

# U.S. Army Guide on Family Assistance Centers



GETTING PREPARED, STAYING PREPARED



# **U.S. Army Family and Morale, Welfare and Recreation Command (FMWRC): Army Community Service (ACS) U.S. Army Guide on Family Assistance Centers**

## ***Acknowledgements***

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<b>Introduction</b>	<b>5</b>
<b>Purpose and Organization of FAC Guide</b>	<b>5</b>
<b>Users of FAC Guide and Their Role in FAC Operations</b>	<b>6</b>
Military Leadership	6
Family Program Staff	6
<b>Part I. What You Need to Know About FAC Operations</b>	<b>9</b>
1.1 Overview on FACs	9
1.2 Planning and Preparations for Establishing a FAC	14
1.3 Setting up a FAC	23
1.4 Maintaining a FAC	26
1.5 Administration	30
<b>Part II. Guidance and Key Issues for Different FACs</b>	<b>33</b>
2.1 FAC – Deployment	34
FAC Checklist	36
2.2 FAC – Mass Casualty	42
FAC Checklist	44
2.3 FAC – Natural Disaster	50
FAC Checklist	52
<b>Part III. Additional Topics</b>	<b>59</b>
3.1 Dealing with Emotions and Reactions of Soldiers, DoD Civilians, and Families	59
3.2 Maintaining Privacy and Confidentiality	64
3.3 Dealing with the Media	65
3.4 Taking Care of Self and Others/Avoiding Compassion Fatigue	67
3.5 Effective FAC Operations – A Brief Synopsis	69
<b>Part IV. References</b>	<b>71</b>
<b>Part V. Resources</b>	<b>73</b>
Acronyms	74
Forms	
FAC Planning Tool [Part A]	76
FAC Planning Tool [Part B]	80
Sample Appointment Order	82
FAC Client Case Record [DA Form 5897]	83
FAC Client Intake and Referral Sheet	85



Handouts

Compassion Fatigue 

86

[Note: Other handouts/brochures are located in the Operation READY Smart Book.]

Family Assistance Center

Leadership’s Role in the FAC

## Purpose and Organization of FAC Guide

The Family Assistance Center [FAC] is a valuable Family service that supports Soldiers, DoD Civilians, and their Families in deployments, (natural and man-made) disasters, mass casualties, catastrophic events, and emergency situations. In today's environment, FACs play a big role because:

- Military operations have led to high OPTEMPO and lengthy back to back deployments of many units, increased mobilization of Guard and Reserve, and large numbers of wounded warriors
- Terrorism, shootings and other incidents have resulted in mass casualties
- Natural disasters occur annually, some like Hurricane Katrina with devastating consequences.

A key lesson learned is that preparations and enhanced capabilities enable installations and communities to respond immediately and effectively to deployments, disasters, or emergencies. The purpose of this guide is to provide information and guidelines that enhance preparedness and responsiveness of FACs in any situation, but especially in providing enduring support for term deployments, mass casualties, and natural disasters.

This guide was designed taking into account differing levels of experience with FAC operations. Readers can read those Parts of greatest interest:

- **Part I** – provides a basic overview about FACs which include a review of pertinent Army policies [section 1.1], and offers a detailed task checklist with explanatory notes to facilitate planning, establishing and maintaining a FAC [sections 1.2-1.5].
- **Part II** – addresses in separate sections what a FAC can do and the implications on how FAC tasks are performed to support large-scale deployments [section 2.1], mass casualties [section 2.2], and natural disasters [section 2.3]. While the information in Part II should be read for more comprehensive planning, the sections in Part II are also designed as stand-alone sections that can serve as a quick reference guide when a FAC is activated for a specific disaster or emergency.
- **Part III** – offers guidance on how to handle specific issues to increase FAC Director and staff capabilities.
- **Part IV** – lists the civilian and military references and web sites.
- **Part V** – offers a selection of tools and education materials to facilitate the Family Program Directors' efforts.

**[Note:** The phrase “deployments, disasters, and emergencies,” will be used throughout this guide. This phrase refers to all natural and man-made hazards such as mass casualty incidents, natural disasters, contingencies, conflicts, catastrophic events, and term deployments.]

### Users of FAC Guide and Their Role in FAC Operations

This guide is for personnel involved in managing FACs conducted by Active Army and Army National Guard, primarily the Family Program Director.

#### Military Leadership

The information presented in this guide gives leadership greater insight into how a FAC can operate in different situations. Having this insight can be helpful in two instances. First, it can be helpful when developing and reviewing the installation contingency plan. Second, it can be helpful in determining how to coordinate response and recovery efforts when deployments, mass casualties and natural disasters occur. Further, this understanding may enable leadership to establish a two-way communication system with the FAC that facilitates both the leadership's and FAC's efforts in supporting Soldiers, DoD Civilians, and Family members.

#### Family Program Staff

The information presented in this guide is intended to assist Family program staff with designated responsibilities for the logistics and management of the FAC. Thus the guide offers information related both to planning and implementation. The intent is to arm Family program staff with the information and tools that may give staff the confidence to carry out FAC responsibilities.

**Army Community Service [ACS] Staff.** When a FAC is activated, the garrison commander typically identifies the ACS as the proponent responsible for the overall logistics and management of the FAC. The roles of key staff are described below.

Specifically, the **Family Program Director's** responsibilities are:

- Prepare Family Assistance Plan [see section 1.1 for more information]
- Make recommendation to garrison commander that FAC be activated
- When the FAC is activated, the Family Program Director becomes the FAC Director
- Serve as advisor to garrison commander
- Notify agencies and advise on staffing requirement, and ensure appropriate level of support is on-hand or on-call
- Provide oversight of FAC operations
- Conduct briefings and trainings to FAC agencies
- Designate Assistant Director from the Family Program staff and shift leaders as required
- Provide FAC status reports to garrison commander
- Prepare FAC after action report
- Advise commanders on Soldier and Family issues
- Manage all donations.

The **Deployment Readiness Program Manager's** responsibilities are:

- Serve as Assistant FAC Director
- Manage day-to-day activities of FAC
- Conduct FAC staff training
- Maintain contact with commanders to exchange information, review available services and procedures, and resolve operational problems
- Keep commanders abreast of problems affecting Families
- Assist Families with information and referral services
- Maintain orders of FRG leaders and chain of concern as necessary, and coordinate with Family Readiness Support Assistants [FRSAs]
- Assist Emergency Operations Center [EOC] and RDC in phone calls and notifications as necessary
- Compile after action reports and make recommendations for improving procedures
- Maintain Smart Book
- Maintain list of FRG leaders and RDCs.

**National Guard Family Program Staff.** In the Guard, FAC operations are overseen by the National Guard Family program staff at the state level. There are 249 enduring FACs strategically located throughout the U.S. and territories. These FACs serve as a hub for the local communities regarding information and services for the geographically dispersed Soldiers, DoD Civilians, and their Family members. The roles of key staff are described below.

The **Army National Guard State Family Program Director** works in coordination with others on location of Guard FACs and FAC Specialists. The State Family Program Director also oversees training for staff and Families and manages programs for Soldiers and Families. In addition, the State Family Program Director handles calls from Families requesting assistance.

The **State Family Assistance Center Coordinator** oversees the FAC Specialists located throughout the state. In addition, the State FAC Coordinator handles calls from Families requesting assistance.



**Army Reserve Family Program Staff.** FAC operations in the Army Reserve are managed by the Family Program staff at the Major Subordinate Command (MSC) level. Each MSC Family Program Directorate serves as an enduring FAC, totaling 29 across the United States, Puerto Rico, the Pacific, and Europe. These FACs serve as a hub for the local communities regarding information and services for the geographically dispersed Soldiers, DoD Civilians, and their Family members. The role of the MSC Family Program Director is described below.

The **MSC Family Program Director** is responsible for the budget, training, resources, and all aspects of the Family Program within their commands. They work for the MSC commander, and provide him/her with information regarding the well-being of the Total Army Family along with updates on new programs and services. The Family Program Director also manages the workload of the Family Program staff within their command, and provides direct assistance to individuals.

**Notes**



## 1.1 Overview on FACs

### What shapes FAC operations?

Army OneSource [AOS] establishes a vast array of partnerships, and strengthens the relationship between the Active Army, National Guard, Army Reserve, and community services. The Army Yellow Ribbon Program also focuses on these type of partnerships to enhance information and support for the Guard and the Army Reserve. The purpose for this emphasis on partnerships is to develop a Family support system that can offer Soldiers, DoD Civilians, and their Family members access to baseline programs and services in the geographical areas where they live.

Programs and services are established by a core set of baseline services, and are made available through coordination and partnerships between military and civilian agencies.

- Information and referral [Military OneSource (MOS) and AOS; finding out where to go for services]
- Child care [Garrison/NG/AR Child care, Community Child Care, Operation Military Child Care, respite care or weekend drill, or deployment related child care]
- School Transition Services [Transition Institutes, CYS Transition or School Liaison Support Services, Partnerships in Education, Home Linkages]
- Youth Services [Garrison/NG/AR Youth programs, Operation Military Kids, Boys and Girls Clubs, 4-H, Garrison/NG/AR programs]
- Employer Support of the Guard/Reserve [ESGR]
- Wounded Warrior Program/Survivor Disabled Soldier Support System [Soldier and Family Assistance Center or Virtual Soldier and Family Assistance Center]
- Transition Assistance Program [Army Career and Alumni Program]
- Managing Deployment [Family Readiness Group and/or Rear Detachment Commander/Officer Training; Family Readiness Support Assistants, Operation READY, Family Academies – Yellow Ribbon]
- Getting Involved [Army Family Action Plan, Army Family Team Building, Army Volunteer Corps]
- Home & Family Life [Marriage Enrichment-Strong Bonds, Military Family Life Consultants, Sexual Assault Prevention and Response Program, New Parent Support Program, Victim Advocacy, Mental Health support]
- Money Matters [Financial Training, Army Emergency Relief]
- Medical/Tricare [Entitlements]
- Legal [Wills, Living Wills, Powers of Attorney, Family Care Plan]
- Continuity of Services [Defense Enrollment Eligibility Reporting System – DEERS, ID Cards].

Army OneSource promotes outreach and leverages technology using a three-pronged service delivery strategy:

- Facility-based services available through walk-in to any Army installation and National Guard and Army Reserve facility/center
- Web sites that provide information and support
- Telephone support available on a 24/7 basis [e.g., Military OneSource].

The purpose of this three-pronged service delivery strategy is to offer access to standardized programs and services.

**What does this mean for FACs?** The purposes and key features of Army initiatives are relevant to FACs and can facilitate FAC operations. For example, in order for FACs to serve as a centralized point for Family support services in deployments, disasters, and emergencies, it is essential to be able to involve and effectively coordinate an array of military and civilian agencies. The FAC's efforts to create partnerships to provide services specific to deployments, disasters, and emergencies reinforces the critical need for and use of partnerships. Currently, some relationships between Family programs and other agencies are only based on or formed at a Family Assistance Exercise (FACEX). To the extent that military Family programs have established partnerships already, then they have the capability to call upon agencies/partners to assist the FAC in different situations. The Inter-Service Family Assistance Committee [ISFAC] is one vehicle to establishing partnerships that include Memorandums of Agreement [MOAs] or Memorandums of Understanding [MOUs]. Sample ISFAC partnerships include YWCA shared child care/parent resources and tuition assistance, and MOAs with law enforcement, child services or youth activities, or medical/behavioral health out-patient care. In sum, they are complimentary efforts that collectively serve the overall goal of establishing a comprehensive network of partnerships. With the passage of time, relationships become more firmly solidified thus making it easier to stand up a FAC quickly.

Secondly, the identification of baseline services under the AOS defines services already in place. FACs must examine how these services need to be tailored or implemented as well as identify what additional services are needed to respond to a specific deployment, disaster, or emergency. FACs can thus work with the partners providing baseline services on how to adapt efforts for a particular situation and to identify other potential partners to provide needed services and expertise. In sum, harnessing services for the FAC becomes easier.

Meeting the needs of all Families, especially those who are geographically dispersed during a deployment, disaster, or emergency is a challenge. In considering a three-pronged service delivery strategy, this means a FAC by virtue of setting up a physical location for the FAC provides walk-in service. FACs typically set up telephone services for information and support, which is another important service delivery strategy. However, FACs also need to promote appropriate web sites. By focusing on all three strategies, FACs will then enable Soldiers, DoD Civilians, and their Families to get help and access to timely and reliable information, which is vital in deployments, disasters, and emergencies.

### **What is the role of a Family Assistance Center?**

The role of the FAC is "to provide Family support services to service members and Families of Active and Reserve component forces as well as emergency-essential Civilians during a catastrophic situation" [AR 608-1]. Most services provided by the FAC, especially for the geographically dispersed, offer a centralized point of contact or central location for accessing multiple services [i.e., "one-stop knowledge center"]. Each FAC also promotes appropriate web sites such as Military OneSource [[www.militaryonesource.com](http://www.militaryonesource.com)] and Army OneSource [[www.myarmyonesource.com](http://www.myarmyonesource.com)].

FACs are intended to serve as a safe, supportive environment where affected Family members can connect with others in the same situation, thereby allowing Families to build their social support network.

The Army National Guard FACs play a vital role in Family support for geographically dispersed Soldiers and their Families by providing information and referral services on a 24/7 basis. In the Guard, information and assistance is often provided via regional contacts with a FAC Specialist and can be located through the geographic locator on the AOS web site [[www.myarmyonesource.com](http://www.myarmyonesource.com)].

## What are the relevant Army policies pertaining to FACs?

### AR 608-1

AR 608-1 states that Family Assistance Centers may be established in deployment or mobilization and Stability and Support Operations [SSOs] [such as mass casualties, evacuation, natural disaster, and acts of terror]. The establishment of Family Assistance Centers is to be addressed in the Family Assistance Plan.

The Family Assistance Plan must specify:

- Type of Family services to be provided based on situation and identified needs
- Garrison and other agencies' roles and responsibilities
- Resource requirements
- Inter-Service Family Assistance Committee [ISFAC] coordination and support
- Mobilization table of distribution and allowances [TDA] requirements
- Requirements to accommodate any projected program needs
- Installation response to acts of terror.

Further, because the Family Assistance Plan is to be incorporated into the installation contingency plan [linked to deployments, disasters, and emergencies], information about the FAC is expected to appear in the installation contingency plan as well.

### National Guard Family Program [NGR 600-12]

States are required to develop a Family program, and more specifically, a well publicized point of contact that handles requests for information and referrals to all resources for National Guardsmen and their Families. Although a FAC is not specified in NGR 600-12, states are advised to establish a toll-free number.

## What services are provided by the FAC?

### Garrison and National Guard

There is a requirement to develop a local FAC SOP that specifies the baseline services or minimum services that will be provided by the FAC when deployments, disasters or emergencies occur. This list provides a framework from which local decisions can be made about how and which services currently in place need to be tailored or emphasized. In addition, local discussions will also need to identify what additional services are needed to respond to these situations.

- Information and referral [Military OneSource (MOS), Army OneSource (AOS); finding out where to go for services]
- Child care [Garrison/NG/AR Child care, Community Child Care, Operation Military Child Care, respite care or weekend drill, or deployment related child care]
- School Transition Services [Transition Institutes, CYS Transition or School Liaison Support Services, Partnerships in Education, Home Linkages]

- Youth Services [Garrison/NG/AR Youth programs, Operation Military Kids, Boys and Girls Clubs, 4-H, Garrison/NG/AR programs]
- Employer Support of the Guard/Reserve [ESGR]
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- Getting Involved [Army Family Action Plan, Army Family Team Building, Army Volunteer Corps]
- Home & Family Life [Marriage Enrichment-Strong Bonds, Military Family Life Consultants, Sexual Assault Prevention and Response Program, New Parent Support Program, Victim Advocacy, Mental Health support]
- Money Matters [Financial Training, Army Emergency Relief]
- Medical/Tricare [Entitlements]
- Legal [Wills, Living Wills, Powers of Attorney, Family Care Plan]
- Continuity of Services [Defense Enrollment Eligibility Reporting System – DEERS, ID Cards].

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#### **KEY POINT**

*Casualty notification is not a function of a FAC.*

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### **Who makes up the composition of the FAC?**

#### **Garrison**

Local FAC SOPs should identify the agencies that will assist in providing the essential services. These agencies will supplement ACS and together make up the FAC team. However, the full complement of a Family Assistance Center Team [FAC team] can change when deployments, disasters, or emergencies occur.

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#### **KEY POINT**

*Keep in mind that AOS baseline services are provided through coordination with military and civilian agencies. Thus, these agencies are available to be potential FAC team members. [See Planning Tools Part A and B located in the Resources section, which provides a matrix of key agencies and roles].*

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#### **National Guard**

FAC Specialists work as individuals serving different regions of a state. They are part of the AOS and have access to a diverse network of agencies from which they can get information, assistance, and referrals when assisting geographically dispersed Soldiers.

## When is a FAC established?

A FAC may be established to support a military operation or local or national emergency situation that impacts a unit or the community such as:

- Extended or large-scale deployment of units
- Mass casualty; mass casualty evacuations
- Natural disasters [e.g., flooding, earthquake, hurricane, tsunami, fire, infectious disease such as influenza pandemic]
- Man-made catastrophic events/Emergency situations [e.g., accidents, airplane crash, shooting, multiple homicides]
- Acts of terror [e.g., chemical attack, biological attack, radiological attack, nuclear attack, high explosive attack].

A FAC can be activated regardless of where the situation occurs, which can be on the installation, in the immediate geographical vicinity, at distant training and deployment sites, or other location. The activation of a FAC is done early in the response phase of a deployment, disaster or emergency when it is critical to be prompt in meeting the needs of Soldiers, DoD Civilians, and their Families. [Note: For information about FAC operations in deployment, mass casualty, and natural disaster situations, see relevant sections in Part II of this guide].

### Garrison

Because ACS is the proponent responsible for setting up the FAC and based on AR 608-1, the ACS building or certain space within the ACS building is often used as the FAC. Other facilities may also be designated as the FAC.

### National Guard

The Army provides the National Guard resources for 249 FACs that are to be sustained as centralized points of contacts and walk-in services for geographically dispersed Soldiers, DoD Civilians, and Family members. FAC locations are identified on the geographic maps, and can be accessed using the geographic locator on the AOS web site [[www.myarmyonesource.com](http://www.myarmyonesource.com)].

