



Background Paper for the Development and Application of a Disaster Resilience Standard for Community- and Faith-Based Organizations

I. Overview of standards and the standard-setting process

Among the definitions of “standard” contained in the Merriam-Webster on-line dictionary are “something established by authority, custom, or general consent as a model or example; something set up and established by authority as a rule for the measure of quantity, weight, extent, value, or quality; a means of determining what a thing should be.”¹ For the purposes of helping to address disaster resilience in community- and faith-based organizations (CBOs/FBOs), the key elements of this definition can be distilled down to “**a standard is a *model*, established by *general consent*, to measure the *quality of disaster resilience improvement*.**”^{*}

Measurement of compliance with a standard can be either objective or subjective. A standard can be considered to be objective if compliance with the standard is perceived the same way by all. For example, a standard stating that a building should be able to be evacuated within five minutes of the sounding of the fire alarm, which can be objectively measured during a drill. A subjective standard is one in which perception of compliance is based on judgments influenced by individual experience, education, or training. For example, determining compliance to a standard stating that an organization should have a comprehensive emergency operations plan will be influenced by the individual’s perception of what a “comprehensive” emergency plan would include. Most existing emergency management standards (addressed below) are subjective standards.

Standard setting efforts typically follow guidelines established by the American National Standards Institute (ANSI). The ANSI standards setting process facilitates cooperative work to develop voluntary standards in a way that meets “the Institute’s essential requirements for openness, balance, consensus and due process.” Following the ANSI process ensures that standards “are developed in an environment that is equitable, accessible and responsive to the requirements of various stakeholders” and “that all interested and affected parties have an opportunity to participate in a standard’s development.”² Although the CBO/FBO Disaster Resilience Standard Project is not formally aligned with ANSI, it will follow its general guidelines for an open standard setting process. The February 18-19, 2009, California Volunteers/Fritz Institute Workshop is the first step in this collaborative process.

A standard can be of great benefit in developing and sustaining disaster resilience activities. A standard developed through an ANSI-type process reflects a consensus definition of what elements should be included as part of these efforts. As the organization undertakes these efforts, the standard provides a tool for conducting a self-assessment of the program. It provides a “checklist for a check-up” and can help focus continuous improvement efforts. Finally, documenting compliance with a standard can demonstrate competency, resilience, and preparedness to others. Ultimately, this could include “second party” reviews by funding organizations and occasional recertification as part of the funding process. Additionally, it

* For the purposes of this work, “Resilient” means an organization can rebound from the disruption resulting from a disaster and resume a limited set of pre-identified critical functions in a defined time frame.

could result in program certification or accreditation with the reviews done by independent third-party assessors.

II. Existing emergency preparedness standards and how they might relate to a standard for CBO/FBO disaster resilience

There are presently no standards that directly address disaster resilience programs for community-based organizations. Emergency management standards exist for local and state government, business, and health care organizations. There are also standards for business continuity plans and for business continuity professionals. Although elements of these standards are certainly applicable to CBOs/FBOs, taken as a whole they are probably too detailed and complicated, and in all likelihood would be prohibitively burdensome for most of these organizations to meet.

Current emergency/disaster management standards and business continuity professional standards include those developed by the National Fire Protection Association (NFPA), Emergency Management Accreditation Program (EMAP), Joint Commission on the Accreditation of Health Care Organizations (Joint Commission), and the Institute for Continuity Management. Table 1 compares the scope of these four standards, described below.

NFPA 1600 – Standard on Disaster/Emergency Management and Business Continuity Programs – 2007 Edition³. The purpose of this standard is to “provide disaster and emergency management and business continuity programs with the criteria to assess current programs or to develop, implement, and maintain aspects for prevention, mitigation, preparation, response, and recovery from emergencies.”⁴ The standard further states that it “shall apply to public, not-for-profit, and private entities.”⁵ The Standard consists of 83 elements in 19 topic areas. It is applied through self-assessment.

Emergency Management Standard by EMAP – 2007 version is targeted to state and local governments, although it is also being used by universities and other organizations to guide and measure emergency preparedness.⁶ The Standard consists of 63 elements in 18 topic areas. It is applied through self-assessment followed by peer review if the jurisdiction is applying for accreditation.

