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REPUBLIC OF THE PHILIPPINES

NATIONAL DISASTER RISK REDUCTION AND MANAGEMENT COUNCIL

National Disaster Risk Reduction and Management Center, Camp Aguinaldo, Quezon City, Philippines

MEMORANDUM No. 107 s. 2021 SEP 22 2021

TO

ALL MEMBER AGENCIES AND OFFICES OF NDRRMC,

RDRRMCS, LDRRMCS AND BDRRMCS

SUBJECT :

NDRRMC Rapid Damage Assessment and Needs Analysis

(RDANA) Standard Operating Procedures (SOP)

Given the country's increasing exposure to disasters, RA 10121, or the Philippine Disaster Risk Reduction and Management (DRRM) Act, was enacted in 2010. This led to the paradigm shift of the government's thrust to disasters from a reactive disaster management stance to a proactive DRRM approach. As part of the paradigm shift, in 2014, the NDRRMC institutionalized the Rapid Damage Assessment and Needs Analysis (RDANA) as a disaster response tool that is used immediately during the early and critical state of a disaster. Its purpose is to determine life-threatening situations and life-saving needs of the affected population immediately after a disaster or emergency.

Recent experiences have highlighted the need to enhance the conduct of RDANA by integrating and harmonizing with other response mechanisms such as the Incident Command System (ICS) and the use of Cluster Approach. Moreover, with the advent of the Coronavirus Disease 2019 (COVID-19) pandemic, there is a need to revisit the RDANA guidelines by incorporating the considerations for observing the minimum public health standards. In this regard, the RDANA Standard Operating Procedures (SOP) is developed.

In this regard, this Memorandum is hereby issued to all member agencies and offices of the NDRRMC, RDRRMCs, LDRRMCs and BDRRMCs to adhere to the NDRRMC RDANA SOP. Other existing RDANA issuances inconsistent herewith are hereby repealed or modified accordingly by this SOP.

For information and guidance.

For the Chairperson, NDRRMC:

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UNDERSECRETARY RICARDO B JALAD

Executive Director, NDRRMC and Administrator, OCD

NDRRMC National

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NATIONAL DISASTER RISK REDUCTION AND MANAGEMENT COUNCIL RAPID DAMAGE ASSESSMENT AND NEEDS ANALYSIS (RDANA) STANDARD OPERATING PROCEDURES

1. REFERENCES

- 1.1. Section 9, Powers and Functions of OCD under Republic Act (RA) 10121: "Formulate standard operating procedures for the deployment of rapid assessment teams, information sharing among different government agencies, and coordination before and after disasters at all levels."
- 1.2. Section 3, Rule 4, Implementing Rules and Regulations (IRR) of RA 10121: "The RDRRMC Chairperson may tap the facilities and resources of other government agencies and private sectors, for the protection of life and properties in pursuit of disaster risk reduction and management."
- 1.3. Section 3G, Rule 7, IRR of RA 10121: "Formulate standard operating procedures for the deployment of rapid damage assessment and needs analysis (DANA) teams, information sharing among different government agencies, and coordination before and after disasters at all levels."
- 1.4. Section 4, Para 21, IRR of RA 10121: "Establish linkage / network with other LGUs for disaster risk reduction and emergency response purposes."
- 1.5. Outcome 15 of Thematic Area III: Disaster Response and Early Recovery, National Disaster Risk Reduction and Management Plan (NDRRMP) 2020-2030: "Accurate, Reliable and Timely Information Management"
- 1.6. National Disaster Risk Reduction and Management Council (NDRRMC) Memorandum Circular No. 25 s 2014: Guidelines in the Conduct of Rapid Damage Assessment and Needs Analysis
- 1.7. Guidance of the Civil Defense Administrator during the Disaster Managers Conference held on 28 to 29 January 2021 to "enhance the conduct of Rapid Damage Assessment and Needs Analysis (RDANA), review the forms and mechanisms for field deployment, assessment and reporting."

2. RATIONALE

Given the country's increasing exposure to disasters, RA 10121, or the Philippine Disaster Risk Reduction and Management (PDRRM Act, was enacted in 2010. This led to the paradigm shift of the government's thrust to disasters from a reactive disaster management stance to a proactive DRRM approach. As part of the paradigm shift, in 2014, the NDRRMC institutionalized the Rapid Damage Assessment and Needs Analysis (RDANA) as a disaster response tool that is used immediately during the early

and critical state of a disasters. Its purpose is to determine the life-threatening situation and life-saving needs of the affected population immediately after the disaster or emergency.

After the impact of a disaster, it is imperative that RDANA be conducted immediately. It provides general information on priority needs, as well as identifies available resources and services, for immediate emergency measures to preserve and save lives and alleviate the sufferings of the affected population. RDANA results serve as the basis for project planning and implementation of humanitarian assistance. The integrated approach of a rapid assessment addresses these needs for assistance in a joint manner and aims to satisfy RDANA in the best way possible through actions that can resolve the assessment simultaneously and not independently by sector.

