

# Partnerships for Recovery Across The Sectors (PRACTIS) Toolkit

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# Contents

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Chapter 1. Welcome and Introduction.....	1
Need for the Toolkit .....	1
Intended Audience.....	2
Goals and Specific Aims .....	2
Partnership Challenges Addressed .....	2
User’s Guide.....	3
How the Toolkit Was Developed .....	4
Potential Benefits and Limitations .....	5
Chapter 2. Tools to Assess Current Partnerships Among Recovery Organizations.....	6
Benefits of the PARTNER Survey .....	7
Questions on the PARTNER Survey.....	7
Steps to Field a PARTNER Survey.....	8
Sample PARTNER Survey .....	12
Welcome to the Hurricane Sandy Recovery Partnership Survey .....	13
Chapter 3: Tools to Identify Strategies to Strengthen Recovery Partnerships .....	24
Quality Improvement Guide.....	25
Survey Overview .....	25
Survey Findings.....	26
Sample Quality Improvement Report on Hurricane Sandy Recovery Partnerships in New York City.....	29
Survey Findings.....	31
Chapter 4: Tools to Exercise Recovery Partnerships .....	45
Annotated Slides to Facilitate Recovery Tabletop Exercise .....	46
Lessons Learned Worksheet.....	48
Chapter 5: Conclusion .....	51



# Chapter 1. Welcome and Introduction

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Welcome to the Partnerships for Recovery Across The Sectors (PRACTIS) toolkit! In this chapter, we review the intended audience and this toolkit's goals and specific aims, as well as identify the key partnership challenges that this toolkit intends to address. We conclude with a brief user's guide that previews the toolkit's content and offers tips for its use and navigation.

## Need for the Toolkit

Organizational partnerships have been studied for decades in the health care and public health arenas. It has been found that health care, public health, and social service organizations with more partnerships that act as important points of information transfer and flow typically have more effective service delivery outcomes than less connected organizations. The role of interorganizational networks in disaster preparedness, response, and recovery has been less studied; however, a recent retrospective study of the events of September 11, 2001, suggests that well-connected networks between government and the public and private sectors could play an important role in effective response and recovery (Kapacu, 2005). A comprehensive literature review also underscored the importance of these partnerships as a key component of community resilience (Chandra et al., 2011). Such recent U.S. strategies as the National Health Security Strategy and the National Disaster Recovery Framework have further emphasized the importance of engaging organizations, especially nongovernmental organizations. However, while there are numerous toolkits and practice guidelines to suggest how community-based organizations (CBOs) and governmental agencies can collaborate for general health issues, as well as some specific to disaster preparedness, response, and recovery, there is little evidence to support these practices.

Hurricane Sandy highlighted the invaluable role of CBOs. Because of preexisting networks facilitated by the New York City Department of Health and Mental Hygiene (DOHMH), Hurricane Sandy provided an opportunity to develop an evidence-based model of the role of interorganizational collaboration in an emergency. Prior to Hurricane Sandy, the DOHMH Office of Emergency Preparedness and Response had convened a Community Resilience and Recovery Planning (C2RP) committee of 20 organizations that were networked to a larger group of almost 1,000 organizations that provide services to vulnerable populations with the mission to increase the capacity of New York City neighborhoods to prepare for, mitigate, respond to, and recover from public health emergencies. This group was convened after an organizational survey revealed that C2RP members viewed improved partnerships with public health and emergency management as a priority to improve their organizations' abilities to respond or provide services to their populations during an emergency. During Hurricane Sandy, C2RP and its broader

network of organizational partners provided essential response services for vulnerable populations, including supporting special needs medical shelters and restoration centers and providing physical and mental health care. C2RP and its organizational network are still involved in ongoing recovery efforts.

The RAND Corporation, in partnership with DOHMH; the University of Colorado—Denver; and the University of California, Los Angeles, conducted a study of C2RP and its partners to show how partnerships help government agencies, and particularly public health entities, support more efficient and effective recovery. This toolkit leverages the lessons learned from that study and translates them into actionable guidance for local health departments (LHDs). The toolkit was developed with funding from the U.S. Department of Health and Human Services Assistant Secretary of Preparedness and Response.

## Intended Audience

This toolkit is for LHD emergency planners, community resilience coordinators, and community outreach staff.

## Goals and Specific Aims

The overall goal of this toolkit is to strengthen community-wide disaster response and recovery. To accomplish this goal, the toolkit aims to

1. help LHDs identify the key CBOs that contribute to disaster response and recovery
2. offer guidance about the strengths and weaknesses of the partnerships between LHDs and key CBOs and between CBOs
3. provide an engaging exercise that can improve the relationship between LHDs and key CBOs.

## Partnership Challenges Addressed

Developing strong partnerships with CBOs has been a challenge for many LHDs. This toolkit will help to address two common challenges that LHDs face when developing partnerships with CBOs.

*Challenge 1: There are too many CBOs in the community for my LHD to keep track of, and we are not sure which ones will actually participate in disaster recovery.*

This toolkit provides an easy-to-use survey that LHDs can use to identify which CBOs participate in recovery activities, what they each contribute, and which CBOs are the most influential.

