Special Needs Registry Survey Application

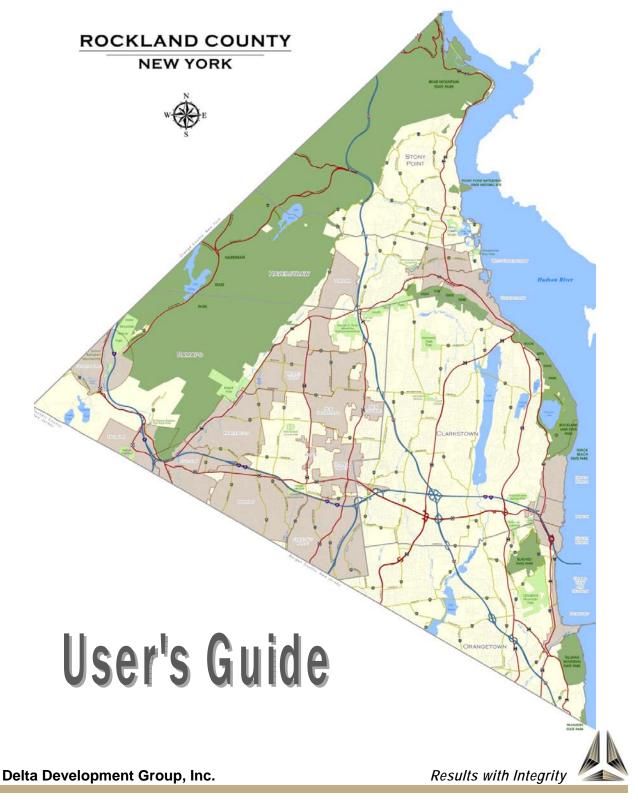


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Overview

During a natural or man-made disaster, particularly one that requires the evacuation of densely populated coastal communities, emergency responders must be able to quickly identify the location, accessibility issues, and mobility requirements of people with special needs. These individuals are typically characterized by impairments and disabilities. While the special needs population shares a common need for particular attention during emergencies, it is not a homogenous group. The first line of defense against the effects of a disaster is personal preparedness. During an emergency, the government and other agencies may not be able to meet the needs of individuals with special needs.

Rockland County sought to increase its knowledge of the number and needs of people with special needs and strengthen/create plans to assist them before, during, and after an emergency. In order to identify individuals with special needs in Rockland County, the Special Needs Registry Survey Application (Registry) Web site was implemented for the county and all its municipalities. The Registry allows residents with special needs and their families, friends, and associates an opportunity to provide information to emergency response agencies, so responders can plan to serve them in a disaster or emergency situation. Local officials will also be able to notify registered individuals when an evacuation has been ordered.

Along with helping to identify the special needs population, the County has a desire to inventory existing facilities and provide special needs shelter recommendations. A special needs facility is a physical structure within which individuals reside (either permanently or temporarily) who may be at an increased risk during a disaster when orders to evacuate or shelter-in-place are given. The information provided will be used, in conjunction with information gathered at the time of the incident, to enable decision makers to allocate resources and provide support during times of disaster. With the assistance of local resources and their knowledge, existing facilities and possible special needs shelters along with all associated resources were entered into the Registry, giving the County the ability to rapidly identify and deploy resources during an emergency.

The Registry provides analytical and planning tools (e.g., what if scenarios, plume analysis, geographic analysis). It is a proven product that allows the County to collect and compile survey information in an electronic format that is easily searched and spatially displayed. It also provides several reporting mechanisms so emergency response personnel can quickly generate manifests to use as a reference to inform and notify individuals of a possible impending incident. The information collected is confidential and will not be available to the public. Security measures are taken by the county department to protect the data. In addition, policies and procedures have been applied so that the information is only used for emergency planning and response purposes.



Overview (Continued)

The Registry incorporates the use of icons to help simplify the functionality of the survey completion. The icons and their corresponding functions used in this system are detailed below:

-	Accepts the option or search criterion. Saves the current operation.
0	Cancels the current operation.
ļ	Edits the information on the respective line.
1	Deletes the information on the respective line.
÷	Expand/Show – allows users to view a "hidden" section.
Ð	Collapse/Hide – allows users to save space on the screen and to "hide" a visible section.
Q,	Allows users to view details about a user.
0	Provides contact information for county personnel.

In summary, the Registry helps state and local governments identify and assist individuals with special needs during an evacuation event. It is an efficient way to catalog individuals and their needs, map the evacuation area, and deploy the necessary resources. It provides the user with the ability to dynamically report which individuals need assistance based on the geographic nature of the incident. The system allows citizens to register themselves or other individuals on their behalf online. The system not only helps emergency managers respond during an emergency but is a critical tool for pre-planning and exercises.

Registration and Public Login

Users can access the survey application from any computer that has an Internet connection. This application has been designed to be used with MicroSoft Internet Explorer 6.0 or higher. Using other browsers such as Netscape navigator or Mozilla Firefox may yield unpredictable results.

Note: Pop-up blockers will cause the system to function improperly. Please set your browser to allow pop- ups for this application. Also, using the "Back" button on your Web browser will produce unpredictable results. Please use the appropriate navigation buttons designed within the application.

The Registry's registration and public login section serves several purposes:

- It provides a brief overview of the Registry program and how it benefits the individuals who use the registry tool.
- New user registration it is the gateway for new users to register.
- Existing users it provides a public interface or login for registered or existing users to sign in to the system.
- Administration it allows administrators to gain access through the same portal to manage surveys and user accounts.
- Login credentials if existing users forget their credentials, they may submit a request to have a username and/or password re-created. The system automatically sends the individual an email with the new login information.



Figure 1: Registration and Public Login Home Page

New User Registration

The New User Registration section provides the ability for self-service registration for new users of the system. In the case of a new user, or one who does not have an account, registration is required prior to completing a survey. A new user may be the person with a special need or a third-party person acting on his/her behalf.

Public Login for Existing Users

An existing user is one who has already registered through the new registration process and has an account in the survey system. This user is now ready to complete a survey for themselves or on behalf of someone else.

Forgot Username

If a user has forgotten his/her username, a link is provided that will allow the user to request their username via their email. If an email was not provided during the registration process, the user may contact their local EMA office for assistance.

	your email below, and your username will be sent to you
in a rev	v minutes.
Email:	Submit

Figure 2: Description of Standard Username

Forgot Password

If a user has forgotten his/her password, the system has the ability to email a new password. Once the user has entered and submitted the assigned username in the space provided on the New Password Request screen, the password will be automatically generated and sent to the email address the user provided during the account registration process.

Figure 3: New Password Request

		new password will be sent to
your email a	ddress in a few minutes	Submit
	contact your county's	



County EMA Contacts

In the event a problem arises when the user tries to reset their username and/or password, a link has been provided from the Forgot Username and Forgot Password sections that contains the county contact information for assistance.

Figure 4: List of County Contacts

your chairad	dress in a few minutes.	
Username: js	mith@deltaone.com	ibmit
Тос	contact your county's EMA office <u>click her</u>	<u>e</u>
	County Phone Directory	
		contact the representative in the appropriate cour
	County Name	County Phone
		(834) 546-1331



Create an Account

Exercise 1:

This exercise will walk you through the process of creating an account in the Registry.

Figure 5: Registration and Public Login Section

Exeting Liters 😡	
Iser Name:	Rockland County has developed this registry for residents with limited mobility or special needs, which might impact a timely response during an emergency. If you believe you, or someone you care for, is unable to independent with response during an emergency of you believe you, or someone you care for, is unable to the source of the
Password:	independently act upon emergency protective orders, please continue with registration:
	Why should you register? To receive individual notification when an evacuation has been ordered
Sign In	To alert local emergency personnel of your individual considerations
STREET, MARKAGE STREET, STREET	To allow emergency responders an opportunity to plan and be prepared
Forgot your username? Forgot your password?	Please be as thorough as possible in your survey responses. The information collected here will be kept confidential, and once you have enrolled, we will contact you periodically to determine if your medical situation or mobility needs have changed.
	Please note: Surveys left unverified will be archived; individual residents after 12 months, and facility surveys
Helpful Links 😣	after 6 months.
	Rememberl Personal Preparedness is Vital to All Emergency responders rely upon you to be prepared and as self sufficient as possible. It is important for all residents to have an individual or farnily plan in case of an emergency. Supply yourself with an emergency preparedness kit and have emergency 'drills' regularly.
	New users click here to register
Bassage	This page requires the use of popular to continue. Peake other disable any popula balans that you are running, or change the settings to that it accepts popular from the domain.
	The first line of defense against the effects of a disaster is personal preparedness. During an emergency, the government and other agencies may not be able to meet your needs. It is important for all citizens to make their own emergency plans and prepare for their own care and safety in an emergency.

- 1. For new users who do not have an account, click **New Users Click Here to Register** on the Registry's registration and public login section.
- New users will be presented with the New User Registration section. Required fields are identified with a red asterisk (*=Required Field). Complete all the required fields for this section of the survey.

Figure 6: New I	Jser Registration	Section
-----------------	-------------------	---------

New User Registra				
Please enter your person				
* First Name: John	MI: J * Last Name: Smith	Suffix 💌	Email: jjsmith@	
* Mailing Address:			Is Primary Phone: ((834) 657 - 1339 ext.
1 Main Street			Secondary Phone	ne: () - ext.
City: Rockland	* State: NY 💌 * ZIP Code: 10956		I do not have	e a phone.
			* Username:	jsmith
			Passwords must be	e at least six characters
			* Password:	•••••
			*Retype Password	d: •••••
* = Required Field				Co

Exercise 1 (Continued):

- 3. Enter a valid email address in the space provided. Account update notifications will be sent to this email address and will be the email address that receives an auto-generated response if the user resets their username and/or password.
- 4. When the primary phone is a device for the deaf, click on the checkbox option to indicate that the primary phone is teletypewriter device (TTY/TTD.) Phone number fields will be validated to make sure the data entered is in the correct format.
- 5. If no phone number is available, click on the checkbox option to indicate that the individual does not have a phone. If a second phone number is available, enter it in the space provided.
- 6. The username must be created to gain access to the system and complete the survey. The username must be at least six characters and can be a combination of letters, numbers and characters.
- 7. Passwords are required and must be at least six characters (a combination of letters, numbers, and characters.) Enter a password and retype the password to confirm.
- 8. Click **Continue >>** to advance to the Account Information section.

At this point, users may choose to save their information and exit the registry. The survey may be completed at a later date and time by simply logging back into the system.



Completing Public Surveys

The Registry is designed to allow individuals, emergency management personnel, special needs advocates, and stakeholder groups that provide services to special needs populations to complete a survey quickly and easily. Individuals with a special need who have registered themselves, or someone who is acting on their behalf, can fill out a survey through a public-facing site. The survey is developed in a wizard-style format and walks the respondent through the sections step-by-step.

Along with helping to identify the special needs population, the Registry has the capacity to inventory existing shelters and special needs facilities. A special needs facility is a physical structure within which individuals reside (either permanently or temporarily) who may be at an increased risk during a disaster when orders to evacuate or shelter-in-place are given. The information provided will be used, in conjunction with information gathered at the time of the incident, to enable decision makers to allocate resources and provide support during times of disaster. The existing shelters and special needs facilities along with all associated resources are entered into the Registry, giving the County the ability to rapidly identify and deploy resources during an emergency.

Account Information

The survey begins with the Account Information section. This section functions as a place for registered individuals to

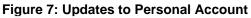
- complete a new survey by simply choosing Myself or Someone Else,
- view/edit/delete existing survey information,
- update their personal account information,
- display the list of surveys created and the date they were last updated, and
- exit or log out of the system

An individual may choose to complete the survey at another date and time. Once registered, an individual logs back into the system by entering the appropriate username and password that was created during the registration process.

As demonstrated in the previous exercise, the individual registered an account. Now that individual may begin completing a survey or make additional changes or updates to the account information.

Update Account

Registered individuals can update or make changes as frequently as needed to their personal account information by logging into the Registry from the registration and public login section. They can log in as an existing user and click **Update Account** in the Account Information section.