## How long does a FAC operate?

### Garrison

A FAC typically was set up and operated during the initial months of a deployment, disaster or emergency. A FAC was viewed as a temporary resource for Soldiers, DoD Civilians, and Families. However, due to the changing times and a broader array of situations in which a FAC may be activated, the length of FAC operations now varies and can be for extended periods of time. An example is the number of wounded Soldiers which has necessitated establishing an enduring Soldier and Family Assistance Center [SFAC] for Warriors in Transition.

### National Guard

There are 249 FACs that remain open to meet needs during deployments, disasters, and emergencies. [See individual sections for relevant details].

## 1.2 Planning and Preparations for Establishing a FAC

This section identifies the planning and preparation tasks for establishing a FAC in checklist format. The purpose of “preplanning for Family assistance” is to “ensure that a comprehensive, realistic, effective and coordinated assistance delivery system is in place” [AR 608-1] and can be implemented quickly. Because situations can occur without warning and the FAC will need to become operational within hours of an event, there will be no time to make preparations. Therefore, conducting these planning and preparation tasks is critically important. Further, some situations may result in large numbers of Soldiers, DoD Civilians, and Families seeking assistance and/or a chaotic environment, both of which necessitate being as well organized as possible.

- ❑ **Develop a Standard Operating Procedure [SOP].** Installations [or states, in the case of National Guard] are required to develop a FAC SOP that elaborates on the activation and operational procedures of the FAC. Information that is important to address in the FAC SOP includes:
  - All circumstances in which a FAC may be activated
  - What and how services will be provided. [In order to determine how services will be provided, it will be necessary to have discussions and planning meetings with agencies. See task labeled “identifying agencies and their roles in the FAC team” below for further details as well as Part II of this guide]
  - Strategy for service delivery, based on the AOS guidance.

Once developed, the FAC SOP becomes a part of the required installation contingency plan [linked to deployment, disaster, or emergency] or community emergency response plan. This type of planning is critical to increasing the installation’s/state’s capability to respond effectively to situations and is congruent with the National Preparedness Guidelines released by the Department of Homeland Security. It is important to periodically review contingency plans and SOPs.

- ❑ **Identify how the FAC will operate.** Both the Active Army and National Guard have established where FACs will operate. However, to increase preparedness for all types of situations, consideration should be given to determining whether alternative locations and delivery strategies may be appropriate in certain situations. For example, situations such as natural disaster or chemical hazard, can necessitate selecting an alternative location if the installation becomes inaccessible, number of individuals to be served is high, or for other reasons.

**TIP:** *It is advisable to establish the FAC near but not at the site of a catastrophic event. Consider whether an off-site location is desirable and establish an appropriate MOU.*

Things to consider in operating a FAC include as follows:

- Accessibility for Families with ID cards, as well as non-ID card holders and disabled
- Availability of site to accommodate the FAC if it becomes long-term
- Ability to provide secure, safe environment [Be prepared to handle displaced pets].
- Size – number of individuals expected to assist and visit the FAC; if applicable, ability to serve large numbers of individuals; and capability to set up stations for different agencies/service providers.

**KEY POINT**

*Keep in mind that it is important to ensure that the FAC meets occupational health and safety standards and fire protection standards for the number of individuals the FAC serves.*

- Layout of the physical space to support the functions that will be provided including:
  - Reception/waiting area and registration area
  - Office/administrative space [including secure files]
  - Space for different agencies
  - Private spaces for interviewing and counseling, if possible
  - General assembly room for informational briefings and training
  - “Comfort space” for Soldiers, DoD Civilians, and Families to relax and for comradeship (quiet room)
  - Sleeping space for staff and/or Families [optional, but may be necessary]
- Infrastructure [i.e., facilities and utilities] and capability to set up and support equipment including multiple phones, computers, internet and intranet access, copiers, fax machines, television, videos, public address system, etc.
- Kitchen/kitchenette [not required, but highly desirable]
- Number of bathrooms
- Availability and size of parking.

**TIP:** Consider creating a floor plan with areas marked for designated functions, which allows for quick set up when a FAC is activated. Thus as agencies check in, they can be immediately told what area is designated for them.

- **Ensure that essential baseline services are provided by the FAC.** To be able to respond immediately and effectively to deployments, disasters, or emergencies, it is important to anticipate the full range of services that may be needed by Families and to determine what specialty services need to be provided.

**KEY POINT**

*Keep in mind that with the coordination of baseline services, some services may already be in place. Further, appropriate arrangements may need to be made to have them delivered at the FAC, if determined appropriate. Other military and civilian services will likely need to be harnessed.*

To determine the full range of services, begin by examining the baseline services available with regard to the areas listed below and identify how each needs to be focused for all natural and man-made hazards. Part II provides information that can be helpful in this task.

- Information and referral [Military OneSource (MOS), Army OneSource (AOS); finding out where to go for services]
- Child care [Garrison/NG/AR Child Care, Community Child Care, Operation Military Child Care, respite care or weekend drill, or deployment related child care]
- School Transition Services [Transition Institutes, CYS Transition or School Liaison Support Services, Partnerships in Education, Home Linkages]
- Youth Services [Garrison/NG/AR Youth programs, Operation Military Kids, Boys and Girls Clubs, 4-H, Garrison/NG/AR programs]
- Employer Support of the Guard/Reserve [ESGR]
- Wounded Warrior Program/Survivor Disabled Soldier Support System [Soldier and Family Assistance Center or Virtual Soldier and Family Assistance Center]
- Transition Assistance Program [Army Career and Alumni Program]
- Managing Deployment [Family Readiness Group and/or Rear Detachment Commander/Officer Training; Family Readiness Support Assistants, Operation READY, Family Academies – Yellow Ribbon]
- Getting Involved [Army Family Action Plan, Army Family Team Building, Army Volunteer Corps]
- Home & Family Life [Marriage Enrichment-Strong Bonds, Military Family, Life Consultants, Sexual Assault Prevention and Response Program, New Parent Support Program, Victim Advocacy, Mental Health support]
- Money Matters [Financial Training, Army Emergency Relief]
- Medical/Tricare [Entitlements]
- Legal [Wills, Living Wills, Powers of Attorney, Family Care Plan]
- Continuity of Services [Defense Enrollment Eligibility Reporting System – DEERS, ID Cards].

- **Identify military, civilian and government agencies and their specific roles in the FAC team.**  
Identifying specific agency roles for different services and establishing the necessary agreements/ memorandum of understanding [MOUs] prior to deployments, disasters, and emergencies is essential. Having this understanding and establishing identified roles increase the installation's [or regional area's] capacity to respond effectively in these situations.



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**KEY POINT**

*The primary intent is to identify not only other military agencies outside of the baseline services, but all key agencies that will provide assistance to Families. With these agencies, it may be valuable to develop an arrangement so that referred Families are received with priority.*

*Also keep in mind that operating a FAC requires a wide range of support, which include security services, communications equipment and services, computers and technical assistance, other equipment, and food. Thus, it is important to identify agencies that will provide support to the FAC.*

*In sum, establishing a vast network of partnerships is key to enhancing overall community response capacity and coordinating mass care resources. This is a key lesson from Hurricane Katrina, 9/11 and other unprecedented events, which revealed that partnerships are necessary and vital for responding to large-scale events.*

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Other **military agencies** to approach and discuss their potential contributions to or role in the FAC are:

- Chaplain
- Behavioral Health: Social Work Service, Psychiatry, Psychology
- Public Affairs Office
- Directorate of Logistics
- Directorate of Public Works
- Provost Marshall Office
- Transportation Office
- Casualty Assistance Office
- Other military installations.

Local **civilian agencies** can also provide valuable assistance at the FAC or in coordination with the FAC. The list below is not exhaustive, but identifies some agencies to consider:

- American Red Cross
- Army Emergency Relief
- Local food bank
- Department of Veterans Affairs
- Mental Health America [formerly National Mental Health Association]
- United Way
- Salvation Army
- VFW.

Local **government agencies** should also be involved in planning efforts, particularly with regard to their role in public safety and emergency services.

For each agency, it will be important to specify their role and the nature of the services they will provide to Families or to the FAC. This includes having Family Programs specify the services that they will provide. See the FAC Planning Tool in Part V to assist in these planning efforts. [Note: Part II of this guide identifies the agencies that have responsibilities or can be called upon in deployment, mass casualty, and natural disaster].

**TIP:** *Inter-Service Family Assistance Committee (ISFAC) membership facilitates communication among the network of community and military agencies.*

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#### **KEY POINT**

*Response and recovery efforts require partnership and collaboration of military, government, and civilian agencies at many levels. Therefore, it is recommended that the aforementioned agencies and others be involved in planning. This will allow for working relationships to be established and the process for requesting assistance from agencies to be determined prior to an emergency event. Be aware that the Army OneSource and Inter-Service Family Assistance Committee [ISFAC] are mechanisms in place by which this planning can occur.*

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- **Establish procedures.** To enhance the capability of the FAC being able to operate effectively, it is essential to establish operational procedures and protocols. Below is a listing of concerns and issues that need to be thought about prior to deployments, disasters, or emergencies occurring.
  - **Communication system among FAC Director, FAC staff, outside agencies, and military leadership** [both unit leadership and garrison commander] – Communication is critical during an emergency event and thus it is important to determine the ways in which different groups will communicate with each other.
 

**TIP:** *Consider these important questions:*

*How will information be shared between FAC Director and FAC staff and other FAC team members?*

*How will the garrison commander share information with FAC Director?*
  - **Communication system with PAO** – In an emergency event, providing timely but accurate information to Families is vitally important.
 

**TIP:** *Consider these important questions:*

*How will PAO keep FAC Director updated on public information release guidelines?*

*Will the PAO provide briefings to Soldiers, DoD Civilians, and Families or will this be coordinated with military leadership?*

- **Staffing for FAC** – Consider these important questions: *How will ACS/Family Programs handle surges with appropriately qualified trained staff and volunteers? How will ACS maintain an ACS staff presence when FAC is a 24 hour operation or ACS needs to be open extended hours by request of garrison commander?*
- **Procedures for assisting Families** – A copy of both the FAC Client Case Record [DA Form 5897] and FAC Client Intake and Referral Sheet can be found in the forms section of Part V of this guide for this purpose. When other agencies are present at the FAC, what will be the intake, case management and follow-up process for individuals seeking assistance from the FAC? How will the FAC handle the intake process if there are large numbers seeking assistance during a disaster?

**TIP:** *When Families are at the FAC, it is important to:*

- *Greet and gather information about the Family*
- *Escort Family to designated area/Assign an escort or designated staff member for a group so Families have personal contact at the FAC*
- *Be certain that individuals get contact information at “check out.”*
- **Procedures for restricting media access to Families** – Discussions on this matter should be held with military and local police, installation leadership, PAO, and other appropriate agencies prior to prior to deployments, disasters, and emergencies. This discussion may be part of a larger discussion on the security services for the FAC.

**TIP:** *Controlling access to the FAC will be necessary to give Families privacy and to protect them from the media. Several measures may need to be taken including:*

- *Having checkpoints at entrance of FAC or in parking area*
- *Implementing a badge system*
- *Having plain clothes police patrol inside the center.*

*Also it is important that no information be released to the media until discussed with Families first. Further, a designated public affairs officer should serve as the primary spokesperson and provide information to the media. It may be necessary for agencies to coordinate information through the designated spokesperson and to establish a media communications area at a separate location from the FAC. This may be particularly necessary if the media persists in trying to interview agencies, Families, rescue workers, and others.*

- **Procedures for handling donations** – A deployment, disaster, or emergency that has a significant impact on the community or is highly publicized by the media can result in donations of food, clothing, money, and letters/cards of support. [For information on this matter, see task “Identify donations needed and notify community; Accept donations” in sections 1.4 and 2.3 of this guide].

**TIP:** Donation reception and distribution will be managed IAW Non-Appropriated Fund guidelines. The “Gifts to Army” web site [<http://giftstoarmy.army.mil>.] and the AOS web site [[www.myarmyonesource.com](http://www.myarmyonesource.com)] provide details about gifts and donation methods from corporations, organizations, citizens, etc.

- **Procedures for handling unaffiliated volunteers** – When a crisis occurs, a variety of individuals [Family members, citizens, clergy, etc.] may come offering to assist. It is important to have a plan on how to handle unaffiliated volunteers as well as to screen individuals so they can have a positive effect and do not hinder response and recovery efforts in deployments, disasters, and emergencies. Procedures on accepting volunteers are defined in AR 608-1. For guidance on planning and preparations needed to manage volunteers who show up offering to assist, see publication entitled Managing Spontaneous Volunteers available from National Voluntary Organizations Active in Disasters [NVOAD – [www.nvoad.org](http://www.nvoad.org)]. Consider contacting Citizen Corps web site [[www.citizencorps.gov](http://www.citizencorps.gov)] to identify the local citizen corps council which offer assistance in training citizens to assist in emergency situations. [Note: Citizen Corps is a component of the USA Freedom Corps and is coordinated by the Department of Homeland Security]. In addition, Red Cross is another agency that can offer assistance in this area.
- **Procedures for establishing and deploying qualified mental health professionals** – Coordination with community mental health leaders and Red Cross is encouraged so that qualified mental health professionals in the local community can be identified prior to any deployment, disaster, or emergency. Part of this effort needs to involve checking education, training, skills, and credentials of individuals to develop a list of mental health professionals appropriately trained for large-scale disasters.

**TIP:** When a significant crisis occurs, crisis counseling services may be offered by professional groups such as the Association of Traumatic Stress Specialists [ATSS], the International Critical Incident Stress Foundation [ICISF], the National Association of Social Workers [NASW], the American Counseling Association [ACA], and others. This is a valuable resource to the FAC, especially in a large-scale situation or when local mental health providers are overwhelmed. However, keep in mind that these professionals’ efforts will need to be coordinated with other mental health efforts.

- **Train agency staff and volunteers.** For the FAC team to be effective in supporting Soldiers, DoD Civilians, and Families, it is important for ACS and other agencies serving on the FAC team to receive appropriate training prior to deployments, disasters, and emergencies. This is necessary to ensure that staff and volunteers who may staff the FAC can “hit the ground running” and are appropriately trained to perform their responsibilities in deployments, disasters, and emergencies. Trainings available for this purpose include:
  - Army Operation READY Trauma training
  - Installation-sponsored disaster preparedness, mass casualty, or other relevant trainings
  - READY Army program campaigns to increase preparedness for all types of emergencies – provides information and encourages assembling kits [[www.Ready.gov](http://www.Ready.gov)]

- FEMA-sponsored emergency preparedness training [which includes online training at [www.fema.gov](http://www.fema.gov)]
- States' Emergency Management Office-sponsored training
- Red Cross-sponsored emergency preparedness training
- Local city or county government emergency preparedness training.

- **Develop local Smart Book.** Having community resource directories, on call lists, and other valuable resource information in one book is essential to being able to respond to affected individuals in a timely manner. Having a "Smart Book" available is another important way to enhance the community's capability to respond effectively in an emergency situation.
- **Make necessary arrangements or have a plan for:**
  - Getting equipment needed [Note: Directorate of Information Management (DOIM) can provide support for communications, e.g., telephones, accounts, data lines. Directorate of Public Works can provide facility support. Keep in mind that it is advisable to have generators and other equipment on hand for natural disaster and other emergency situations].
  - Securing security services for the FAC [Note: Provost Marshall and DES can provide security for FAC]
  - Offering on-site child care [Note: CYS Services can assist in coordinating childcare or setting up short-term alternative childcare sites (STACC)]
  - Providing food on site [Note: MWR Club, disaster relief organizations, faith-based organizations, and others can assist in this effort]
  - Operating a toll-free telephone number
  - Having interpreters available
  - Making FAC accessible when there are increased security measures
  - Preparing a disaster supplies kit [Note: For a list of items to have on hand in a disaster, see the Red Cross web site [www.redcross.org](http://www.redcross.org)]
  - Securing fiscal resources for operating the FAC.
- **Conduct a FACEX.** The purpose of a FACEX [or for Guard, as appropriate] is to test the effectiveness in providing Family support in an emergency situation. Conducting a FACEX has a number of other benefits in that it provides the opportunity to:
  - Develop relationships with and/or reestablish connections with different agencies
  - Discuss coordination of services with agencies
  - Discuss structure and organization of the FAC and communication systems
  - Discuss intake procedures [especially for mass care] and forms

- Test the SOP and emergency plans
- Update local Smart Book
- Update FAC roster.

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#### **KEY POINT**

*It is vitally important to be prepared for a wide variety of natural and man-made disaster and emergency situations. Therefore, use new case scenarios for FACEX. Scenarios to consider are: terrorist attacks [e.g., biochemical], pandemic and natural disaster. [For ideas, see the national planning scenarios in the National Preparedness Guidelines released by the Department of Homeland Security]. In addition, it is important to hold a FACEX in alternative locations where a FAC might be stood up. Coordination of FACEX is to be done through the Director of Plans, Training, Mobilization, and Security [DPTMS]. It is recommended that a FACEX be conducted at least once a year unless the installation is involved in a deployment operation and the FAC has been activated for deployment.*

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- **Educate community.** According to the National Preparedness Guidelines, community preparedness is an important capability for communities to be able to respond effectively to disaster and emergency situations. An important component of community preparedness is getting Soldiers, DoD Civilians, and Families prepared for various emergency situations.
  - FEMA, READY Army campaign, Red Cross, state emergency management offices, and other agencies have guides and other educational materials on disaster and emergency preparedness for Families.
  - For military Families, it is also essential to inform them prior to any emergency event about where they can receive support in a crisis situation. Thus, there is a need to increase their awareness about what a FAC is and what it offers. A FAC handout written for Soldiers, DoD Civilians, and Families can be found in the accompanying Operation READY Smart Book and is intended to be used for educational purposes, as part of an overall community readiness effort. Soldiers and Families can also become aware about a FAC through contacts with unit leadership. For this reason, a separate FAC handout for military leadership is also available in the Operation READY Smart Book.