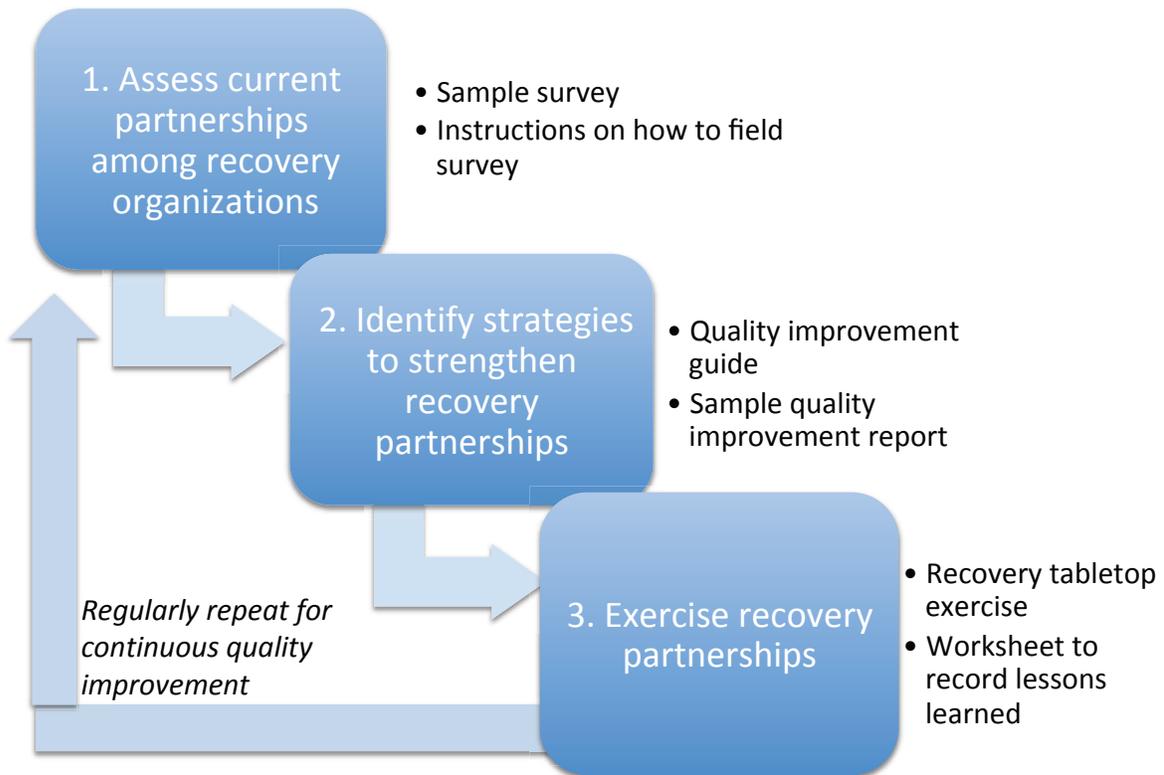
*Challenge 2: It is too complex to quantify the strengths and weaknesses of our LHD-CBO partnerships and difficult to find ways to strengthen these partnerships.*

This toolkit provides a guide to help LHDs interpret their survey data and use the data for quality improvement (i.e., to strengthen their CBO partnerships). This toolkit also supports the use of a recovery tabletop: a group exercise in which LHDs and CBOs can come together to strengthen their partnerships.

## User's Guide

The toolkit is organized into three sets of tools. The first tool set is intended to help users assess current partnerships among recovery organizations by providing a sample partnership survey and instructions for how LHD staff can field the survey (Chapter 2). The second tool set helps users identify strategies to strengthen recovery through a quality improvement guide and a sample quality improvement report (Chapter 3). Chapters 2 and 3 contain both guidance and specific examples from RAND's work in New York City with DOHMH after Hurricane Sandy. The last set of tools, a recovery tabletop exercise and after-action report template, is used to exercise recovery partnerships (Chapter 4). Figure 1.1 provides a visual representation of the tool sets.

**Figure 1.1. Components of the PRACTIS Toolkit**



## How the Toolkit Was Developed

Program to Analyze, Record, and Track Networks and Enhance Relationships (PARTNER), an existing platform for assessing partnerships, was adapted to the recovery context (<http://www.partnertool.net>). The adaptation was accomplished by RAND researchers with expertise in disaster recovery and staff from DOHMH. The adaptations were then pilot-tested by LHD and CBO staff who participated in New York City recovery from Hurricane Sandy. PARTNER has been used to assess a variety of public health collaboratives with wide-ranging foci (e.g., active living, substance abuse, oral health). The PARTNER website contains a detailed description of the ways in which PARTNER has been used (<http://www.partnertool.net/projects/>). This page may be useful for generating ideas for how an LHD might use PARTNER to enhance its work. The recovery tabletop exercise was adapted from a community resilience tabletop exercise that RAND developed for use in its pilot project with the Los Angeles County Community Disaster Resilience pilot project (<http://www.laresilience.org>).

## Potential Benefits and Limitations

This toolkit is intended to take users through a series of sequential steps to understand, improve, and exercise recovery partnerships. Repeating this process on a regular basis will help LHDs continually improve their partnerships, which can ultimately lead to improved disaster response and recovery operations in your community.

It is important to note that this toolkit does not provide guidance to address difficult relationships or to build a recovery coalition. It also does not contain a detailed summary of the existing literature on the role of partnerships in disaster recovery. Suggested resources on coalition-building can be found in Chapter 4, and additional references on partnerships and disaster recovery can be found in Chapter 5.