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di,Reno-	e existing surveys for	r.	
	Nere	Address	Savey Type Status Last Lpdated
		Page:	
0	17 - Circk the pencil is	on to edit an existing survey.	Displaying 1 - 3 of 1
		to change an and wed survey to a	chie status.
g80	KOLE-Ook Eve Inst	transcontos non existing survey.	

Account Information (Continued)

Exercise 2:

This exercise will require you to log in with your account credentials and proceed to complete a survey. You may complete a survey for yourself or for someone else.

- Use the Registry's registration and public login section to log in to the system with the account credentials created earlier in the Create an Account - Exercise 1. Registered or existing users log in to the Registry by entering a username and password in the spaces provided, as shown in Figure 8.
- Click Sign In. Once you have successfully signed into the Registry, you will begin to complete the Account Information section.
- Account Information Section Click on the option to create a new survey for Myself. Personal information about you is gathered from the New User Registration section and populated in Section 1A – Your Personal Information.

Existing Users	8
User Name:	
Password:	
Sign In Forgot your username?	
Forgot your password?	
Helpful Links	8

Sormation Pyror: Soreane Else existing surveys for: Name Bosley, Theodore Fitzpatrick, John	Address 110 S MAIN ST 162 MAIN ST			Survey Type Individual	Status	rrent User: j Last Update 01/19/2011
ey ror: So eone Else existing surveys for: Name) Bosley, Theodore	110 S MAIN ST			States when a state of the	2005/01/2005	
ey ror: So eone Else existing surveys for: Name) Bosley, Theodore	110 S MAIN ST			States when a state of the	2005/01/2005	
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Name Bosley, Theodore	110 S MAIN ST			States when a state of the	2005/01/2005	
Name Bosley, Theodore	110 S MAIN ST			States when a state of the	2005/01/2005	
Bosley, Theodore	110 S MAIN ST			States when a state of the	2005/01/2005	
				Individual	Active	01/19/2011
Fitzpatrick, John	162 MAIN ST					
				Individual	Active	01/19/2011
Sufferon Acute Care Hospital	145 COLLEGE RD			Facility	Active	01/19/2011
	Page:					
- Click the pencil icon to e	dit an existing survey.				D	Displaying 1 -
TIVATE - Click the reactiv	ate icon to change an archived survey to activ	ve status.				
OVE - Click the trash can ic	on to remove an existing survey.					
	TIVATE - Click the reactiv	- Click the pencil icon to edit an existing survey.	- Click the pencil icon to edit an existing survey. TTIVATE - Click the reactivate icon to change an archived survey to active status.	- Click the pencil icon to edit an existing survey. TTIVATE - Click the reactivate icon to change an archived survey to active status.	- Click the pencil icon to edit an existing survey. TIVATE - Click the reactivate icon to change an archived survey to active status.	- Click the pencil icon to edit an existing survey. TIVATE - Click the reactivate icon to change an archived survey to active status.

Figure 9: Account Information - Myself



Individual Surveys

An individual survey consists of several specific sections that collect important information about an individual with special needs. Each section of the survey requires a response from the individual. Section 5 – Additional Comments/Information is optional. Below is a list of each section in the survey and a brief explanation of the reason why this information is collected.

<u>Section 1A – Your Personal Information</u> – Personal information about an individual, such as name, address, telephone number, date of birth, height, weight, and gender, is collected in this section to assist first responders to determine the location of the individual and help them to allocate the necessary resources in the event of an evacuation or in response to other emergencies. The county and municipality information is gathered for logistical and geospatial purposes. Once an address has been entered, and the county and municipality have been selected, the Registry's geo-coding utility matches the co-ordinates and generates a point of reference on the map in the Registry.

Note: The geo-coding functionality is described in greater detail in the Survey and User Management section of this Guide.

- <u>Section 1B Emergency Contact Information</u> An individual who would like to provide information for an emergency contact to be notified in the event of an emergency can do so in this section. An emergency contact may be a relative, friend, neighbor, caregiver, etc. First responders may need to contact this person to discuss the individual's situation and other relevant information. The individual may also choose not to provide any reference for an emergency contact.
- <u>Section 2 Evacuation Information</u> This section of the survey collects information about an individual's condition(s). If there were an emergency requiring evacuation, the individual can provide important details about cognizant, mobility, or communications issues that first responders should be aware of in order to better prepare for evacuation.
- <u>Section 3 Duration of Need</u> An individual's condition may or may not be permanent. By providing information about their condition in this section, such as an estimated date of recovery, the Registry can automatically manage those surveys that are temporary.
- <u>Section 4 Level of Assistance</u> Each individual's condition is unique and may require different levels of assistance; therefore, this section asks questions to determine the exact level of help to be provided.

Individuals may own pets or service animals that would require special arrangements for their care. Medications need to be accounted for in the case of an evacuation situation. Does the individual have a caregiver, and if so, do they provide 24-hour caregiver service, are they present at the address provided, and is the caregiver available to support this person in the event of an emergency? In addition, an individual may be a seasonal resident. In this case, the person would indicate the dates when he/she is residing at this location.

• <u>Section 5 – Additional Comments/Information</u> – There may be information that an individual may feel is important to provide as part of the evacuation plan but has not been included during the course of the survey. They may enter detailed information about their condition or situation in this section.

Complete an Individual Survey

Exercise 3:

In this exercise, you will complete an entire survey for yourself. Verify that you are logged in the system from the Registry's Registration and Public Login section with the account credentials created in Create an Account - Exercise 1.

Section 1A – Your Personal Information

 The registration information that was entered in the New User Registration section for the user account will automatically populate the fields found on Section 1A – Your Personal Information, as shown in Figure 10 below. Review the information and make changes where needed. Complete all the required fields. Required fields are denoted with a red asterisk.

Special I version: 2.4	Needs Survey	<u>Public Survey</u>	<u>Users</u>	<u>Contact Info</u>	Multiple Entries	<u>Loq Out</u>
Section 1 A					Current U	ser: jsmith
Your pe	rsonal information: ss does not reflect your actual physical location, then describe	where the loca	ation is t	that emerger	ncy personnel ca	an find
* First:	John MI J * Last: Smith Suffix 💌	Email:	jjsmith@	hotmail.com		
* Address:	1 Main Street	* Primar	y Phone:	(834)6	57 - 1339 ext.	
				Is Pr	rimary Phone TTY/	TTD 🔲
		Cell Pho	ne: ()	ext.	
* City:	Rockland State: NY 👻 * ZIP Code: 10956	🔲 I o	lo not ha	ve a phone.		
		Date o	f Birth (m	m/dd/yyyy):		
* County:	Please Select a County	examp	e: 02/19	/1976		
* Township:	Please Select a Township	Height	Feet	▼ Inches ▼	Weight over 300	bs 🔲
What is this?			o we nee			
		Gender	Please Se	elect 🔻		
* = Required F	Field	E	Exit	«Back	Next Survey	/ Page »

Figure 10: Section 1A - Your Personal Information

- 2. Select a county from the drop-down list.
- 3. Select a municipality from the drop-down list.



Exercise 3 (Continued):

Section 1A – Your Personal Information (Continued)

Section 1A includes two links that explain why the individual is asked to provide information about their municipality and their height and weight (see below.)

- Click on the link <u>What is this?</u> This help link describes how your municipality is different from your city. Close the dialog box by clicking .
- Click on the link <u>Why do we need this?</u> This help link describes why it is important for you to provide as much information as possible about your special needs. Close the dialog box by clicking .

Figure 13: Personal Information Help Link

It is important that our personnel be aware of any condition that requires either special equipment or additional personnel to evacuate the person in need. This includes gathering information on an individual's size (both height and weight).

Figure 12: Municipality Help Link

How is my Municipality different from my City?

The entry in the "City" field should be the same as your mailing address. For example: if you live in the Village of Upper Nyack, and your zip code is 10960 (Nyack zip code), your "City" would be Nyack.

Exercise 3 (Continued):

Section 1A – Your Personal Information (Continued)

6. If multiple addresses are found that match or are similar to the address you entered, a Multiple Addresses Found dialog box will appear. Choose the address that is the closest match to your address. If none of the addresses match, click **None of the Addresses Matched**. The address is saved and the survey continues to the next page.

Address on Survey: 1 Main Street, 10956
Matching Addresses
1 S MAIN ST, Clarkstown 10956
1 MAIN ST, Orangetown 10960
1 N MAIN ST, Orangetown 10965
1 S MAIN ST, Orangetown 10965
1 MAIN DR, Clarkstown 10954
1 MEIN DR, Clarkstown 10956
1 S MAIN ST, Clarkstown 10956
1 N MAIN ST, Clarkstown 10956
1 S MAIN ST, Clarkstown 10956
1 S MAIN ST, Clarkstown 10956
NONE OF THE ADDRESSES MATCHED
<< Prev Next >>

Figure 11: Multiple Address List

7. To navigate through the sections of the survey, click **Exit**, <<**Back**, or **Next Survey Page**>> at the bottom of the page.

Note: If you are still reviewing the Section 1A – Your Personal Information page, clicking <<**Back** will also prompt you to exit the survey. Any changes to the survey will be lost.



Exercise 3 (Continued):

Section 1B – Emergency Contact Information

This section is where a person may provide emergency contact information in the event of an emergency. Complete all the fields that are marked with a red asterisk. All other information in this section is optional.

- 1. Select one of the choices from the drop-down list that describes the emergency contact's relationship to you.
- 2. If you choose not to provide emergency contact information, please check the option that states "I choose not to provide emergency contact information."

Public Survey Users Contact Info Multiple Entries Log Out Special Needs Survey version: 2.4 Current User: jsmith Section 1 B Emergency Contact Information: In the event of an emergency, we may need to get in contact with an emergency contact. Please enter the personal information for your emergency contact below. I choose not to provide emergency contact information. First Name: * Last Name: * Primary Phone: () Secondary Phone: () Address: x State: NY ZIP Code: City: -Email: Emergency contact's relationship to you: Please Select a Relationship... Friend Family Member Neighbor Caregiver Other * = Required Field Exit « Back Next Survey Page »

Figure 14: Section 1B – Emergency Contact Information

3. Click **Next Survey Page**>> to continue to the next section of the survey.

Results with Integrity.

Exercise 3 (Continued):

Section 2 – Evacuation Information

This section collects information about the condition(s) of an individual. If there were an emergency requiring evacuation, the individual may have difficulty evacuating or being notified of the need for evacuation because of his/her condition(s).

- 1. **Check** all the options that apply to your condition by clicking on the appropriate boxes.
- 2. **Select** "Other" if none of the options apply. Please enter the specific reason in the space provided.

Special Needs Survey version: 2.4		Public Survey	<u>Users</u>	Contact Info	<u>Multiple Entries</u>	Roman Conservation
Section 2 Evacuation Information: If there were an emergency requiring evacuation condition(s): (Check all that apply)		or being notified (of the ne	ed for evacuatio	on because of the	following
1. 🔲 Sight impaired	I do not:	I have	difficult	y walking an	d require:	
2. Hearing impaired	11. I have access to a motor vehicle	15.	Manual W	/heelchair		
3. Speech impaired	12. 🔲 have a radio or a television	16. 🕅	Motorized	l Wheelchair		
4. Physically Impaired	13. have a telephone	17.	Walker /	Cane		
5. 🕅 Completely bedridden	14. Speak english	18.	Attendan	t to assist in am	bulating	
 Mentally / memory impaired Dementia/Alzheimer's 	(Primary Language)		ire medi ortable		t that is not ea	sily
	Thease beneer	19.	Oxygen o	concentrator or	cylinder	
		20.	Ventilator	5		
9. I require constant skilled nursing care		21.	Suction M	lachine		
10. 🔲 Other reason for needing assistance		22.	Other Eq	uipment (Please	Specify)	
		E	xit	« Back	Next Survey	Page »

Figure 15: Section 2 – Evacuation Information

- 3. Click Next Survey Page>> to continue to the next section of the survey.
- 4. If English is not your primary language, **check** option #14 and select a language from the drop down menu.

Exercise 3 (Continued):

Section 3 – Duration of Need

This section is where you will provide information about the length of time the condition is expected to last. If the conditions that you previously selected in Section 2 – Evacuation Information are temporary, select "Yes."