Recent experiences have highlighted the need to enhance the conduct of RDANA by integrating and harmonizing with other response mechanisms such as the Incident Command System (ICS) and the use of Cluster Approach. Moreover, with the advent of Coronavirus Disease 2019 (COVID-19) pandemic, there is a need to revisit the RDANA guidelines by incorporating the considerations for observing the minimum public health standards. In this regard, the RDANA Standard Operating Procedures (SOP) has been developed.

3. OBJECTIVES

The objectives of the RDANA SOP are as follows:

- 3.1. To specify the triggers for the conduct of RDANA;
- 3.2. To determine the composition of the RDANA Team;
- 3.3. To specify areas of assessment that will be the coverage of RDANA operations;
- 3.4. To determine the procedures to be observed during RDANA mobilization;
- 3.5. To specify the reporting requirements that must be observed by the RDANA team; and
- 3.6. To set the funding chargeability for all activities associated with RDANA.

4. SCOPE AND COVERAGE

The RDANA SOP shall apply to DRRMCs at all levels, from the respective Chairpersons down to the members and partner stakeholders. Pursuant to RA 10121, said DRRMCs are mandated to implement assessment activities according to their respective levels of jurisdiction. Further, it shall apply to all types of incidents or disasters requiring immediate assessment for the determination of priority interventions.

5. **DEFINITION OF TERMS**

- 5.1. **Damage Assessment:** a process of collecting information and depicting the situation by describing the disaster's magnitude and impact to the population.
- 5.2. **Disaster:** a serious disruption of the functioning of a community or a society involving widespread human, material, economic or environmental losses and impacts, which exceeds the ability of the affected community or society to cope using its own resources.

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- 5.3. Disaster Risk Reduction and Management (DRRM): the systematic process of using administrative directives, organizations, and operational skills and capacities to implement strategies, policies and provided coping capacities in order to lessen the adverse impacts of hazards and the possibility of disaster. Prospective DRRM refers to risk reduction and management activities that address and seek to avoid the development of new or increased disaster risks, especially if risk reduction policies are not put in place.
- 5.4. **Disaster Risk Reduction and Management Council (DRRMC):** organized and authorized body of government agencies, to include civil society organizations and private sector, mandated to undertake DRRM activities from the national to local levels. The composition, powers and functions of the DRRMC are defined in RA 10121.
- 5.5. **Disaster Response:** the provision of emergency services and public assistance during or immediately after a disaster in order to save lives; reduce health impacts, ensure public safety and meet the basic subsistence needs of the people affected. Disaster response is predominantly focused on immediate and short-term needs and is sometimes called "disaster relief."
- 5.6. **Emergency Operations Center (EOC)**: a designated facility that is staffed to undertake multi-stakeholder coordination, manage information, and mobilize resources in anticipation of and/or to support incident operations.
- 5.7. **Exposure:** the degree to which the elements at risk are likely to experience hazard events of different magnitudes.
- 5.8. **Hazard:** a dangerous phenomenon, substance, human activity or condition that may cause loss of life, injury or other health impacts, property damage, loss of livelihood and services, social and economic disruption, or environmental damage.
- 5.9. Large-scale Disasters: Disasters that require emergency response at a national or higher scale. Their impacts often cross administrative boundaries including international borders. These disasters have extensive and long-term effects on sustainable development.
- 5.10. **Medium-scale Disasters:** Emergencies that are smaller than national geographic scales. These are defined by a threshold of impacts causing emergency reaction from authorities from multiple administrative regional authorities such as from multiple villages, districts, or provinces.
- 5.11. **Needs Analysis:** a process to determine the level and type of assistance required by the affected population. It also includes determining needs and priorities for assistance.
- 5.12. **Incident:** an occurrence or event, natural or human-induced, that requires an emergency response to protect life or property. Incidents can, for example, include major disasters, emergencies, terrorist attacks, terrorist threats, wildland and urban fires, floods, hazardous materials spills, nuclear accidents, aircraft accidents, earthquakes, hurricanes, tornadoes, tropical storms, war-related