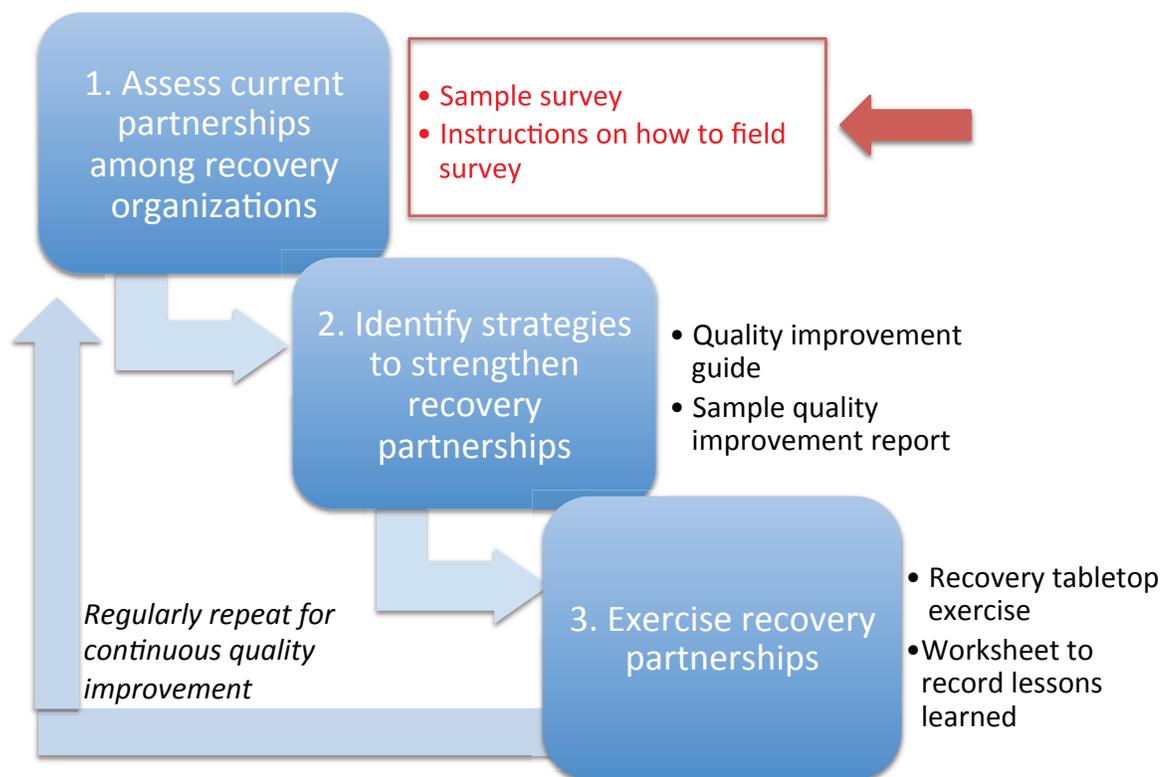
## Chapter 2. Tools to Assess Current Partnerships Among Recovery Organizations

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This chapter contains two tools to assess current partnerships among recovery organizations (Figure 2.1):

- instructions on how to field an organizational partnership survey
- a sample PARTNER survey that can be used to assess organizational partnerships between LHDs and CBOs and among CBOs involved in recovery.

**Figure 2.1. Components of the PRACTIS Toolkit**



By using these tools, LHDs will be able to demonstrate to members and community partners how your LHD's partnership activity has changed or improved over time, including how community CBOs participate. The results from the tool will help LHDs and their CBO partners strategically plan ways to work together to address preparedness, response, and recovery issues facing their community.

## Benefits of the PARTNER Survey

The PARTNER survey offers many benefits for measuring LHD-CBO partnerships, many of which have not been readily available to date:

1. **Scoring partnerships.** The survey collects data on a set of indicators (scores) that LHDs can use to identify baseline measures of progress, areas where improvement can be made, and progress over time.
2. **Visualizing partnerships.** In addition to scores, survey data can also produce visualizations of partnerships. This can be a powerful representation for LHDs and their partner organizations of how connected they truly are, where gaps exist among relationships, and how LHDs might allocate or shift resources to strengthen particular relationships.
3. **Sharing results with LHD staff, CBO partners, funders, and other stakeholders.** The survey offers results that are easy to share with LHD staff or partners and others, such as community stakeholders. By assessing scores and pictures of partnership activity, LHDs can demonstrate progress over time in partnership activity.

## Questions on the PARTNER Survey

The survey contains six types of questions: organization description (e.g., role in recovery), partnerships with other recovery organizations, participation in recovery coalitions, partnership with the LHD, perceived impact on community recovery, and facilitators and barriers to recovery. Table 2.1 outlines the question types, provides example questions, and gives a brief summary of the information that each question type collects. More information about how each question type can be used for quality improvement is contained in Chapter 3.