- 1. **Provide** an estimated date when your condition will be resolved. **Select** the month from the drop-down menu. Enter the year.
- 2. If your condition(s) is expected to be permanent, select the option that states "No, the conditions(s) are expected to be permanent."

Special Needs Survey	Public Survey	<u>Users</u>	Contact Info	Securit International Contract	Log Out
				Current Us	er: jsmith
Section 3					
Duration of Need: 🧐					
Are ALL of the conditions resulting in the need for evacuation assistance temporary? difficulties, but are expected to be fully recovered after the baby is delivered.)	(Example: You a	re bedrid	den due to preg	inancy	
Yes					
Please provide an estimated date when the condition will be resolved					
Month: January 👻 Year:					
No, the condition(s) are expected to be permanent					
	E	xit	«Back	Next Survey	Page »

Figure 16: Section 3 – Duration of Need

3. Click **Next Survey Page>>** to continue to the next section of the survey.

Exercise 3 (Continued):

Section 4 – Level of Assistance

- 1. Select Yes or No for questions #1 through #3. These are required questions.
- 2. Select Yes or No for question #4.
- 3. **Select** Yes or No for question #5. If the answer is No, choose a time (from and to) the person will need evacuation assistance from the drop down menu.
- 4. **Select** Yes or No for question #6. If the answer is No, choose the months (from and to) if the individual is a seasonal resident from the drop down menu.

Public Survey Users Contact Info Multiple Entries Log Out Special Needs Survey version: 2.4 Current User: jsmith Section 4 🥝 * 1. Do you have a service animal? (ie: seeing-eye dog) 4. Does the person in need have a 24hr caregiver? Yes O No O Yes 🔘 No (* 2. Do you have any pet(s)? 5. Does the person in need require evacuation assistance 24hr / day? Yes 🔘 No O Yes 🔘 No 🔘 The person in need requires evacuation assistance? From: 1:00 - AM - To: 1:00 - AM -* 3. Do you have medications that must be taken with you if evacuated? 6. Is the person in need a seasonal resident? Yes 🔘 No O Yes 🔘 No 🔘 The person in need is a seasonal resident... From: January - To: January -Exit « Back Next Survey Page »

Figure 17: Section 4 – Level of Assistance

5. Click **Next Survey Page>>** to continue to the next section of the survey.

Exercise 3 (Continued):

Section 5 – Additional Comments/Information

The Additional Comments/Information section gives the person completing the survey an option to provide additional comments and suggestions, and capture information that was not covered in previous sections, and may be useful to emergency personnel for evacuation in the event of an emergency.

1. To enter comments, click in the space provided and type as much information as possible to describe your condition, situation, or any other factor that may assist emergency personnel to efficiently and safely evacuate you from the premises.

Figure 18: Section 5 – Additional Comments/Information

Special Needs Survey	Public Survey	<u>Users</u>	<u>Contact Info</u>	Multiple Entries	<u>Log Out</u>
version: 2.4				Current Us	er: jsmith
Section 5 🕖					
Additional Comments / Information:					
Please enter any additional information that may be useful for our emergency personne	el to evacuate yo	u.			
					*
					-
	E	xit	«Back	Next Survey	Page »
	8 C		ac a	500 (S14)	

2. Click **Next Survey Page>>** to continue to the final section of the survey.

Exercise 3 (Continued):

Thank You Statement

The final section of the survey is the Thank You Statement. Rockland County appreciates the time and effort the person has taken to complete the Special Needs Survey and extends its gratitude to the individual for his/her help. The information provided will ensure the safety of the special needs population throughout the community.

- 1. **Click Save** to save the information. The system will place you back on the Account Information page.
- 2. Or **click** <<**Back** to return to the previous page of the survey.
- 3. **Click Exit** to quit the survey. All the information collected throughout the survey will be saved. This action will redirect you to the Account Information Section.

ecial N	eeds Surv	ey	
Prepar	redness Informat	ion 😣	
XIT	«BACK	SAVE	Thank you for enrolling in our special needs registry. The information you have provided will be of great value to the men and women within the Rockland County emergency response community. During an emergency these individuals will perform their best to meet your needs; please remember that emergencies are unpredictable and there is no guarantee. Your accuracy of information is crucial – please remember us if your contact information or situation changes!
			Remember: The first line of defense against the effects of a disaster is personal preparedness. During an emergency, the government and other agencies may not be able to meet your needs. It is important for all citizens to make individual emergency plans and prepare for their care and safety in an emergency.

Figure 19: Thank You Statement

Edit an Individual Survey

Now that a survey has been completed and saved, respondents may edit their personal information at any time by logging back into the Registry from the Registration and Public Login section.

Exercise 4:

This exercise will demonstrate how an existing user can quickly access and update their personal information in the survey.

- 1. Click l to edit your personal information or someone else's survey.
- 2. Click **Next Survey Page>>** on each section to edit the survey.
- 3. Click **Finish** when you have finished editing the survey.

Figure 20: Edit a Survey

Spec versio		eed	ls Survey		Public Survey	<u>Users</u>	ers <u>Contact Info</u>	Bawaaneseer	<u>Entries</u> rrent Us	<u>Loq Out</u> er: jsmith
Cre	ate a ne	w sur yself	formation vey for: Someone Else							
			Name	Address			Survey Type	Status	Last Upo	dated
	0	1	🗿 Bosley, Theodore	110 S MAIN ST			Individual	Active	01/19/2	011
	Ø	1	🥑 Fitzpatrick, John	162 MAIN ST			Individual	Active	01/19/2	011
	1	1 6	😸 Smith, John J	1 Main Street			Individual	Active	01/21/2	011

Delete an Individual Survey

An individual or an existing user may have entered a survey for themselves or someone else, but their condition is temporary. At any point in time, the individual may delete their survey information from the Registry.

Exercise 5:

This exercise will demonstrate the steps to delete a survey from the Registry.

Note: Once a survey has been completed by the individual who registered, the **Myself** option will no longer be available unless the individual deletes their existing survey. Once deleted, the **Myself** option will be active and the individual may re-enter a new survey.

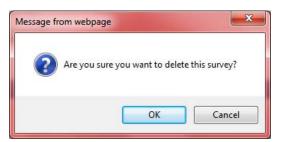
1. Click 🥩 to delete an individual's survey.

Special Version: 2.4		ds	Survey		<u>Public Survey</u>	<u>Users</u>	<u>Contact Info</u>	<u>Multiple E</u> Curr	ntries Log Out ent User: jsmit
Create a r		irvey	for:	1					
View/Edit/	Remo	/6 = 2	Name	Address			Survey Type	Status L	ast Updated
0	2	9	Bosley, Theodore	110 S MAIN ST			Individual	Active 0	1/19/2011
Ø	2		Fitzpatrick, John	162 MAIN ST			Individual	Active 0	1/19/2011
Л	2		Smith, John J	1 Main Street			Individual	Active 0	1/21/2011

Figure 21: Remove a Survey

2. Click OK to accept the deletion of the survey.







Create a New Survey for Someone Else

Some individuals will not be in a position to complete their own survey and will need a person acting on their behalf to complete one for them. In such a situation, a third party or someone acting on the behalf of another individual can complete a survey by registering the individual and choosing the option to complete a survey for **Someone Else**.

Exercise 6:

This exercise will demonstrate how to complete a survey for another individual who cannot complete one for themselves. The person who is acting on behalf of the individual with the special need will need to create an account in the Registry.

1. Click Someone Else to begin a new survey for an individual other than yourself.

Special		ds	Survey			Public Survey	<u>Users</u>	Contact Info	Multiple	Entries	Log Out
version: 2.4									Cu	rrent Us	ser: jsmith
Accourt	nt I	nfo	ormation								
Create a	new s	urve	for:								
	Myse	F	Someone Else								
	1919 SCI		Someone Lise								
View/Edit	Remo	ve e	xisting surveys for:								
			Name	Address				Survey Type	Status	Last Up	dated
8	2	1	Fitzpatrick, John	162 MAIN ST				Individual	Active	01/19/2	011
0	2	ø	Smith, John J	1 Main Street				Individual	Active	01/21/2	011
Ø	2		Sufferon Acute Care Hospital	145 COLLEGE RD				Facility	Active	01/19/2	011
					Page: 1						

Figure 23: Account Information – Someone Else

Create a New Survey for Someone Else (Continued)

Exercise 6 (Continued):

2. **Complete** the information in Section 1A – Personal Information for Individual with Need.

Special N	eeds Survey	<u>Public Survey</u>	<u>Users</u>	<u>Conta</u>	<u>ct Info</u>	Multiple Entrie	and the workshold with
TCI SIGILI ETT						Current	User: jsmith
Section 1 A							
Personal	Information for Individual with Need:						
* First:	MI * Last: Suffix 🔻	Email:					i.
* Address:		* Primary	Phone:	()		ext.
					Is Pri	mary Phone TT	
		Cell Phone	:: ()		ext.	
* City:	State: NY 🔻 [®] ZIP Code:	Doe	s not ha	ve a ph	one		
		Date of	Birth (mr	m/dd/yy	yy):	1 1	
* County:	Please Select a County	example	: 02/19/	1976			
* Township:	Please Select a Township	Height:	Feet •	Inch	nes 🔻	Weight over 3	300lbs:
What is this?		Why do y	and the second second	1000	_		
* Are you the e	mergency contact for this individual? Yes \bigcirc No \bigcirc	Gender P	lease Se	lect 🔻			
* Your relations	hip to this individual: Please Select a Relationship 👻						
* = Required Fi	ield	Ex	it	(«E	Back	Next Surv	ey Page »

Figure 24: Section 1A – Personal Information for Individual with Need

3. **Refer** to the section on Complete an Individual Survey and follow the steps in Exercise 3 to complete the remaining sections of the survey.



Administrative Module

The Administrative Module is a powerful tool for administrators. It allows system administrators to manage the application, utilize detailed searching and reporting capabilities, and rapidly enter or update survey information. The main screen is referred to as the dashboard and is divided into four sections: administration functionality, list and search capability, reporting and data entry tools, and the survey records which lists individual and facility surveys. Each feature of the administrative component and the functionality that are supported by the components are described in greater detail on the following pages of this User's Guide.

	ecia sion: 2		eds Survey	_	_	Public Survey Users	<u>Contact Info</u>	<u>Multiple Entri</u>	ies <u>Loq Out</u> t User: jsmith	Administration
Sea	arch							Show / Hide	e Search 📮	
0	Quick S	Bearch								
	١	Name to	search for							List
	1									and
O	Advand	ced Sea	rch							Search
N	lew Su	rvey	Listing Report	Detailed Report	Export Shape File	Export Data to Excel	Show on Map	Reve	erse 911	Reporting
			Name	Cour	ity.	Township	Survey Type	Status	Last Update	and Data
0	0	1	Bardonia Boarding Scho	ol Rockla	and	Clarkstown	Facility	Active	01/21/2011	Entry
1		1	Cranston, Brian	Rockla	and	Ramapo	Individual	Active	01/19/2011	
0		1	Davidson, Steven	Rockla	and	Stony Point	Individual	Active	01/20/2011	
Ø	0	1	Fitzpatrick, John	Rockla	and	Orangetown	Individual	Active	01/19/2011	
0		(Hampton, Chloe	Rockla	and	Clarkstown	Individual	Active	01/19/2011	Survey
0	0	1	Jones, Jeremiah A	Rockla	and	Orangetown	Individual	Active	01/21/2011	Results
0		1	Patterson, Saul	Rockla	and	Ramapo	Individual	Active	01/19/2011	
0		1	Probst, Adam D	Rockla	and	Clarkstown	Individual	Active	01/21/2011	
	0	w)	Smith, John J	Rockia	and	Clarkstown	Individual	Active	01/21/2011	

Figure 25: Administrative Module (Dashboard)



Listing and Search

The Listing And Search format of the dashboard displays a list of surveys in the system as shown in the figure below. At a glance, an administrator can see some standard information about the surveys in the system. The surveys that appear on the dashboard are divided into groups by page. More surveys can be seen by using the page links at the bottom of the list. In addition, tools to edit, archive, and delete surveys have been incorporated into the format.