#### **See the following web sites for some of the guides available:**

Army OneSource – [www.myarmyonesource.com](http://www.myarmyonesource.com)

READY Army – [www.ready.gov](http://www.ready.gov)

Red Cross – [www.redcross.org](http://www.redcross.org)

FEMA – [www.fema.gov](http://www.fema.gov)

## 1.3 Setting Up a FAC

The **checklist** in this section identifies the tasks that need to be performed to set up a FAC once an alert activation is issued.

### KEY POINT

*In the event of an actual disaster or emergency, FAC set up and services need to be tailored to the situation and needs of all involved. Please be aware that this guide provides general guidelines.*

- **Receive notification to activate FAC.** The **garrison commander** activates the FAC. How ACS is then notified depends upon local chain of command and emergency protocols. For example, the garrison commander alerts FMWRC ACS Director or the Deployment and Mobilization staff. In the **National Guard**, the governor or the state's Adjutant General makes the decision of whether to activate a FAC for the state. Command notifies State Family Program Coordinator about when the FAC is to be open, the location and hours of operation. These enduring FACs are state Family resources and can be accessed using the geographic locator on the AOS web site [[www.myarmyonesource.com](http://www.myarmyonesource.com)].

### KEY POINT

*The ACS Director and Deployment Readiness Program Manager can make the following recommendations to the garrison commander [and EOC or senior mission commander]:*

- Whether a FAC should be stood up
- Number of hours/proposed working hours for the FAC
- Agencies represented at the FAC.

*However, the final decision lies with the garrison commander [and, if activated, the EOC and senior mission commander]. Also be aware of the contents of the local FAC SOP and command expectations when setting up the FAC. Some installations' SOPs stipulate the number of hours following the activation alert the FAC is to be fully operational.*

- **Coordinate with unit commanders/rear detachment commanders.** It is important for the FAC Director [and in the Guard, State FAC Coordinator] to have contact with unit commanders. These contacts are key to determining the number of Soldiers and Families needing assistance, identifying specific Families, and discussing Soldiers', DoD Civilians' and Families' needs. Once the FAC is set up, it is recommended that the FAC Director notify both the unit commanders and FRGs so that units can notify Families.
- **Assess services needed and ensure essential baseline services are provided.** Due to the short amount of time available to set up the FAC, it is not likely that there will be time to make any formal assessments of needs. Thus, initial efforts will likely focus on implementation of the baseline services and what is stipulated in the FAC SOP. Having knowledge of the types of services needed in different situations and personal observations of the impact of the situation will be helpful in determining how to focus service delivery efforts. Initial assessments and information from the installation commander and unit commander will also indicate services needed.

**KEY POINT**

*It is important to provide services geared to the type of situation that has occurred. [For further information, see Part II.] Providing incident specific support services is critical to responding effectively and is promoted in National Preparedness Guidelines. It is also critical to tailor services to the population groups affected and their needs. Keep in mind that children are also impacted by events. Do not forget to provide support and services for children.*

- ☐ **Notify agencies who will participate in FAC.** The ACS Director [or ACS Deployment Readiness Program Manager, if delegated this responsibility] is responsible for initiating contact with FAC members once garrison commander has given approval. In the National Guard, the State Family Program Coordinator or designated Family Program staff take on this responsibility.

**KEY POINT**

*Be aware of whether the installation SOP has a specified time period in which agencies are to be informed.*

- ☐ **Establish FAC staffing needs.** The FAC Director will need to:
  - Determine staff schedules and staffing needed to fulfill ACS's/Family Program's presence at the FAC and notify staff
  - Obtain a roster from supporting agencies of staff representatives assigned to the FAC
  - Assign staff and consider having support agency staff assist in manning the FAC's toll-free telephone number.
- ☐ **Activate toll-free telephone number and web site or email system and provide contact information to Family members.** It is essential that the toll-free number be activated quickly in deployments, disasters, and emergencies because many people will be seeking information.
 

**TIP:** Consider setting up a pass code section for Families directly impacted by the event that are unable to travel or visit the FAC and need to receive official information. Also, before releasing the toll-free number and web site ensure these systems are operational.
- ☐ **Attend official briefings.** The FAC Director should attend any official briefings given by military leadership and the primary group overseeing response efforts. It will be imperative that the FAC Director get and remain informed about the situation and response and recovery efforts.
- ☐ **Conduct training as necessary.** The FAC Director [or designee] is responsible for conducting training with ACS/Family Program and other agency staff relevant to the situation that has occurred and the issues FAC staff may face.
- ☐ **Develop a list of key points of contact for FAC staff.** In order for all FAC staff to be able to assist Soldiers, DoD Civilians, and Families in a timely manner and be able to provide accurate information and referrals, it is essential that the FAC Director [or designee] establish a list of key POCs. This list is also helpful in facilitating communication between agencies.



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**KEY POINT**

*Each agency represented at the FAC is required to assign a POC and alternate.*

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- ❑ **Arrange on-site child care.** Having child care or a supervised area for children available can be very helpful. This can be useful for times when a parent needs to talk with an agency and does not want their child[ren] present, are awaiting news about a loved one, or needs respite care.

**TIP:** *Do not separate children from their parents in the immediate aftermath of a traumatic event as the separation can cause further anxiety.*
- ❑ **Notify appropriate designee of FAC set up.** Once the FAC is fully operational, the appropriate designee should be notified, based on the local/installation contingency plans [linked to deployments, disasters, and emergencies]. The FAC Director would notify the garrison commander and emergency operations center [or other designee]. In the Guard, the state FAC Coordinator is expected to maintain communication with the State Family Program Office.
- ❑ **Publicize FAC.** Because the FAC is intended to serve as the primary place for Soldiers, DoD Civilians, and Family members to receive information, assistance, and support in deployments, disasters, and emergencies, it is critical to get the word out as early as possible in the aftermath of an event. Use of a variety of communication methods will be essential. Strategies to consider are:

  - Request PAO notify media and ask media to make announcements on television. Have PAO educate the media on types of services offered at FAC.
  - Ensure the location and telephone number of the FAC are mentioned at any briefings.

**TIP:** *Ensure all telephone numbers are operational.*

  - Encourage unit commanders and FRGs to notify Families about the FAC.
  - Have supporting agencies to the FAC assist in publicizing the FAC through the contacts they have, especially with Families.
  - Use print media [e.g., installation newspaper, community newspaper, Guard newsletters] and consider sending text messages.
  - Publicize on the Internet [e.g., AOS portal, installation web site, State National Guard web site].

## 1.4 Maintaining a FAC

The checklist in this section identifies the tasks vital to maintaining and sustaining FAC operations.

- **Receive notification to shift to a 24 hour operation or change hours of operation.** Garrison commander or designee may at some point request FAC become a 24 hour operation. The timing of this request is dependent upon the phase of the deployment, disaster, or emergency and needs [and is most likely to occur in the initial response or recovery phases and is based on the needs of Soldiers, DoD Civilians, and Families.]

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### KEY POINT

*The FAC is not able to change hours of operation without command approval. The garrison commander or designee will inform the FAC Director of when to increase or reduce FAC operations as well as when to deactivate. The FAC Director then notifies supporting agencies of any operational changes.*

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- **Manage staff workload against man-power needs.** The FAC Director or designee is responsible for staffing the FAC functions performed by staff and ensuring staffing levels are adequate. Managing the staff will require the FAC Director to take one or more of the following steps:
  - Recruit volunteers for FAC and/or ACS essential to successful operations. [Note: ACS Army Volunteer Corps Coordinator (AVCC) can recruit, screen and train volunteers for the FAC. Disaster relief organizations can also assist in this effort.]
  - Hire additional staff [e.g., Civilians; temporary hires, contractors] for the FAC. [Note: What type of individuals is hired depends on Army regulations and funding source for the position. Be aware that funding support may be available from the garrison command. Thus, the FAC Director should contact the garrison commander to discuss the funding available for hiring staff for emergencies].
  - Establish shifts and designate shift leader for FAC as appropriate.

**TIP:** *When developing the shift schedule, ensure there is overlap time so oncoming staff and volunteers can be briefed on any problems encountered.*

- Prepare staffing schedules for ACS. The activation of a FAC can impact the delivery of services. The FAC Director [i.e., Family Program Director or designee] will need to determine whether certain services need to be curtailed or the level of staffing changed while the FAC is operational.

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### KEY POINT

*Each agency represented at the FAC must assign personnel to the FAC and handle their own manning. In addition, support agencies are to help staff the FAC during increased operational hours. Keep in mind that it is essential to have staff on call for after hours and to have sufficient staff for the toll-free FAC number.*

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❑ **Disseminate information to and maintain communication with Family members.**

In any deployment, disaster, or emergency providing timely, accurate and reliable information and practical advice on ways to protect and recover from events are essential. According to trauma literature, timely and practical information is necessary to help Soldiers, DoD Civilians, and Families deal with the event and regain normal functioning. It is also important to curtail rumors which can create further stress or distress for Families. To be effective it is important that the information delivery system:

- Address Families' current issues of concern
- Provide updates regularly
- Provide updated information to Families prior to media release, especially in the event of fatalities
- Be redundant by repeating information and using a variety of communication methods that include briefings and handouts.

**TIP:** Have a Q&A session at end of briefings to identify issues and to address concerns. This is an important way to be responsive and to monitor concerns. Be certain to continue using ample strategies to publicize the FAC. Encourage mental health providers located at the FAC and in the community to talk with the media to educate the community about the psychological impact of deployments, disasters, and emergencies and ways to cope and enhance recovery.

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**KEY POINT**

Keep in mind that Families' receptiveness to getting information and types of information needed are likely to change over time. For example, immediately following an event, Family members are likely not to read materials given to them. For this reason, consider providing limited information orally and highlighting key resources or things Family members need to know that are in written materials.

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❑ **Modify services delivered based on changing needs.** The services provided by the FAC will change during the phases of the deployment, disaster, or emergency [i.e., immediate aftermath/ response, post event/short-term recovery, and long-term recovery/"get back to life" phases]. To ensure services address changing needs, it is important to monitor the needs of Soldiers, DoD Civilians, and Families.

Methods for assessing needs include: regular reporting to EOC, reviews of client intake forms [DA Form 5897], and FAC Director's contact with FAC support agencies, unit commanders and FRGs. Information from these sources can be utilized to make determinations about what services to reduce, increase, add or drop and subsequently what changes in FAC team members may be needed. These changes will need to be discussed with the garrison commander.

**TIP:** Collecting client feedback from informal contacts and comment cards are additional methods for evaluating service delivery efforts.

❑ **Review and modify procedures as necessary.** Despite best designed plans, the circumstances of an event may necessitate making changes to procedures and protocols. Certain procedures may need to be modified. Specific procedures may need to be added. Personal observations, Families' feedback, communications with installation and unit leadership, and communications with supporting agencies will help reveal what modifications are needed.

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**KEY POINT**

*Flexibility and adaptability are necessary to be effective in handling deployments, disasters, and emergencies. [For example in responding to Hurricane Katrina, the requirement to show ID cards was waived because the FAC assisted both military and Civilians in the community.]*

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- ☐ **Maintain communication and coordinate with leadership and, if activated, the emergency operations center.** Since the FAC will be one of many components responding in the deployment, disaster, or emergency, it is essential that the FAC Director provide updates to the appropriate local coordinating body. The FAC Director can provide to the emergency operations center valuable information about Families' exposure to the event that can help guide response and recovery efforts. It is also important for the FAC Director to discuss needed resources with leadership. In turn, the FAC Director must get essential information relative to response and recovery efforts to share with the FAC team and staff as well as safety information/instructions to disseminate to Families.

**TIP:** *The FAC Director should encourage senior leadership to make personal visits to FAC to show leadership's concern and support to Families. This is critical in trauma events such as mass casualties and natural disasters. The FAC Director can provide information to leadership to help them be prepared to address Families' questions and emotional state at briefings.*

- ☐ **Maintain communication with supporting agencies.** It is important that the Family Assistance Officer (FAO) have face-to-face contact with agency representatives, particularly as it may not be possible to have FAC team meetings in the initial period the FAC is open. If the FAC remains operational for an extended time and once the demands for services have stabilized, conducting FAC team meetings periodically may be advisable. The purpose of these communications is to identify issues of concern, monitor Family needs, address ways to meet Family needs, collect logs on Families' use of different agencies, and discuss changes in agency's services or representation at the FAC.
- ☐ **Accept and manage donations [identify donations needed and notify community].** For details on accepting volunteer services from individuals and donations, consult AR 608-1, AR-100 and AR-101, the local staff judge advocate and ethics counselor.
- ☐ **Maintain records and submit reports as requested.** Collecting data is necessary to evaluate service delivery efforts. Additionally, statistics and information will be needed to fulfill requests for reports on the assistance provided.

The Family assistance data that will need to be reported are FAC activities, benefits and services delivered, and issues that required resolution. Data can be collected and summarized from completed FAC Client Case Records [DA Form 5897] and FAC Client Intake and Referral Sheets. The FAC Director [or designee] is encouraged to review this data frequently to determine what changes in services and/or agency representatives are needed. A summary of this data and any other data [or completed form] requested by the Emergency Operations Center [EOC] should be submitted to the EOC per EOC's reporting requirements and requests. Additionally, information about activation of FAC, number served, and other data should be provided to HQDA per Family Program management reporting requirements.

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**KEY POINT**

*Be aware that during the first 30 days, a report needs to be filed twice daily with the EOC, per AR 608-1. In the National Guard, the state FAC Coordinator provides reports to State Family Program office and National Guard Bureau per their reporting requirements and requests.*

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## 1.5 Administration

Operationally the role of all Family program staff, the FAC team, and volunteers is to maintain the continuity and stability of FACs in times of deployment, and all natural or man-made hazards such as mass casualty incidents and natural disasters. Setting up a FAC requires preparations and planning before being able to meet the urgent needs of Soldiers, DoD Civilians, and Family members. After a FAC is established and emerging issues are addressed, Soldiers, DoD Civilians, and Family members are provided timely and reliable information, a safe supportive environment, and expanded or refocused baseline services tailored to their needs. [See section 1.1 for a review of the Army OneSource baseline services].

### Staffing

FAC operations rely on a cadre of trained FAC staff/FAC Specialists and volunteers who are complemented and supported by military and civilian agency representatives. The size and makeup of a FAC is fluid and is based on the deployment, disaster, or emergency that has occurred, and the demand for services.

**ACS Staff.** The ACS Director serves as the FAC Director when the garrison activates a FAC. As FAC Director, the ACS Director serves as advisor to the commander, oversees FAC operations, serves as liaison to agencies, coordinates training, and ensures manpower levels are adequate. The ACS Director also determines the number and which ACS staff will serve at the FAC providing the essential Family programs needed.

**FAC Specialists.** In the National Guard, the FAC Director designee performs related duties. Some FAC Specialists may be located in a FAC, other National Guard FAC Specialists may be on their own. In the latter case, FAC Specialists provide information and referrals and provide other assistance as trained.

**Military and Civilian Agency Representatives.** The number of representatives from a particular agency and the specific agencies represented at the FAC will be determined by the type of deployment, disaster, or emergency that has occurred. These agencies will assist in providing baseline services to the Total Force depending on existing arrangements and will tailor services to Soldiers', DoD Civilians', and Family members' needs. These agencies will also provide other additional support as needed. [For more detailed information, see Part I, Q&A, and Part II, sections on agencies who participate].

**Volunteers.** The specific role of the volunteers will be based on what services need to be provided. Volunteers can assist staff by managing individuals [e.g., greeting individuals, managing a waiting room, handing out badges as required] and provide support functions [e.g., overseeing kitchen and food]. Additional responsibilities can be performed based on training received [See Part 1]. All volunteers should receive trauma and other relevant training.

### Resource Management

Key resources needed to operate a FAC include:

- Funding
- Equipment
- Food

- Child care
- Interpreters
- Security

Funding needed to operate a FAC can be obtained from the garrison commander, who is responsible for securing funding and resources for the FAC. The FAC Director should provide estimates of FAC needs annually to the commander so that the commander can prepare appropriate budget for emergencies. Military and civilian agencies can also contribute resources to the FAC. It is advisable to make appropriate arrangements with agencies when conducting FAC planning activities.

## Records Management

Collecting data on the activities, benefits and services delivered, and issues that required resolution is necessary to evaluate service delivery efforts. Tracking this data and information will be needed to fulfill requests for reports on the assistance provided. The FAC Director [or designee] is encouraged to review this data frequently to determine what changes in services and/or agency representatives are needed. Record keeping will be necessary to manage clients. However, maintaining records and collecting data can be useful for several purposes as briefly outlined here.

**Client management.** FAC agencies and volunteers will need to complete FAC Client Case Records [DA Form 5897], and FAC Client Intake and Referral Sheets to have a record of individuals served, the issues/needs addressed, and to be able to conduct follow-up with individuals. The FAC Director and/or state FAC Coordinator will need to distribute these forms to agency representatives, FAC specialists and volunteers who assist Soldiers, DoD Civilians and Family members at the FAC (either on a walk-in basis or by telephone). These forms need to be collected and reviewed.

**Monitoring service delivery.** The FAC Director and state FAC Coordinator (or designee) are responsible for submitting reports both to the Emergency Operations Center (EOC) and to HQDA or National Guard State Family Program office. The specific nature of the data collected, report format, and report schedule are to be determined based on discussions with Garrison Commander or Senior Mission Commander. Note that in the first 30 days, a report is to be submitted twice daily to the EOC. Reports will also be submitted to HQDA and National Guard Bureau per Family program management reporting requirements.

In addition to these formal reporting requirements, the FAC Director and/or state FAC Coordinator are encouraged to review client and agency records on the number served, needs/issues addressed and use of services. Discussions on these matters should also be conducted with FAC team members on an ongoing basis. The purpose of these data activities is to facilitate determining when changes in services and/or agency representatives are needed at the FAC.

**Conducting After Action Reports/Evaluations.** The purpose of conducting After Action Reports and evaluations is to assess what worked and what did not work, as well as what outcomes and benefits were achieved. From this assessment, lessons learned and ways to improve FAC operations in the future can be identified. This process helps staff describes what services were provided, determine program changes and needs, clarify best practices, and judge whether those services were provided efficiently.