- disasters, public health and medical emergencies, and other occurrences requiring an emergency response.
- 5.13. **Incident Commander (IC):** the individual responsible for all incident activities, including the development of strategies and tactics and the ordering and the release of resources. The IC has overall authority and responsibility for conducting incident operations and is responsible for the management of all incident operations and the incident site.
- 5.14. **Incident Command Post (ICP):** the field location where in the primary tactical-level, on-scene incident command functions are performed.
- 5.15. Incident Command System (ICS): a standard, on-scene, all-hazard incident management concept that can be used by all DRRMCs, member agencies and response groups. It allows users to adopt an integrated organizational structure to match the complexities and demands of single or multiple incidents without being hindered by agency or jurisdictional boundaries.
- 5.16. Incident Management Team (IMT): a team composed on the Incident Commander and appropriate Command and General Staff personnel assigned to an incident or planned event. The Command Staff consists of the Public Information Officer, Safety Officer, and Liaison Officer. The General Staff consists of the Operations Section Chief, Planning Section Chief, Logistics Section Chief, and finance/Administration Section Chief. The IMT members may be expanded as needed.
- 5.17. **Personal Protective Equipment (PPE):** protective garments or equipment worn by individuals to increase personal safety from infectious agents.
- 5.18. Quick Response Fund (QRF): a standby fund to be used for the rehabilitation and relief programs and projects, including prepositioning of goods, emergency response units, activation of Incident Command System (ICS), and other allied support items and equipment to immediately address impending impacts of extreme weather events or other natural hazards, in order that the situation and living conditions of people in communities or areas affected by natural or human-induced calamities, epidemics, crises and catastrophes, which occurred in the last quarter of the immediately preceding year and those occurring during the current year may be normalized as quickly as possible.
- 5.19. Rapid Damage Assessment and Needs Analysis (RDANA): a disaster response tool that is used immediately during the early and critical state of a disaster as soon as the conditions allow disaster survey teams to operate. Its purpose is to determine the life-threatening situation and life-saving needs of the affected population immediately after the disaster or emergency.
- 5.20. **Response Clusters:** part of the NDRRMC's strategic action for providing humanitarian assistance and disaster response services. These are organized groups of government agencies that are designated to undertake coordination functions at the strategic level and to provide resource support for tactical response.

5.21. **State of Calamity:** a condition involving mass casualty and/or major damages to property, disruption of means of livelihoods, roads and normal way of life of people in the affected areas as a result of the occurrence of natural or human-induced hazard.

6. **GENERAL GUIDELINES**

- 6.1. RDANA shall be conducted immediately after the onset of a disaster event as always categorized as medium and large-scale events.
- 6.2. Conduct of RDANA shall always follow a bottom-up approach, starting with the deployment of RDANA teams at the local government unit (LGU) level, before escalating to regional and national levels, consistent with Section 15 of RA 10121:

RDANA TEAMS	CONDITIONS	
Barangay RDANA Teams	a barangay is affected	
Municipal/City RDANA Teams	two (2) or more barangays are affected	
Provincial/Chartered City	two (2) or more municipalities/cities are	
RDANA Teams	affected	
Regional RDANA Teams	two (2) or more provinces/chartered cities are affected	
N. C. IDDANIA		
National RDANA Teams	two (2) or more regions are affected	

- 6.3. RDANA assessment shall be conducted amongst concerned RDANA Teams (National/Regional/Local), jointly as deemed necessary.
- 6.4. Organizing, capacitating and equipping respective RDANA teams shall be undertaken by the member agencies and office of the DRRMCs.
- 6.5. Maximize utilization of ICT and other technological tools such as drones and satellite imagery in lieu of physical deployment and to minimize exposure of RDANA teams to hazardous situations.
- 6.6. Preparation and submission of RDANA Report to be provided to higher authorities copy furnished LGUs concerned.
- 6.7. Should disaster data be available and accessible from credible sources despite the existence of the above triggers, there is no need for the conduct of RDANA and deployment of RDANA Teams.
- 6.8. Deployment of RDANA Teams shall be for a maximum of five (5) days per deployment exclusive of travel time.
- 6.9. The DRRMC shall build the capacities of RDANA teams through periodic orientation and re-orientation of identified trained members and new team members from agencies/offices.

7. STANDARD OPERATING PROCEDURES

7.1. Triggers for RDANA

- 7.1.1. The triggers for the conduct of RDANA shall be any of the following:
 - 7.1.1.1. Declaration of a State of Calamity¹;
 - 7.1.1.2. Official request for RDANA assistance shall emanate from the affected LGU or Region to higher DRRM council;
 - 7.1.1.3. Absence of contact in areas expected and/or suspected to be severely affected within six (6) hours using all primary and backup communication means;
 - 7.1.1.4. Devastation as assessed in Pre-Disaster Risk Assessment (PDRA) meetings and/or and as reported by more than one media reports;
 - 7.1.1.5. As recommended and directed by the OCD at the National/Regional Level² or Local Chief Executive/ LDRRMO at the Local Level.
 - 7.1.2. Individual agencies may also initiate the conduct of a rapid assessment for respective specific sectors that have been affected by a disaster. In this case, the triggers for the conduct of assessment shall be in accordance with the guidelines and mandates of the said agency.

