



#### **CERC Assessment**

- Initial assessment of the intensity of a crisis event is vital.
- First, turn to the event assessment checklist on the following page and check the boxes that are applicable toyour event.
- Don't spend a lot of time considering whether or not to check a box—this matrix is meant to be a general guide.
- This is not a test and there are no right or wrong answers.
- The checklist is meant to take a only few minutes to complete.
- When you are done, turn back to this page, and compare the boxes you checked to those cited in the "Crisis Criteria" column in the table below to determine the level of crisis that you are dealing with and how you may want to respond.
- Reassessment is expected as more information about the event is gathered.

Complete the following worksheets to generate a quick analysis of the nature of the event and its associated CERC needs.

CRISIS EMERGENCY RISK COMMUNICATIONS (CERC)







	Event Evaluation Factors					
Crisis Level	Crisis Description	Crisis Criteria	Recommended Outcome*			
Α	Highly intense in the initial phase. The need to disseminate information rapidly to the public and media is critical. Life and limb will be at risk if the public is not notified about the risk and public health recommendations.	First box must be checked. From among boxes 2, 3, and 4, at least two boxes must be checked.	Operate 24 hours a day, 7 days a week for media and public response, with an expectation that relief and replacement staff will be needed. Per your plan, form or join a Joint Information Center (JIC).			
В	Intense. The need to directly provide public health recommendations to the public and media to save life or limb is not immediate. The public and media, however, believe their health and safety are or could soon be at risk. There is a high and growing demand for more information.	First box <u>not</u> checked, and third and fourth boxes checked.	Operate 20 hours a day, 7 days a week during the initial phase. Set up routine times for media briefings, allow public to e-mail or leave phone messages during nonduty times, and move into maintenance phase when possible. Be prepared to face "initial phase" demands, depending on developments during the maintenance phase (maintenance phases with bumps). May need to form a JIC.			
С	Moderately intense. Media frenzy develops. Interest is generated because of the event novelty versus a legitimate and widespread or immediate public health concern. Interest could die suddenly if a "real" crisis occurred.	Third box checked, and boxes 1, 2 and 4 not checked. Three or more of the ++ boxes checked, and one or more of the +++ boxes checked.	Operate 10–12 hours a day, 5–6 days a week and assign a single team member for after-hour purposes during the initial phase. Operate on weekend if event occurs on a weekend; otherwise use on-call staff only on weekends, not during full operation. Attempt to move the media and public to maintenance phases with prescribed times and outlets for updates. No need to form a JIC.			
D	Minimally intense. Builds slowly and may continue for weeks, depending on the outcome of further investigation. Requires monitoring and reassessments.	Boxes 1, 2, and 3 not checked. More + or ++ boxes checked than +++ boxes.	Operate normally in the initial phase while preparing to move to 24 hours a day, 7 days a week, if needed. Notify relief and replacement staff that they may be called for duty depending on how the event develops. Do not "burn out" staff with long hours before the public and media demand escalates. Practice your crisis communication operations (during normal duty hours) to ensure the system works. Consider operating a JIC if information release is shared.			

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**Directions:** Check all that apply, based on current information.

Criteria Number	Check if applicable	Criteria Intensity (0-8)	Crisis Criteria
1		+++++++	The initial event is clearly recognized as a public health emergency that requires immediate communication with the public to prevent further widespread illness or death.
2		++++	Deaths are expected within a short window of time (catastrophic event). Diagnosis and/or treatment are uncertain.
3		++++	The media and public perceive the event as the "first," "worst," or "biggest," etc.
4		++++	Deaths are expected well above normal levels.
5		+++	The event is occurring in a metropolitan area (with dense media outlets) versus a sparsely populated area (with fewer media outlets).
6		+++	The event is sudden, is national in scope, or has the potential to have a national health impact.
7		+++	The government is perceived as a cause of or responsible for the event.
8		+++	The event predominantly impacts children or previously healthy adults.
9		+++	The event is possibly "man-made" and/or deliberate.
10		+++	Controlling the event may require a suspension of civil rights for a significant portion of the population.
11		+++	Persons involved in the event must take active steps to protect their personal health and safety.
12		+++	Responsibility for mitigating the event falls within the scope of your organization.
13		++	The event has some "exotic" aspect.
14		++	A well-known product, service, or industry is involved.
15		++	Sensitive international trade or political relations are involved.
16		++	A well-known "celebrity" is involved.
17		++	An ongoing criminal investigation is involved.
18		++	The disease or public health issue is not well understood by the general population, or the general population is misinformed about the situation.
19		++	The event is "acute." The event occurred and your organization is faced with explaining the event and the aftermath (e.g., an accident in the laboratory or a chemical release).
20		+	The long-term health effects for humans involved in the event are uncertain.
21		+	The event is evolving. Its progression is uncertain and may become more or less serious (e.g., identification of a novel influenza virus).