**When evaluating FAC efforts, here are some key issues to examine:**

#### **FAC Operations**

- How well did leadership and FAC Director/State Family Assistance Coordinator communicate with each other?
- How well did agencies communicate with each other?
- What other partners/agencies were needed to provide additional services?
- How well were baseline services appropriately tailored to the situation?
- What problems were experienced in delivering services at the FAC? On the telephone? What were the reasons these problems occurred?
- How well did ACS and other agencies provide the staffing levels needed? At what times, if any, were agencies unable to meet manpower needs and what was the reason?
- How well was the FAC able to address changing and emerging needs?

#### **FAC Goals**

- Do Soldiers, DoD Civilians, and Family members feel the information and assistance provided by the FAC met their needs?
- Do Soldiers, DoD Civilians, and Family members report they received timely and accurate information?
- Do Soldiers, DoD Civilians, and Family members report they were well informed about the services available to them?
- Did Soldiers, DoD Civilians, and Family members connect with others at the FAC?
- Were Soldiers, DoD Civilians, and Family members connected with appropriate services in the community? Do Soldiers, DoD Civilians and Family members report that when they were at the FAC, they felt they were in a safe, supportive environment?
- Were Soldiers, DoD Civilians, and Family members able to deal with the situation better once they received information on normal reactions and ways to cope?



**Part II of the FAC Guide** focuses on important issues and select aspects of FAC operations in specific situations, namely, large-scale deployment, mass casualty, and natural disaster. The sections that follow highlight key information from the literature, Army policy, Army OneSource, and lessons learned.

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### **KEY POINT**

*Keep in mind that this guide provides general guidelines. In the event of deployment, disaster, or emergency, FAC set up and services need to be tailored to the situation and the needs of Soldiers, DoD Civilians, and Families. Keep in mind that two or more of these situations can occur simultaneously or overlap. For example, a mass casualty can occur during a deployment. Another example would be the return of a mobilized unit from deployment in the aftermath of a natural disaster situation. In such instances, it will be necessary to determine whether a second FAC will need to be established in a different location or whether to expand FAC operations at the present location to address a second significant event.*

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## 2.1 FAC — Deployment

This section addresses active Army, National Guard and Reserve FAC operations to support Soldiers, deployed Civilians, and Family members with large-scale or extended deployments or mobilizations for military operations.

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### **KEY POINTS TO KEEP IN MIND ABOUT LARGE-SCALE DEPLOYMENTS**

- *The deployment involves multiple units and/or brigade combat teams.*
- *The mission of the deploying force can vary to include: humanitarian assistance, peacekeeping, and war.*
- *Access to military installation may be restricted.*
- *Soldiers, deployed Civilians and Families may not have completed necessary preparations for deployment/mobilization.*
- *Combat deployments have great uncertainties and the possibility of future injury or death. These stressors and others make combat deployments different from traditional deployments.*
- *Back to back combat deployments create ongoing anxiety, fear and dread for Families with expected repeat exposure to combat deployment stressors.*
- *The stress of deployment, especially combat or lengthy deployments, can take an emotional toll on some Families. Hence, some Families, who have experienced back to back deployments, may lack emotional strength to cope with an upcoming deployment.*
- *The most stressful stage of the deployment cycle varies across Families. The times that seem to create the most stress for Families are: pre-deployment, midpoint of deployment, and reintegration.*
- *The reintegration process following a deployment [especially a combat deployment] presents challenges for Soldiers, deployed Civilians and Family members.*

*For further information about the impact of combat deployment on Soldiers, deployed Civilians and Families, see the Operation READY Army Leader's Handbook: Trauma in the Unit.*

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**KEY POINTS TO KEEP IN MIND ABOUT THE ROLE OF THE FAC IN SUPPORT OF DEPLOYED SOLDIERS, DEPLOYED CIVILIANS, AND THEIR FAMILY MEMBERS**

*The FAC is only one component of the support system for deployed/mobilized Soldiers, deployed Civilians and their Family members. Other components of the Family support system include:*

- *Unit*
    - *Family Readiness Group [FRG] – serve as liaison between unit leadership and Family members and disseminate command information to Families; conduct social activities to relieve stress; provide opportunities for Families to meet and communicate; provide information on available services; and conduct welfare calls to Families*
  - *Other ACS Services – AER, Relocation, EFMP, Financial Readiness, Unit Service Coordinators and in particular:*
    - *Deployment Readiness program manager – manage support to unit leadership; provide orientations to units and their Family members; coordinate with local and state human service agencies as well as state adjutants general; and identify Families with problems requiring special assistance and support*
    - *Army OneSource portal to Family programs [www.myarmyonesource.com]*
  - *Other military agencies [e.g., Chaplain, Social Work Service, Clinical Army Substance Abuse Program] – provide training, counseling, and other services such as deployment health assessments*
  - *Military Family Life Consultants [MFLC] – provide anonymous support and counseling*
  - *Military OneSource – has a toll-free telephone number [1-800-342-9647] where Soldiers, deployed Civilians and Families can self refer anonymously for counseling and also provides a variety of informational resources online at www.militaryonesource.com*
  - *vFRG Web site – provide the functionality of a traditional FRG in an online setting and provide secure communications for Soldiers and Family members.*
- 

**The Goal of the FAC**

The goal of the FAC is to provide information and support to Family members during deployment and in an emergency. The key objectives are to:

- Provide timely support by:
  - Being open extended hours so Soldiers, deployed Civilians and Family members can access support whenever needed
  - Being proactive and coordinating different programs and trainings to address changing Families' needs, emerging issues as well as different issues pre, during and post deployment
  - Arranging for appropriate agency representatives and MFLC to be present at the FAC to assist Soldiers and Family members
  - Disseminating information on deployment reactions and ways to cope
  - Connecting Families to skill-building classes and other services available in the community through referrals/serving as information clearinghouse to increase Families' self-sufficiency
  - Making computers, video teleconference [VTC] and other resources available to Family members
- Provide a place for Families to meet, relax, and/or find relief
- Provide support to unit FRGs.

## FAC CHECKLIST

### Setting Up the FAC

- ☐ Activate FAC.\*
- ☐ Obtain and be aware of the SOP.
- ☐ Identify where the FAC will operate.\*
- ☐ Coordinate with unit commander[s]/rear detachment commander[s].
- ☐ Assess services needed and ensure essential baseline services are provided.\*
- ☐ Notify agencies who will participate in FAC.\*
- ☐ Establish FAC staffing needs.
- ☐ Activate toll-free telephone number and web site or email system and provide contact information to Families.
- ☐ Attend official briefings.
- ☐ Conduct training as necessary.
- ☐ Develop a list of key points of contact for FAC staff.
- ☐ Arrange on-site child care.
- ☐ Coordinate with and notify garrison commander or emergency operations center [or other designee] of FAC set up.
- ☐ Publicize the FAC [e.g., work with PAO, coordinate with key players].

### Maintaining the FAC

- ☐ Receive notification to shift to a 24 hour operation or change hours of operation.\*
- ☐ Manage staff workload against man-power needs.\*
- ☐ Disseminate information to and maintain communication with Family members.\*
- ☐ Modify services delivered based on changing needs.\*
- ☐ Review and modify procedures as necessary.
- ☐ Maintain communication and coordinate with leadership and, if activated, the emergency operations center.
- ☐ Maintain communication with supporting agencies.
- ☐ Accept and manage donations [Identify donations needed and notify community].
- ☐ Maintain records and submit reports as requested.\*
- ☐ Address compassion fatigue.

\*Note: Tasks that are asterisked are discussed in the pages following this table. This discussion provides important information pertaining to these tasks in a large-scale deployment situation. For general information about any of these tasks, see Part I of this guide.

## Activate FAC

### Garrison

A FAC is typically activated for large-scale deployments. At some installations, the operational tempo has been high with frequent back-to-back deployments or lengthy deployments. At these installations, the FAC operates on an ongoing basis and maintains enduring FAC operations, and thus is no longer “activated” for each deployment. However, the hours of operation may change based on the garrison commander’s direction.

### National Guard

The National Guard established FACs throughout the U.S. many years ago. Today, in response to mobilization of Guard units, state Guard Family Program Offices review the location of their FAC[s] and FAC Specialists and establish new regional contacts as necessary. Enduring FACs are augmented with the stand-up of additional locations based on identified state needs.

## Identify where the FAC will operate

### Garrison

Active duty FACs for deployment tend to be set up on the military installation. Many installations use the ACS Center as the FAC site. This decision is based on the fact that ACS staff serve as FAC staff and that the ACS deployment readiness program and other ACS programs are designed to support Soldiers, deployed Civilians and Family members throughout the deployment cycle.

### National Guard

Guard FACs tend to be set up to serve regional areas within states. Currently, there are 249 enduring Army National Guard FACs that can be augmented. A FAC may be located at a Reserve Center, armory or may be a call center with 24 hour on call I&R service. In addition to having one or more FACs in a state, there are a varying number of FAC Specialists located throughout a state. All FAC Specialists are managed under the State’s FAC Coordinator [or Family Program Coordinator] at the state’s Guard Family Program Office. Locator information is available on the National Guard Family Program web site: [www.guardfamily.org](http://www.guardfamily.org).

### KEY POINT

*Because military Families tend to be geographically dispersed, the Army has been shifting existing Family support systems to be more integrated. As a result, and in accordance with the AOS all FACs [Active duty and Guard] are expected to provide services to deployed Civilians, Soldiers and Family members of all components [Active duty, Guard and Reserve] regardless of location.*

## Assess services needed and ensure baseline services are provided

### KEY POINT

*The Army OneSource [AOS] establishes a set of baseline services for Active Army, National Guard, Reserve, deployed Civilians, and Family members. Because Total Force members and their Families are geographically dispersed, these services are being provided through coordination with an array of military and civilian agencies. Consequently, some services appropriate to deployment are already in place. With this mind, review, modify and add services as necessary to provide the spectrum of services needed. [For additional information about AOS see section 1.1 of this guide].*

In a deployment/mobilization, AOS baseline services as well as other key identified services need to be coordinated. These may include:

- Assistance with personnel issues [completion of Family Assistance Information Sheets during Soldier Readiness Processing (SRP), ID cards]
- Legal assistance [e.g., Wills, power of attorney, medical power of attorney, living will, DD Form 93, Family Care Plan, Survivor Benefit Plan]
- Specific financial assistance
- Information related to deployment operations and referrals to resources
- Referrals to available services and counseling
- Resources/communication systems [e.g., email, VTC] for Family members to connect with deployed Soldiers and deployed Civilians
- Lounge/space for Families to meet, relax or find relief.

### KEY POINT

*Refer to the Operation READY [OPREADY] training resources and the Deployment Cycle Support Plan [e.g., Pre-deployment Financial Management Planning; Post deployment/Reintegration training] when planning for specific deployment cycle support training for all Soldiers, deployed Civilians and Family members. This includes the Battlemind Training System which teaches Soldiers and their Family members about pre-deployment challenges, reintegration issues, and mental health problems they could face after a deployment, as well as danger signs and how to get help. The Battlemind training for Family members is available at [www.battlemind.army.mil](http://www.battlemind.army.mil): [OPREADY] Spouse Battlemind Training, Helping You and Your Family Prepare for Deployment; and Helping You and Your Family Transition From Deployment.*

## Notify agencies who will participate in FAC

### Garrison

FACs are often staffed by ACS staff, however, the ACS Director [or Deployment Readiness Program Manager, if designated] may want to invite other individuals and agencies to be present at the FAC at designated times to provide needed services. Individuals/agencies to consider are:

- JAG

FAC – Deployment

- TRICARE
- Chaplain
- Military Family Life Consultants [MFLC]
- Civilian Personnel
- Behavioral Health: Social Work Service, Psychiatry, Psychology.

**KEY POINT**

*It may not be necessary to have other agencies present at all times during FAC operations. Appropriate agencies can be brought in at designated times to address issues specific to the phase of units' deployment cycle. For example, having JAG present at pre-deployment is recommended to address legal issues for deployment readiness. JAG presence during deployment would not be essential.*

**National Guard**

Support for Guard FACs and events for geographically dispersed Soldiers and their Families is available through the State Guard Family Program Office's coordination with state government department and agencies, veteran service organizations, civilian agencies, all military services within the state, community service organizations and organizations with a role in disaster response. Consequently, FAC Specialists have access to a network of agencies that enable them to provide information, assistance and referrals to Families. Key contacts for FAC Specialists, that will enable them to provide the range of services identified earlier [see subsection, "assess services needed"], should include:

- Chaplain
- Employment assistance specialist
- Child behavioral counselors
- G1 representative
- Department of Veterans Affairs
- Veterans service organizations
- ESGR
- Medical.

**Receive notification to shift to 24 hour operation or change hours of operation**

It is important to plan for surge periods, which typically are pre-deployment [i.e., mobilization], redeployment and post deployment stages of a units' deployment cycle. There may be other periods when increased hours are needed.

**Garrison**

The garrison commander decides the hours in which the FAC will operate. It can be expected that operational hours will be on a 24 hour basis. Further, the FAC may be required to remain as an enduring FAC for an extended period. [Note: Installations which are experiencing lengthy deployments in relation to OIF and OEF operations have sustained expanded hours for months.]

**TIP:** If the FAC is established at the ACS and the ACS already has a telephone number for Families to call after hours, then this need may already be met. If not, it will be necessary to establish a telephone number or hotline that is manned after ACS office hours, on weekends and holidays. In addition, decisions will need to be made about what ACS services will be provided during after hours when limited staffing will be available.

### National Guard

Each state currently provides a telephone number for geographically dispersed Soldiers and their Families to contact after hours [See [www.guardfamily.org](http://www.guardfamily.org) web site].

## Manage staff workload against man-power needs

Manning the hotline and ACS after hours will require setting up rotating shifts among ACS staff, requiring staff overtime, or hiring additional staff for this activity. Hiring additional staff may particularly be necessary if expanded hours need to be provided for numerous months or a year or longer.

**TIP:** When staffing for after duty hours, it is advisable to have at least two people present for both staff's safety and so that a second staff member is still available if one staff member becomes involved in assisting a Family in an emergency. Staff hired for after hours will need to be trained on ACS programs, particularly I&R and other services, that these staff will perform during expanded hours of ACS.

## Disseminate information to and maintain communication with Family members

Providing timely, accurate information about deployment operations, available resources, and ways to cope is essential to helping Family members cope with deployment and reintegration. While the unit and military leadership have primary responsibility for providing information about deployment operations and supporting Families, the FAC can support information dissemination efforts and assist in monitoring Family well-being. The FAC can:

- Host and/or advertise leadership briefings for Family members
- Host and/or advertise trainings/seminars for Soldiers, deployed Civilians, and Family members
- Disseminate handouts. Available deployment-related informational materials for Family members include:
  - Operation READY Deployment Cycle Readiness: Soldier's and Family Member's Handbook
  - DoD, installation, Guard, and unit deployment OPREADY reintegration material
  - Coping with stress factsheet [see Operation READY Smart Book]
  - Contact sheets for Army OneSource [AOS] and Military OneSource [MOS]
- Produce and mail newsletter [Note: Some Guard FACs currently do this. Alternatively, Guard FAC or FAC Specialists can share newsletter produced by Guard State Family Program Office].
- Publicize Web sites, especially:
  - Army OneSource [[www.myarmyonesource.com](http://www.myarmyonesource.com)]
  - Military OneSource [[www.militaryonesource.com](http://www.militaryonesource.com)]
  - My Army Benefits [[myArmybenefits.us.army.mil](http://myArmybenefits.us.army.mil)]



FAC – Deployment

- Army FRG [www.armyFRG.org]— Find and promote appropriate battalion vFRG
- National Guard Family Program [www.guardfamily.org]—for list of contacts by state
- Send letters to Family members

**KEY POINT**

It is very important to publicize these web sites so that Families [especially geographically dispersed Families] can get access to information and support whenever they need. Further, this effort aligns with the AOS.

- Make wellness calls to Family members to check on how they are coping [Note: In Active Army and National Guard, and Reserve unit FRGs and rear detachment are expected to make morale calls].

For further information on handouts and web sites related to deployments, see Resources for Families section of *Operation READY Smart Book*.

## Modify services delivered based on changing needs

Family stresses and needs can change throughout the deployment cycle. In response to the Deployment Cycle Support [DCS] Plan, training and resources are available and address changing Family needs. However, it is still important for the FAC in collaboration with unit leadership to monitor Family needs to determine what changes in services are needed.

**TIP:** *Keep in mind that the midpoint of a deployment can be stressful for some Families. Consider what services the FAC can provide to support these Families at this challenging time.*

## Maintain records and submit reports as requested

### Garrison

The Deployment Readiness Program Manager has responsibility for maintaining records of Family assistance services provided through the FAC. DA Form 5897 is to be used for this purpose.

### National Guard

FAC Specialists maintain records on contacts and report data to State's Family Program Coordinator.

## 2.2 FAC — Mass Casualty

There are a number of situations that may result in a mass casualty situation including combat deployment, training accident, natural disaster, shooting, and acts of terrorism. If this situation arises in a military-related operation, response and recovery efforts primarily involve military protocols and agencies. [For further information on unit level Family assistance, see *Operation READY Army Leader's Handbook: Trauma in the Unit*.] In a local or national catastrophic event, federal, state and civilian agencies will become involved.

This section focuses on installation level [or community level] response efforts and in particular, the role of the FAC in any type of mass casualty situation. Below is a list of issues which impact as well as drive FAC operations in a mass casualty situation. The following is general guidance on the ways to expand Family assistance and how to address certain FAC tasks that may become challenging. Keep in mind that each mass casualty situation creates unique needs and challenges. Thus, response efforts will need to be tailored to the situation.