Search			5	how / Hide	Search 😑	
Quick Search						
Name to search for						
O Advanced Search						O ant has
						Sort by
New Survey Listing Report	Detailed Report Export Shape File	Export Data to Excel	Show on Map	Reve	rse 911	Heading
Name	<u>County</u>	<u>Township</u>	Survey Type	<u>Status</u>	<u>Last Update</u>	Listing and
🖉 📄 🥪 <u>Summers, Georgette</u>	Rockland	Ramapo	Individual	Active	01/19/2011	Search
🖉 📄 🥪 <u>White, Skylar</u>	Rockland	Clarkstown	Individual	Active	01/19/2011	Links to
	Page: <u>1</u> 2					More
						Surveys

Administrators of the system can sort all the resources that have completed a survey by name, municipality, survey type (individual and facility), status (active, archived, deleted), or chronologically by last update. Archived surveys will remain on the list and can be sorted or filtered through the advanced search feature. By default, the surveys are sorted alphabetically. The sort functionality is built into the heading of the corresponding column. Users simply click on the heading title to change the sort order.

An administrator who has the appropriate permissions will be able to add, edit, delete, or archive surveys from the dashboard. Each survey must be classified as one of the three available statuses: Active, Archived, or Deleted. Although deleted surveys will be removed from the listing, they will not be permanently deleted from the system. This is referred to as a "soft" delete. Deleted surveys can only be retrieved through an advanced search query.

Quick Search

Administrators access the search functionality by expanding the Show/Hide Search feature on the dashboard. Narrowing the search for a resource can be done by applying search criteria using the Quick Search or Advanced Search features in the system. Later in the lesson, we will demonstrate how to sort, search, and print reports.

The Quick Search feature allows administrators to find a survey in the system by simply entering the first letters of either an individual's first or last name, or the name of the facility in the space provided. Once the survey has been found, the administrator can double-click on the name to open the rapid entry form and see the details of the survey.

	pecial Needs Survey		Public Survey Users Cont	act Info Multiple Entries Log Out
				Current User: jsmith
–				Show / Hide Search 🗧
/ *	Quick Search Name to search for			
/4	Name to search for			
successive in the local division of the loca	Advanced Gearch	-1		
pecial Needs Survey	Đả	lic.Survey Users Conta	ct.Info Multiple.Entries Lo	
			Current User:	jsmith
earch				
Quick Search			Show / Hide Seard	
Name to se rch for				
john				
Advar Fitzpatrick, John				
Smith, John J				_
New S				
	sonal information for indiv			Survey Status: Active •
rst:	John MI J * Last: Smith	Suffix •	Email: jjsmith@hotm	
Adre	ss: 1 Main Street		Primary Phone: [_) [ext
1		-		Is Primary Phone TTY/TTD
* Oty:	Roddand State: NY - 2		Secondary Phone: () ext
	Geocode State Plane Coordin	ates (feet)	Does not have a phone	
Northing	g: Easting:		Date of Birth (mm/dd/yyyy	
* Count	Roddand Roddand			example: 10/10/1976
* Town:	ship: Clarkstown	•	Height: Feet + Inches	▼ Weight over 300 lbs
			Gender Please Select +	

Figure 27: Quick Search Feature

Delta Development Group, Inc.

Advanced Search

A convenient and easy way to search the system is to use Quick Search when you need to find one resource (individual or facility) at a time. The Advanced Search feature helps administrators to create a more comprehensive list of resources. Depending on the situation, applying the conditions and criteria to filter surveys and narrow the search to a more focused group of people with special needs helps administrators manage their data and provide better preparation for an evacuation or other events that require specific resources.

	d.	-							•			
1000	ick Se vance	arch ed Sea	rch									
			Conjunction	Field	Condition		Criteria					
	1			County -	Exactly Mat	ches 👻	Rockland	•				
		Add 5	Search Criteria	dh Show All								
Nes	v Surv	ey	Listing Report Oct	aled Report Export Shap	e File) (Export Data to E	ixcel) (Show on Ma	p] Revi	erse 911				
			Name	County	Township	Survey Type	Status	and the second second	als:			
1		۲	Bardonia Boarding School	Rockland	Clarkstown	Fadity	Active	01/21/	011			
		- 21	Cranston, Brian	Roddand	Ramapo	Individual	Active	01/19/	-			
1		B				Individual	Active	01/20/	111			
		1	Davidson, Steven	Rockland	Stony Point	ar norvino adm		0.000				
	0	1	Davidson, Steven	Rockland		ced Search						
		9	Davidson, Steven	Roddand		ced Search		Er			Condition	
		9	Davidson, Steven	Rockland	e Advan	ced Search Cc	rjunction	Re			Condition	
		9	Davidson, Steven	Roddand	e Advan	ced Search Co	rjunction	C	a la	•	Condition Exactly Matches 👻	
g 1 g 1		9	Davidson, Steven	Roddand	e Advan	ced Search Cc	rjunction					
		9	Davidson, Steven	Roddand	e Advan	ced Search Co Add Search Criteria	rjunction	C	unty Show		Exactly Matches 👻	ow on Map

Figure 28: Advanced Search Feature

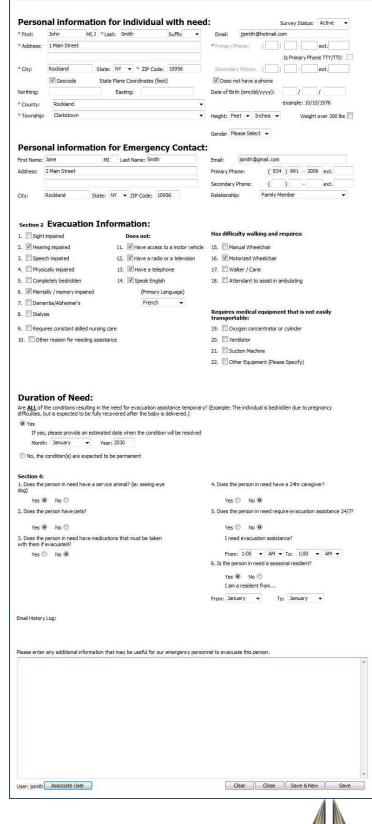
There are many criteria one can use to build a comprehensive search or filter the data in the system. Obviously, choosing the appropriate criteria to get the exact results is essential. Performing an advanced search query requires that an administrator have a thorough knowledge of the information contained in a survey, the types of conditions to search on, and how to conjoin the queries. Once an advanced search has been created, the surveys that match the advanced search criteria will populate the Listing and Search dashboard. To see the details of a survey, administrators have the option to generate a detailed report or open the rapid entry form that displays the individual's or facility's details.

Survey Page

All individual and facility resources displayed in the Listing and Search dashboard are linked to a survey page. As mentioned earlier, to see the details of a survey, one would click on the hyperlinked name on the Listing and Search section of the dashboard.

A survey page includes all of the information about an individual or facility (i.e., address, phone number, email address, county, date of birth, etc.) provided in their survey response. An asterisk (*) denotes required information. The survey page is also referred to as the Rapid Entry Survey Form that will be discussed briefly in the Survey and User Management section of this User Guide.

Figure 29: User Info & Permissions Tab



Results with Integrity.

Exercise 7:

Quick Search

This exercise will demonstrate how to quickly search for an individual or a facility survey in the system.

- 1. Log into the system with an administrator's account.
- 2. Find the Quick Search tool on the dashboard.
- 3. **Click** in the field for the Quick Search option and begin typing the first letter of either the last name or first name of the individual or facility you want to find in the system.
- 4. If the individual or facility exists, the name will populate the Quick Search field. **Click** on the link to open the survey form.

Advanced Search

This exercise will demonstrate how to perform an advanced search on the data in the system. Selecting the appropriate criteria and conditions, the system will filter the data and only those survey records will be displayed. This allows administrators to more efficiently manage the data and the resources needed in the event of an emergency.

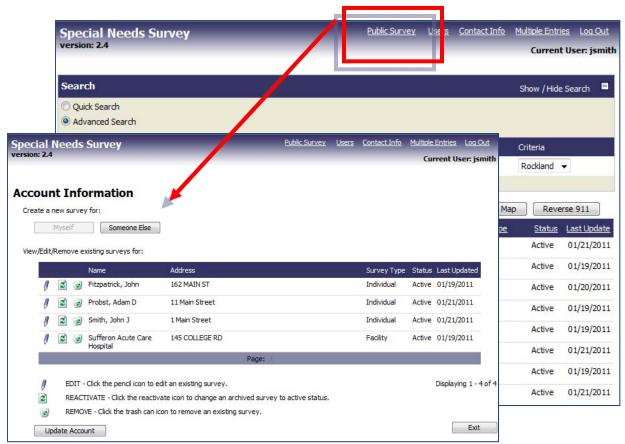
- 1. **Log into** the system with an administrator's account.
- 2. **Find** the Advanced Search option on the dashboard. You may need to expand Show/Hide to see the Advanced Search option.
- 3. **Select** the criteria from each drop-down menu to build a query.
- 4. Choose a conjunction to build a more complex query to narrow your search.



Public Survey

The administrative module includes a hyperlink from the dashboard to the Account Information section of the Public Survey. The administrators who have been assigned rights to specific surveys also have access to the surveys from the Public Survey link that allows them to review the Public Survey process.





Note: The Public Survey is in a wizard-style format and assists a special needs individual or public users through the survey step by step. For detailed information on public surveys, please see the section on Completing Public Surveys.

Contact Information

The Contact Information Sheet will provide the name of the resource that will be the official point of contact for questions, clarification, and any other issues that may arise during the process of managing the surveys in the system. Only the assigned county or municipal administrator will have the ability to edit the contact details.

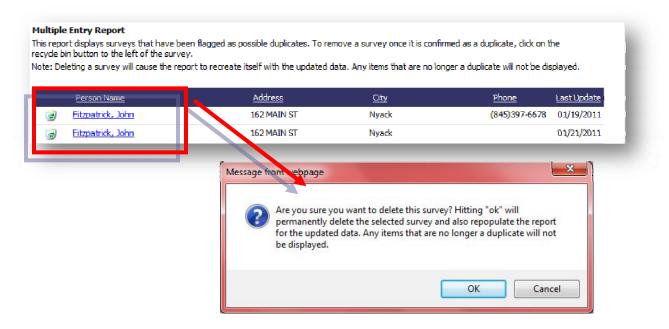
Figure 31: Contact Information Sheet

Phone () -) ext.
Cancel Save

Multiple Entries

In certain circumstances, more than one person may complete a survey for the same individual. The administration of the Registry supports a feature that allows survey administrators to audit and remove duplicate entries of individual surveys. A multiple entry report can be generated from the dashboard to display the list of duplicate surveys. If the same individual has been entered multiple times into the Registry, the duplicate survey may be deleted from the list. The list will be re-populated with the updated entries and the survey will be permanently removed from the system. Multiple entries are found based on matches of the last name, partial first name, and the address.

Figure 32: Multiple Entry Report



Survey and User Management

Rapid Entry Surveys Forms

A Rapid Entry Survey Form allows administrators to enter new surveys for individuals or facilities en mass from paper forms, telephone calls, or other methods of collecting data. The Rapid Entry Survey does not follow the wizard-style format of the public entry survey. To utilize the Rapid Entry functionality, an administrator would click **New Survey**..., found on the Listing and Search dashboard. A pop-up displays and provides the option to choose to complete a survey for either a person or facility survey type.

	ecia sion: 2		eds Survey	-	-	Public Survey Users	⊆ 😰 http://r	ockland	indow
Se	arch								irvey type: © Facility
			search for					0	
			00000000						
N	lew Su	rvey	Lit ing Report	Detailed Report	Export Shape File	Export Data to Excel	Show on Map	Reve	erse 911
N	lew Su	rvey	Lit ing Report	Detailed Report	W.	Export Data to Excel	Show on Map Survey Type	Reve	rse 911 Last Update
N	lew Su	rvey		Count	Y		1. 2024		
0 0			INGINE	Count	nd	Township	Survey Type	Status	Last Update
N 0 0		1	Bardonia Boarding Schoo	<u>Count</u> Rockla	nd	<u>Township</u> Clarkstown	<u>Survey Type</u> Facility	<u>Status</u> Active	Last Update 01/21/2011

Figure 33: Listing and Search



Rapid Entry Surveys (Continued)

As shown below, a Rapid Entry Survey Form for an individual or a facility contains the same information as that found on the public survey. The difference is that an administrator can quickly fill out the survey and change it without having to navigate back through each section. In addition, there is no need to exit the existing rapid entry form to begin a new one. The option to Save and Create a new survey is provided on the form for both individual and facility surveys.