The mission of the Joint Commission is to “continuously improve the safety and quality of care provided to the public” through accreditation of various types of healthcare organizations, including ambulatory care facilities (e.g., health clinics). The Standards for Ambulatory Care include both “patient-focused” and “organization” functions.⁷ Facility emergency response is included under the “organization” function. The Joint Commission standards are organized by “standard” (performance expectation), “rationale” (background or justification), and “elements of performance” (specific performance expectations). It is applied through self-assessment followed by review by a team of professional assessors if the facility is applying for accreditation. The Joint Commission Standard is a regulatory requirement for hospital and ambulatory care clinic accreditation.

The Institute for Continuity Management is focused on business continuity and educational and certification programs for those engaged in the practice of business continuity planning and management.⁸ It currently certifies individuals and vendors in the business of developing business continuity programs based upon knowledge in 10 areas defined in the Professional Practices for the Business Continuity Planner. These standards are not directly applied to programs.

Table 1 - Comparison of Various Emergency Management Standard Topic Areas:

NFPA 1600	EMAP	Institute for Continuity Mgmt	Joint Commission*
Program Administration	Program Administration & Evaluation	Program Initiation/ Management	
Program Coordination	Program Coordination	(included in Program Management)	Plan developed with leadership
Advisory Committee	Advisory Committee	Coordination with External Agencies	Coordination with community
Program Evaluation	(included with Program Administration)	(included in Exercises)	
Laws and Authorities	Laws and Authorities		
Risk Assessment	Hazard Identification, Risk Assessment, & Consequence Analysis	Risk Evaluation & Control	Hazard vulnerability analysis
		Business Impact Analysis	
Incident Prevention	Prevention and Security	(included in Strategies)	
Mitigation	Hazard Mitigation	Business Continuity Strategies	Plan addresses mitigation
Resource Management & Logistics	Resource Management & Logistics	(included in Plans and in Response)	Logistics related to critical supplies
Mutual Aid/ Assistance	Mutual Aid	(included in Response)	Identify external personnel
Planning	Planning	Business Continuity Plans	Written emergency plan
			Plan addresses response & recovery
Incident Management	Incident Management	(included in Plans and in Response)	All-hazards command structure
			Assign staff to essential roles
Communications & Warning	Communications & Warning	(included in Plans)	Notification & alternative communications
Operational Procedures	Operations & Procedures	Emergency Response & Operations	Plan includes processes for initiating actions
Facilities	Facilities	(included in Plans and in Response)	Alternate means of meeting utility needs
Training	Training	Awareness & Training	
Exercises, Evaluation & Corrective Action	Exercises, Evaluation & Corrective Action	Exercise, Audit, & Maintenance	Conduct drills & Identify improvements
Crisis Communications & Public Information	Crisis Communications & Public Information	Crisis Communications	
Finance & Administration	Finance & Administration		

* Ambulatory Care Standard EC.4.10 “Addresses emergency management” and EC.4.20 “Conducts drills regularly to test emergency management”

In addition to these standards, the U.S. Department of Homeland Security (DHS) is currently sponsoring an effort to identify voluntary private sector preparedness standards and certification programs through the Voluntary Private Sector Preparedness Accreditation and Certification (PS-Prep) Program. The goal of PS-Prep is to “improve private sector preparedness in disaster management, emergency management, and business continuity to enhance nationwide resilience in an all hazards environment.”⁹ Based on the program description included in the Federal Register, “PS-Prep will raise the level of private sector preparedness through a number of means, including (i) establishing a system for DHS to adopt private sector preparedness standards; (ii) encouraging creation of those standards; (iii) developing a method for a private sector entity to obtain a certification of conformity with a particular DHS-adopted private sector standard, and encouraging such certification; and (iv) making preparedness standards adopted by DHS more widely available.”¹⁰