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### KEY POINTS TO KEEP IN MIND ABOUT MASS CASUALTY

- *Mass casualty situations occur with little or no warning.*
  - *Mass casualty situation can occur in theater of operations or in local area. In the former situation, the injured and deceased are service members. In the latter situation, the injured and deceased may be military and/or Civilians and individuals of all ages.*
  - *A mass casualty situation will affect the entire community. All individuals may experience grief, shock and/or other reactions. Reactions will vary across individuals depending upon type of event and individuals' proximity to event, relationship to injured and killed, and coping style and resources. [For more information about trauma reactions, see section 3.1 of this guide and Part V of Operation READY Army Leader's Handbook: Trauma in the Unit].*
  - *Most individuals are resilient. However, individuals' needs will change with each phase of the event [impact, rescue/response, short-term recovery, long-term recovery/return to life].*
  - *Access to the installation may be restricted due to heightened security concerns and/or to protect casualty Families.*
  - *Mass hysteria can occur following mass casualty situation.*
  - *In a mass casualty situation resulting from a natural disaster or terrorist act, telephone communications and/or basic services may be disrupted [e.g., loss of power/electricity, damage to businesses and facilities, inability to access ATMs, gas stations, grocery stores, etc.]. As a result, there will be needs for basic necessities [i.e., heating/air conditioning, access to and use of computers and cell phones, water, food, clothing, gasoline, money, etc.].*
  - *In a natural disaster or terrorist act, loss and/or damages occur at both individual and community levels.*
  - *The event may draw media attention and, if so, an influx of media can be expected. Further, affected Families and the community will likely increase their media viewing [or Internet use]. While media may serve as source for information, it can result in repeated exposure to traumatic event and distress.*
  - *An outpouring of community and/or national support may occur resulting in offers of help and donations. Individuals may come to the area wanting to assist in response and recovery efforts.*
  - *Extended Family members will come to support affected Families.*
-

**KEY POINTS TO KEEP IN MIND ABOUT THE ROLE OF THE FAC IN SUPPORT OF CASUALTY OPERATIONS**

*The Department of the Army has established casualty operations and assistance procedures and protocols. The FAC is only one component of the military Family support system for Families. Other components of the military Family support system include:*

- CAC – casualty notification
- Unit:
  - Unit Commander/Rear Detachment Commander – coordinate memorial services [for deceased military] and support for Family; maintain contact with Family to identify unmet needs and monitor Family well-being; inform FRG and unit Families how to support Families of the injured and deceased
  - Casualty Assistance Officer – provide assistance and counsel on survivor benefits, entitlements, emergency financial assistance, and other personnel-related issues [for primary next of kin of deceased Soldiers and DoD Civilians only]
  - Care Team – for emotional support and practical assistance [e.g., meals, child care and home care assistance] on a short-term basis, if Family accepts
- Chaplain – for pastoral counseling
- PAO – handles media; provides guidance on what information can be released to Families
- VA – provide assistance and information on benefits.

*In certain types of mass casualty situations, the federal, state and local governments have defined roles. In these situations, the military Family support system will work in conjunction with federal, state and local governments and disaster organizations (local hospital updates, etc.). This coordination may be determined at the time of the incident or may already be addressed in local emergency plans.*

**The Goal of the FAC**

The overall goal of the FAC is to provide information, comfort and assistance that meet Families' needs, help facilitate coping and healing, and offer a safe, supportive environment. Thus, the objectives of the FAC are to:

- Provide timely, accurate information about the event, loved one, response and recovery efforts, and resources available
- Be supportive by:
  - assessing and monitoring needs and informing leadership and other designated parties
  - coordinating and providing services at the FAC [and, as appropriate, connecting Families to services available in the community]
  - providing information on mass casualty/trauma reactions and ways to cope; arranging for qualified mental health professionals and Chaplains to be present to offer counseling to Families
  - offering comfort
  - providing a space for Families to grieve in private
- Provide an opportunity for Families to connect and communicate with other Families
- Coordinate support service personnel at FAC, if needed.

## FAC CHECKLIST

### Setting Up the FAC

- ☐ Activate FAC.\*
- ☐ Obtain and be aware of the SOP.
- ☐ Identify where the FAC will operate.\*
- ☐ Coordinate with unit commander[s]/rear detachment commander[s].
- ☐ Assess services needed and ensure essential baseline services are provided.\*
- ☐ Notify agencies who will participate in FAC.\*
- ☐ Establish FAC staffing needs.
- ☐ Activate toll-free telephone number and web site or email system and provide contact information to Families.
- ☐ Attend official briefings.
- ☐ Conduct training as necessary.\*
- ☐ Develop a list of key points of contact for FAC staff.
- ☐ Arrange on-site child care.
- ☐ Coordinate with and notify garrison commander or emergency operations center [or other designee] of FAC set up.
- ☐ Publicize the FAC [e.g., work with PAO, coordinate with key players].

### Maintaining the FAC

- ☐ Receive notification to shift to a 24 hour operation or change hours of operation.
- ☐ Manage staff workload against man-power needs.
- ☐ Disseminate information to and maintain communication with Family members.\*
- ☐ Modify services delivered based on changing needs.
- ☐ Review and modify procedures as necessary.\*
- ☐ Maintain communication and coordinate with leadership and, if activated, the emergency operations center.
- ☐ Maintain communication with supporting agencies.\*
- ☐ Accept and manage donations [Identify donations needed and notify community].
- ☐ Maintain records and submit reports as requested.
- ☐ Address compassion fatigue.

\*Note: Tasks that are asterisked are discussed in the pages following this table. This discussion provides important information pertaining to these tasks in a mass casualty situation. For general information about any of these tasks, see Part I of this guide.

## Activate FAC

When a mass casualty event occurs, efforts will be made to immediately activate FAC operations. A central point for informing and supporting affected Family members is activated quickly. Keep in mind that the FAC may be activated before casualty notification is made. In such situations, such as a natural disaster, shooting and terrorist situations, Families may be requested while at the FAC to provide information to assist in the identification of the injured, killed and missing.

## Identify where the FAC will operate

Depending upon where the mass casualty event occurs, it may be necessary to set up one or more FACs in alternate locations. When selecting a location, review the list of considerations outlined for this task in Section 1.2 of Part I of this guide.

### KEY POINT

*Be aware that in some situations, multiple FACs may need to be set up or the venue of the FAC may need to change to accommodate the number needing assistance. For example, after 9/11, the FAC site changed three times in New York City before a suitable site was found to handle the large numbers needing support.*

## Assess services needed and ensure essential baseline services are provided

### KEY POINT

*The Army OneSource [AOS] establishes a set of baseline services for Active Army, National Guard, Reserve, DoD Civilians, and Family members. Because Total Force members and their Families are geographically dispersed, these services are being provided through coordination with an array of military and civilian agencies. Consequently, some services appropriate to mass casualty are already in place. With this mind, review, modify and add services as necessary to provide the spectrum of services needed. [For additional information about AOS, see section 1.1 of this guide].*

In a mass casualty situation, the AOS baseline services [which includes mental health support as well as other services] as well as a wide range of other services may need to be coordinated and/or provided through the FAC to include:

- Information about loved one [injured, deceased and missing], notification procedure, identification methods, return of personal effects, condition of the body, etc.
- Immediate pastoral counseling and spiritual care
- Assistance in forensic and investigative aspect of disaster [i.e., mortuary affairs and collection of DNA samples]
- Medical assistance
- Casualty assistance

- Assistance in filing with social security and other benefits information
- Travel assistance; transportation for Families
- Food for Families, staff and volunteers
- Housing assistance
- Interpreter services
- Respite for first responders.

**TIP:** *Keep in mind that Families of survivors and deceased will have different emotions and thus separate visits should be arranged for these groups. It is also important to prepare Families for visits to the site.*

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**KEY POINT**

*It is important to identify first the different groups that need support. For example, following the terrorist attack on the world trade center, there were three groups in NYC needing support services: 1] those looking for missing loved ones, 2] those who had confirmed dead Family members, and 3] those displaced from their home or job. Once having identified the population groups, an assessment of the needs of each group should be made. In this manner, services can then be tailored to the situation and those affected by the event.*

*Keep in mind that the scope of services provided by the FAC will also be determined by how response and recovery efforts are being coordinated. The FAC may serve as the central place for coordinating services or may serve a more supportive role to other agencies' efforts.*

*Because information about the mass casualty incident may be released by the media, it is important that Families be notified of the source for official information and that official information be provided at the FAC.*

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## **Notify agencies who will participate in FAC**

The exact make-up of the FAC will vary across deployments, disasters, or emergencies and depending upon how community response efforts [including the FAC] are organized and stipulated in installation [and community] contingency plan[s]. [Note: Efforts may be coordinated by federal and local government agencies, in partnership with Red Cross, or conducted at the installation level through emergency operations center. How efforts are coordinated will likely in part be based on location of mass casualty event and numbers affected.] Further, additional agencies may be added to the FAC over time, especially if the FAC becomes centralized point for services. When a FAC is a centralized point, federal agencies and other agencies are more likely to be present within the FAC and to provide crisis intervention. Thus, there is no specific list of agencies for a mass casualty FAC. Any number or all of the following agencies may assist and/or support FAC operations:

- Chaplain
- JAG
- Behavioral Health: Social Work Service, Psychiatry, Psychology
- Military Family Life Consultant
- Social security administration

- Department of Veterans Affairs
- Federal Emergency Management Agency [FEMA]
- Airline Assistance Office
- Medical examiner's office
- Medical
- Ambulance service
- Civilian resources [mental health providers, clergy, religious institutions, volunteer organizations, funeral directors, etc.]
- Disaster relief experts [Red Cross which has a Disaster Mental Health Services branch]
- Community mental health service providers
- Other installations
- Tragedy Assistance Program for Survivors
- Salvation Army
- TRICARE
- Federal Bureau of Investigations [FBI]
- State or local police
- State's Emergency Management Office
- State and county victim assistance and compensation office
- Department of Justice Office for Victims of Crime.

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**KEY POINT**

*The success of the FAC depends on interagency collaboration. Keep in mind that in coordinating baseline services prescribed under AOS, relationships may already exist with some agencies which can be helpful to facilitating efforts and identifying and obtaining other agencies.*  
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## Conduct training as necessary

For any staff or volunteers who have not attended trauma training or other relevant training prior to being assigned duty in the FAC, it is imperative that they receive training. Further, it is advisable that all staff and volunteers be given information about ways to avoid compassion fatigue [See Part V, entitled Resources, of this guide]. Disseminate the handout on compassion fatigue.

## Disseminate information to and maintain communication with Family members

Providing information is essential in a mass casualty incident. The FAC will likely serve as the primary central point for Family members to get information and will need to:

- Host briefings for Family members

FAC – Mass Casualty

2

**TIP:** Encourage leadership or appropriate designee to provide frequent briefings to victims' Families. Briefings are critical to dispel rumors, keep individuals informed and calm, and monitor and address Families' questions and issues. Daily briefings are recommended and may be necessary.

- Operate a toll-free telephone hotline – Setting up a hotline is essential as many may be trying to locate missing loved ones and wanting information.
- Disseminate educational materials – Providing information on normal reactions and coping strategies is essential part of support provided to Families and will be a need early in the event. There are a number of organizations [such as National Center for PTSD, American Psychological Association, Substance Abuse and Mental Health Services Administration [SAMHSA], American Academy of Child and Adolescent Psychiatry, Department of Justice's Office for Victims of Crime, and others] that have materials already available or will prepare materials in a timely manner that can be shared with Families [and staff]. Check these agencies' web sites for the release of such documents.
- Publicize web sites, especially **helpful resources**:
  - Army OneSource – [www.myarmyonesource.com](http://www.myarmyonesource.com)
  - Military OneSource – [www.militaryonesource.com](http://www.militaryonesource.com)
  - My Army Benefits – [myArmybenefits.us.army.mil](http://myArmybenefits.us.army.mil)
  - READY Army – [www.ready.gov](http://www.ready.gov)

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**KEY POINT**

*It is also very important to publicize these web sites so that Families [including geographically dispersed Families and extended Family members] can get access to practical information and support whenever they need, which is critical in mass casualty incidents. Further, this effort aligns with AOS.*

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For more information on educational materials and web sites related to grief, trauma, violence, and war, see Resources for Families in Operation READY Smart Book.

## Establish or review procedures and modify as necessary

Because of the manner in which a situation unfolds and the FAC is subsequently set up, it may be necessary to review and modify procedures as detailed in the FAC SOP and/or to establish procedures. In a mass casualty situation, issues that may arise include:

- Defining command structure and reporting for FAC. It will be important to consider and provide guidance on:
  - Who will lead the FAC?
  - Who will direct different components of operations?
  - What information will be collected about service delivery and to whom will this information be provided?
- Screening of mental health staff



**KEY POINT**

*There will be offers from a variety of individuals to help victims. Because psychological first aid/mental health services is an essential service after a mass casualty event, it will be critical to identify professionals quickly. Further, it will be important to screen individuals carefully in order to identify compassionate, qualified mental health professionals who can deliver appropriate crisis intervention. Keep in mind that there will not be time to check credentials so having some idea of how the screening will be conducted is vital.*

- Handling waiting room/length of waits

**KEY POINT**

*Keep in mind that long waits in a FAC when individuals may already be experiencing intense reactions to the event can result in displays of frustration and anger.*

- Restricting media access to FAC and Families
- Safeguarding victim and Family member information.

## **Maintain communication with supporting agencies**

In a mass casualty situation, strong collaboration among the FAC team will be necessary in order to coordinate appropriate support services for Family members. Communication and clarity about FAC structure and agency roles will be key to having effective collaborative arrangements. In addition, daily meetings of FAC team are recommended and may be necessary to coordinate services effectively.

## 2.3 FAC—Natural Disaster

This section addresses FAC operations in a natural disaster situation [e.g., earthquake, tornado, flood, hurricane, tsunami, wildfire]. It is important to know these operations are directed by the governor of the state. While lessons learned from Hurricane Katrina are included within the content, keep in mind that each natural disaster situation creates unique needs and challenges. Thus, response efforts will need to be tailored to the situation.

Below is a list of issues which impact as well as drive FAC operations in a natural disaster situation. Following is general guidance on the ways to expand Family assistance and how to address certain FAC tasks that may become challenging.

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### **KEY POINTS TO KEEP IN MIND ABOUT NATURAL DISASTERS**

- *In some situations when a warning is given about a forthcoming natural disaster, an evacuation may be ordered.*
  - *Natural disasters can occur with little or no warning and with little or no time for Families to take action.*
  - *The extent of damage cannot be predicted and varies from incident to incident.*
  - *Damages occur at individual and community levels.*
  - *Telephone communications and basic services [i.e., community infrastructure] are disrupted for a period. As a result, there will be needs for basic necessities [i.e., heating/air conditioning, access to and use of computers and cell phones, water, food, clothing, gasoline, money, etc.].*
  - *Roads may be blocked or impassable or gone creating difficulties in the ability of individuals and service providers to get around.*
  - *There may be personal injuries and/or deaths. There may be missing persons or animals.*
  - *Some number of individuals and pets are displaced.*
  - *Both victims and service providers may suffer loss.*
  - *Victims' needs will change over time, and initially will be focused on basic needs.*
  - *Some level of media attention can be expected.*
  - *An outpouring of community and/or national support may occur resulting in offers of help and donations. Individuals may come to the area wanting to assist in response and recovery efforts.*
  - *Extended Family members may come to assist affected Families. Some affected Families may leave the area temporarily.*
-

**KEY POINTS TO KEEP IN MIND ABOUT THE ROLE OF THE FAC IN SUPPORT OF NATURAL DISASTER VICTIMS**

*Federal, state and local government agencies and disaster relief organizations have defined roles in natural disaster situations. In the Army, a local emergency operations center will activate to coordinate response and recovery efforts for the installation. The local emergency operations center will work in conjunction with federal, state and local governments and disaster organizations. The coordination of response and recovery efforts and locations for support efforts [including the FAC] will be determined at the time of the incident when the location and extent of damages are known. However, local emergency plans may already address the coordination of federal, state, local and military agencies in a natural disaster.*

**Goal of the FAC**

As a result, the FAC will be only one component of a larger community effort to help the victims of a natural disaster. Further, the location and scope of FAC services will likely be determined at the time of the incident. Nonetheless, in all natural disaster situations, the overall goal of the FAC is to provide information and assistance that meet Families' needs, provide comfort, help Families regain normal functioning, and minimize impact of the event. Thus, the objectives of the FAC are to:

- Be responsive by:
  - providing services in a location proximate to affected Soldiers, DoD Civilians, and their Families and other victims
  - being proactive in addressing needs and issues of concern; also assessing and monitoring victims' needs and informing leadership and other designated parties
  - giving timely, accurate information on resources available; assisting victims in connecting with other services available in the community; serving as an information clearinghouse
  - providing practical advice on how to cope; arranging for qualified mental health professionals and Chaplains to be present to offer counseling to Families
  - offering comfort
- Provide a safe place to meet and communicate with other victims and receive support.

## FAC CHECKLIST

### Setting Up the FAC

- ☐ Activate FAC.\*
- ☐ Obtain and be aware of the SOP.
- ☐ Identify where the FAC will operate.\*
- ☐ Coordinate with unit commander[s]/rear detachment commander[s] (s as appropriate).
- ☐ Assess services needed and ensure essential baseline services are provided.\*
- ☐ Notify agencies who will participate in FAC.\*
- ☐ Establish FAC staffing needs.
- ☐ Activate toll-free telephone number and web site or email system and provide contact information to Families.
- ☐ Attend official briefings.
- ☐ Conduct training as necessary.\*
- ☐ Develop a list of key points of contact for FAC staff.
- ☐ Arrange on-site child care.
- ☐ Coordinate with and notify garrison commander or emergency operations center [or other designee] of FAC set up.
- ☐ Publicize the FAC [e.g., work with PAO, coordinate with key players].\*

### Maintaining the FAC

- ☐ Receive notification to shift to a 24 hour operation or change hours of operation.
- ☐ Manage staff workload against man-power needs.\*
- ☐ Disseminate information to and maintain communication with Family members.
- ☐ Modify services delivered based on changing needs.
- ☐ Review and modify procedures as necessary.\*
- ☐ Maintain communication and coordinate with leadership and emergency operations center.
- ☐ Maintain communication with supporting agencies.
- ☐ Accept and manage donations [Identify donations needed and notify community].\*
- ☐ Maintain records and submit reports as requested.
- ☐ Address compassion fatigue.

\*Note: Tasks that are asterisked are discussed in the pages following this table. This discussion provides important information pertaining to these tasks in a natural disaster situation. For general information about any of these tasks, see Part I of this guide.

## Activate FAC

Communication systems in the initial aftermath of a natural disaster situation can be down or disrupted. This may hamper abilities of installation leadership, FAC Director, Family Program staff, and agencies being able to communicate for the purposes of setting up the FAC. For this reason, it is important for installations to determine in advance what communication/alert systems need to be in place for when such a situation occurs.

## Identify where the FAC will operate

In a natural disaster, it may be necessary to make appropriate arrangements to set up a FAC off post to support victims effectively. When setting up an off-post FAC, review the list of considerations under “Identify how the FAC will operate” in section 1.2 of this guide.

