people are drawn to help their neighbors physically, spiritually, and emotionally.

After a disaster there is a need for housing for volunteers who come into the area to assist the community in its recovery. There is a short-term need for early response volunteers which may be followed by a long-term need for volunteer work-teams that come in to muck out, repair, and rebuild. Hosting volunteers requires careful planning for facility use and services that may be offered.

Acknowledging that major disasters present significant challenges to those individuals and organizations responding, the National VOAD Volunteer Management Committee has developed this Points of Consensus document to provide best practices in the area of volunteer housing.

1. Volunteer host sites will be respectful of volunteers regardless of ethnicity, socio-economic, culture, gender, age, sexual orientation, spiritual/religious practices or disabilities.
2. Volunteer host sites will be established and remain connected to their local community organizations active in the disaster recovery effort.
3. Volunteer host sites will ensure their locations are safe, secure, sanitary and in compliance with any housing codes.
4. Volunteer host sites will ensure they are financially stable and sustainable.
5. Volunteer host sites will provide adequate space per person for sleeping arrangements and gender separation.
6. Volunteer host sites will have sufficient toilets, sinks and showers for volunteers or make suitable arrangements with other facilities in the community.
7. Volunteer host sites will be suitably equipped for meal preparation, food storage and dining.
8. Volunteer host sites will provide adequate space for volunteer leisure time.
9. Volunteer host sites will ensure there is adequate parking space for volunteers' transportation.
10. Volunteer host sites will have a safety plan in place and available to volunteers.
11. Volunteer host sites will provide separation between areas assigned to volunteer groups and normal day to day business activities, e.g. child daycare/education programs, being conducted onsite.
12. Volunteer host sites will provide volunteers with appropriate on-call emergency contacts.
13. Volunteer host sites will communicate to volunteers all policies of the host site.
14. Volunteer host sites will maintain records on financial transactions.
15. Volunteer host sites will ensure the facility is ready for volunteers to arrive with attention to cleanliness, supplies and maintenance.

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# NATIONAL VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER POINTS OF CONSENSUS

## VOLUNTEER MANAGEMENT

The National Volunteer Organizations Active in Disasters (VOAD) recognizes that volunteers are inherently valuable and, when properly coordinated, make up an essential part of the human resources needed to respond to disasters of all magnitudes. In times of disaster, people are drawn to help their neighbors physically, spiritually, and emotionally. We believe volunteers' skills are best utilized and are most effective when they volunteer as part of an established organization trained in disaster response activities. However, we realize that not all volunteers will be affiliated with an organization and trained prior to a disaster. We acknowledge that they too are a valuable resource and should receive the same level of care brought forth in this document. In addition, we acknowledge that volunteer organizations have the right to select volunteers in agreement with their Mission, Code of Conduct, and/or Statement of Faith. Acknowledging that major disasters present significant challenges to those individuals and organizations responding, the National VOAD Volunteer Management Committee has developed this Points of Consensus document to provide best practices in the area of volunteers' rights and their responsibilities when serving in a non-paid capacity with any National VOAD member organization.

### 1. Right To Be Treated With Respect

<i>Volunteer Rights</i>	<i>Volunteer Responsibilities</i>
Volunteers have a right to be respected regardless of ethnicity, socio-economic, culture, gender, age, sexual orientation, spiritual/religious practices and disabilities.	Volunteers should respect the organization, support its mission statement, and agree with its core values. They should respect all those with whom and for whom they serve regardless of ethnicity, socio-economic, culture, gender, age, sexual orientation, spiritual/religious practices and disabilities.

### 2. Right To Be Valued

<i>Volunteer Rights</i>	<i>Volunteer Responsibilities</i>
Volunteers have the right to be treated as a valued team member, treated with fairness and equity; and have the right to understand how the assigned task is a valuable part of fulfilling the organization's mission. Volunteers should be recognized and thanked for their contribution to the organization.	Volunteers should serve and interact with their colleagues with respect, fairness and equity. Volunteers should maintain an enthusiastic and flexible attitude. In addition, volunteers should provide contact information so they can be properly thanked and recognized.

**3. Right To Organized, Structured System That Matches Skills With Tasks**

<i>Volunteer Rights</i>	<i>Volunteer Responsibilities</i>
Volunteers have a right to know about the organization in which they are serving including its mission, leadership, organization and financial structure, and its management liability practices. They have the right to know about available volunteer opportunities and the types of skills needed to perform tasks. They should expect their time and skills to be used wisely and effectively.	Volunteers should seek information about an organization, its mission, and structure to determine if it is a good fit with their own skills and values. Volunteers should be honest in communicating their skill level, experience, and availability. Volunteers should use their time and skills wisely and should cooperate in the organization's process and procedures.

**4. Right To Clear Expectations**

<i>Volunteer Rights</i>	<i>Volunteer Responsibilities</i>
Volunteers have a right to know what assignments or tasks are needed and clear expectations of the task that they have agreed to perform including the estimated time and parameters of the task. Volunteers have the right to ask questions and clarify expectations at any time during their service.	Volunteers should make sure they understand how to do the assigned task and how to properly operate necessary equipment. They should ask questions to clarify expectations and bring attention to any impediments that would hinder them from performing a task.

**5. Right To Safe Work Environment**

<i>Volunteer Rights</i>	<i>Volunteer Responsibilities</i>
Volunteers have the right to know that the organization has taken appropriate precautions to provide a safe work environment; to identify potential hazards, and to identify safety equipment needed to perform their assigned tasks safely and effectively.	Volunteers are responsible for following safety guidelines and wearing safety equipment as directed. Volunteers should not accept assignments which are beyond their ability. It is the volunteer's responsibility to let a supervisor know if they are uncomfortable in a situation or performing a task. Volunteers should make the organization aware of any potential safety issues. Volunteers should respect an organization's request to perform background checks.

<b>6. Right To Confidentiality</b>	
<i>Volunteer Rights</i>	<i>Volunteer Responsibilities</i>
Volunteers should expect that the organization has taken proper precautions to safeguard confidential information and protect their privacy.	Volunteers should respect the confidentiality of any proprietary information of the organization. They should respect and protect the privacy of their colleagues and clients, and take prudent steps to minimize the potential for disclosure of their own confidential information.

<b>7. Right To Supervision, Direction, And Training</b>	
<i>Volunteer Rights</i>	<i>Volunteer Responsibilities</i>
Volunteers have the right to a general orientation and training. They should know their direct supervisor, the chain of command, and the appropriate way to address and resolve issues.	Volunteers should attend orientations or trainings as required. They should understand and respect the chain of command, and take direction from their direct supervisor. Volunteers should resolve conflicts in a mature, respectful manner within the chain of command.

<b>8. Right To Clear, Two-way Communication</b>	
<i>Volunteer Rights</i>	<i>Volunteer Responsibilities</i>
Volunteers have the right to be given clear direction and to give feedback to their supervisor (directly) as well as the organization.	Volunteers should actively participate in two-way communication. Volunteers are welcome to provide honest feedback in a respectful manner.

<b>9. Right To Be Cared For And Have Access To Care Resources</b>	
<i>Volunteer Rights</i>	<i>Volunteer Responsibilities</i>
Volunteers have the right to be cared for by the organization, which could include the provision of food, water, housing, medical care, spiritual and emotional care, etc.	Volunteers should take personal responsibility to ensure their needs are met. This could include requesting rest periods; requesting reassignments when needed; monitoring their own intake of food and water; and seeking medical, spiritual, or emotional care when needed.

Initials: \_\_\_\_\_