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Criteria Number	Check if applicable	Criteria Intensity (0–8)	Crisis Criteria
22		+	The event site does not have a well-equipped and resourced public information response capability.
23		0	The event occurred internationally with little chance of affecting the U.S. population.
24		0	Treatment or control of exposure is generally understood and within the person's control.

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	Planning, research, training, and evaluation			
Yes	No			
		Does your organization have an emergency response/crisis communication operational plan for public information and media, partner, and stakeholder relations?		
Yes	No	If yes, does the plan have the following elements:		
		Designated line and staff responsibilities for the public information team		
		Information verification and clearance/approval procedures		
		Agreements on information release authorities (who releases what/when/how)		
		Regional and local media contact list (including after-hours news desks)		
		Procedures to coordinate with the public health organization response teams		
		Designated spokespersons for public health issues in an emergency		
		Public health organization emergency response team after-hours contact numbers		
		Contact numbers for emergency information partners (e.g., Governor's public affairs officer, local FBI public information special agent in charge, local or regional department of agriculture or veterinarian public information officers, Red Cross and other nongovernment organizations)		
		Agreements/procedures to join the joint information center of the emergency operations center (if activated)		
		Procedures to secure needed resources (space, equipment, people) to operate the public information operation during a public health emergency 24 hours a day/7 days a week, if needed		
		Identified vehicles of information dissemination during a crisis to public, stakeholders, partners (e.g., e-mail listservs, broadcast fax, door-to-door leaflets, press releases)		
Yes	No			
		Have you coordinated your planning with the community or state emergency operation center?		
		Have you coordinated your planning with other response organizations or competitors?		
		Have designated spokespersons received media training and risk communication training?		
		Do they understand emergency crisis/risk communication principles to build trust and credibility?		

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Message and audiences					
The following are types of incidents (disasters) that could require intense public information and media and partner communication responses:					
rborne infectious disease outbreak (e.g., pandemic influenza)					
oodborne infectious disease outbreak (e.g., listeria)					
Vaterborne (e.g., Cryptosporidiosis)					
ectorborne (e.g., West Nile virus)					
Outbreak with potential to spread outside your region or to your region					
Inknown infectious agent					
Chemical or toxic material disaster					
latural disasters					
Inknown infectious agent (international) with potential to spread to U.S.					
nown infectious agent (international) with potential to spread to U.S.					
arge-scale environmental crises					
adiological event					
errorist event					
Biological (suspected or declared)					
Chemical					
Radiological					
Mass explosion					
ite-specific emergencies					
Laboratory incident with laboratory worker					
Laboratory incident/release of material in community					
Death of employee/contractor/visitor while on campus					
Hostage event with/by employee/contractor on campus					
Bomb threat					
Explosion/fire—destruction of property					
Violent death of an employee/contractor or visitor on campus					

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Yes	No	
		Have you <b>identified special populations</b> (e.g., elderly, first language other than English, Tribal communities, border populations)? List any specific sub-populations that need to be targeted with specific messages during a public health emergency related to your organization (e.g., Tribal nations, persons with chronic respiratory illness, unvaccinated seniors)?
		Have you <b>identified your organization's partners who should receive direct information and updates</b> (not solely through the media) from your organization during a public health emergency?
		Have you <b>identified all stakeholder organizations</b> or populations (groups or organizations that your organization believes have an active interest in monitoring activities—to whom you are most directly accountable, other than official chain of command) who you believe should receive direct communication during a public health-related emergency?
		Have you <b>planned ways to reach people according to their reactions</b> to the incident (fight or flight)? Are messages, messengers, and methods of delivery sensitive to all types of audiences in your area of responsibility?
		Are there <b>mechanisms/resources in place to create messages</b> for the media and public under severe time constraints, including methods to clear these messages within the emergency response operations of your organization (include cross clearance)?
		Identify how you will perform media evaluation, content analysis, and public information call analysis in real time during an emergency to ensure adequate audience feedback.
Have identi	you o	leveloped topic-specific precrisis materials for identified public health emergency issues, or sources of these materials if needed?
Yes	No	
		Topic factsheet (e.g., description of the disease, public health threat, treatment, etc.)
		Public Q/As
		Partner Q/As
		Resource factsheet for media/public/partners to obtain additional information
		Web access and links to information on the topic
		Recommendations for affected populations
		Background beta video (B-roll) for media use on the topic
		List of subject matter experts outside your organization that would be effective validators to public/media regarding your activities during a public health emergency.