7.2. Composition of RDANA Team Members

7.2.1. The formation of RDANA Team shall commence with the identification of leader coming from the following agencies/offices:

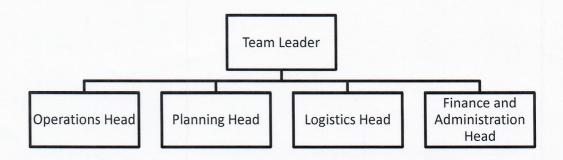
DRRMC Level	Agency/Office RDANA Team Leader			
NDRRMC	OCD Central Office			
RDRRMC	OCD Regional Office			
PDRRMC	Provincial DRRM Office			
CDRRMC	City DRRM Office			
MDRRMC	Municipal DRRM Office			
BDRRMC	Barangay DRRM Committee			

For RDRRMC Level for BARMM, RDANA Team leader will be under the discretion of the BARMM DRRM Chairperson or Executive Director of the BARMM DRRMC.

¹ In most cases, the Declaration of State of Calamity is based on the recommendation of EOC/LDRRMCs. However, RDANA can be conducted during sudden onset of disaster thereby requiring full assessment operations and augmentation of RDANA teams before the Declaration of State of Calamity.

² In the case of BARMM, recommendation will emanate from the BARMM Government or from OCD BARMM (subject for approval of BARMM DRRMC).

- 7.2.2. The assigned RDANA Team Leader shall organize the members based on the requirements of the assessment. Selection of RDANA Team Members shall consider the following:
 - 7.2.2.1. Agency/office/organization mandate
 - 7.2.2.2. Relevance of background, experience and skills to the assessment requirements
 - 7.2.2.3. Health condition (must be in excellent health condition, no comorbidity, must be tested as COVID-19 negative within 48 hours prior to deployment, fully vaccinated and must be able to work in a stressful and high-risk situation, etc.)
 - 7.2.2.4. Proximity of the RDANA Team Member to initially report to the Emergency Operations Center (EOC) or the actual assessment site
 - 7.2.2.5. With shared commitment and willingness to adapt to a dynamic working environment
- 7.2.3. The RDANA Team shall be task organized into five (5) management functions patterned with the management principles of Incident Command System (ICS). Additional members shall be added under each function based on the requirements of the assessment:
 - 7.2.3.1. Team Leader: supervises the team meetings and deployment activities, designates tasks and communicates to the EOC for updates
 - 7.2.3.2. Operations Head: manages implementation of field assessment and sectoral on-site data gathering
 - 7.2.3.3. Planning Head: spearheads documentation, data collection and analysis for review and approval of the team leader.
 - 7.2.3.4. Logistics Head: manages tools, supplies and logistics requirements of the RDANA team
 - 7.2.3.5. Finance and Administration Head: manages finance and administration requirements of the RDANA team



- 7.2.4. All member agencies identified in item 7.2.3 shall ensure readiness of its identified RDANA Team upon receipt of Memorandum for the conduct of RDANA.
- 7.2.5. The DRRMC may tap the support of civil society organizations (CSOs), private sector groups as well as local or international non-government organizations to join in the assessment as long as they are duly coordinated with, authorized and approved by the Chairperson of the DRRMC.

7.3. Areas of Assessment

7.3.1. The following shall be the recommended priority areas of assessment for RDANA:

Areas of Assessment	Recommended Agencies/Offices to be tapped for RDANA Operations
Health	Department of Health (DOH) Local Health Office (LHO) Barangay Health and Social Welfare Committee Barangay Health Emergency Response Team
Food	Department of Social Welfare and Development (DSWD) Local Social Welfare Office (LSWO) Barangay Health and Social Welfare Committee Barangay Nutrition Committee
Shelter	Department of Social Welfare and Development (DSWD) Local Social Welfare Office (LSWO)
Infrastructure	Department of Public Works and Highways (DPWH) Local Engineering Office (LEO)
Law and Order	Philippine National Police (PNP) Armed Forces of the Philippines (AFP) Public Order and Safety Office Barangay Peace and Order Committee

Search, Rescue and Retrieval	Armed Forces of the Philippines (AFP) Bureau of Fire Protection (BFP) Philippine National Police (PNP) Philippine Coast Guard (PCG) Local DRRM Office (LDRRMO) Barangay DRRM Committee
Energy	Department of Energy (DOE) Local Engineering Office (LEO) Local Electric Cooperatives
Communications	Department of Information and Communications Technology (DICT) Local Engineering Office (LEO)
Transportation	Department of Transportation (DOTr) Local General Services Office Local Traffic Management Office Public Order and Safety Office Barangay Peace and Order Committee
Education	Department of Education (DepEd)
Agriculture	Department of Agriculture (DA) Bureau of Fisheries and Aquatic Resources (BFAR) Local Agriculture Office Barangay Agriculture and Fisheries Committee
Water Supply	National Water Resource Board (NWRB) Local Water Utilities and Concessionaires Barangay Environmental and Waste Management Committee

7.3.2. Other sectors and areas of assessment may be added based on the requirements of the RDANA operations

In the case of BARMM or MMDA, if there are no counterpart agencies/ offices, Bangsamoro DRRMC/Metro Manila DRRMC shall have discretion to identify the agency/office to represent.