**Table 2.1. Categories of PARTNER Survey Questions**

Question Type	Example Questions	Information Provided by Question
Organization description (e.g., role in recovery)	<p>How long has your organization been involved in disaster recovery work?</p> <p>What geographic area does your organization serve?</p> <p>Prior to Hurricane Sandy, what services did your organization provide (if any)?</p> <p>Since Hurricane Sandy, what disaster recovery services has your organization provided (if any)?</p> <p>Are disaster recovery services part of your organization's primary mission?</p>	<p>Provides background on the types of organizations that responded to the survey</p> <p>Describes the types of services that CBOs delivered during recovery</p>
Partnerships with other recovery organizations	<p>Over the past year what organizations or agencies have you worked most closely with on recovery from Hurricane Sandy?</p> <p>When did each recovery partnership form?</p> <p>To what degree has each organization contributed resources to Hurricane Sandy recovery activities?</p> <p>To what degree has each organization been reliable in providing Hurricane Sandy recovery activities?</p>	<p>Describes the reach and function of partnerships</p> <p>Describes the types of contributions that partnership made to recovery</p>

Question Type	Example Questions	Information Provided by Question
Participation in recovery coalitions	Does your organization participate in any long-term recovery committee or other community-wide recovery partnership? To what extent did your membership in a long-term recovery committee/group or community-wide recovery partnership contribute to your organization’s ability to impact recovery? What benefits have you or your organization received as a result of your participation in the long-term recovery committee/group or community-wide recovery partnership?	Identifies the role that recovery coalitions played when compared to more informal organizational partnerships
Partnership with the LHD	In the past year, has your organization worked with the New York City Department of Health and Mental Hygiene (NYCDOHMH) on any recovery activities? What benefits have you or your organization received as a result of working with NYCDOHMH during Hurricane Sandy recovery?	Identifies the role that the LHD plays in supporting CBOs during recovery
Perceived impact on community recovery	In your opinion, what has been the impact of the recovery services provided by your organization and your partners?	Determines the areas where CBOs have the greatest impact on community recovery
Facilitators and barriers to recovery	In your organization’s view, what is the greatest barrier to recovery from Sandy? Which of the following factors have facilitated your recovery partnerships? Which of the following factors have been barriers to your recovery partnerships? What resources would help to improve your recovery partnerships?	Identifies areas that need improvement if CBOs are to be meaningfully engaged in recovery Identifies ways to continue supporting CBOs in recovery

## Steps to Field a PARTNER Survey

In this section, we share the steps for fielding the PARTNER survey and describe our experience fielding a survey with New York City’s DOHMH, as an example. Before fielding the survey, LHD staff will need to complete the following steps:

1. **Register as a PARTNER survey manager.** The PARTNER tool is online at [www.partnertool.net](http://www.partnertool.net). To administer the survey, first register as a manager under the “Survey” tab of the PARTNER website (<http://www.partnertool.net/survey/register.php>). After submitting the registration information, LHD staff will be granted access to the managers’ area of the PARTNER website, enabling them to create a list of survey respondents and then customize and administer the survey. No special qualifications are needed to become a survey manager.
2. **Create a list of CBOs in the community that may be involved in disaster recovery.** Before developing the list, think about the naturally occurring groups of CBOs and discuss potential respondents with colleagues. Many of the relationships already exist, and it is important to leverage current partnerships when building a respondent list. We began with the Community Resilience Planning Committee. This naturally occurring group of recovery organizations in New York City works with DOHMH. To find naturally occurring groups in the community, consider searching the Internet for “long-

term recovery committees” or “coalitions.” Health provider or social service provider directories are another good source of information about the CBOs in the community that may provide recovery services.

3. **Compile the respondents’ contact information.** Create an Excel spreadsheet with the following fields: Organization (Name), Point of Contact (Last Name, First Name), Email Address, and Phone Number. It is important to have the phone number to call respondents and remind them to complete the survey. A larger sample can be collected by adding a question to the end of the survey that asks the respondent to provide the contact information for his or her partners (see Question 35 in the example survey at the end of this chapter).

Our contact list was comprehensive but not up to date; therefore, we searched the Internet for current email addresses, points of contact (POCs), and phone numbers. Additionally, we attended disaster recovery meetings to introduce ourselves to partners and exchange business cards and contact information.

If current email addresses are not available or it is not clear to whom the survey should be sent, call the organization, briefly explain the study, and ask for the appropriate contact. It is important to identify a point of contact who is knowledgeable about the organization’s overall disaster recovery services. If it is not clear whether the identified POC is the correct person to respond to the survey, build language into the survey invitation that indicates that a contact with knowledge of the organization’s disaster recovery services should respond to the survey. Additionally, some survey recipients may respond to the survey manager via email or phone (provide the manager’s information in the survey invitation and reminders) with questions about who the correct POC should be and whether they can pass the survey to another colleague. If this is the case, allow them to choose the correct respondent once the criteria are explained and clarify that only one person from the organization should respond, but multiple people may view and provide relevant information to complete the survey. After the respondent list is complete, the manager will enter the necessary information into the PARTNER tool.

4. **Determine whether the LHD wants to customize the PARTNER survey.** A copy of a customized survey used by the New York City DOHMH is included in the toolkit as a sample.

To collect survey data, you will need to:

5. **Invite these organizational POCs to respond to the survey.** This can be done through an email invitation linking to the online survey or via the PARTNER tool. This email can also be used to introduce the survey and inform POCs about why their participation is important to gain valuable insight on disaster recovery. Sample email text for the initial email and a reminder email is contained in Figure 2.2.