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Yes	No	
		Have you identified public health spokespersons for media and public appearances during an emergency?  Identify persons to act as spokespersons for multiple audiences (e.g., media spokesperson, community meeting speaker, etc.) and formats about public health issues during an emergency and ensure that their communication roles and responsibilities are understood and incorporated into their expected duties during the crisis.
		Methods of delivery (information dissemination) and resources
Yes	No	
		Does your organization have <b>go kits</b> for public information officers who may have to abandon their normal place of operation during a public health emergency or join a JIC?  If yes, does the kit include:
		A computer(s) capable of linking to the Internet/e-mail
		A CD–ROM or disks containing the elements of the crisis communication plan (including media, public health, and organization contact lists, partner contact lists; information materials, etc.)
		A cell phone or satellite phone, pager, wireless e-mail, etc.
		A funding mechanism (credit card, etc.) that can be used to purchase operational resources as needed
		Manuals and background information necessary to provide needed information to the public and media
		Care and comfort items for the public information operations staff
		Have you identified the mechanisms that are or should be in place to ensure multiple channels of communication to multiple audiences during a public health emergency?  If yes, do they include:
		Media channels (print, TV, radio, Web)
		Web sites
		Phone banks
		Town hall meetings
		Listserv e-mail
		Broadcast fax
		Letters by mail
		Subscription newsletters
		Submissions to partner newsletters
		Regular or special partner conference calls

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	Door-to-door canvassing			
	Are <b>contracts/agreements</b> in place to post information to broadcast fax or e-mail systems?			
	Have locations for press conferences been designated and resourced?			
Have you identified employees, contractors, fellows, interns currently working for you or available to you in an emergency, that have skills in the following areas:				
	Public affairs specialist			
	Health communication specialist			
	Communication officer			
	Health education specialist			
	Training specialist			
	Writer/editor			
	Technical writer/editor			
	Audio/visual specialist			
	Internet/Web design specialist			
	Others who contribute to public/provider information			
Personnel				
Have you identified who will provide the following expertise or execute these activities during a public health emergency (including backup)?				

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Yes	No	
		Command and control:
		☐ Directs the work related to the release of information to the media, public, and partners
		Activates the plan, based on careful assessment of the situation and the expected demands for information by
		media, partners, and the public
		Coordinates with horizontal communication partners, as outlined in the plan, to ensure that messages are consistent and within the scope of the organization's responsibility
		Describes and other to conscient and discrete FOO consequent and bishock and markets are determined in the other
		Provides updates to organization's director, EOC command and higher headquarters, as determined in the plan
		Advises the director and chain of command regarding information to be released, based on the
		organization's role in the response
		☐ Ensures that risk communication principles are employed in all contact with media, public, and partner
		information release efforts  Advises incident-specific policy, science, and situation
		Reviews and approves materials for release to media, public, and partners
		Obtains required clearance of materials for release to media on policy or sensitive topic-related information not
		previously cleared
		☐ Determines the operational hours/days, and reassesses throughout the emergency response
		Ensures resources are available (human, technical, and mechanical supplies)
Yes	No	
		Media:
		Assesses media needs and organizes mechanisms to fulfill media needs during the crisis (e.g., daily
		briefings in person, versus a Web site update)  Triages the response to media requests and inquiries
		☐ Ensures that media inquiries are addressed as appropriate
		☐ Supports spokespersons
		Develops and maintains media contact lists and call logs
		☐ Produces and distributes media advisories and press releases
		☐ Produces and distributes materials (e.g., factsheets, B-roll)
		Oversees media monitoring systems and reports (e.g., analyzing environment and trends to determine needed
		messages, determining what misinformation needs to be corrected, identifying concerns, interests, and needs arising from the crisis and the response)
		Ensures that risk communication principles to build trust and credibility are incorporated into all public
		messages delivered through the media
		Acts as member of the joint information center of the field site team for media relations
		☐ Serves as liaison from the organization to the JIC and back

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Yes	No	
		Direct public information:
		☐ Manages the mechanisms to respond to public requests for information directly from the organization by telephone, in writing or by e-mail
		Oversees public information monitoring systems and reports (e.g., analyzing environment and trends to determine needed messages, determining what misinformation needs to be corrected, identifying concerns, interests, and needs arising from the crisis and the response)
		Activates or participates in the telephone information line
		Activates or participates in the public e-mail response system
		Activates or participates in the public correspondence response system
		Organizes and manage emergency response Web sites and Web pages
		Establishes and maintain links to other emergency response Web sites