### KEY POINT

*Keep in mind that the installation may be inaccessible following a natural disaster. Thus, it is important to plan and make appropriate arrangements to enhance preparedness for when this may occur.*

## Assess services needed and ensure essential baseline services are provided

### KEY POINT

*The Army OneSource [AOS] establishes a set of baseline services for Active Army, National Guard, Reserve, DoD Civilians, and Family members. Because Total Force members and their Families are geographically dispersed, these services are being provided through coordination with an array of military and civilian agencies. Consequently, some services appropriate to natural disaster are already in place. With this mind, review, modify and add services as necessary to provide the spectrum of services needed. [For additional information about AOS, see section 1.1 of this guide].*

In a natural disaster situation, AOS baseline services as well as other key services to include are as follows:

- Shelter and assistance obtaining temporary housing or lodging
- Food and water
- Clothing
- Assistance with filing insurance claims
- Crisis counseling
- Assistance connecting victims with other Family members; Family locator services
- Transportation services
- Travel services, if individuals choose to leave geographical area
- Emergency messages

- Pet care or boarding
- Casualty assistance
- Humanitarian assistance to Civilian community
- Emergency childcare
- Ongoing information
- Ongoing emotional support.

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#### **KEY POINT**

*It is important to coordinate because the FAC should not limit the support it provides nor take on the burden of providing all services. Through coordination with other agencies and installation's EOC, as well as approval with the installation's EOC, the FAC can serve as the primary contact and source of support for Soldiers, DoD Civilians, and Family members. A determination will need to be made about what services will be provided at the FAC [to include those services provided by community representatives housed at the FAC] and what services are available in the community. In the latter case, the FAC would provide information and referrals on services available in the community. Be aware that the role of the FAC may be influenced by local [city or county] emergency plan for natural disasters in which the support role of the installation has been specified. [Note: It is important to review installation SOPs and MOUs].*

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### **Notify agencies who will participate in FAC**

In a natural disaster situation, federal [i.e., FEMA], state and local government agencies become involved. In addition, disaster relief agencies such as Red Cross also get involved. While the installation commander and EOC will work with these agencies to coordinate overall response efforts, there are implications for the FAC.

The number of people served by the FAC will depend upon the extent of the community devastation. When a large number of people [including potentially Civilians] come to the FAC, this also has implications for the FAC.

As a result, the exact make-up of the FAC will vary across natural disaster situations and depending upon how community response efforts [including the FAC] are organized and stipulated in installation [and community] contingency plan[s] for disasters or emergencies. Thus, there is no specific list of agencies for a natural disaster FAC. Any number or all of the following agencies may assist and/or support FAC operations:

- Military Police – for assisting people with access to the installation and for traffic control
- Directorate of Public Works – to ensure FAC is safe and meets safety and fire standards
- Federal Emergency Management Agency [FEMA]
- Civilian resources [mental health providers, clergy, religious institutions, volunteer organizations, etc.]
- Disaster relief experts [Red Cross which has a Disaster Mental Health Services branch]
- Red Cross – to have representatives present to help individuals file insurance claims and to train ACS volunteers so that ACS volunteers can also assist individuals with filling out claim forms
- Expanded role of Family Programs – to help individuals navigate FEMA or other web sites

## FAC – Natural Disaster

- Staff Judge Advocate (SJA) – for legal assistance
- Chaplain – for crisis counseling
- Behavioral Health: Social Work Service, Psychiatry, Psychology – for crisis counseling
- Military Family Life Consultant (MFLC) – to support FAC customers, [e.g., and in case of Hurricane Katrina, also assisted returning Reservists who lost home and contact with Family members]
- Army Emergency Relief (AER) – for financial assistance
- Faith-based organizations – for food and shelter.

**KEY POINT**

*In a natural disaster situation that affects the entire community, it is important that the FAC be prepared to serve the different population groups affected, which may include Civilians, retirees and veterans. Thus, the appropriate agencies may need to be added to the FAC team. [For example, it is recommended that the VA be added to assist veterans, if veterans are an affected group.]*

*Keep in mind that in coordinating baseline services prescribed under AOS, relationships may already exist with some agencies which can be helpful to facilitating efforts and identifying and obtaining other agencies.*

**Conduct training as necessary**

Screening staff and conducting training prior to individuals being assigned duty in the FAC are highly recommended. In the training provided to both staff and volunteers, it is important to give tips on how to avoid compassion fatigue to reduce these individuals' risk of secondary trauma. See section 3.4 for further information. A handout on Compassion Fatigue included in Part V of this guide may be distributed for this purpose.

If ACS staff and volunteers take on new responsibilities, additional training may be necessary. For example, in Hurricane Katrina, the ACS assisted individuals with filing insurance claims and received training on this task from the Red Cross. Other training may include use of client tracking systems.

**Publicize FAC**

Publicity can be challenging in a natural disaster situation, especially when there is no electricity. Telephone service [land line and cellular] can also be disrupted or blocked, if the system becomes overwhelmed by high volume of calls. Thus, it may be necessary to find other ways to get the word out, especially in the early days following a natural disaster. Some ways to publicize include:

- Radio [especially satellite radio]
- Television
- Signs and billboards
- Internet (AOS)
- Red Cross, Citizen Corps, faith-based organizations and others can help get the word out; word of mouth.

Consider using the television and Internet when feasible to reach as wide an audience as possible. This can also facilitate information being passed on by "word of mouth".

## Manage staff workload against man-power needs

A natural disaster that causes extensive damage places a heavy demand on support efforts and, in particular can create challenges in staffing the FAC. In this situation, partnerships with other installations, Citizen Corps, civilian [e.g., faith-based organizations] and private sectors can assist in identifying individuals and volunteers that can be used to supplement staffing and/or to assist in providing services [e.g., food]. However, keep in mind that FEMA, Red Cross and other agencies with disaster response responsibilities also have individuals with specialized skills, such as crisis intervention, that can be placed in the FAC.

### KEY POINT

*When a high volume of individuals are being served, seek and/or accept help from others. It will not be possible “to do it all yourself”.*

**TIP:** *In the aftermath of Hurricane Katrina, additional AER and ACS staff were obtained from other installations to assist in the FAC. To enhance preparedness for these types of requests, it is important to establish MOUs when making and reviewing disaster and emergency plans.*

## Review and modify procedures as necessary

In a natural disaster situation, it will be necessary to review and/or establish procedures that address emerging issues which may include:

- Determining how to manage crowds

**TIP:** *When a high volume of individuals are being served, it may become less important to ensure all individuals have valid ID cards. [A lesson learned from Hurricane Katrina where a large number of Civilians was assisted.]*

- Screening of mental health staff

### KEY POINT

*Psychological first aid/counseling is a key service provided by Red Cross after a natural disaster. However, if the FAC receives offers from individuals to help victims, it will be important to screen individuals carefully in order to identify compassionate, qualified mental health professionals who can deliver appropriate crisis intervention. It is important to designate an individual with appropriate qualifications [perhaps Social Work Service or other FAC team member] to conduct this screening. Keep in mind that as part of the planning process it is important to establish screening criteria to facilitate efforts in the aftermath of a disaster.*



## Accept and manage donations

In a natural disaster situation, handling donations can become a complex matter [see AR 1-100]. Monies will be received from the Department of the Army and community donations. In addition, “in kind” donations will be received [e.g., general public, organizations, agencies]. As a result, the following issues will arise and actions will be necessary:

- Need to establish an account for monies received. Consult with local SJA on any limitations on amount of money that can be collected and use of funds. Keep in mind that FEMA and Red Cross will be distributing funds to affected individuals.
- Need to set up a warehouse to store in kind donations. [Optional, but may become necessary if large volume of donations received.] Will need to determine how goods will be distributed and what to do with items once FAC deactivated.
- Donation reception and distribution are managed by IAW Non-Appropriated Fund guidelines. The “Gifts to Army” web site includes details about gifts and donation methods from corporations, organizations, citizens, etc. [Web sites: <http://giftstoarmy.army.mil> and <http://www.armymwr.com> and <http://www.myarmyonesource.com>].

The extent to which the FAC will need to address these issues will be based on size of community response. In Hurricane Katrina, for example, due to the extensive loss of property and community damages, the community response from across the nation was significant.

## Notes

### 3.1 Dealing with Emotions and Reactions of Soldiers, DoD Civilians, and Families

Having an understanding of how and why individuals react the way they do to traumatic events [which includes severe injury of Soldier] can be helpful in dealing with Soldiers, DoD Civilians, and their Families' emotions. Specific guidance on dealing with grief and trauma reactions is also provided in this section.

#### Understanding Reactions to Trauma Events

Individuals' reactions to traumatic events vary so it is not possible to predict how they will react to a trauma event. Reactions tend to be multi-faceted, meaning there are physical, emotional, cognitive, and behavioral reactions. Also, many factors can influence how any given individual reacts.

The reactions an individual exhibits are a response to the stress, fear, vulnerability and loss the Soldier and Family has experienced or is feeling. When a traumatic event occurs, a Soldier and Family experience:

- An unexpected event
- Injury or death of a loved one
- Loss
  - personal loss such as loss of husband/parent [for Family] and functional loss [for wounded Soldier]
  - symbolic loss such as loss of sense of security and loss of identity and for wounded Soldier, loss of self-image and sense of body integrity
  - ambiguous loss [i.e., the uncertainty of Family unit and relationships as in case of seriously wounded]
- A prolonged sense of crisis or lack of control feeling [ a feeling that can arise from the sense “the whole world has just turned upside down” and the life change that has just occurred]
- Additional stressors [Family now faces decisions and matters that have to be addressed, filing claims, etc.].

In addition, it is common for an individual to struggle to find meaning in the event [i.e., “why did this happen?”]. Thus, reactions initially following the trauma event may be intense, but not always. Reactions do tend to change over time as individuals move through the recovery process and transition to a new situation. During the recovery process, there will be good days and bad days for a Soldier, DoD Civilian and their Family until they are able to thrive. Keep in mind that the length of time to recover will vary across individuals.

**Normal Trauma Reactions**

- Feeling of horror
- Sense of safety threatened
- Grief/traumatic grief
- Anger/Irritability
- Resentment
- Fear
- Disbelief/Shock
- Numbing and withdrawal
- Helplessness
- Confusion
- Unexplained somatic symptoms
- Depression
- Anxiety
- Feeling jumpy; easily startled
- Sleep disturbances
- Nightmares/flashbacks
- Distrust
- Loss of confidence in self or others
- Questioning or shattering of beliefs
- Survivor guilt

**Normal Grief Symptoms**

- Shock
- Numbness
- Denial
- Overwhelming sense of loss
- Strong yearning or longing for loved one
- Sense of emptiness; sense part of you has died
- Generalized pain/heaviness in chest
- Sadness
- Depressed or hopeless about future
- Cry easily
- Loss of interest in eating
- Anger
- Guilt
- Fear
- Anxiety
- Physical symptoms [e.g., stomach upset, headaches, pain or heaviness in chest, intense fatigue]
- Feeling of restlessness
- Loneliness
- Lack of motivation
- Social withdrawal
- Loss of interest in social activities
- Dreams about deceased
- Difficulty sleeping

Note: In addition to the aforementioned trauma and grief symptoms, other reactions that may be seen with wounded warriors and their Families include: embarrassment or shame, frustration, isolation or feeling alone, and worry.

**Traumatic grief.** A sudden loss of a Soldier, DoD Civilian, child or Family member is particularly difficult when death has occurred under any of the following circumstances: 1] death occurred without warning and opportunity to say goodbye, 2] death occurred as result of violence, 3] death in which body is never recovered, 4] multiple losses [e.g., mass casualty], and 5] death occurred as result of willful misconduct of others [e.g., accidents, war and terrorism]. Traumatic deaths or sudden loss of significant attachment [which is also applicable to wounded warriors] can lead to a more complicated and longer grief process. Traumatic grief is when an individual shows extreme distress over an extended period of time that grief dominates an individual's life. It is not uncommon for these individuals to experience intense reactions including agitation, suicidal ideation, and powerful rage [e.g., anger toward those perceived to be responsible] or revenge fantasies. These individuals also commonly have frightening memories/thoughts about the traumatic event by either agonizing about what their loved one experienced during the final moments of life or recalling the horror of the traumatic event they experienced. These frightening memories/thoughts along with the intense symptoms of distress are over and above the normal symptoms of bereavement. If this is the case, these individuals need to seek professional support.

**Post traumatic stress disorder (PTSD).** Symptoms of PTSD can also occur with traumatic events and with Soldiers exposed to combat. PTSD symptoms will appear as follows:

- Re-experiencing the traumatic event by having nightmares, distressing memories, or flashbacks
- Avoidance or emotional numbing [e.g., staying away from places, activities, or things related to recollection of the trauma; loss of interest in activities]
- Feeling detached from others and inability to feel positive emotions
- Increased persistent anxiety and physiological arousal [e.g., difficulty sleeping, irritability, difficulty concentrating, tendency to be startled easily].

When all of these symptoms occur together and persist, then the individual may be experiencing PTSD and needs professional help.

## Dealing with Emotions

Each trauma event and the reactions and needs of each Soldier, DoD Civilian and Family are different. The key to providing valuable support is to take cues from the individual; to be flexible and adaptable as a Soldier/Family's situation changes, and to never lose sight of the fact that they are the primary focus. Individuals are going to have good days and bad days. So please remember not to take things personally.

**TIP:** The tips that appear on the following pages offer guidance on how to deal with individuals' grief and other trauma reactions. Keep in mind that these tips are also applicable to wounded Soldiers and Families of seriously wounded Soldiers who may also show grief along with other trauma reactions.

## TIPS ON DEALING WITH GRIEF AND TRAUMA REACTIONS

### Do's

- ★ Be compassionate. Let your genuine concern and caring be visible.
- ★ Be comfortable with anger and intense emotions. It is an appropriate response to stress.
- ★ Listen patiently and nonjudgmentally. Allow individuals to talk about and vent their feelings. Accept that it is not possible for you to make a grieving person feel better. Avoid judgments about a Soldier/DoD Civilian and Family and the tragic situation.
- ★ Let individuals know that their reactions are normal. Also help individuals to know what to expect on the road to recovery.
- ★ Allow for diversity in how individuals respond and cope. Let people grieve/react in their own way. Mention availability of or refer Soldiers/DoD Civilians and Families to clergy, counseling service, mental health agency, or support group. Connect them to others and encourage them to talk to other Soldiers/DoD Civilians and Families at the Family Assistance Center.
- ★ Offer reassurance.
- ★ Encourage self-confidence and point out individuals' strengths.
- ★ Arrange or provide practical assistance and support as appropriate. Also inform individuals where they can get information and assistance on their own [to empower them] and encourage individuals to ask for help. Be aware that it is often difficult for grieving people to reach out for help and, in certain cultures, a reluctance to seek help.
- ★ Encourage Soldiers/DoD Civilians and Families to take care of themselves [i.e., eat properly and get rest] and give information on effective ways to cope with stress. Encourage individuals to limit exposure to media coverage.
- ★ Respect Soldiers'/DoD Civilians' and Families' privacy and religious and cultural beliefs.
- ★ Be patient, especially in the recovery phase of an incident. Give Soldiers/DoD Civilians and Family members time to establish routine, to grieve, and to recover.
- ★ Be aware of warning signs when professional help needs to be sought. [For a list of warning signs, see the Operation READY Smart Book.]

**TIPS ON DEALING WITH GRIEF AND TRAUMA REACTIONS****Don'ts**

- Don't be afraid of silence. Don't be afraid of tears.
- Don't inhibit open communication. For example, don't change the subject when a griever mentions the deceased.
- Don't answer questions about the injury or death. It is common for Family members to have questions, but refer the Family to leadership.
- Don't impose your explanation on why this has happened. Don't try to answer the question, "why?"
- Don't say "I know how you feel" or "Everything will be all right."
- Don't say anything that implies a judgment about the Family's feelings: "You ought to be feeling better now" or "You'll be feeling better in a month or so" or "I know how you feel." Don't encourage the Family to "get over it."
- Don't make statements or ask questions that induce guilt or affix blame.
- Don't treat the Families or wounded warriors like invalids. Let individuals be in control and do the things that they want to do for themselves.
- Don't try to find something positive in the death. Don't make statements, such as "God knows best" or "It's God's will."
- Don't assume anything. For example: if a widow isn't crying, don't assume she's not upset or if she's screaming, don't assume she can't care for herself or her Family.

### 3.2 Maintaining Privacy and Confidentiality

Privacy is of the utmost importance to Soldiers, DoD Civilians, and Family members during times of trauma. It is expected that the FAC Director will keep personal matters disclosed to them in the strictest confidence and encourage staff and volunteers working in the FAC to do the same. A more detailed discussion with specific examples of how to protect a Soldier's, and DoD Civilians' and Family's privacy is provided in the tips box.

#### TIPS ON MAINTAINING CONFIDENTIALITY

- ★ During the course of working with a Family, you may learn many intimate details about a Family's life (discussed in a private room if possible). Keep this information to yourself.
- ★ Only give information with the permission of the Soldier/DoD Civilian and/or Family involved.
- ★ Protect the person's privacy when reporting to others. For instance if you are informing the Garrison Commander or supporting agency of something that happened with a Family, do not use names or specific details when others may be present. Move to a private area when possible.
- ★ [When confidentiality does not apply.] During any time you are assisting a Family, if there is any suggestion of any of the following issues: suicide, neglect, or assault, inform the person that you are obligated to report the situation. Depending on the severity of the situation, call 911, RDC, and the Chaplain. If there is a possibility of immediate danger to an individual, contact the police right away. If you are asked to keep this type of information, which may be illegal or dangerous [to themselves or others] in confidence, inform the person that confidentiality does not cover these areas.
- ★ Have a clear understanding of what situations the Emergency Operations Center and Garrison Commander [or in the Guard, unit commander] expects to be reported to him/her. This information should be discussed with the Garrison Commander [or unit commander] when the FAC is activated. If you are unsure about whether a specific situation falls outside the confidentiality areas or must be reported to the command, contact the SJA for advice.