Figure 34: Rapid Entry Survey (Individual)

First	ME	"Last:	Suffix		Email:								
Address:					+ Primar	y Phon	e:	5)	-		ext.	
1				1					Is	Primar y	Phone	тту/тт	D 🗉
tarys		States NY - * 78	Codes		Secon	dary 14	innes	(2		1	·97.	
1	🗹 Geocode	State Plane Coordinat	les (teet)		Doe	snoth	ave a	phone					
kur Uhimu:		Easting			Dale of	Bir Ut (m	m/dd	iveve):		1	1		
County:	Please Select a Cou	nty							P30	mple: 1	10/10/	19.75	
I ownship:	Please Select a Tow	nship			Height:	I cet	• 8	nches	•	We	ichte	ver 300	ls 🗄
	al Informatio	on for Emerg	jency Con	tact:	Gender	Please	Selec	t •					
irst Name:	al Informatio	on for Emerg	jency Con	tact:	Gender I mail: Primary Seconda	Phones		t -]			exL exL	1
lurst Name: Address:				tact:	l mai: Primary	Phones at y Pho		t)) s Selec	t a Kela	bonsh	exi.	1
ust Name: Null-east Dity: Section 2 E	Stacuation 1	NI Inst Name:	e ()	tact:	i mai: Primary Seconda	Phones ary Pho ship:	ie:	l (Flease			bonsh	exi.	
unst Name: Nobli eas: Dity: Section 2 E	Sta Evacuation 1	NI Last Name: ate: NY - ZIP Cod Enformation Does not	e ()	tact:	i məl: Prinary Seconda Relation	Phones ary Pho ship: Ticulty	wall	([Flease Ling an			bonsh	exi.	
Address: Add	Sta Evacuation 1 Impared	MI I AST NAME: Atte: NY - ZIP Cod Information Does not 11. UNVE	e:	ract:	i mai: Primary Seconda Relation Has diil	Phones ary Pho etrip: Ticulty Manual	wall	t (Please ting an	d reg		bonsh	exi.	
l inst Name: Address: Oty:	St EVacuation 3 pared impared impared	MI I AST NAME: Atte: NY - ZIP Cod Information Does not 11. UNVE	t: th arress to a motor s a radio or a televis	rbact:	i mal: Primary Seconda Relation Has dif	Phones ary Pho ship: Ficulty Menual Motoriz	wall wall	(Flease Ling an eichar heelcha	d reg		bonsh	exi.	

Figure 35: Rapid Entry Survey (Facility)

		* Facility Type:
aulity Name:		(for mixed use facilities check all (hell apply)
Faulity Address		ular approp
Facility Address 7:		5 V
	*City: State: Nf • *7pCode:	Acute Care Hospital
	Geocode State Plane Courdinates (Jeel)	Adult Doyrare
iorthing:	i ashng:	Assisted Living
County:	Please Select a County	Buarding School
Tomships	Please Select a Township	Child Daycare
* 24 Hour Staffed		Correctonal Lacity
Plane al Faulity		Croup Home
Average Population		
Tengust	Population	III Hallway House
	Pepulation	C Hallway House
Kanaging Agency /		
lanaging Agracy / Irganization Name		Otier
Kanaging Agency / Jeganization Name Kalling Address:		🖾 Other 🖾 Kehabiltation Hospital
lanaging Agency / Inganization Name Galling Address:		Other Kehabiltaton Hospital Skilled Nursing
Kanaging Agency / Jeganization Name Kalling Address:		Other Kehabilitation I lospital Skilled Nursing Fluhiversity Domitory
lanaging Agency / Inganization Name Iniling Address Iailing Address Iailing Address	and a state	Other Kehebiltaton I isspital Skilled Numbrg Fullycraty Domitory Residential Educational
Consus: Monoging Agency / Urganization Name: Molling Addiesss: Mailing Addiesss: Administration Administrative Point of Contact: Titles	and a state	Other Gitter Gi
Annaging Agency / Jeganization Name Aniling Address: Aniling Address: Administrative Administrative Thes	and a state	Other Kehabiration Flospital Galaxie Naming University Domitory Reading Educational Facility Monnecide Educational Facility
Monoging Agency / Urganization Name Mailing Address: Mailing Address: Administrative Point of Contact:	and a state	Other Kehabiration Liopital Galaxi Naming University Domitory Reading Educational Facility Monnecide Educational Facility

Facility Surveys

A special needs facility is a physical structure within which individuals reside (either permanently or temporarily) and who may be at an increased risk during a disaster when orders to evacuate or shelter-in-place are given. Once a possible facility has been identified, along with all associated resources, they are entered into the Registry. The information provided will be used, in conjunction with information gathered at the time of the incident, to enable decision makers to allocate resources and provide support during times of disaster.

A facility survey consists of several specific sections that collect important information about a facility, including its physical assets and staffing. The questions included in each section of the survey should be answered and completed as accurately as possible to provide the necessary information to first responders and emergency management personnel for pre-planning and response purposes. Below is a list of the sections included in the facility survey and a brief explanation of the reason why this information is collected.

The following sections are to be completed by an administrator or designated facility personnel:

- <u>Facility Information</u> General information about the facility is collected in this section, such as the name of the facility, address, county, municipality, a 24-hour staffed telephone number, the average population or census, the type of facility, the managing agency, and administrative contact information. Similar to the functionality of an individual survey, these fields are required and denoted by an asterisk. Those fields must be answered before moving onto the next section.
- <u>Self-Sustainment Section</u> This section allows the respondent to answer specific questions about the ability of the facility to sustain its residents or conduct sheltering-inplace in the event of an emergency. In addition, it's helpful to know if the staff is trained to evacuate residents and if the evacuation procedures are practiced on a regular basis.
- <u>Transportation Information</u> In the event that an emergency is declared and evacuation procedures must be initiated, a facility's ability to handle transportation issues is critical. Each facility that registers in the system is asked to provide any and all information about their ambulance service they provide, if they are contracted, or have a Memorandum of Understanding (MOU) with another facility to provide services and support, and provide an inventory of the types of vehicle(s) that are maintained at the facility for transportation.
- <u>Additional Questions and Comments</u> based on the type of facility, the survey may present additional questions that are specific to that type. For example, if the facility is a skilled nursing center, the respondent must indicate the training level of the highest trained individual. Options are provided on a drop-down list.

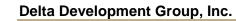
Facility surveys can be accessed by users who have been given pre-assigned facility survey permission to edit or complete the surveys. Additionally, the **Facility** survey button will appear on the Account Information page for individuals with only facility administration rights.



Facility Surveys (Continued)

Public users who do not have facility administration permission cannot create but may edit preassigned facility surveys. The facility survey will appear on the list on the Account Information page. To restrict public users from creating a facility survey but allow them to edit one, the user must be associated with the facility. Associating users is done by selecting the **Associate User** option found on the Rapid Entry Survey Forms. *(Refer to the Associate Users section of this User's Guide for more information.)*

Note: Only an Administrator may associate users.



Complete a Facility Survey

Exercise 8:

In this exercise, you will complete an entire survey for a facility. You must have rights to administer facilities, or an administrator of the Registry must associate your account with a facility survey in order to maintain that particular survey or surveys. *(Refer to the User Administration and Associate Users sections of this User's Guide for instructions on assigning user permissions.)* Verify that you have the appropriate rights to a facility survey.

1. Log in to the system with the appropriate credentials from the Registry's Registration and Public Login section.

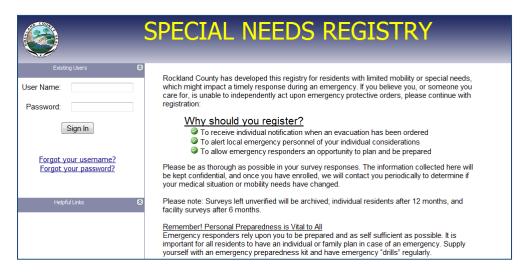


Figure 36: Registration and Public Login Section

2. To begin a new facility survey, click **Facility**, found on the Account Information section.

Figure 37: Facility Survey

Specia version:			eds	Survey		<u>Public Survey</u>	<u>Users</u>	<u>Contact Info</u>	Multiple Entries	Charles and the second s
Acco Creat	-			ormation						
View/		Myse Remo		Someone Else	Facility					
				Name	Address			Survey Type	Status Last Up	dated
	0	2	1	Lizambri, Diane	123 Main Street			Individual	Active 01/21/2	2011
						Page:				

Exercise 8 (Continued):

Facility Information Section

- 1. Enter the appropriate information into the survey form. If a required field is not completed or the answer provided is not valid, the system will validate the information by highlighting those fields found to be erroneous. Required fields are indicated by a red asterisk and include the following:
 - Average population/census
 - Administrative point of contact and title
 - Valid phone number, including the area code
 - Facility type for mixed-use facilities, check all that apply
- 2. Check the option "Same as above" if the address for the managing agency is the same address as that of the facility.
- 3. Once you have finished entering the information for the facility, click **Next Survey Page**>> to advance to the next section of the survey.

Special Need	s Survey			Public Survey	<u>Users</u>	<u>Contact Info</u>	Multiple Entries	Log Out
version: 2.4							Current User	: dlizambri
0								
*Facility Name:							acility Type: or mixed use facili	ties
*Facility Address:							neck all that apply	
	*City:		State: NY 👻	*ZipCode:	-		Acute Care Ho	spital
*County:	Please Select a County				•		Adult Daycare	
*Township:					•		Assisted Living	
24 Hour Staffed Phone at Facility:	()	ext.					Boarding Schoo	ol
Average Populatio	n /	Average An	nbulatory				Child Daycare	
*Census:		Population	1				Correctional Fa	acility
Managing Agency Organization Name							Group Home	
*Mailing Address:				Same as ab	ove		Halfway House	÷
							Other	
	*City:		State: NY 🔻	*7inCode:	_		Rehabilitation I	Hospital
Administrative	City.j		State. III ·	zipcode.j			Skilled Nursing	
Point of Contact:							University Dori	mitory
*Title:					_		Residential Edu	ucational
*Email:							acility	
* Phone Number:	()	ext.					Non-residentia ducational Facility	
Secondary Phone	: ()	ext.	* = Re	equired Field				
				E	xit	Next Survey	Page »	Back

Figure 38: Facility Information

Exercise 8 (Continued):

Self-Sustainment Section

- 1. Answer questions #1 through #8 on the **Self-Sustainment** section of the survey.
- 2. Click on **Next Survey Page>>** to advance to the next section of the survey.

Special Needs Survey	Public Survey	<u>Users</u>	Contact Info	Multiple Entries	Log Out
version: 2.4				Current User	dlizambri
0					
1. What is the primary source of heat for the facility?	•				
2. What is the primary source of hot water for the facility?	•				
3. What is the primary source of potable water for the facility?		•			
4. What type of sewer does the facility use?	•				
 5. Does the facility have a back-up power generator? Oregon No a) How is the generator powered? b) Is the generator designed to support all necessary functions of the facility including heat and air conditioning or only minimal lighting and life safety 		O Minima	al Needs		
6. Does the facility have its own food preparation area to serve residents? (a) Based on average on-hand supplies, how many days of food is stored at the facility assuming average population/census?) Yes 💿 No				
7. Are staff and/or residents trained in procedures to conduct shelter in place operations if advised by public safety authorities to do so? © Yes	s 🔍 No				
a) Is this procedure practiced/drilled? 🔘 Yes 🔘 No					
 In an emergency, taking into account utilities, normal staffing on-site, food etc., how long could the facility operate locked down without any outside ass 		© Exit	Days 🔘 Hours	Next Surve	y Page »

Figure 39: Self-Sustainment Section

Exercise 8 (Continued):

Transportation Information Section

1. Select Yes or No for questions #9 and #10. If you answered Yes, provide the name and contact number of the service. If you answered No, you may continue to question #11.