7.3.3. All member agencies identified in item 7.2.3 shall ensure readiness of its identified RDANA Team upon receipt of Memorandum for the conduct of RDANA.

7.4. Mobilization Procedures

Mobilization of RDANA Teams shall adhere to the following procedures:

7.4.1. Pre-Mobilization

7.4.1.1. Based on the triggers stated in item 7.1, an emergency DRRMC meeting shall be convened to discuss the current situation and response priorities. Should there be data gaps that require field

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7.4.2.5. Should the operations be considered as unsafe for assessment, the RDANA Team Leader, in coordination with the EOC Manager or IC, shall have the authority to suspend or terminate the RDANA operations.

7.4.3. **Termination:**

- 7.4.3.1. Should there be no need for conduct of rapid data gathering and assessment, the EOC Manager shall recommend for termination of RDANA operations, for approval of the DRRMC. Once approved, the RDANA Team shall be called back and report to the EOC.
- 7.4.3.2. The RDANA Team shall duly report to the local authorities about the termination of the mission and undergo necessary demobilization procedures.
- 7.4.3.3. Upon reporting to the EOC, the RDANA TEAM shall prepare a final assessment report to the DRRMC. Further, the EOC Manager shall arrange for a debriefing for the RDANA Team, highlighting what went well and processing the areas for improvement.
- 7.4.3.4. The RDANA Team shall submit an accounting and auditing of all mission-related expenditures and turnover all necessary supplies, equipment and other logistical resources in accordance with all relevant existing rules and regulations.

7.5. Reporting Procedures

- 7.5.1. The updated RDANA Form (Annex A) shall be used in data gathering and assessment process.
- 7.5.2. All accomplished RDANA Forms shall be reviewed by the Team Leader and submitted to the EOC for consolidation and analysis within 72 hours upon deployment at the assessment site. Subsequent forms shall be accomplished and submitted thereafter until the completion of the assessment.
- 7.5.3. A Final RDANA Report shall be submitted and presented to the DRRMC through the EOC upon termination of the operations (maximum of five days). The report shall highlight the summary of actions taken, damages, needs and recommended actions for prioritization of the DRRMC.

7.6. Funding

All programs, activities and its costs associated in the operationalization of RDANA, from the preparation, pre-mobilization to termination, shall be included in the LGU's regular programs under the Local DRRM Plan and shall be charged against the Local DRRM Fund.

8. INSTITUTIONAL ARRANGEMENTS

- 8.1. The Department of the Interior and Local Government (DILG), as the Vice-Chairperson for Disaster Preparedness, shall ensure the readiness and operational capacities of the LDRRMCs, as the first line of defense in disasters, to undertake and to spearhead the conduct of RDANA deployment at the ground level before escalating to higher level DRRMCs.
- 8.2. The Department of Social Welfare and Development (DSWD), as the Vice-Chairperson for Disaster Response, shall exercise leadership in the performance of response operations, including the conduct of RDANA, in accordance with the National Disaster Response Plan and other relevant issuances and guidelines.
- 8.3. The Office of Civil Defense (OCD), as the Executive Arm and Secretariat of the NDRRMC, shall work with the member agencies and other stakeholders to develop the necessary tools, templates, procedures, and process flows to operationalize the provisions of this Memorandum Circular.
- 8.4. All member agencies and offices of the DRRMC at the national, regional, and local levels shall implement the provisions stated in this Memorandum Circular and undertake parallel dissemination to respective stakeholders.

9. CONTINUOUS DEVELOPMENT AND ENHANCEMENT OF THE OVERALL RDANA PROCESS

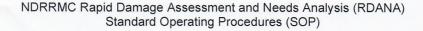
While it is understood that all other existing RDANA related issuances inconsistent herewith are hereby repealed or modified accordingly, the RDANA SOP shall be subject to continuous development and enhancement based on documented lessons learned and practices for RDANA operations. For this purpose, the OCD Operations Service through the 24/7 Operations Center (OPCEN) Division and Response and Operational Coordination Division (ROCD) will initiate the necessary desk reviews, focus group discussions, meetings, workshops and other relevant activities with concerned NDRRMC member agencies, Regional Offices and other stakeholders.