As mentioned previously, a standard for disaster resilience or emergency preparedness targeted specifically to CBOs/FBOs does not currently exist. However, both the Maryland Association of Nonprofit Organizations and the Minnesota Council of Nonprofits have developed management standards for nonprofit organizations and their approaches can inform our current disaster resilience standard setting effort. Neither directly addresses emergency management, although both tangentially address risk management. The Minnesota “Principles and Practices for Nonprofit Excellence” identify 133 management practices, grouped in 10 topic areas, to “provide specific guidelines for individual organizations to evaluate and improve their operations, governance, human resources, advocacy, financial management and fundraising.”¹¹ The organization’s website specifically states that the practices “are not meant for use by funders or government to evaluate nonprofit organizations” but rather “designed to support the effective functioning of our sector by recommending specific best practices.”¹² The Maryland “Standards for Excellence” identify 53 elements grouped under 8 “guiding principles”. The website states “these Standards describe how nonprofits should act to be ethical and be accountable in their program operations, governance, human resources, financial management and fundraising.”¹³ The Maryland program includes a voluntary, peer-review certification program that involves a written application and a site review by a trained assessment team. Author Paul C. Light, in Pathways to Nonprofit Excellence, in his discussion of the Minnesota and Maryland standards, notes that “standards are not about finding perfection, but about encouraging nonprofits to aspire to higher performance.”¹⁴

III. Reviewing the key elements of a disaster resilience program/plan

Before embarking on the identification of a standard for measuring CBO/FBO disaster resilience, there must be consensus on the key *elements* of CBO/FBO disaster resilience. A variety of studies have begun to converge on these elements. Four of these, encompassing differing perspectives on emergency preparedness and crisis management for organizations, are summarized below.

First, organizations face day-to-day and unexpected crises (such as funding cuts, supply chain disruptions, death of staff, or a sudden increase in demand for services) and these have been well-studied. A recent overview of organizational crisis readiness identified seven “significant” predictors of crisis readiness.¹⁵



- Organization's performance is rated as high
- Organization has experienced or been threatened by an external crisis
- Leadership has a shared vision of mission
- Organization engages in preparedness planning
- Organization engages in preparedness training
- Organization actively monitors threats
- Organization engages in business continuity planning.

Second, a review of relevant preparedness literature conducted by Jeannette Sutton and Kathleen Tierney for the Fritz Institute identified eight dimensions (defined as “the various goals or end-states that preparedness seeks to achieve”) of preparedness:¹⁶

- Hazard knowledge
- Management, direction, and coordination of emergency operations
- Formal and informal response plans and agreements
- Resource acquisition aimed at ensuring that emergency functions can be carried out smoothly
- Life safety protection
- Property protection
- Emergency coping and restoration of key functions
- Initiation of recovery activities

At the local level, a variety of initiatives have aimed to improve community preparedness and response capacity among CBOs/FBOs. Collaborating Agencies Responding to Disasters (CARD), based in Alameda County, has gained a national reputation in part through its work developing tools and templates for CBO/FBO emergency preparedness. Similar work has been undertaken by San Francisco CARD (Community Agencies Responding to Disaster) and Santa Clara's CADRE (Collaborating Agencies Disaster Relief Effort). Building on the work of CARD, the Seattle and King County (Washington) Public Health Department has made an effort to identify standards and indicators for community based organization emergency preparedness and response. This is part of their overall efforts to work collaboratively with community-based organizations as part of their Vulnerable Populations Action Team (VPAT). The VPAT draft standard includes 6 outcomes, 14 standards, and 31 indicators.¹⁷ The six outcomes are:

- Completion of an agency emergency plan
- Plans and protocols are shared, exercised, and tested
- Relationships with emergency services are established and maintained
- Vendor relations are secured for critical functions (supply chain management)
- Memorandums of understanding are in place with partner organizations
- Staff are prepared to shelter-in-place
- Organization engages in business continuity planning.