Figure 40: Transportation Information Section

Special Needs Survey	Public Survey Users Contact Info Multiple Entries Log Out
version: 2.4	Current User: dlizambri
0	
9. Do you have a contract with an ambulance or transport service?	10. Do you have a contract/MOU with another facility to receive your clients/patients in the event an evacuation is necessary?
Yes O No	● Yes ◎ No
* Name:	*Name:
* Contact Number: () -	* Contact Number: () -
11. Please indicate the type and capacity of all methods of transportation resource for multiple buildings if a resource is shared (Eg. An extended ca a van. The van should be entered under only one of the facilities, not bot Add New Vehicle	re complex with a skilled nursing building and an assisted living building share

2. To add a new vehicle, click **Add New Vehicle**. Indicate the type and capacity of all methods of transportation available at the facility to evacuate the residents. Do not duplicate the resource for multiple buildings if a resource is shared (e.g., an extended care complex with a skilled nursing building and an assisted living building share a van. The van should be entered under only one of the facilities, not both.)

Exercise 8 (Continued):

- 3. **Select** a vehicle type from the drop-down list. Complete the information in each of the fields.
- 4. Click Save when finished.
- 5. **Click Close** to close the page.

Special Needs Survey	Public Survey Users Contact Info Multiple Entries Log Out
version: 2.4	Current User: dlizambri
0	
9. Do you have a contract with an ambulance or transport service?	10. Do you have a contract/MOU with another facility to receive your dients/patients in the event an evacuation is necessary?
Yes O No	● Yes 🔘 No
* Name: 911 Ambulatory Services	* Name: Flynn Healthcare
* Contact Number: (834) 909 - 3231	* Contact Number: (834) 979 - 1347
 11. Please indicate the type and capacity of all methods of transportation resource for multiple buildings if a resource is shared (Eg. An extended car a van. The van should be entered under only one of the facilities, not bot Add New Vehicle Facility Survey: Vehicle Information - Windows Inte http://rockland.snr.deltatwo.com/facilityNewVehicle.aspx?survey 	re complex with a skilled nursing building and an assisted living building share h.)
Vehicle Type: Ambulance / Invalid coach	-
Capacity:	
Seated:	
Wheelchair:	
Litter:	Exit «Back Next Survey Page »
Close Save	
Internet Protected Mode: Off	🝸 🔐 Protected Mode: Off 🛛 🖓 👻 🔍 100% 👻

Figure 41: Transport Services Information

6. Add additional vehicles or click **Next Survey Page**>> to advance to the next section.



Exercise 8 (Continued):

Additional Questions

 Depending on the facility type that was selected on the Facility Information section of the survey, additional questions relevant to the type of facility will be asked at the end of the survey. Select the appropriate answers from the drop-down lists provided on the survey.

Special Needs Survey	Public Survey	Users Con	tact Info Multiple	Entries Log Ou
ersion: 2.4			Curre	nt User: <mark>dli</mark> zam
0				
12. What is the training level of the highest trained individual at th	e facility 24 hours a day / 7 days a	week?		-
13. Are patient beds on wheels for movement around facility? \bigcirc	Yes 🔘 No 🔘 Mixed, some yes an	d some Physici	an an Assistant	-
Additional Comments:		Nurse Registe	Practitioner ered Nurse	
			ed Practical Nurse Assistant	*
				T
				T
				Ŧ
				T

Figure 42: Additional Questions

- 2. Enter additional comments into the space provided for comments.
- 3. Click Save & Continue. The survey has been saved in the system and will appear on the survey list on the Account Information section.

Figure 42: Additional Questions

2. What is the training level of the highest trained individual at the facility 24 hours a day /7 days a week? Physician 3. Are patient beds on wheels for movement around facility? Yes No Mixed, some yes and some no Additional Comments:	Special Needs Survey version: 2.4	<u>Public Survey</u>	Users Contact Info	<u>Multiple Entries</u> <u>Log Out</u> Current User: dlizambri	
«Back Save & Continue	 What is the training level of the highest trained Are patient beds on wheels for movement arour 				
Delta Development Group, Inc. 42 Results with Integrity.		40		, (

Edit a Facility Survey

A facility survey may be edited at any point in time. The user or facility administrator who has been assigned the appropriate rights to that facility survey can log in to the system to edit the information in the facility survey.

Exercise 9:

This exercise will demonstrate how a facility administrator can edit the information for an existing facility survey.

- 1. **Click** *f* from the survey basket to edit an existing facility survey.
- 2. Click Next Survey Page>> on each section to edit the survey.
- 3. Click Finish when you have finished editing the survey.

Figure 44: Edit a Facility Survey

Specia version:			eds	Survey		<u>Public Survey</u>	<u>Users</u>	<u>Contact Info</u>	Multiple E		<u>Log Out</u> dlizambri
Create	ear	new s Myse	urve If	y for: Someone Else xisting surveys for:	Facility						
				Name	Address			Survey Type	Status	Last Up	odated
	Ø	2	۲	Lizambri, Diane	123 Main Street			Individual	Active	01/21/	2011
	Ø	2		Miller Adult Daycare	2 Main Street			Facility	Active	01/21/	2011
					F	age: E					

Delete a Facility Survey

A facility such as a nursing home or an adult day care, for example, may either relocate, close their operations, or be subjected to other situations that may change the nature of their operations or assets. In these situations, the facility administrator may need to remove a facility's survey from the Registry.

Exercise 10:

This exercise will demonstrate how to remove or delete facility surveys from the Registry.

Note: The delete feature does not permanently delete a survey from the Registry. The survey is stored in the database but is no longer displayed in the Account Information section. This is what is referred to as a "soft" delete.

1. Click 📝 to delete a facility survey.

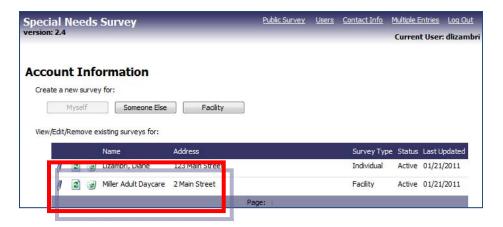
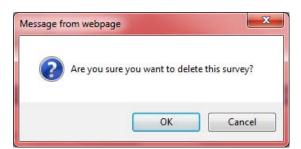


Figure 45: Remove a Facility Survey

2. Click OK to accept the deletion of the survey.

Figure 46: Deletion Confirmation

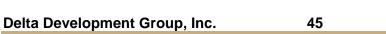


User Administration

The User Administration is the core component for maintaining users. The system provides the ability for a central system administrator to set up and maintain (add, edit, delete) administrators and end users, and assign the appropriate rights or access levels.

	cial Needs Survey on: 24	Bultinstony y	Users Contact Info	Multiple Entries Log Out Current User: dlizambri
Special Needs S version: 2.4	Survey - User Administration			Show / Hide Search 🗧
Search		Sho	w / Hide Search 🗧	
Quick Search				
Access Level	Name to search for			_
All Users				
Advanced Search				
Add User				
_				

Figure 47: User Administration



User Administration (Continued)

A User's Information page is created when a new user is added to the system. User Info and User Permissions tabs are available to enter information.

User Info Tab:

- o Requires first and last name, a username, and a password
- Space is provided for a middle initial and a suffix, an email address, primary and secondary phone numbers, and a complete mailing address
- Option to select teletypewriter (TTY) designation for the primary telephone number
- An email is automatically delivered to the user if the password changes for the account
- o Option to assign a user as a Facility Administrator

User Permission Tab:

- o Allows users to set the access level
- o Offers ability to change the role of the user to Administrator

<u>Note</u>: A user account is created for every individual that registers in the system.

User Info		User Info User Permissions	
		User's Permissions	User ID: Tester
* First Name * Last Name		County/Municipality	Access Level Facility Admin
MI:		-NEW YORK -Rockland	None <u>Edit</u> ^ None <u>Edit</u>
Suffix Email:	•	Clarkstown Haverstraw	None <u>Edit</u> None <u>Edit</u>
Phone:	() - ext.	Orangetown Ramapo	None <u>Edit</u> None <u>Edit</u>
Secondary Phone:	Is Primary Phone TTY/TTD () - ext.	-Stony Point	None <u>Edit</u>
Address:			
City:	State: NY 🔻		
Zipcode:	_		
* Username:	E Facility Administrator Tester		
	You may change the password below. If you do not enter matching passwords below, the password will remain the same.		
* Password	•••••		
* Confirm Password	•••••		*
Save Close			Close

46

Figure 48: User Info & Permissions Tabs

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User Administration (Continued)

Table 1 defines the user type and their permission levels for the Special Needs Registry Survey Application.

User Type	Permission Level
Public User	 Access to Public Survey to: complete their own survey create/edit/delete individual surveys for someone else that they have created create/edit/delete pre-assigned facility surveys view county contact information update own account information
Facility Administration User	Access to Public Survey to: - complete their own facility survey - create/edit/delete individual surveys for someone else - create/edit/delete facility surveys - view county contact information - update own account information
Application Administration User	 Access to Special Needs Registry Survey Application to: maintain administration of users and their permissions create/edit/delete individual surveys via public entry survey form view county contact information remove multiple entries create/edit/delete individual and facility surveys via rapid entry survey form generate reports perform searches export shape files utilize GIS map data and tools
Facility and Application Administration User	 Access to Special Needs Registry Survey Application to: maintain administration of users and their permissions create/edit/delete individual surveys via public entry survey form view county contact information remove multiple entries create/edit/delete individual and facility surveys via rapid entry survey form generate reports perform searches export shape files utilize GIS map data and tools

Table 1	۱
---------	---

User Administration (Continued)

Create a New User Account

The User Administration module provides administrators of the system the ability to create user accounts and assign permissions to each user. The administrator must have the appropriate rights to create accounts and assign permissions.

Exercise 11:

This exercise will demonstrate how to create a user account from within the user administration module and assign the user rights.

- 1. Log in to the Registry (must have the appropriate administrative rights to create user accounts).
- 2. **Click** on the Users link at the top of the dashboard. The User Administration section will be displayed.
- 3. Click Add User from the User Administration section.
- Once the User Info tab is displayed, fill out the necessary information. Required fields are denoted with red asterisks.
- Assign a username and password, and use a combination of at least six characters, numbers, letters, etc., for a strong password.
- 6. **Check** the option to assign the Facility Administrator rights for this user.

Figure	e 49: Create a New Oser Account
User Info	
* First Name	
* Last Name	
MI:	
Suffix	
Email:	
Phone:	()) - ext.
	Is Primary Phone TTY/TTD
Secondary Phone:	() - ext.
Address:	
City:	State: NY 🔻
Zipcode:	
-	
* Licername:	Facility Administrator
* Username:	You may change the password below. If you
	do not enter matching passwords below, the
** *	password will remain the same.
* Password	
* Confirm Password	
Save Close	

Figure 49: Create a New User Account

Create a New User Account (Continued)

Exercise 11 (Continued):

- 7. **Click Save** to save the user information. The system will save the data and a new User Permissions tab will be displayed next to the User Info tab.
- Click on the plus sign next to the county. This will expand the list and allow you to set specific permissions for the user down to the municipal or town level.
- To display the permissions tab, click on the Edit hyperlink for the county or town.
- 10. **Select** the access level from the drop-down menu.
- 11. If the user is going to be an administrator, **check** the Administrator role, and save the changes.

User Info User Permissions User ID: amiller acility_{Edit Link} County/Municipality Access Level -NEW YORK None Edit None Edit User Info User Permissions User ID: amiller Access Level Facility Edit Link County/Municipality -NEW YORK None Edit B-Rockland <u>Edit</u> None ---------------Clarkstown <u>Edit</u> None None <u>Edit</u> -Orangetown <u>Edit</u> None Ramapo Rockland Stony Point Access Level None -Administrator Save Cancel

Figure 50: Create a New User Account - Permissions

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Associate Users

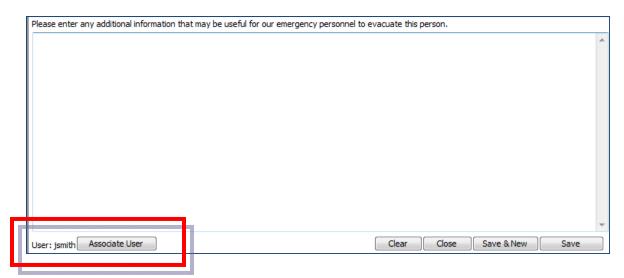
Users other than administrators of the system may manage specific individual and/or facility surveys. An administrator assigned with the appropriate permissions may choose a designated user(s) to be associated to other surveys. For example, an emergency management coordinator may associate one or more facility surveys in a specific township or borough to a first responder or a volunteer. The Associate User option is available for both survey types, although they may only be assigned through the Rapid Entry Survey Form. This allows the user to complete, edit, or delete a survey for another individual or facility.