BY THE AUTHORITY OF THE CHAIRPERSON, NDRRMC

UNDERSECRETARY RICARDO B JALAD
Executive Director, NDRRMC and

Administrator, OCD

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RDANA FORM					
To be accomplished within the first 72 HOURS after a disaster.					
1. PROFILE OF THE DISASTER & RDANA MISSION	A A ADAMA MISCION				
1.1 EMERGENCY OPERATION 1.1.1 Name of Operation/Event:	1.2 RDANA MISSION 1.2.1 Region :(required)				
1.1.1 Name of Operation/Event :	1.2.2 Province :(required)				
1.1.3 Date and Time of Event	1.2.3 City/Municipality:(required)				
	1.2.4 Barangay : (required)				
	1.2.5 Sitio/Purok :				
	1.2.6 GPS Coordinate:				
1.3 LOCAL AUTHORITIES/PERSONS INTERVIEWED	1.2.7 Date and Time of RDANA: (required)				
1.3.1 Name:	1.3.2 Age: 1.3.3 Office/Organization:				
1.3.4: Designation: 1.3.5: Phone	number: 1.3.6 Email:				
1.4 SUMMARY DESCRIPTION OF DISASTER / INCIDENT (IMPACT AND LOCA	TION)				
2. INITIAL IMPACT: (DEMOGRAPHICS)					
2.1 Affected Families: 2.3 Displaced Families (Inside ECs):	2.5 Displaced Parsons (Outside ECs):				
2.2 Affected Persons: 2.4 Displaced Persons (Inside ECs):	2.6 Displaced Persons (Outside Ecs).				
2.2a Affected children: Age 0-2: Age 3-5:	Age 6-12: Age 13-17:				
2.2b PWD: 2.2c Elderly:					
Depending on the type of disaster, BASELINE may be equal to AFFECTED; but in all situ 2.7 Missing (Male): 2.8 Missing (Female): 2.9 2.10 Injured (Male): 2.11 Injured (Female): 2 2.13 Dead (Male): 2.14 Dead (Female): 2.15	9 Missing (Total): .12 Injured (Total):				
3. ACCESSIBILITY					
3.1 Is the community accessible?					
3.2 How can the community be reached? [check all that applies] ☐ Car or Bus ☐ 4WD or 6-10-Wheeler Trucks ☐ Motorcycle					
3.3 Are their road segments or bridges that are damaged?	No				
	· ·				
	on access: [check all that applies] toad repair Coordination with Port/RORO Operator Coordination with CAAP / Airport Mgt.				
4. POWER OR ELECTRICITY					
4.1 Is their electricity in the community?	4.2 Based on observations, please check if the following are true:				
☐ Yes ☐ None (Totally, no power) ☐ Partial (cite % without power)	☐ Fallen electric posts ☐ Fallen or damaged electric tower ☐ Power lines are cut ☐ Damaged transformers				
☐ Limited from (time)to	☐ Damaged Power Plant ☐ Others				
☐ No power even before the disaster (proceed to next section)					
4.3 How many days from date of survey will the fuel stock in the	4.4 What are the urgent power (electricity) needs of the community?				
community last?	☐ Generators / Alternative Power Kit (Solar) Quantity ☐ Gasoline for Generators Quantity				
	☐ Gasoline for Generators Quantity Qua				
5. COMMUNICATIONS	and or construction and or construction and construction				
5.1 Please check if the following telecommunication services are operation	nal (has signal) in the area:				
☐ Smart/Sun ☐ Globe/TM ☐ Othe	ers				
5.2 Please check if the following services are operational in the area:	5.3 Please check if the following alternative communications are operational in the				
☐ Radio - AM ☐ Radio - FM ☐ TV Free-Air	area: ☐ Satellite Phone ☐ VHF Radio ☐ UHF Radio				
☐ TV Cable ☐ TV Satellite	☐ Satellite Phone ☐ VHF Radio ☐ OHF Radio ☐ V-SAT				
5.3 Based on current situation, please identify your most immediate need	on communication [check all that applies]				
☐ Communication to Family or Relatives ☐ Communication	n to Responders / Government				
☐ Internet connection ☐ Charging station					
☐ TV / RADIO service ☐ Public Address	System Others				
6. EVACUATION CENTER DETAILS					
6.1 Is there an evacuation center in the community?	6.2 If yes, is there a designated camp manager?				
☐ Yes ☐ No [Skip to next section]	☐ Yes ☐ No				