**Figure 2.2. Sample Introduction Email for PARTNER Survey**

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FROM: Ingrid A. Gonzalez, LMSW, Director, Community Engagement & Response Office  
of Emergency Preparedness and Response, NYC DOHMH  
SUBJECT: Survey of Recovery Networks

Dear John Doe,

I am writing to you to request your participation in a survey because of your organization's role in recovery efforts after Hurricane Sandy. We are working with the RAND Corporation; the University of California, Los Angeles; and the University of Colorado—Denver to conduct this survey.

Hurricane Sandy highlighted the invaluable role of community-based organizations (CBOs) in recovery. We want to assess how CBOs were impacted by Hurricane Sandy and examine the relationship between public health departments and the nongovernmental sector. Your responses to this survey will help strengthen New York City Department of Health and Mental Hygiene and CBOs' partnerships to improve community recovery outcomes.

The following questions will take ten minutes to complete. Upon completion, you will be entered into a raffle for a \$500 gift card to Target.

Click the link below, or cut and paste the entire URL into your browser to access the survey:  
[www.surveylink.com](http://www.surveylink.com)

Please complete the survey by July 4, 2015, and thank you in advance for helping to make the survey a success.

If you have any questions, please contact Jane Doe at [janedoe@email.edu](mailto:janedoe@email.edu) or 555-555-5555, ext. 0000, between 11 a.m. and 8 p.m. Eastern time.

Sincerely,  
Ingrid Gonzalez

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**Figure 2.3. Sample Reminder Email for PARTNER Survey**

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FROM: Ingrid A. Gonzalez, LMSW, Director, Community Engagement & Response Office  
of Emergency Preparedness and Response, NYC DOHMH  
SUBJECT: Survey of Recovery Networks

Dear John Doe,

We recently sent you a link to an online survey because of your organization's role in recovery efforts after Hurricane Sandy. We noticed that you have not yet responded. We kindly ask that you spend ten minutes filling out the survey.

To take the survey, click on the following link:

[www.surveylink.com](http://www.surveylink.com)

Please complete the survey by July 4, 2015, and thank you in advance for helping to make the survey a success.

If you have any questions, please contact Jane Doe at [janedoe@email.edu](mailto:janedoe@email.edu) or 555-555-5555, ext. 0000, between 11 a.m. and 8 p.m. Eastern time.

Sincerely,  
Ingrid Gonzalez

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6. **Use the original list of CBOs (developed in Step 2) to create a tracking sheet for survey invitations and reminders.** When contacting respondents multiple times, it is important to note the person with whom the caller spoke and the result of the last interaction. There will also be people who decline or feel they are not appropriate to respond to the survey; these individuals should be noted in the tracking sheet. When possible, write down why they declined or felt they were not able to respond. This information will be helpful when analyzing the data and if the survey is fielded again. Make sure to send reminders only to respondents who have not completed the survey.
7. **Send survey invitation reminders and/or custom messages to organizational POCs.** These reminders will help maximize the number of survey responses. We suggest leaving the survey open for six weeks and sending weekly reminder emails (six total). We created a sample invitation, email reminder, and call reminder scripts, alternating between emails and phone calls until we reached the appropriate response rate. For example, we sent an invitation via email on Tuesday, sent a reminder on Thursday, and then called the respondent the following week.

To manage and analyze survey data:

8. **Download the data from the PARTNER online database** into the PARTNER analysis tool.
9. **Generate partnership scores and visualizations** (via the automated function embedded in the PARTNER tool).
10. **Repeat** survey distribution, data gathering, and evaluation, **as appropriate**.
11. **Communicate results** to coalition members, existing and potential funders, and other community stakeholders, and develop action steps for performance improvement (see Chapter 3).

There are nine web demos available online on how to set up and manage the PARTNER survey at <http://www.partnertool.net/resources/web-demos-using-partner/>:

- Web Demo 1—PARTNER Overview
- Web Demo 2—Introduction to Social Network Analysis
- Web Demo 3—Social Network Analysis Applied in PARTNER
- Web Demo 4—Using PARTNER: Registration and Uploading Respondent Information
- Web Demo 5—Using PARTNER: Customizing Your Survey
- Web Demo 6—Using PARTNER: Inviting Respondents to Take the Survey
- Web Demo 7—Using PARTNER: Sending a Reminder to Survey Respondents & Using the Collaborative Email Function
- Web Demo 8—Using PARTNER: Downloading Your Data
- Web Demo 9—Using PARTNER for Quality Improvement

These web demos take you through each step of the PARTNER process.

## Sample PARTNER Survey

Below is an example survey that we used for our study examining partnerships between CBOs and the New York City DOHMH after Hurricane Sandy. We organized our survey into three types of questions: partnership questions, organization questions, and questions about the role of the LHD. In the sample below, we categorize each question and explain why you might want to include it in your survey. **Blue text** represents instructions for you, while black text represents sample survey text. For more examples, please see the PARTNER website ([www.partnertool.net](http://www.partnertool.net)). Do not send your invitations until you've completed Step 4 (in the previous section, "Steps to Field a PARTNER Survey").

## Welcome to the Hurricane Sandy Recovery Partnership Survey

When a respondent enters the survey, he or she will be greeted with a consent page where he or she must decline and exit or accept and enter the survey. The language can be modified.

### *Consent*

This survey asks about how organizations work together to support community recovery from Hurricane Sandy. The survey asks about how organizational recovery partnerships form, their functions, and their potential impacts on community recovery. We do not anticipate any risks to your participation. Your participation will help us understand how to support and improve recovery partnerships.