The Nonprofit Risk Management Center has published a guide for non-profit organization developing crisis management programs.¹⁸ It addresses both external crises (including both community-wide emergencies such as earthquakes and floods and more localized events such as a building fire or



prolonged utility outage) and internal crises (such as embezzlement, workplace violence, or food poisoning at a charity event). It identifies three “treatment phases”:

- Phase 1 - Anticipating a Crisis, including identifying risks, planning, forming a crisis response team, coordinating with partners, and exercises;
- Phase 2 - Preventing a Crisis, including mitigation; and,
- Phase 3 - Surviving a Crisis, including implementing plans, communicating with constituents and with the media, and post-event evaluation.

IV. Proposed elements and possible indicators of a CBO/FBO Disaster Resilience Standard – A Strawman

Based on the findings and the literature discussed above, the following *elements* are offered as a starting point for discussion regarding a comprehensive CBO/FBO disaster resilience standard:

1. Disaster mission
2. Hazard identification and assessment
3. Facility resilience
4. Disaster operations plans
5. Disaster-specific agreements for collaboration and support
6. Donations and volunteer management
7. Training, exercises and continuous improvement
8. Client and community education
9. Financial resilience, stability and planning

To stimulate a discussion and fleshing-out of the content of each element, the following discussion points are offered. These discussion points may form the basis for appropriate *indicators* for each element, that is, measures or methods to indicate or document successful achievement of a given standard element.

- 1) Disaster mission
 - a. Is the organization’s disaster mission defined? Has it been formally adopted by the organizations’ governing board? Is it part of the organization’s strategic plan? Are management, staff, volunteers, donors, and clients aware of this disaster mission?
- 2) Hazard identification and assessment
 - a. Has the organization reviewed the jurisdiction’s hazard and vulnerability assessment? Has the organization identified the natural and human-caused hazards that could impact its facilities and operations?
 - b. Are structural hazards identified?
 - c. Are non-structural and content hazards identified?



- d. Are adjacent or neighborhood hazards identified?
 - e. Are workplace environmental hazards identified?
- 3) Facility resilience (structural/non-structural mitigation, stockpiling supplies, alternate locations, etc.)
- a. Has the organization's board adopted a Facility Resilience Strategy to mitigate structural and non-structural hazards to align building(s) performance with the Disaster Mission?
 - b. Are threats in the immediate environment (adjacent structures, security, workplace) identified and addressed in the Strategy?
 - c. Are critical resources for organization operations identified, including energy, staffing, and supply chains? Are appropriate resources (including emergency supplies) stockpiled?
 - d. Are there alternate locations identified where disaster operations will be carried out and services provided if the primary cannot be used?
- 4) Disaster Operations Plans (and the linkages between Emergency Response, Continuity of Operations/Business Continuity, and facility emergency plans)
- a. Does the organization have an organized disaster management program that is developed and maintained with input from all stakeholders, including management, staff, volunteers, donors, and clients?
 - b. Does the organization have a Continuity of Operations Plan (COOP)/Business Continuity Plan (BCP)?
 - c. Do all organization facilities have building emergency (including evacuation) plans? Are these plans regularly tested?
 - d. Does the organization have a Disaster Response Plan that defines its disaster mission/role and how it will carry out that role (including concept of operations)? Is this Plan integrated with the COOP/BCP?
 - e. Do the plans describe the roles of staff and volunteers needed to carry out the plan (organized using the principles of the Incident Command System, if appropriate)?
 - f. Are the plans supported by checklists/procedures?
 - g. Are procedures in place for assessing the impact of the disaster event on the organization, its clients, its disaster mission, and its facilities, including reporting information to local government(s)?
 - h. Do the plans identify resource needs? Do they identify how these resources will be obtained (procurement, local government, mutual aid)? Are agreements with critical sources in place?
 - i. Is there a process in place for communicating with staff/volunteers, supporting organizations, and local government? Does the plan include an alternate if normal (landline and cell phone) communication are not available?
 - j. Has the organization identified a location for managing disaster operations and a survivable location for delivering disaster services?



- 5) Disaster-specific agreements with partners and suppliers (peer organizations, local government, suppliers, etc.)
 - a. Has the organization identified opportunities for collaboration to carry out essential functions during disasters?
 - b. Has the organization established disaster response and recovery relationship with local government, identifying procedures for collaboration and coordination?
 - c. Has the organization negotiated MOUs with local governments and partner organizations to coordinate response and recovery activities, and to provide for cost recovery?