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Yes	No	
		Partner/stakeholder information:
		<ul> <li>Establishes communication protocols based on prearranged agreements with identified partners and stakeholders</li> <li>Arranges regular partner briefings and updates</li> <li>Solicits feedback and responds to partner information requests and inquiries</li> <li>Oversees partner/stakeholder monitoring systems and reports (e.g., analyzing environment and trends to determine needed messages, determining what misinformation needs to be corrected, identifying concerns, interests, and needs arising from the crisis and the response)</li> <li>Helps organize and facilitate official meetings to provide information and receive input from partners or stakeholders</li> <li>Develops and maintain lists and call logs of legislators and special interest groups</li> <li>Responds to legislator/special interest groups requests and inquiries</li> </ul>
Yes	No	
		Content and material for public health emergencies:
		<ul> <li>Develops and establishes mechanisms to rapidly receive information from the EOC regarding the public health emergency</li> <li>Translates EOC situation reports and meeting notes into information appropriate for public and partner needs</li> <li>Works with subject matter experts to create situation-specific factsheets, Q/As, and updates</li> <li>Compiles information on possible public health emergency topics for release when needed</li> <li>Tests messages and materials for cultural and language requirements of special populations</li> <li>Receives input from other communication team members regarding content and message needs</li> <li>Uses analysis from media, public and partner monitoring systems, and reports (e.g., environmental and trend analysis to determine needed messages, what misinformation need to be corrected, identify concerns, interests and needs arising from the crisis and the response) to identify additional content requirements and materials development</li> <li>Lists contracts/cooperative agreements/consultants currently available to support emergency public/private information dissemination</li> </ul>

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Yes	No	
		Space:
		You need space to operate your communication teams outside the EOC. You need a place to bring media on site (separate from the EOC).
		You need a quiet space to quickly train spokespersons.
		You need space for team meetings.
		You need space for equipment, exclusive for your use. You cannot stand in line for the copier when media deadlines loom.
Yes	No	
		Contracts and memoranda of agreement:
		Consider a contract with a media newswire.
		Consider a contract with a radio newswire.
		Consider a contract for writers or public relations personnel who can augment your staff.
		Consider a contract for administrative support.
		Consider a phone system/contractor to supply a phone menu that directs type of caller and level of information desired:
		<ul> <li>□ General information about the threat</li> <li>□ Tip line, listing particular actions people can take to protect themselves</li> <li>□ Reassurance/counseling</li> <li>□ Referral information for health care/medical facility workers</li> <li>□ Referral information for epidemiologists or others to report cases</li> <li>□ Lab/treatment protocols</li> <li>□ Managers looking for policy statements for employees</li> </ul>
Yes	No	
		Equipment:  ☐ Fax machine (number that's pre-programmed for broadcast fax releases to media and partners)  ☐ Web site capability 24/7. Attempt to have new information posted within 2 hours (some say within 10 minutes).  ☐ Computers (on LAN with e-mail listservs designated for partners and media)  ☐ Laptop computers  ☐ Printers for every computer  ☐ Copier (and backup)  ☐ Tables—lots of tables  ☐ Cell phones/pagers/personal data devices and e-mail readers  ☐ Visible calendars, flow charts, bulletin boards, easels

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		Designated personal message board
		☐ Small refrigerator
		□ Paper
		☐ Color copier
		☐ A/V equipment
		☐ Portable microphones
		☐ Podium
		TVs with cable hookup
		☐ VHS VCR
		☐ CD-ROM
		☐ Paper shredder
Yes	No	
		Supplies
		☐ Copier toner
		□ Printer ink
		□ Paper
		☐ Pens
		☐ Markers
		☐ Highlighters
		☐ Erasable markers
		Overnight mail supplies
		☐ Sticky notes
		Tape (be creative)
		□ Notebooks
		☐ Poster board
		☐ Standard press kit folders
		Organized B-roll in beta format (keep VHS copies around for meetings)
		☐ Formatted computer disks
		Color-coded everything (folders, inks, etc.)
		Baskets (to contain items you're not ready to throw away)
		Organizers to support your clearance and release system
		Expandable folders (with alphabet or days of the month)
		☐ Staplers (lots of them)
		Paper punch
		☐ Three-ring binders
		Organization's press kit or its logo on a sticker
		Colored copier paper (for door-to-door flyers)
		Paper clips (all sizes)
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