Exercise 12:

This exercise will demonstrate how an administrator can associate other users of the system to help maintain and manage surveys.

- 1. Edit an individual's Rapid Entry Survey Form from the dashboard.
- 2. To associate a user, **click Associate User** from the rapid entry form. The User Administration section will be displayed.
- 3. **Select** a name from the list by clicking on the checkmark, or add a new user and associate it to a survey.
- 4. Click Save at the bottom of the survey form to save the changes.
- 5. Click Close to close the survey form and return to the dashboard.

Figure 51: Associate User – Rapid Entry Survey (Individual)



Associate Users (Continued)

The Quick Search and Advanced Search features are also available in the User Administration section to find a particular user to associate to a survey. The Quick Search Access Level menu lists the different types of access level users in the system: all access levels, basic user, application administrator, and facility administrator. Details about the user can be viewed by selecting the magnifying glass. An example of how to associate a user to a facility survey is shown below.

			Miller Adult Daycare		Survey Status: Active Facility Type: (for mixed use facilities check all that apply)
		Facility Address 2: Northing:	* City: Rockland	State: NY T ZpCode: 10956 State Plane Coordinates (feet) Easting:	Acute Care Hospital Acute Care Hospital Acute Daycare Assisted Living Boarding School
Special Needs Survey - rersion: 2.4	User Administratio	n		ext.	Child Daycare
Search			Show / Hide Search	alation	Group Home Halfway House Other
Access Level	Name to search for			Same as above	Rehabilitation Hospital Skilled Nursing University Dormitory
Advanced Search Add User				State: NY V ZipCode: 10956	Residential Educational Facility Non-residential Educational Facility
Last Name	First Name	Email			Unan allowabel
 ✓ Q administrator ✓ Q Fitzpatrick 	system John	bkilheffer@deltaone.com		t.	Associate User
Q Hampton Q Jones	Chloe	jjones@gmail.com		L	

Figure 52: Associate User – Rapid Entry Survey (Facility)

Figure 53: User Information

			Facility Inf	Miler Adult Davcare		Survey Status: Active • * Facility Type:
			*Facility Address:			(for mixed use facilities che all that apply)
First Name Last Name Email Phone Secondary Phone: Address: Last Four Digits of Social Security #: Username:	John Fitzpatrick C 162 MAIN ST City: Nyack jfitzpatrick	State: NY Zipcod - Application Administrator - Facility Administrator Associate User	le: 10960	City: Roridond State: NY • * ZpCo Geocode State Plane Coordinates (feet) Easting: Teodand Drangetown (A14) 576 - 3316 ext. State: NY • ZpCode: 10 State: NY • ZpCode: 10	▼ ▼ as above	Acute Care Hospital Adult Daycare Adult Daycare Contectional Facility Group Home Halfway House Other V Rehabilitation Hospital Skilled Nursing University Domitory Residential Educationa Facility
				Ashley Miller Chief Executive Officer amiller Bhotmail.com (834) 379 - 4002 ext. () - ext.		Non-residential Educational Facility User: jfitzpatrick Associate User
)elta Develop	ment Gr	oun Inc	5	1 Results	with Integr	rity

Archived Surveys

Another useful feature for managing surveys is the ability to archive surveys. Each survey will expire in the Registry based on the date they were entered into the system. Individual surveys expire at 12 months, and facilities will expire at six months. A survey that has not been updated by its expiration date may be archived in the system. Archiving allows the administrator to identify those surveys where outreach may be necessary to verify the status. If an individual has moved, or a facility is no longer providing a service to the special needs population, the administrator may change the status and remove the survey from the list. Periodic notifications are sent to the respondent and the administrator.

Note: More details about expiration notification will be discussed later in this Guide.

Exercise 13:

This exercise will demonstrate how surveys can be archived in the system. Archived surveys will remain in the system and can be searched by choosing the Survey Status from the drop-down list, and selecting "Archived" under Advanced Search. Surveys that have been archived can be made active by changing the status from within the survey form.

- 1. Login to the system with an administrator's account.
- 2. **Perform** a quick search or an advanced search to find a survey that will be archived in the system.
- Once you have found the survey, open the form.
- 4. **Locate** the Survey Status feature at the top, right-hand section of the form.
- Facility Information:
 * Facility Information:

 * Facility Name:
 Miler Adult Daycare

 * Facility Address:
 2 Main Street

 * Facility Address:
 2 Main Street

 * City:
 Rodkland

 State:
 NY * 7ipCode:

 * City:
 Rodkland

 State:
 Plane:

 * City:
 State:

 * City:
 State:
- 5. **Click** on the drop-down menu and choose the Archived option.
- 6. Click Save on the survey form. This survey has now been archived in the system.



Geocoding

The Special Needs Registry Survey Application utilizes geocoding services to locate, spatially display, and match addresses for individuals and facility resources. When an address is entered into a survey and the survey is saved, the system initiates the geocoding functionality to generate the appropriate latitude and longitude. If there are multiple matches, the system will provide a list of possible addresses that match the one entered on the survey. The user can select the appropriate address and the geocoding service will insert the latitude and longitude coordinates into the survey form. The coordinates translate into a reference point indicated by a dot on the Registry's GIS Module map tool. The map's tools, functionality, and features will be described in greater detail later in this Guide.

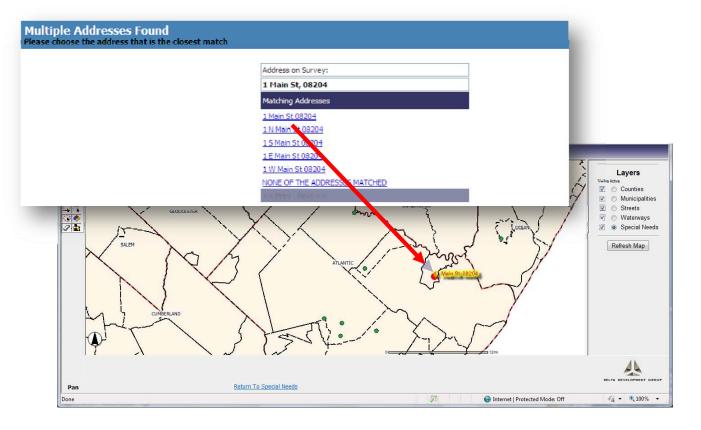


Figure 55: Multiple Address List



Report and Export Features

The Registry features several reporting tools. Administrators can run listing reports, detailed reports, or export data to shape files and/or an excel file.

	ecia sion: 1		eds Survey	-	-	<u>Public Survey</u>	<u>Users</u>	<u>Contact Info</u>	Multiple Entries	<u>Loq Out</u> r <mark>: dlizambri</mark>	
Se	arch								Show / Hide	Search 🗖	
0	Quick S										
		Name to	o search for						_		
0,	Advand	ced Sea	arch								Denerting
N	lew Su	rvey	Listing Report	Detailed Report	Export Shape File	Export Data t	o Excel	Show on Ma	ap Rever	se 911	Reporting and Data
-			Name	Cour	<u>ity</u>	<u>Township</u>		Survey Type	<u>Status</u>	Last Update	Entry
Ø		1	Bardonia Boarding Schoo	Rockl	and	Clarkstown		Facility	Active	01/21/2011	
8		ø	Cranston, Brian	Rockl	and	Ramapo		Individual	Active	01/19/2011	
0		1	Davidson, Steven	Rock	and	Stony Point		In <mark>d</mark> ividual	Active	01/20/2011	
A		1	Fitzpatrick, John	Rocki	and	Orangetown		Individual	Active	01/19/2011	

Figure 56: Reporting Tools

Listing Report

The Listing Report is a basic report that contains the name of the individual and/or the facility and the contact information, including the address, phone number, and email. The system divides each respondent's survey information by inserting alternating shaded sections.

Figure 57: Listing Report

Name: Address:	John Fitzpatrick 162 MAIN ST Nyack, NY 10960	Primary Phone: (845) 397-6678 Secondary Phone: Email:
Name: Address:	Chloe Hampton 18 NEW HEMPSTEAD RD New City, NY 10956	Primary Phone: (845) 554-9798 Secondary Phone: Email:



Detailed Report

Detailed data entered on individual and facility surveys is included in the Detailed Report as shown in the figure below. Detailed reports are helpful to administrators and first responders to use as a manifest for organizing evacuation procedures, a reference for contacting resources, and a way to verify and maintain information.

24 Hr. Staffed Phone: (845) 678-1212
Max Population/Census: 133
Township: Clarkstown
Phone Number: (888) 555-9868
Secondary Phone:
Email: hdearfield@gmail.com
Title: Administrator
out any outside assistance for this amount of time:

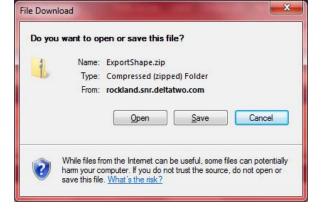
Figure 58: Detailed Report

Export Shape File

The Export Shape File feature allows the user to download a shape file that is created based on the current survey information in the system.

Exported shape files are standard GIS files. Shape files that have been exported from the Listing and Search dashboard can be downloaded and saved to import into a GIS system at any time.

Figure 59: File Download Prompt



Export Data to Excel

The data in the system can be exported to a spreadsheet. The Data Export Preview includes the option to preview groups from a drop-down menu. The following groups are included: Application Administration Users, Basic Users, Facility, Facility Administration Users, Custom Search, and Special Needs Individuals. These groups can be exported to a spreadsheet. Once the data is exported, it can be manipulated and used in charts or graphs for demonstrative purposes or for generating mail merges.

Export: Custom Sear	rh 🖣	Export to	Excel]										
First Name	LastName	Middle Name	<u>Suffix</u>	Facility Name	Facility Contact Nar	ne Email	Pho	one Number	Address	Address2	City	State	Zipcode	,
Georgette	Summers						(84)	5) 664-9798	145 COLLEGE RD		Sufferior	NY	10901	
Chloe	Hampton						(849	5) 554-9798	18 NEW HEMPSTEAD RD		New City	NY	10956	
Sufferon Acute Care Hospi				Sufferon Acute Care Hospital	Maxine Clause	mdaus	se@sufferon.org	e Downlo	ad				-	
Teremiah	lones	4				ijones	@gmail.com			-			-	
lohn	Smith					jjsmith	@hotmail.com							
Adam	Probst I)						Do you	want to open or	save th	is file?			
Brian	Cranston						-	NOR ANY AN	and a second second second					
Diane	Lizambri													
Miler Adult Daycare				Miler Adult Davcare	Ashley Miller	amiler	@hotmail.com	3	Name: Excel	Export.xls	S			
										<u>O</u> pen		ave		Cano
A First Kame	R (last M	C me Middle N) F fix Facility Name	F Facility Cont		G	2	While files from the harm your compute save this file. What	e Internet o er. If you d	can be use	ul, some		an pot
First Name	Lest Ne	me <mark>Middle N</mark>) F fix Facility Name	Facility Cont			2	harm your compute	e Internet o er. If you d	can be use	ul, some		an pot
	Lest Ne Summe	me <mark>Middle N</mark> 85						2	ham your compute save this file. <u>Wha</u>	Internet o er. If you d t's the risk	can be use lo not trust t	ul, some		an pot
First Name Georgette Chloe	Lest Na Summ Hampt	me <mark>Middle N</mark> 85		fix Facility Name		act Name		(845) 554	harm your compute save this file. Wha	Internet o er. If you d t's the risk	can be use lo not trust f	ul, some	ce, do n	an pot
First Name Georgelle Chloe Sufferon Acute Card	Lest Na Summ Hampt	me <mark>Middle N</mark> 85		fix Facility Name	Facility Cont	act Name	Email	(845) 554	harm your compute save this file. What 9798 18 NEW HEMPS 9964 145 COLLEGE R	Internet o er. If you d t's the risk	can be use lo not trust f	ul, some he sourc	ce, do n	an pot
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Figure 60: Export Data to Excel



<u>Reverse 911</u>

The Reverse 911 function compiles the contact information from the surveys and exports the data to a file. Administrators of the system will save the file and follow the Reverse 911 procedures to provide emergency management agencies with the necessary information to contact these individuals in the event of an emergency. The exported file may be opened directly from the survey application or saved in one of two format options: PRN (HTML file) or TXT (standard text file).