Researchers conducting this survey will keep all responses confidential, except as required by law. The information you provide will be combined with responses from other participants, and only aggregate results will be reported. The data will be used for research purposes only by the researchers. Your name will not be included in any reports on the survey results.

This survey is completely voluntary. There is no penalty if you choose not to respond.

If you have any questions or concerns regarding this study, please contact the study principal investigator, Joie Acosta, at [jacosta@rand.org](mailto:jacosta@rand.org) or (703) 413-1100, x5324.

Brief instructions will also be provided before respondents begin the survey.

### *Survey Instructions*

The survey is part of a study among multiple partners, funded by the U.S. Department of Health and Human Services Assistant Secretary of Preparedness and Response, to examine how recovery partnerships have developed and emerged after Hurricane Sandy and how these partnerships might help to improve the recovery of New York City. The research partners include the RAND Corporation; the New York Department of Health and Mental Hygiene; the University of California, Los Angeles; and the University of Colorado—Denver.

## Organization Questions

Basic descriptive information about the organization will allow you review the most common types of services, discuss whether the services meet the needs of the community, and identify potential gaps. We have also added references to time (i.e., “prior to Hurricane Sandy,” “since Hurricane Sandy,” “over the next 12 months”) in order to track changes over time and how services can shift.

1. What is the name of your organization/program/department?

\_\_\_\_\_

The organization name will be autopopulated based on what you’ve entered into the respondent list.

2. What is your job title? \_\_\_\_\_
3. How long has your organization been involved in disaster recovery work? (Provide the number of months.) \_\_\_\_\_
4. *Prior* to Hurricane Sandy, what services did your organization provide (if any)? (Select all that apply.)

You can modify the services list based on your expertise and identified categories.

- |  |   |
|--|---|
| <input type="checkbox"/> Animal services   | <input type="checkbox"/> Senior services  |
| <input type="checkbox"/> Job and unemployment assistance   | <input type="checkbox"/> Family violence (e.g., domestic violence, child abuse, interpersonal violence) |
| <input type="checkbox"/> Case management, information, or referral services (e.g., assistance with benefits) | <input type="checkbox"/> Spiritual support  |
| <input type="checkbox"/> Legal, insurance, or mediation services   | <input type="checkbox"/> Financial assistance, including referrals for financial assistance             |
| <input type="checkbox"/> Child services—child care, other child support                                      | <input type="checkbox"/> Transportation   |
| <input type="checkbox"/> Medical care  | <input type="checkbox"/> Food services  |
| <input type="checkbox"/> Clothing  | <input type="checkbox"/> Volunteer opportunities  |
| <input type="checkbox"/> Medication or pharmacy  | <input type="checkbox"/> Home care services   |
| <input type="checkbox"/> Community liaison (e.g., representing community needs or interests)                 | <input type="checkbox"/> Warehousing (e.g., storing food, clothes, and other goods)                     |
| <input type="checkbox"/> Mental health or counseling   | <input type="checkbox"/> Housing (temporary or permanent)   |
| <input type="checkbox"/> Construction or infrastructure development  | <input type="checkbox"/> Immigrant services   |
|  | <input type="checkbox"/> Other (please specify)   |

5. *Prior* to Hurricane Sandy, what was your organization's MOST IMPORTANT contribution? (Choose *one*. Please pick one from the list of those selected in Question 4 and write it here.)

---

6. *Since Hurricane* Sandy, what disaster recovery services has your organization provided (if any)? (Select all that apply.)

- |  |   |
|--|---|
| <input type="checkbox"/> Animal services   | <input type="checkbox"/> Preparing community members for the next disaster                              |
| <input type="checkbox"/> Job and unemployment assistance   | <input type="checkbox"/> Family violence (e.g., domestic violence, child abuse, interpersonal violence) |
| <input type="checkbox"/> Case management, information, or referral services (e.g., assistance with benefits) | <input type="checkbox"/> Senior services  |
| <input type="checkbox"/> Legal, insurance, or mediation services   | <input type="checkbox"/> Financial assistance, including referrals for financial assistance             |
| <input type="checkbox"/> Child services—child care, other child support                                      | <input type="checkbox"/> Spiritual support  |
| <input type="checkbox"/> Medical care  | <input type="checkbox"/> Food services  |
| <input type="checkbox"/> Clothing  | <input type="checkbox"/> Transportation   |
| <input type="checkbox"/> Medication or pharmacy  | <input type="checkbox"/> Home care services   |
| <input type="checkbox"/> Community liaison (e.g., representing community needs or interests)                 | <input type="checkbox"/> Volunteer opportunities  |
| <input type="checkbox"/> Mental health or counseling   | <input type="checkbox"/> Housing (temporary or permanent)   |
| <input type="checkbox"/> Construction or infrastructure development  | <input type="checkbox"/> Warehousing (e.g., storing food, clothes, and other goods)                     |
|  | <input type="checkbox"/> Immigrant services   |
|  | <input type="checkbox"/> Other (please specify)   |

7. *Since Hurricane* Sandy, what is the MOST IMPORTANT disaster recovery service your *organization* provides? (Choose one. Please pick one from the list of those selected in Question 6 and write it here.) \_\_\_\_\_

8. Will *your* organization continue to provide the same level of recovery services over the next 12 months? (Select one and please take your best guess.)