### 3.3 Dealing with the Media

In the most stressful hours of responding to deployments, disasters, or emergencies, the media may request a formal interview, an informal comment or a gut reaction. Contact the PAO when approached by the media. It is advisable that the PAO handle the media. Per discussion with PAO, individuals may elect to talk to the media to provide information about FAC services and to have the media inform Families via television/radio about the FAC. Keep in mind that it is essential to protect the Families from the media while at the FAC to allow them to grieve and deal with their emotions.

#### TIPS ON DEALING WITH THE MEDIA

- ★ Know with whom you are talking. Ask for and write down the reporter's name, telephone number, and name of the media organization.
- ★ Anticipate what questions reporters may ask. Determine response to questions or prepare a written statement with the help of the PAO, and stick to the statement.
- ★ Listen carefully to the question. Think before speaking.
- ★ Know your limitations. If you do not have first-hand knowledge, do not speculate. Do not provide an explanation when you cannot answer a question.
- ★ Be brief in answer and just answer the question. Be cautious about questions that lead to only "yes" or "no" responses. Do not answer "What if..." questions.
- ★ Avoid acronyms.
- ★ Know what not to discuss or say. Know how to respond to specific types of questions.
  - Do not say "off the record."
  - Never give sensitive information that could jeopardize the safety, security and privacy of either Soldiers, DoD Civilians, or Family members.
  - Do not say anything you don't want printed, heard or seen.
- ★ Be positive. Do not argue. Be courteous and diplomatic. Be yourself.
  - Be sincere about how you feel. If it upsets you, or you are frustrated, say that.
  - Answer in the first person. Use "I" rather than "we."
- ★ Do not be intimidated by the media.
  - Do not be afraid of silence. Often the media will use this as a tool to make you feel uncomfortable or to say more than you intended.
  - You may politely refuse to cooperate with the interviewer. Stay in control and do not let anyone persuade you to do or say anything you do not want to.
  - End the interview when you are ready.
- ★ Notify PAO, if you have not already done so.

Note: For additional information about dealing with the media, attend the garrison or Reserve Component public affairs training.

## Frequently Asked Questions About Media

### **Will media be allowed to attend the funerals and/or unit memorial services?**

Families determine media attendance at funerals or Family memorials. The unit Commander determines attendance at unit memorial ceremonies. The unit Chaplain determines attendance at unit services.

### **How are Soldiers' names released to the media? Can Family members have a Soldier's name withheld from the media?**

Once required next of kin notifications have been completed, the Army Human Resources Command Public Affairs Office will release the information to the Army's Office of Chief of Public Affairs [OCPA], 703-697-7550. OCPA releases to Office of Secretary of Defense Public Affairs and the media, 24 hours after official notification is complete. Although Families may request their Soldier's name be withheld, it is a matter of public record and may be released without their permission.

### **What information is released to the public?**

Information released to the public includes: the Soldier's name, age, place of birth, unit, as much information about the incident as is available, next of kin information [name, relationship to the Soldier, and their city and state of residence], when and where the Soldier entered the Army, and the Soldier's Military Occupational Specialty [MOS] or branch. Because the Army wants to release as much information as possible as quickly as possible, names will be released immediately. However, there may be times when not all information will be immediately available. Follow-up releases may be provided when necessary.

### **How can media representatives get information?**

Media representatives can call the Department of the Army Public Affairs at 703-697-7550. No media updates are disseminated through the hotline.

### **How often will information be released to the media?**

Department of the Army Public Affairs will determine the regular release of information.

### **Are there any media sites that will be set up at the incident site or at the unit's home station?**

All information will be initially released at the Department of the Army level. If a media center is established, information will be available from Army Public Affairs, Media Relations Division, 703-697-7550. Information may also be disseminated through the unit or installation public affairs office of the unit involved. Office of the Chief of Public Affairs [OCPA] determines the level of response, in coordination with subordinate commands. Public release is made at <http://www.defenselink.mil/releases> 24 hours after HQDA receives confirmation of completed Primary Next of Kin [PNOK] notification.

### 3.4 Taking Care of Self and Others/Avoiding Compassion Fatigue

To support Soldiers, DoD Civilians, and Families effectively in deployments, disasters, and emergencies, it will be important for the FAC Director and FAC staff and volunteers to take care of themselves. This involves taking steps to deal with own reactions, handle stress, and avoid compassion fatigue.

#### Dealing With Own Reactions

Keep in mind that staff and volunteers may be grieving and/or having to deal with personal reactions to the trauma event. This is especially true if Soldiers and/or Families were friends. Allow yourself to grieve. Helping Soldiers and Families is rewarding and meaningful. However, it is important to have realistic expectations of how you [and the FAC] can assist them.

#### Handling Stress

Helping individuals in distress can take an emotional toll and be stressful. Because individuals display stress in different ways, be attentive to the signs and symptoms of stress and what one is personally experiencing.

#### Avoiding Compassion Fatigue

The FAC Director and FAC staff are at risk of developing compassion fatigue [or vicarious traumatization] and subsequently showing signs of posttraumatic stress. It occurs as a result of ongoing exposure to witnessing Families' suffering and hearing about their experiences. Exhibiting some stress symptoms is normal. However, when a constellation of symptoms listed in the table below occur, this may indicate a need for professional help. In general, when levels of stress do not diminish or normal functioning becomes impaired, then it is important to seek professional help.

#### SIGNS OF COMPASSION FATIGUE

Physical Symptoms	Cognitive Symptoms	Emotional Symptoms	Behavioral Symptoms
<ul style="list-style-type: none"> <li>• Headaches</li> <li>• Upset stomach [stomach aches, nausea, diarrhea]</li> <li>• Dizziness</li> <li>• Heart pounding</li> <li>• Flu or cold-like symptoms</li> <li>• Tremors</li> <li>• Sweating</li> <li>• Soreness in muscles, lower back pain</li> <li>• Exaggerated startle reaction; jumpiness</li> <li>• Fatigue</li> </ul>	<ul style="list-style-type: none"> <li>• Difficulty concentrating</li> <li>• Forgetful</li> <li>• Slowness of thinking and comprehension</li> <li>• Inability to make decisions</li> <li>• Limited attention span</li> <li>• Loss of objectivity</li> </ul>	<ul style="list-style-type: none"> <li>• Nervous</li> <li>• Anxiety</li> <li>• Fear</li> <li>• Worry</li> <li>• Anger</li> <li>• Mood swings</li> <li>• Flashbacks, nightmares, distressing dreams</li> <li>• Low self-esteem</li> <li>• Feeling less trusting [cynical and jaded]</li> <li>• Sadness</li> <li>• Depression</li> <li>• Grief</li> <li>• Feeling overwhelmed, hopeless</li> <li>• Feeling heroic, invulnerable, euphoric</li> <li>• Guilt or survivor guilt</li> <li>• Identification with Family/survivor</li> </ul>	<ul style="list-style-type: none"> <li>• Crying episodes</li> <li>• Irritability</li> <li>• Arguing</li> <li>• Aggression</li> <li>• Blaming or criticizing others</li> <li>• Restlessness</li> <li>• Hypervigilant about safety</li> <li>• Social withdrawal, isolation</li> <li>• Change in appetite</li> <li>• Change in sleep habits</li> <li>• Loss of energy</li> <li>• Increased use of alcohol, tobacco or drugs</li> <li>• Accident prone</li> <li>• Inability to do job</li> </ul>

## TIPS ON AVOIDING COMPASSION FATIGUE

Steps to minimize your vulnerability to compassion fatigue:

- ★ Limit the amount of time you spend assisting an individual Family or Families. Also take breaks to decompress and recharge.
- ★ Have realistic expectations of how you can help Families.
- ★ Take care of yourself. Eating properly and getting sleep is very important during times of high stress.
- ★ Use stress management techniques. Do things that help you relax.
- ★ Limit exposure to media coverage.
- ★ Talk to other FAC staff or Chaplain. Talking is helpful to vent feelings and to find other ways to deal with stressors and issues you are experiencing.
- ★ Set more limits during this stressful time. Give yourself time alone to regroup.
- ★ Attend compassion fatigue training available from garrison ACS.
- ★ Seek professional help if you experience any of the following either during or after serving on FAC:
  - overwhelming feelings of sadness, anger, despair
  - thoughts of suicide
  - difficulties getting along with others
  - trouble functioning
  - drinking or using drugs
  - difficulties sleeping.

Steps to minimize the vulnerability of FAC staff and volunteers:

- ★ Ensuring staff and volunteers know their role and are properly trained for their duties/responsibilities.
- ★ Having staff and volunteers work in shifts.
- ★ Monitoring the number of hours staff and volunteers spend assisting Families.
- ★ Making sure individuals take care of themselves.
- ★ Encouraging staff and volunteers to use stress management techniques.
- ★ Encouraging individuals to take breaks.
- ★ Monitoring well-being of FAC staff and volunteers.
- ★ Encouraging FAC staff and volunteers to talk with others or to Chaplain.
- ★ Thanking FAC staff and volunteers often.
- ★ Ensuring staff and volunteers attend Garrison ACS training on compassion fatigue.
- ★ Distributing the handout on Compassion Fatigue, which appears in Part V of this guide.
- ★ Reminding individuals to get professional help and review available resources for dealing with compassion fatigue.

### 3.5 Effective FAC Operations – A Brief Synopsis

This section discusses important factors that assist a FAC and FAC Director in their work to effectively support Soldiers, DoD Civilians, and Family members in deployments, disasters, and emergencies or in sustaining FAC operations.

#### KEYS TO FAC SUCCESS

##### Before Deployments, Disasters, or Emergencies Occur

- ★ Installations and regions take necessary steps to prepare for all types of contingencies.
- ★ Written plans, specifically a local contingency plan [linked to the deployment, disaster, or emergency] and FAC SOP, are developed.
- ★ Staff and volunteers receive disaster/emergency training.
- ★ Plans and systems are tested by conducting table top exercises and mock disasters periodically. Diverse case scenarios should be used in these exercises to examine response efforts in different types of situations.
- ★ Partnerships with relevant agencies are established before the deployment, disaster, or emergency occurs. It is important to identify who will [or can] be involved in the support network and the role of each agency. Further, MOUs and agreements should be put in place.
- ★ The organizational structure and processes of the FAC are determined in advance.
- ★ Soldiers, DoD Civilians, and Family members are knowledgeable about what the FAC is and the baseline services.
- ★ Resources, funding, and plan for additional staffing are identified in advance.

##### When Deployments, Disasters, or Emergencies Occur

- ★ The FAC is set up at an appropriate site.
- ★ Services are tailored to the deployment, disaster, or emergency situation and changing needs of the individuals being served.
- ★ Good interagency collaboration takes place. Collaboration is vital for services to be well coordinated at the FAC and appropriate referrals to services outside the FAC to be offered, thus allowing the FAC to serve as a “one stop” or centralized point for service. Good coordination is also intended to avoid duplication of efforts and minimize the chaos Families may experience.
- ★ Individuals are provided with timely, accurate information and the assistance that meets basic needs. As a result, the FAC is seen as a reliable and valuable resource.
- ★ Ongoing communication is occurring between FAC and leadership and between FAC agencies.
- ★ Leadership, agencies and FAC staff recognize the need to be flexible and to be able to adapt to respond effectively to the specific circumstances of a contingency event.
- ★ Staffing levels and hours of operation are adjusted to meet ebb and flow in demand for services.
- ★ Individuals understand their own roles and the command structure of FAC.

## KEY SKILLS REQUIRED BY FAMILY PROGRAM DIRECTOR

The success of the FAC does not rest solely on one person since collaboration is key. However, the FAC Director can facilitate efforts that will make a FAC successful and the Director's leadership will be essential to the overall management of the FAC. Thus, an effective FAC Director will require the following knowledge, skills and attitudes:

- ★ Compassion
- ★ Flexibility
- ★ Stamina
- ★ Professionalism and promotes professionalism in those assisting Soldiers, DoD Civilians, and Family members
- ★ Inclusiveness and promotes openness in serving all groups
- ★ Strong communication skills
- ★ Good organization skills
- ★ Good problem-solver and analytical skills; Decision-maker
- ★ Sense of humor
- ★ Ability to work with military, government, and civilian agencies and private sector; Ability to work collaboratively with agencies and involves agencies in the FAC
- ★ Ability to listen and willing to seek input/gather information
- ★ Ability to work in an emergency situation; Ability to remain calm and poised under pressure
- ★ Ability to stay informed and keep others informed
- ★ Ability to evaluate services and procedures and modify, as needed
- ★ Ability to secure funding and resources FAC staff and agencies need
- ★ Ability to create a teamwork environment with staff and volunteers
- ★ Knowledge of laws, policies, and regulations
- ★ Knowledge of military and community services available in deployments, disasters, and emergencies
- ★ Knowledge about mass casualty, natural disaster, and terrorism situations [e.g., risks/threats, response and recovery].

### Military and Government Publications

- AR 608-1, *Army Community Service Center*, 19 September 2007.
- NGR 600-12, *National Guard Family Program*, 8 January 1986.
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- Department of Homeland Security. [September 2007]. *National Preparedness Guidelines*. Washington, D.C.: Author. Available on the Internet at [www.fema.gov/pdf/emergency/nrf/National\\_Preparedness\\_Guidelines.pdf](http://www.fema.gov/pdf/emergency/nrf/National_Preparedness_Guidelines.pdf).
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- HQDA. *Managing Deployment* [PowerPoint™ slides] [nd]. Briefing at Army Integrated Family Support Network Conference.
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- Mancini, D. [2006 and 2007 editions]. *Operation READY Smart Book* [Operation READY product.] Alexandria, VA: U.S. Army Family and Morale, Welfare and Recreation Command.
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- Presidio of Monterey. *All Hazard Emergency Operations Plan*, 15 August 2007.
- U.S. Army Garrison – Vicenza. *Standard Operating Procedure [SOP] for the U.S. Army Garrison – Vicenza Soldier Family Assistance Center*, 30 March 2007.

### Civilian Publications

- Bowenkamp, C.D. [2000]. Coordination of mental health and community agencies in disaster response. *International Journal of Emergency Mental Health*, 2 [3], 159-165.
- Leskin, G.A., Huleatt, W.J., Herrmann, J., LaDue, L.R., & Gusman, F.D. [2006]. Rapid development of Family Assistance Centers: Lessons learned following the September 11 terrorist attacks. In E.C. Ritchie, P.J. Watson, and M.J. Friedman [Eds], *Interventions Following Mass Violence and Disasters: Strategies for Mental Health Practice* [pp. 257-277]. New York: Guilford Press.
- Mancini, J.A. & Marek, L.I. [2004]. Sustaining community-based programs for families: Conceptualization and measurement. *Family Relations*, 53 [4], 339-347.

## Web sites

Army OneSource [[www.myarmyonesource.com](http://www.myarmyonesource.com)]

National Guard and State Guard Web sites [[www.guardfamily.org](http://www.guardfamily.org)]

Army Reserve Family Program [[www.arfp.org](http://www.arfp.org)]

Military OneSource [[www.militaryonesource.com](http://www.militaryonesource.com)]

READY Army [[www.ready.gov](http://www.ready.gov)]

FEMA Web site [[www.fema.gov](http://www.fema.gov)]

Citizen Corps [[www.citizencorps.gov](http://www.citizencorps.gov)]

American Red Cross [[www.redcross.org](http://www.redcross.org)]



### Contents

The resources listed below appear in the following pages of the guide.

#### Acronyms

#### Forms

- FAC Planning Tool

- Sample Appointment Order

- FAC Client Case Record [DA Form 5897]

- FAC Client Intake and Referral Sheet

#### Handouts

- Compassion Fatigue

- [Note: Additional resources including those listed below can be found in the Operation READY Smart Book].

- Family Assistance Center [brochure]

- Leadership's Role in the FAC

## Acronyms

ACS	Army Community Service
AER	Army Emergency Relief
AIFSN	Army Integrated Family Support Network [AIFSN]
AOS	Army OneSource
AR	Army Regulation
AVCC	Army Volunteer Corps Coordinator
CAC	Casualty Assistance Center
CDR	Commander
CYS	Child, Youth and School [CYS] Services
DA	Department of the Army
DAC	Department of Army Civilians
DCS	Deployment Cycle Support
DES	Department of Emergency Services
DFAS	Defense Finance and Accounting Service
DoD	Department of Defense
DOIM	Directorate of Information Management
DEERS	Defense Enrollment Eligibility Reporting System
DES	Directorate of Emergency Services
DPTMS	Director of Plans, Training, Mobilization, and Security
DPW	Directorate of Public Works
EOC	Emergency Operations Center
ESGR	Employer Support of the Guard and Reserve
FAC	Family Assistance Center
FACEX	Family Assistance Center Exercise
FAO	Family Assistance Officer
FAT	Family Assistance Team
FAQ	Frequently Asked Questions
FEMA	Federal Emergency Management Agency
FRG	Family Readiness Group
FRSA	Family Readiness Support Assistant
HQDA	Headquarters, Department of the Army
IOC	Installation Operations Center
ISFAC	Inter-Service Family Assistance Committee

JAG	Judge Advocate General
MEDCOM	Medical Command
MFLC	Military Family Life Consultant
MOS	Military OneSource
MOU	Memorandum of Understanding
MP	Military Police
MPOC	Military Point of Contact
MTF	Medical Treatment Facility
MWR	Morale, Welfare and Recreation
NCO	Non-commissioned Officer
NVOAD	National Voluntary Organizations Active in Disasters
OIF	Operation Iraqi Freedom
OEF	Operation Enduring Freedom
OCPA	Office of Chief of Public Affairs
PAO	Public Affairs Office
PNOK	Primary Next of Kin
PTSD	Posttraumatic Stress Disorder
RDC	Rear Detachment Commander
SFAC	Soldier and Family Assistance Center
SJA	Staff Judge Advocate
SMC	Senior Mission Commander
SOP	Standing Operating Procedure/Standard Operating Procedure
SRP	Soldier Readiness Processing
SSO	Stability and Support Operations
STACC	Short-term Alternative Childcare
STARCEX	State Area Command Exercises
vFRG	Virtual Family Readiness Group
VA	Department of Veterans Affairs
VFW	Veterans of Foreign Wars
VTC	Video Teleconference
WTU	Warrior Transition Unit

## FAC Planning Tool A

To develop and/or revise local plans and FAC SOP, it will be necessary to conduct planning meetings and discussions with diverse agencies about the FAC in deployments, disasters, and emergencies. This FAC planning tool may be used to facilitate garrison and regional efforts. The planning tool consists of two parts. Part A is designed to guide discussions about which agencies will be located at the FAC and the assistance provided to Soldiers, DoD Civilians, and Families. Part B addresses other roles agencies may play in supporting FAC operations.