	The files was succesfully exported
File Download	Save PRN File Save TXT File Close
Do you want to open or save this file? Name: Reverse911.prn Type: HTML Document, 5.22KB From: maps.mcmtrans.com	
Open Save Can	
While files from the Internet can be useful, some files can pot harm your computer. If you do not trust the source, do not op save this file. What's the risk?	

Figure 61: Reverse 911

Exercise 14:

This exercise will demonstrate how to create different manifests or reports using the reporting tools described in the Report and Export Features section.

- 1. Generate a report that lists the surveys in the system by selecting **Listing Report** from the Report toolbar on the dashboard.
- 2. Review, print, or close the report when finished.
- 3. To generate a detailed report, first filter the list of surveys by building an advanced search using any criteria in the system. Click **Search** to display the survey results.
- 4. Once the survey results have been displayed, click **Detailed Report** from the Report toolbar on the dashboard. Only the filtered list of surveys will be displayed on the report.
- 5. Review, print, or close the report when finished.

Special Needs GIS Module

The GIS Module allows users to spatially search the Special Needs Registry's database. The system then generates a report of the special needs individuals found within the user-specified location on the map. The GIS component utilizes an ArcIMS platform with shape-file data. The components of the GIS module include map display, selection by geometry, and reporting.

Show on Map

The Show on Map feature will display a map populated with points that identify areas where individuals with special needs reside and where facilities are located.

Layers are built into the design to furnish more information about waterways, streets, and towns. Layers can be displayed by checking one or all the "visible" layer options.

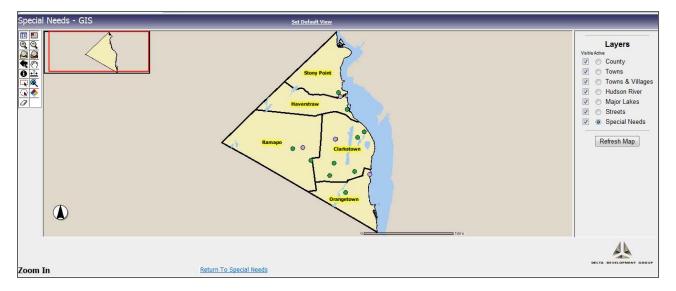
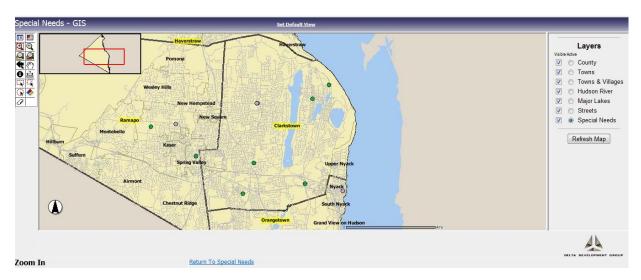


Figure 62: Special Needs GIS Map



Visible Layers

Visible layers are those shown on the map when the option is selected. For example, in the figure shown below, when you use the **zoom** feature, the special needs, waterways, streets, and towns are visible.





Active Layers

A layer can be activated by selecting the corresponding **active** radio button. Only one layer can be "active" at a time and it is used in conjunction with the selection tools to provide detailed information on those active layers.

Set Default View

The Set Default View feature allows a user to define a certain view other than the standard full mapview that is generated when the GIS module is accessed.



GIS Map Tools

The Special Needs GIS Module's map feature has incorporated a set of tools designed to allow a user to interact with the map and incorporated data. Each tool's unique function is described in Table 2.

		able 2	
	Toggles between legend and layer lists		Turns map over-view on/off
0	Zoom in	Q	Zoom out
	Zoom to full extent		Zoom to active layer
ŧ	Back to last extent – Zooms to the last map view that was generated	ংশ্য	Pan – Grabs and moves the map in any direction
0	Identify – Retrieves detailed information for active layer features	2	Measure – Measures distance between multiple points
Q	Select by rectangle – Drags pointer across an area and displays information about those points selected	G.	Select by polygon – Allows you to select points on a map to complete a polygon and retrieves detailed information for the active layer
R	Select by circle – Selects an area on the map based upon the number of miles entered into the radius field		Hazmat – Defines areas affected by hazardous material accidents by isolation distance, hazardous area distance, and wind direction
0	Clear selection – Clears the current selection points		

Table 2

Select by Circle

The Select by Circle tool allows users to perform a radius search. Once the tool has been selected, a radius distance field is displayed at the bottom of the map, as shown in the figure below. Users enter a radius distance and click the epicenter on the map. A map data table is then automatically generated to display the detailed information of the points contained in the selected area.

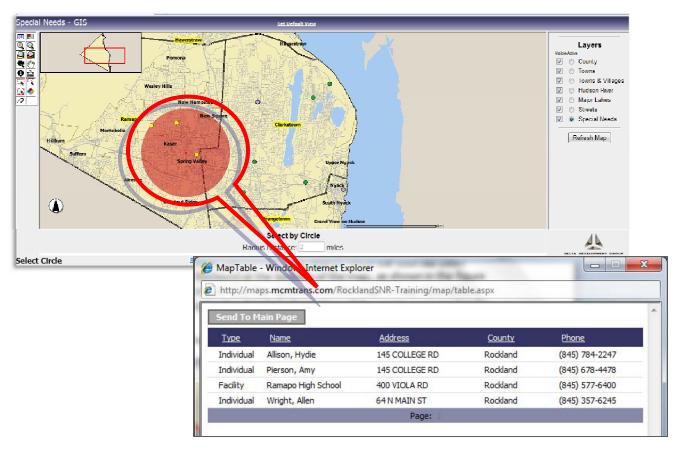


Figure 64: Selected Area by Circle and Corresponding Map Data Table



<u>Hazmat Tool</u>

In the even an accident occurs, users can quickly identify the area affected by the spill or contamination by selecting the Hazmat tool. The initial isolation distance and protective action distance are entered in the corresponding fields at the bottom of the map, as shown in the figure below. The distance can be measured in feet, meters, miles, or kilometers. In addition, to calculate the wind direction, to further define the affected area, users enter the degrees for the wind direction. Once the calculated information has been entered, users click a point on the map at the incident location. The affected area will be highlighted showing the isolation distance and an estimated downwind hazard area. A map data table is automatically rendered to display the detailed information of the points contained in the selected area.

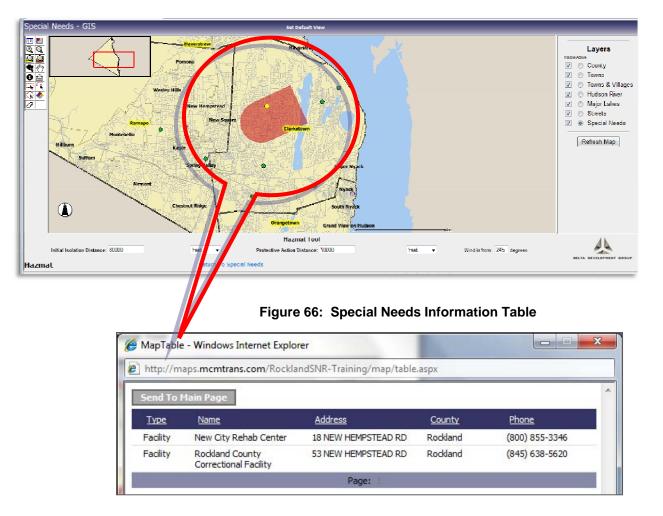


Figure 65: Hazmat Tool

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Results with Integrity.

Mass Email Capability

Mass emailing is a process programmed to start automatically at a pre-defined time within a 24hour period. There are several emailing processes built directly into the Special Needs Software. These processes search the database for records that have not been updated at pre-established intervals. If records are found that have not been updated, an email will be sent automatically, to notify the individual that he/she needs to update the information.

Individual surveys are required to be maintained on an annual basis. Facility surveys are required to be updated on a semi-annual basis.

Individual 30-Day Expiration Email

An individual account will receive an email 30 days prior to their annual expiration date, or eleven months since their account was last updated. An example of an individual 30-day expiration email notification is detailed below.

Thank you for staying prepared and maintaining your **Special Needs Registry Account**.

Please ensure you have reviewed your Individual Preparedness Plan and updated your Special Needs Registry Account.

You are receiving this message because either your account information or an individual you have registered an account for will expire in 30 days.

Please click this link to confirm and update your registration: [yourURLhere.xxx]

Thank you, Rockland County Special Needs Registry

Please do not reply to this email. It is being sent from an unmonitored account.

Individual Expired Email

If a user does not update their account within the 30-day window, a second email will be sent stating that their account has been made inactive, and is no longer accessible within the Special Needs Registry. If a user wishes to re-activate the account, they would need to contact the appropriate county or municipal administrator. An example email notification regarding an individual's expired account is shown below.

Thank you for staying prepared and maintaining your **Special Needs Registry Account**.

Please ensure you have reviewed your Individual Preparedness Plan and updated your Special Needs Registry Account.

You are receiving this message because either your account information or an individual you have registered an account for is no longer active.

Please click this link to confirm and update your registration: [yourURLhere.xxx]

Thank you, Rockland County Special Needs Registry

Please do not reply to this email. It is being sent from an unmonitored account.

Should you need additional assistance to access your account, please contact Rockland County's Emergency Management Agency.

A system administrator will receive a monthly email detailing the number of current registrants, number of new registrants, and the number of accounts that have expired.



Facility 30-Day Expiration Email

A facility that has registered in the system will receive an email 30 days prior to their semiannual expiration date or five months since their account was last updated. The 30-day facility survey expiration email notification is show below.

Thank you for staying prepared and maintaining your **Facility's Special Needs Registry Account**.

Please ensure you have reviewed your Facility's Preparedness Plan and updated your Special Needs Registry Account.

You are receiving this message because your facility account will expire in 30 days.

Please click this link to confirm and update your registration: [yourURLhere.xxx]

Thank you, Rockland County Special Needs Registry

Please do not reply to this email. It is being sent from an unmonitored account.



Facility Expired Email

If a facility administrator does not update the account within the 30-day notification period, a second email will be sent stating that their account has been turned inactive and is no longer accessible within the Special Needs Registry. If a user wishes to re-activate the facility account, they would need to contact the appropriate county or municipal administrator to reactivate the account. An example of a facility's email notification about the expired account is shown below.

Thank you for staying prepared and maintaining your **Special Needs Registry Account**.

Please ensure you have reviewed your Facility Preparedness Plan and updated your Special Needs Registry Account.

You are receiving this message because your facility account is no longer active.

Please click this link to confirm and update your registration: [yourURLhere.xxx]

Thank you, Rockland County Special Needs Registry

Please do not reply to this email. It is being sent from an unmonitored account.



Administrative Monthly Email

Rockland County Special Needs Registry Monthly Status Report

	Individuals	Facilities
<i>Number of current registrants</i>	45	8
<i>Number of new registrants this month</i>	11	3
<i>Number of accounts that are expired</i>	4	1

Thank you, Rockland County Needs Registry Administrator

Please do not reply to this email. It is being sent from an unmonitored account.

Help Information

The individual may contact the Rockland county or municipal administrator to answer any questions or if they are uncertain how to respond to a question. The contact information is available by clicking on 20 on any page throughout the survey.

Figure 69: County Phone Directory

http://maps.mcmtrans.	com/RocklandSNR-Training/contactlis	t.aspx
County Phone Directo For additional help ple	pry ase contact the representative i	n the appropriate county
County Name	County Phone	
Rockland	(845) 364-8800 ext. 125	
		Close