- 6) Donations and volunteers management
 - a. Has the organization established plans and procedures for accepting, managing and sharing donated services, goods and cash, as well as recruiting and managing volunteers?
 - b. Does the organization have plans in place to communicate resource needs?

- 7) Training, exercises and continuous improvement
 - a. Has an emergency preparedness training program been established? Have key staff/volunteers with emergency response roles (in the COOP, response plan and/or in the facility emergency plan) been trained in those roles?
 - b. Are the organization's emergency response, COOP and other disaster plans regularly tested?
 - c. Does the organization participate in local jurisdiction emergency exercises?
 - d. Is the provision of Staff personal/family preparedness training required as part of the organization's Human Resources Policy? Is there a mechanism to incorporate 'lessons learned' from training and exercises into updated disaster plans and procedures?
 - e. Is the training program sustained (such as through an annual training schedule)?

- 8) Client and community education
 - a. Has the organization established educational goals for client awareness and preparedness?
 - b. Does the organization provide training and/or outreach materials on disaster preparedness for its clients?

- 9) Financial resilience, stability and planning
 - a. Has a post-disaster fundraising strategy been established in collaboration with funders, government and partner service providers?
 - b. Has the organization defined its role in the community's long term recovery and how might the organization participate in the long-term recovery planning process?
 - c. Does the organization have a process for tracking disaster-related expenditures (including tracking time) that is consistent with applicable local, state and federal procedures for reimbursement?
 - d. Does the organization have MOUs and procedures in place to recovery disaster related costs from local, state and federal governments?
 - e. Has the organization addressed the need for a Reserve Fund for Emergency Response with funders and collaborative partners?



¹ www.merriam-webster.com

² “Introduction to ANSI”, American National Standards Institute website (www.ansi.org)

³ National Fire Protection Association (NFPA), NFPA 1600 – Standard on Disaster/Emergency Management and Business Continuity, 2007 Edition, (www.nfpa.org)

⁴ Ibid, Section 1.2

⁵ Ibid, Section 1.3

⁶ Emergency Management Accreditation Program (EMAP), Emergency Management Standard by EMAP, 2007 (www.emaponline.org)

⁷ Joint Commission on the Accreditation of Healthcare Organizations, Standards for Ambulatory Care 2005-2006, specifically standards related to “Management of the Environment of Care”

⁸ DRI – The Institute for Continuity Management, Professional Practices for the Business Continuity Planner, 2003 (www.drii.org)

⁹ PowerPoint Presentation by Dennis Schrader to the Seventh Plenary Session of the ANSI Homeland Security Panel, October 2, 2008.

¹⁰ Federal Register Vol. 73 No. 248, Wednesday December 24, 2008, page 79140.

¹¹ Minnesota Council of Nonprofits, “Principles and Practices for Nonprofit Excellence”, Introduction, (www.mncn.org/info_principles)

¹² Ibid

¹³ Maryland Association of Nonprofit Organizations, “Standards for Excellence”, (www.marylandnonprofits.org)

¹⁴ Paul C. Light, Pathways to Nonprofit Excellence, Brookings Institution, 2002, page 34.

¹⁵ “Predicting Organizational Crisis Readiness: Perspectives and Practices toward a Pathway to Preparedness”, Paul C. Light, The Center for Catastrophe Preparedness and Response Project on Organizational and Community Preparedness, page 51-52

¹⁶ Jeanette Sutton and Kathleen Tierney, Disaster Preparedness: Concepts, Guidance, and Research, 2006, Natural Hazards Center, University of Colorado (www.colorado.edu/hazards), p 6-7

¹⁷ ‘Community Based Organizations: Standards and Indicators for Emergency Preparedness’, draft dated 1/31/08, Seattle-King county Public Health Department

¹⁸ Melanie L. Herman and Barnara B. Oliver, Vital Signs: Anticipating, Preventing, and Surviving a Crisis in a Nonprofit, Nonprofit Risk Management Center, 2001