6.3 Evac	uation Center summary		W M W W CO. OF CO.		·p. · · · · · · · · · · · · · · · · · ·		***************************************	
	Name of Evacuation Center Add		Addr	ress		Inside EC		
	***************************************				COORDINATES	# FAMILY	# PERSON	
6.4 Wha	t are the existing protection	mechanisms in the co	mmunity, commu	nal shelters, or ev	acuation sites for o	ases related to ma	Itreatment or viole	nce against
	oups of people? [check all the		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	rity Patrols Organized by the	Affected Population		Presence / Patrol			mmunity Protection	
	□ BCPC Desk □ Women-Friendly Spaces □ Church Groups □ Child-Friendly Spaces							
	Others No Protection Mechanism at all. 6.5 Please check the following if operational in the evacuation areas (Check all that applies):							
	☐ Lighting ☐ Ventilation ☐ Sleeping Areas with partition ☐ Separate Toilets/Baths for Male and Female						Female	
	☐ Cooking Areas ☐ Separate Toilets/Baths for PWDs ☐ Washing Areas ☐ Camp Management Team ☐ Medical / Health Desk ☐ Police / VAWC Desk ☐ Marked breast-feeding Areas ☐ "Libreng Tawag" / Phone recharging station						ctation	
☐ Othe		Palice / VAWC Desk	U	Marked breast-fee	ading Areas L	Libreng raway	/ Prione recharging	, Station
	LIEF ASSISTANCE (e.g., Fa	mily Food Packs, Cloth	nes, Sleeping Imple	ements, Kitchen U	tensils, Water Kits,	Cash, others)		
	the community/EC received			to next section]		QQC COLOR		
7.2 If ye	s, please list below	A	M. A. B. C.	* COLONA	are and	ernsser na	re la u	Families
	NAME or ORGANIZATION	CONTACT PERSON	CONTACT DETAILS	PARTICULA	NCE GIVEN R QUANTITY	SERVICE DAT	***************************************	Served
	(required)	renson	DETAILS	FARTICODA	QOARTIT	3.00		
				1				
	ARCH-RESCUE-RETRIEVA ed on observation, is SEARC		needed in your	8 2 Please check	what SRR is neede	»d·		
		Skip to next section] [☐ Search and R			nd Rescue (USAR)	
							ture Search and Re	scue
				☐ Water Search		☐ Maritime Searc	th and Rescue	
0 10	W			☐ Aviation Sear	en and Rescue	☐ Others		
	W and ORDER W AND ORDER a problem in	your community?		9.2 Are any of	the following a th	reat in your com	munity? [check al	that applies]:
☐ Yes		xt section] Do no	t know	□Looting □ R	obbery 🗆 Banditi	ry, Hold-up		
				☐ Kidnapping	☐ Human Tr		*/	
-				☐ Violence aga ☐ Sexual Abuse		IViolence against \ petween groups	vomen	
A STATE OF THE STA					veen families 🔲		су	
				□Others				
	se check if any of the follow				п т.	errorist . 🗆 P	rivate armies	
☐ Bara	ngay Tanod (BPSO)	□ Coast (ouard law enforcement i	units			yndicates/Bandits/	'Pirates
	ppine Army/Air Force/Navy/		THE CONTROL OF THE CO		По	ther Armed Groups		
-	HELTER							
10.1 Nu	mber and/or percentage of	destroyed houses (irre	eparable)	# □ <25%		51-75% □ >75	%	
10.2 No	mber and/or percentage of # □ <25% □ 26-		., walls, roof and α	olumn collapsed, l	nanging waii) (repa	irable)		
10 3 Ba	sed on current situation, ple			on shelter: [check	all that applies]			***************************************
	mer/Nails/Saw □ Galvania		☐ Tarpaulins	☐ Plastic sheet	ing		ping Mat	
☐ Blan	ket 🔲 Mosqui	to Net	☐ Cash	☐ Lumber	☐ Plywood	□Othe	rs	
11. FOOD SECURITY								
11.1Do people have access to food in their current location?								
11.2 What are the main sources of food in the area?								
11.3 is the local market operating?								
11.5 Based on current situation, please check most immediate food need								
□ Cooked food □ Food pack □ Rice □ Fresh produce □ Cash □ Others								
12. WATER SUPPLY								
	12.1 Is their access to water for drinking? ☐ Yes ☐ No 12.2 Is their access to water for domestic use? ☐ Yes ☐ No							
12.2 is then access to water for domestic doc. and for								
12.3W	nat is the primary water sou			12.4 Do	affected househo		wn water contair	iers with a
□ Open well □ Bore hole/hand pump □ Stream/river Iid to store water? □ Yes □ No								
☐ Stor	age/collection container	☐ Piped water syste	em					000000000000000000000000000000000000000
12.5 Ba	sed on current situation, pl	ease identify your mos	st immediate need	ls for water syster	ns?	***************************************		A
□ Jern	/ cans	☐ Bottled w	ater [☐ Water Distribut	ion/Delivery	☐ Water Purification	on Device	
☐ Cast		☐ Others_						
	ANITATION their access to functioning s	enitary facilities? TV	'es □ No					
13,115	men access to runctioning s	maintaily ratificities: Land 1	wo in its					Address.