- Yes, we will continue providing all the same recovery services we are now.
- No, we will only be able to provide some of the same recovery services because of funding.
- No, we will only provide some of the same recovery services because our community needs have changed.
- No, we will only be able to provide very few recovery services or will not be able to provide any recovery services because of funding.
- No, we will only be able to provide very few recovery services or will not be able to provide any recovery services because our community needs have changed.
- No, we will not be able to continue providing any recovery services.

9. If in the previous question you indicated that you would be able to provide fewer services, why *do* you anticipate this change? (Select all that apply.)
- Lack of funding
  - Community needs have changed
  - Other

### *Partnership Questions*

10. Since Hurricane Sandy occurred, what organizations or agencies have you worked most closely with on recovery from Hurricane Sandy?
- *List up to 25 organizations. If you worked with more than 25 organizations, list the 25 you worked most closely with.*

“Worked closely with” means that your organization has **partnered** to plan, rebuild, offer joint services, or serve as a primary referral or information source. “Worked closely with” does not mean you have seen their website, you serve similar clients, or you have attended meetings with or know organizational staff.

These partners might include nongovernmental organizations (e.g., churches, nonprofits), government (i.e., local, state, federal), or businesses. Includes partners that you worked closely with prior to the hurricane, as well as partners that are new relationships since the hurricane. Please list the full, formal organization or name. If you are listing a program, please include the organization of which the program is a part.

- *You will then be asked to answer Questions 11–19 about each partner.*

11. When did this recovery partnership form? (Select one.)
- Prior to Hurricane Sandy
  - During response to Hurricane Sandy (first month of response after Sandy)
  - In early Hurricane Sandy recovery efforts (2–6 months following Hurricane Sandy)
  - In recent Hurricane Sandy recovery efforts (7 months following Hurricane Sandy to present)
12. *Which* description below best characterizes your partnership with this organization? (Select all that apply.)
- Shared mostly information or clients
  - Engaged in cooperative activities (e.g., worked with them as part of a larger partnership to rebuild our community)
  - Engaged in coordinated activities (e.g., provided joint services)
  - Engaged in integrated activities (e.g., have a formal memorandum of understanding (MOU) or memorandum of agreement (MOA) to share staff, funding, or other resources)

13. For *each* partner, please indicate whether you are still working with them on Hurricane Sandy recovery activities. (Select one for each organization.)
- My organization no longer works with this organization.
  - My organization still occasionally works with this organization.
  - My organization still works regularly with this organization.
14. How much power or influence (e.g., decisionmaking authority, leadership responsibility) do you *think* this organization has over Hurricane Sandy recovery activities? (Select one, and please take your best guess.)
- None at all
  - A small amount
  - A fair amount
  - A great deal
15. How involved is this organization in Hurricane Sandy recovery activities? (Select one.)
- None at all
  - A small amount
  - A fair amount
  - A great deal
16. To *what* degree has this organization contributed resources to Hurricane Sandy recovery activities? (Select one.)
- None at all
  - A small amount
  - A fair amount
  - A great deal
17. To *what* degree has this organization been reliable in providing Hurricane Sandy recovery activities? (Select one.)
- None at all
  - A small amount
  - A fair amount
  - A great deal
18. To what degree is this organization's communication open and transparent (i.e., their *purpose*, and what they intend to do, is clear) about Hurricane Sandy recovery activities? (Select one.)
- None at all
  - A small amount
  - A fair amount
  - A great deal

19. About how frequently have you communicated with this organization about Hurricane Sandy *recovery* activities in the past year? (Select one.)
- Less than monthly
  - Monthly
  - Weekly
  - Daily

***Organization Questions***

20. What geographic area(s) does your organization serve? (Select all that apply.)

- All of New York City
- All of Manhattan
- Part of Manhattan
- All of the Bronx
- Part of the Bronx
- All of Brooklyn
- Part of Brooklyn
- All of Queens
- Part of Queens
- All of Staten Island
- Part of Staten Island

21. If you reported that you deliver services in one of the boroughs, can you tell us more specifically which neighborhoods you service?

---

As a reference, we've included a list of neighborhoods in each borough (to see a list of all the neighborhoods in each borough, copy and paste this link into a new window: <http://tinyurl.com/NYClis>).

22. Are disaster recovery services part of your organization's primary mission? (Select one.)

- Yes.
- No, but they are part of our emergency plan to respond to a disaster.
- No, but we provided disaster recovery services after Hurricane Sandy because the population we serve was severely affected.

### *Role of Local Health Department Questions*

23. In the past year, has your organization worked with the New York City Department of Health and Mental Hygiene (NYCDOHMH) on any recovery activities? (Select all that apply)

- Continuity planning or disaster planning
- Coordinated training or education on disaster recovery with NYCDOHMH
- My organization has not worked with NYCDOHMH on any recovery activities
- Organized points of dispensing (PODs) with NYCDOHMH
- Promoted or disseminated NYCDOHMH disaster recovery information to our community constituents or clients
- Provided information on community recovery to NYCDOHMH
- Received disaster recovery supplies from NYCDOHMH (e.g., N-95 masks)
- Received training on disaster recovery from NYCDOHMH
- Represented my community's recovery needs or interests
- Reviewed NYCDOHMH emergency plans
- Served on a NYCDOHMH committee on recovery-related issues
- Worked with NYCDOHMH to build organizational capacity to reach vulnerable populations
- Other

24. What benefits have you or your organization received as a result of working with NYCDOHMH during Hurricane Sandy recovery? (Select all that apply.)