### PART A – ON-SITE FAC TEAM AND SERVICES

#### Directions:

- Step 1. Develop a list of the Family support services needed in different contingencies. (Part II of this guide may be used to create a list.)
- Step 2. For each service listed, determine whether the service will be provided at the FAC and/or at another community location.
- Step 3. For all services provided at the FAC, identify the agency (or agencies) that will provide the service. Also decide whether the agency will be present when the FAC is activated or brought in when needed. [It is advisable to determine in advance whether all or a subset of services will be provided when a FAC is activated.]
- Step 4. Record the results of the discussion. (The sample on the following pages shows how decisions about FAC services might be recorded.) Based on discussions, develop and/or revise plans, SOPs and MOUs. [Also update local community directories and Smart Book based on information about different agencies' services revealed in discussions.]

Agencies	See Key			Types of FAC Services That May Be Provided To Families						
	D	MC	ND	Information	Counseling	Referrals	Legal Assistance	Financial Assistance	Emergency Food & Shelter	Other Assistance
<b>MILITARY</b>										
Alcohol Substance Abuse Program (ASAP)	✓			✗ (substance abuse info)		✗				
Army Community Service (ACS)	✓[1]	✓ [1]	✓ [1]	✗ (info on available resources and Family services)		✗		✗ (financial counseling)	✗	✗ (assistance in different areas to also include exceptional children, relocation, and Family Advocacy)
Army Emergency Relief	✓		✓ [1]	✗ (info on personal finances, budgeting and consumer fraud/scam awareness)				✗ (emergency financial assistance)		
Behavioral Health: Social Work Service, Psychiatry, Psychology	✓ [1]	✓ [1]	✓ [1]		✗					
Casualty Assistance Office	✓	✓ [1]								✗ (casualty assistance)
Chaplain	✓	✓ [1]	✓ [1]	✗ (info on religious activities and programs)	✗ (individual and group crisis intervention counseling; pastoral counseling)	✗				✗ (spiritual guidance)
Child, Youth and School [CYS] Services	✓	✓	✓	✗ (info on childcare)						

\* Key: D = Deployment, MC = Mass Casualty, ND = natural disaster [Services provided will depend upon the needs created by the event.]

[1] Agency will be present when FAC set up

## FAC PLANNING TOOL: PART A—SERVICES BY SUPPORTING AGENCIES

Agencies	See Key			Types of Services That May Be Provided To Families						
	D	MC	ND	Information	Counseling	Referrals	Legal Assistance	Financial Assistance	Emergency Food & Shelter	Other Assistance
<b>MILITARY</b>										
DFAS	✓									✗ (pay issues)
Directorate of Public Works (DPW)/Housing Office	✓	✓	✓	✗ (info on housing available for Families arriving into, remaining in, and moving from the area)		✗ Local housing			✗ (emergency housing)	
Finance Office	✓ [1]	✓	✓ [1]	✗ (info on military pay, entitlements, allowances and insurance issues)				✗		✗ (pay and insurance issues)
Medical		✓	✓ [1]							✗ (medical care; first aid)
Military Family Life Consultant (MFLC)	✓	✓ [1]	✓ [1]		✗	✗				
Military Personnel Division	✓ [1]									✗ (ID cards, DEERS enrollment; identification of EFM)
Other military installations		✓	✓							
Public Affairs Office (PAO)		✓	✓	✗ (release official info)						
Staff Judge Advocate/JAG	✓ [1]	✓	✓ [1]	✗ (info on legal services available)		✗	✗ (prepare legal documents and correspondence including will, power of attorney, insurance, landlord-tenant issues)			

\* Key: D = Deployment, MC = Mass Casualty, ND = natural disaster [Services provided will depend upon the needs created by the event.]

[1] Agency will be present when FAC set up

FAC PLANNING TOOL: PART A—SERVICES BY SUPPORTING AGENCIES

Agencies	See Key			Types of Services That May Be Provided To Families						
	D	MC	ND	Information	Counseling	Referrals	Legal Assistance	Financial Assistance	Emergency Food & Shelter	Other Assistance
<b>MILITARY</b> Transportation Office	✓			✕ (info on transportation services available in area and for moving—including personal property)						✕ (provide transportation between agencies and FAC; coordinate Family member transport to and from medical facility, assist with transportation arrangements of early returning Family members)
Tricare	✓ [1]	✓ [1]		✕ (info on health insurance issues)						✕ (health insurance and medical matters)
VA	✓	✓		✕						
<b>OTHER GOVERNMENT</b> ESGR	✓ [1]									✕ (assistance with employer issues)
FEMA		✓ [1]	✓ [1]							✕ (assistance with filing claims)
<b>CIVILIAN</b> American Red Cross	✓	✓ [1]	✓ [1]		✕			✕	✕	✕ Distribute comfort kits; Help locate Family members; Provide web site for “safe and well” postings; Send emergency messages
Clergy		✓	✓ [1]		✕					
Mental health providers		✓	✓ [1]		✕					

\* Key: D = Deployment, MC = Mass Casualty, ND = natural disaster [Services provided will depend upon the needs created by the event.]

[1] Agency will be present when FAC set up

## FAC Planning Tool B

### PART B – RESOURCES FOR FAC OPERATIONS

Directions: In the course of discussions, it is also important to identify what other ways agencies can provide support to the FAC. The purpose is to make the necessary arrangements for the resources needed to support FAC operations. Part I of this guide provides a preliminary list of the resources and potential agencies (see sample table provided on the following page); however, a plan should be developed based on local and regional planning discussions.



FAC PLANNING TOOL: PART B—AGENCIES SUPPORT TO FAC

Agencies	See Key			Types of Support Provided to FAC				
	D	MC	ND	Equipment and Facility Support	On-site Security	On-site Food	On-site Childcare	Other
MILITARY								
CYS Services	✓	✓	✓				✕ (arrange STACC)	
DES		✓	✓		✕			
DOIM		✓	✓	✕ (communications support)				
DPW		✓	✓	✕ (ensure FAC meets fire/safety standards; facility support)				
MWR Club		✓	✓			✕		
PMO/MP		✓	✓		✕			
PAO	✓	✓	✓					✕ (official info that can be revealed on hot line; attend briefings to Families)
OTHER GOVERNMENT								
Citizen Corps		✓	✓					✕ (help with volunteer recruitment and publicity of FAC)
Local Police		✓	✓		✕			
CIVILIAN								
Airline Assistance Office		✓						✕ (help with transportation assistance for Family members (immediate and extended))
Disaster relief organizations		✓	✓			✕		
Mental Health America/Community mental health leaders		✓	✓					✕ (help identify qualified mental health professionals; provide information on reactions and coping strategies)
Hotel or other building		✓	✓					✕ (serve as FAC site when necessary)
Local consulate	✓	✓	✓					✕ (interpreter services)

\* Key: D = Deployment, MC = Mass Casualty, ND = Natural Disaster

## Sample Appointment Order for Family Assistance Team Members

Office  
Symbol  
Here

### MEMORANDUM FOR SEE DISTRIBUTION

#### SUBJECT: Duty Appointment

1. Effective immediately, SFC Joe Gettum 000 00 0000, is appointed as a primary/alternate member of the VI Corps Family Assistance Team [FAT], to operate at the Family Assistance Center [FAC], at the Volunteer Center as part of Army Community Service [ACS], Directorate of Community Activities [DCA].
2. Period. Minimum of one year.
3. Purpose. To provide assistance, in his area of expertise, while the FAC is operational.
4. Authority. AR 608-1, sections 4-2 through 4-5.
5. Special instructions. None.

FOR THE COMMANDER:

BULL T. DURHAM  
Commander or branch chief

#### DISTRIBUTION:

- 1 – CDR
- 1- Individual concerned
- 1 – ACS, S&FR Branch

<b>ARMY COMMUNITY SERVICE (ACS) CLIENT CASE RECORD</b> For use of this form, see AR 608-1; the proponent agency is OACSIM			1. CASE NUMBER	
<b>PRIVACY ACT STATEMENT</b>				
<b>AUTHORITY:</b> 5 USC Section 301, Departmental Regulations; 10 USC Section 3013, Secretary of the Army; Army Regulation 608-1, Army Community Service Center.				
<b>PRINCIPAL PURPOSE:</b> To provide appropriate background information needed for Army Community Service personnel to help individuals seeking assistance.				
<b>ROUTINE USES:</b> None.				
<b>DISCLOSURE:</b> Voluntary. However, failure to provide the requested information may impede Army Community Service personnel from being able to assist individuals effectively.				
<b>SECTION A - GENERAL INFORMATION</b>				
2. NAME OF CLIENT ( <i>Last, first, MI</i> )		3. DATE OF INITIAL APPOINTMENT (YYYYMMDD)		4. DATE CASE CLOSED (YYYYMMDD)
5. TOTAL NUMBER OF SESSIONS		6. TYPE OF CASE ( <i>Check one</i> ) <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> COUPLE <input type="checkbox"/> FAMILY		7. STATUS OF CLIENT ( <i>Check one</i> ) <input type="checkbox"/> ACTIVE <input type="checkbox"/> RESERVE <input type="checkbox"/> RETIRED <input type="checkbox"/> FAMILY MEMBER <input type="checkbox"/> CIVILIAN
<b>SECTION B - PERSONAL DATA</b>				
9. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		10. MARITAL STATUS ( <i>Check appropriate box</i> ) <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW/WIDOWER <input type="checkbox"/> DUAL MILITARY CAREER <input type="checkbox"/> SINGLE <input type="checkbox"/> SEPARATED <input type="checkbox"/> SINGLE PARENT W/CUSTODY <input type="checkbox"/> UNKNOWN		
11. CLIENT'S ADDRESS AND E-MAIL ADDRESS ( <i>Street, City, State, and ZIP Code</i> )		12. EMPLOYER/ASSIGNMENT		13. HOME PHONE
14. WORK PHONE AND FAX PHONE		a. Sponsor		
b. Family Member				
15. EDUCATION ( <i>Number of years, degree(s)</i> )		16. CLIENT'S AGE		17. DATE MARRIED (YYYYMMDD)
18. TIMES MARRIED		a. Sponsor		
b. Family Member				
19a. NAME OF CHILDREN		19b. CHILDREN'S AGES		19c. SCHOOL OR LOCATION
20a. OTHER HOUSEHOLD MEMBERS		20b. AGE		20c. RELATIONSHIP

SECTION C - SERVICE DATA		
21a. SPOUSE'S NAME <i>(Last, First, MI)</i>	21b. MILITARY ADDRESS	21c. RANK/GRADE
22. SOURCE OF REFERRAL <i>(Check appropriate boxes)</i> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 22%;"> <input type="checkbox"/> SELF  <input type="checkbox"/> LEGAL             </div> <div style="width: 22%;"> <input type="checkbox"/> CIVILIAN AGENCY  <input type="checkbox"/> COMMAND             </div> <div style="width: 22%;"> <input type="checkbox"/> MEDICAL <i>(Military)</i>  <input type="checkbox"/> MILITARY             </div> <div style="width: 22%;"> <input type="checkbox"/> CHAPLAIN  <input type="checkbox"/> VOLUNTEER             </div> </div>		
23. REQUEST FOR SERVICE		
24. PRESENTING PROBLEM		
25. ASSESSMENT		
26. TREATMENT PLAN		
27. SUMMARY OF SERVICE		
28. PRIMARY SERVICE <input type="checkbox"/> a. PERSONAL COUNSELING <input type="checkbox"/> b. MARRIAGE COUNSELING <input type="checkbox"/> c. FAMILY COUNSELING <input type="checkbox"/> d. FAMILY/CHILD DEVELOPMENT <input type="checkbox"/> e. EXCEPTIONAL FAMILIES <input type="checkbox"/> f. CAREER INFORMATION <input type="checkbox"/> g. FINANCIAL COUNSELING <input type="checkbox"/> h. EMPLOYMENT COUNSELING <input type="checkbox"/> i. RELOCATION COUNSELING <input type="checkbox"/> j. OTHER <input type="checkbox"/> k. SUPPLEMENTAL SERVICES <i>(Specify)</i>	29. REFERRALS TO <input type="checkbox"/> a. LEGAL <input type="checkbox"/> b. CHAPLAIN <input type="checkbox"/> c. RED CROSS <input type="checkbox"/> d. HOUSING <input type="checkbox"/> e. CHILD CARE CENTER <input type="checkbox"/> f. MEDICAL <input type="checkbox"/> g. VA <input type="checkbox"/> h. SOCIAL SECURITY <input type="checkbox"/> i. OTHER <i>(Specify)</i>	30. FAMILY ADVOCACY INFORMATION <input type="checkbox"/> a. SPOUSE ABUSE <input type="checkbox"/> b. CHILD ABUSE <input type="checkbox"/> c. CHILD NEGLECT <input type="checkbox"/> d. INCEST <input type="checkbox"/> e. RAPE <input type="checkbox"/> f. SEXUAL ASSAULT <input type="checkbox"/> g. DRUG ABUSE <input type="checkbox"/> h. ALCOHOL ABUSE <input type="checkbox"/> i. OTHER <i>(Specify)</i>
31. BOOKS/PAMPHLETS RECOMMENDED		32. CLASSES/WORKSHOPS RECOMMENDED
33. FOLLOWUP		
34a. ACS STAFF MEMBER'S SIGNATURE		34b. DATE (YYYYMMDD)
35a. SUPERVISOR'S SIGNATURE		35b. DATE (YYYYMMDD)

## FAC Client Intake Form and Referral Sheet

**Case #**

Soldier Name:

Family Member Name:

Rank / Grade:

Rank / Grade [if military]:

Telephone:

Telephone:

Address:

Address:

Unit:

Unit [if military]:

**Discourse: Problem / Action / Recommendations**

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**Follow-up Required: Who/When/Where/Why**

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## Compassion Fatigue

Family assistance team members [leadership, rear detachment commanders, ACS staff and volunteers, chaplain, and other agency staff and volunteers] are at risk of developing compassion fatigue when assisting in response and recovery efforts in deployments, disasters and emergencies. Compassion fatigue [or vicarious traumatization] is when those helping Families and victims show signs of post traumatic stress. It occurs as a result of ongoing exposure to Family's traumatic experiences and reactions. Witnessing a Family's suffering and hearing about their experiences can take a toll. Although compassion fatigue usually develops over time, it is important to deal with emotions, reactions, and stress before burnout and problems in daily functioning and relationships occur. Therefore it is important for unit leadership, agency staff and volunteers, and others assisting Families when an emergency occurs to take steps to minimize their vulnerability to compassion fatigue.

### What are the signs of compassion fatigue [or post traumatic stress]?

Exhibiting some stress symptoms is normal. However, when a constellation of symptoms listed in the table below occur, this may indicate a need for professional help. In general, when your level of stress does not diminish or normal functioning becomes impaired, then it is important to seek professional help.

Physical Symptoms	Cognitive Symptoms	Emotional Symptoms	Behavioral Symptoms
<ul style="list-style-type: none"> <li>• Headaches</li> <li>• Upset stomach [stomach aches, nausea, diarrhea]</li> <li>• Dizziness</li> <li>• Heart pounding</li> <li>• Flu or cold-like symptoms</li> <li>• Tremors</li> <li>• Sweating</li> <li>• Soreness in muscles, lower back pain</li> <li>• Exaggerated startle reaction; jumpiness</li> <li>• Fatigue</li> </ul>	<ul style="list-style-type: none"> <li>• Difficulty concentrating</li> <li>• Forgetful</li> <li>• Slowness of thinking and comprehension</li> <li>• Inability to make decisions</li> <li>• Limited attention span</li> <li>• Loss of objectivity</li> </ul>	<ul style="list-style-type: none"> <li>• Nervous</li> <li>• Anxiety</li> <li>• Fear</li> <li>• Worry</li> <li>• Anger</li> <li>• Mood swings</li> <li>• Flashbacks, nightmares, distressing dreams</li> <li>• Low self-esteem</li> <li>• Feeling less trusting [cynical and jaded]</li> <li>• Sadness</li> <li>• Depression</li> <li>• Grief</li> <li>• Feeling overwhelmed, hopeless</li> <li>• Feeling heroic, invulnerable, euphoric</li> <li>• Guilt or survivor guilt</li> <li>• Identification with family/survivor</li> </ul>	<ul style="list-style-type: none"> <li>• Crying episodes</li> <li>• Irritability</li> <li>• Arguing</li> <li>• Aggression</li> <li>• Blaming or criticizing others</li> <li>• Restlessness</li> <li>• Hypervigilant about safety</li> <li>• Social withdrawal, isolation</li> <li>• Change in appetite</li> <li>• Change in sleep habits</li> <li>• Loss of energy</li> <li>• Increased use of alcohol, tobacco or drugs</li> <li>• Accident prone</li> <li>• Inability to do job</li> </ul>

## What can you do to avoid compassion fatigue?

- ★ Limit the amount of time you spend assisting an individual Family or Families. Also take breaks to decompress and recharge.
- ★ Have realistic expectations of how you can help a Family.
- ★ Take care of yourself. Eating properly and getting sleep is very important during times of high stress.
- ★ Use stress management techniques. Do things that help you relax.
- ★ Limit exposure to media coverage.
- ★ Talk to other FAC staff or Chaplain. Talking is helpful to vent feelings and to find other ways to deal with stressors and issues you are experiencing.
- ★ Set more limits during this stressful time. Give yourself time alone to regroup.
- ★ Attend compassion fatigue training available from garrison ACS.
- ★ Seek professional help if you experience any of the following either during or after serving on FAC:
  - overwhelming feelings of sadness, anger, despair
  - thoughts of suicide
  - difficulties getting along with others
  - trouble functioning
  - drinking or using drugs
  - difficulties sleeping.

*Sources: This information is an adaptation of information from Coping with Stress article on Military OneSource web site and various stress management documents for disaster/emergency professionals posted on the Center for Mental Health Services of Substance Abuse and Mental Health Services [SAMSHA] Web site.*







*Getting prepared — Staying prepared*

**OPERATION  
READY**

Resources for Educating About Deployment and You