13.2 Are there separate facilities for women and men?	14.3 Do affected families have adequate personal hygiene supplies? (e.g., soap,					
☐ Yes ☐ No Sanitary napkins, etc.) ☐ Yes ☐ No 14.4 Based on current situation, please identify your most immediate need on sanitation: [check all that applies]						
☐ Toilet facilities ☐ Bathing Facilities ☐ Hygiene kit☐ Solid Waste Management ☐ Information on Good Sanitary Practices ☐ Others ☐ Others ☐	s □ Dignity Kits □ Water / Water Supply					
14. HEALTH						
14.1 Do people have access to Health Services in the community? ☐ Yes ☐ No ☐ Do not know	14.2 Which health facilities/services are functional? ☐ Barangay health station ☐ Hospital ☐ Health desk ☐ Mobile health units ☐ Birthing facility ☐ Others					
14.3 What are the main health concerns? □ Diarrhea/dehydration □ Skin infections □ Hypertension □ Respiratory infection □ Gastro-intestinal illnesses □ Trauma □ Others □ Others	14.4 What is the level of availability of medicines and medical supplies in health facilities? ☐ Adequate ☐ Inadequate					
15.5 Based on current situation, please identify your most immediate need on health ☐ Mobile clinics ☐ Health personnel ☐ Medicines ☐ Medical Supplies ☐ Maternity and New born Kits ☐ Reproductive Health Commodities ☐ Supply of Blood ☐ Cash ☐ Others						
15. NUTRITION						
15.1 Is their information on infants that are exclusively breastfed? ☐ Yes ☐ No	15.2 Have infant milk products (e.g., milk formulas) and/or baby bottles/teats been distributed since the start of the emergency? ☐ Yes ☐ No					
15.3 Are any of the following activities being continued without any disruption during the emergency? Vitamin A capsule supplementation for children 6-59 months:						
Management of children with moderate and severe acute malnutritio 15.4 Based on current situation, please identify your most immediate need on n □ Food □ Food supplements □ Bottled water □ Ma						
16. PROTECTION						
16.1 Are their cases (reported or not) of violence in the community as a result or	f the disaster or displacement?					
☐ Yes ☐ No ☐ Do not know						
16.2 Presence of vulnerable people in the community/EC who need assistance: □ Unaccompanied/Separated MINORS/ORPHANS □ Unaccompanied/Separated MINORS/ORPHANS □ Unaccompanied/Separated □ Single Adult Headed □ Senior H						
17.3 Is there an existing reporting mechanism for protection related incidents? ☐ Yes ☐ No	17.4Based on current situation, please identify your most immediate need for protection essential services: ☐ Referral ☐ Police Presence ☐ Local Gov't. Official's Presence ☐ Social Services ☐ Counseling / Debriefing ☐ Others ☐ Replacement of identification documents					
17. EDUCATION						
17.1 Number of classrooms are being used as evacuation centers: 17.2 Number of children are staying in the evacuation centers: 17.3 Number of destroyed (irreparable) classrooms: 17.4 Number of damaged (repairable) classrooms (Walls, roof and column collapse)	osed, hanging wall etc.):					
117.5 What are the most urgent educational needs in the area. Please shade all Safe spaces to hold classes Replacement of Child Replacement of Learning Materials Repair of Damaged Buildings Securing Water & Sar Integrating affected children to other schools Cash Others	ren's School Supplies ning Materials litation Facilities at Learning sites					
18.1 What is the main source of livelihood?	18.2 Based on current situation, please identify your most immediate need on					
	livelihood/early recovery? ☐ Transport ☐ Cash for Work ☐ Debris clearance ☐ Cash ☐ Others					
19. COMMUNITY ENGAGEMENT						
19.1 Based on observation, does the community receive from government or concerned agencies the information they need to cope with the evolving humanitarian situation? ☐ Yes ☐ No ☐ Do not know	19.2 What do affected people want to know most? ☐ General situation ☐ Situation at home ☐ Information about family members ☐ What aid is coming ☐ Weather situation ☐ Health advice ☐ Security information ☐ Other					
19.3 What are the main sources of information? ☐ Friends/neighbors/family ☐ Community leader ☐ Religious leader ☐ Gov ☐ Newspaper (national/local) ☐ AM/FM radio ☐ Aid worker ☐ Community ☐Others	group 🗆 Social media					
20. OVER-ALL ASSESSMENT (not to be asked from the key informant, but as a concluding observation of the enumerator)						
21.1 When you consider the general situation in the area, would you say: ☐ People are facing serious problems in the area ☐ As a result of the emergency, people will get sick and might even die						

☐ As a result of the emergency, many people ha	ive already died	
20.2 Please provide general justification for the	answer:	
Submitted by:		
NAME	DESIGNATION	
ORGANIZATION	RDANA Team	
CONTACT#	EMAIL	