- |   |  |
|---|--|
| <input type="checkbox"/> Additional funding   | <input type="checkbox"/> Stronger relationships with large recovery organizations  |
| <input type="checkbox"/> NYCDOHMH plans better reflect my organization and community                | <input type="checkbox"/> More resources, such as N-95 masks, electric heaters, or blankets   |
| <input type="checkbox"/> Improved communication with government agencies and other first responders | <input type="checkbox"/> Other (please specify)  |
| <input type="checkbox"/> Stronger relationships with community-based organizations                  | <input type="checkbox"/> More training or information to build the recovery capacity of my organization (e.g., get recovery financing) |
| <input type="checkbox"/> Information about how to improve emergency plans for my organization       | <input type="checkbox"/> New information on disaster recovery (e.g., where recovery activities are occurring)                          |
| <input type="checkbox"/> Stronger relationships with government organizations                       | <input type="checkbox"/> No benefits   |
| <input type="checkbox"/> More input on community emergency plans                                    |  |

25. How much do you agree with the following statement: My organization needs a strong relationship with the NYC Department of Health and Mental Hygiene to promote recovery from Hurricane Sandy in my community. (Select one.)
- Not at all
  - A little bit
  - Quite a bit
  - Very much

### ***Organization Questions***

26. Does your organization participate in any long-term recovery committee or other community-wide recovery partnership? (Select all that apply.) *A recovery partnership is a group of different organizations coming together to plan for recovery at a broader neighborhood or community level.*
- A long-term recovery committee/group
  - An unmet needs committee
  - A recovery coalition or collaborative
  - Other (please specify)
  - No, we do not participate in any recovery committees or partnerships
27. To what extent did your membership in a long-term recovery committee/group or community-wide recovery partnership contribute to your organization's ability to impact recovery? (Select one)
- Not at all; my organization could have done it regardless of their participation
  - A small amount
  - A fair amount
  - A great deal; my organization could not have done it without the support of partners
28. What benefits have you or your organization received as a result of your participation in the long-term recovery committee/group or community-wide recovery partnership? (Select all that apply.)
- Allowed our community to leverage additional recovery resources (e.g., funding, skilled volunteers)
  - Increased my organization's access to key recovery resources (e.g., funding, skilled volunteers)
  - Better prepared for the next disaster
  - More training, consultation, or information to build the recovery capacity of my organization
  - Improved access to updated information on recovery services, activities, or progress
  - Other (please specify)
  - Improved communication between my organization and other participating organizations
  - No benefits

29. In your opinion, what has been the impact of the recovery services provided by your organization and your partners? (Select all that apply.)

- Engaged community leadership in recovery activities
- Expanded/established a local community emergency response team
- Helped rebuild damaged houses or infrastructure
- Helped with broader community development (e.g., resilience, sustainability)
- Identified needs of affected residents
- Informed the media on recovery progress or activities
- Physically assisted with mold cleanup
- Provided education on mold
- Provided medical care to residents
- Provided resources for mold cleanup
- Shared community information with the recovery services contractors
- Shared important recovery information with residents in the community
- Supported residents emotionally
- Supported residents financially
- Other

30. In your organization's view, what is the greatest barrier to recovery from Hurricane Sandy?

- Lack of adherence to or use of preestablished plans to guide disaster operations
- Lack of communication between official government responders and grassroots organizations
- Lack of financing for disaster recovery services
- Lack of preestablished plans to guide disaster operations
- Lack of preestablished relationships between trusted grassroots organizations and disaster response organizations
- Lack of trust between community residents and disaster response organizations
- Political interference in recovery operations
- Other
- None

31. Which of the following factors have facilitated your recovery *partnerships*? (Select all that apply.)

- Funding from state and federal sources
- Funding from NYCDOHMH
- History of collaboration and sharing with recovery partners
- Policy or funding guidance required us to work together
- Prior disaster experience of organizations in the community
- Recovery activities align with organizational missions
- Shared interest in rebuilding the community
- Strong organizational leadership (e.g., able to resolve conflicts)
- Other
- None

32. Which of the following factors have been barriers to your recovery *partnerships*? (Select all that apply.)

- Competition among the organizations involved in recovery
- Difficult to find time to cultivate recovery partnerships
- Funding limitations
- Lack of trust between my organization and our recovery partners
- Policy made it difficult to work together
- Poor leadership (e.g., does not resolve conflicts, not organized)
- Other
- None

33. What resources would help to improve your recovery partnerships? (Select all that apply.)

- Funding
- Guidance on what to look for in partnerships
- Guidance on where recovery resources are available in my community (e.g., GIS maps)
- Strategies on how to work with government agencies
- Templates for putting together MOUs/MOAs
- Other
- None

34. How many full-time employees does your organization have?

\_\_\_\_\_

*Question to Generate a Larger Sample*

35. We would like to ask the partners you listed earlier in this survey the same questions we asked you in this survey. Please share their contact information in the spaces below. If you have any questions or prefer to share this information directly with us over the phone, please click the “Contact me” button below. Individuals who share information about partners will be entered into a raffle to win a \$500 gift card to Target.

Repeat for all partner organizations from Question 9.

<b>Organization</b>	<b>Key Contact Name</b>	<b>Key Contact Email</b>

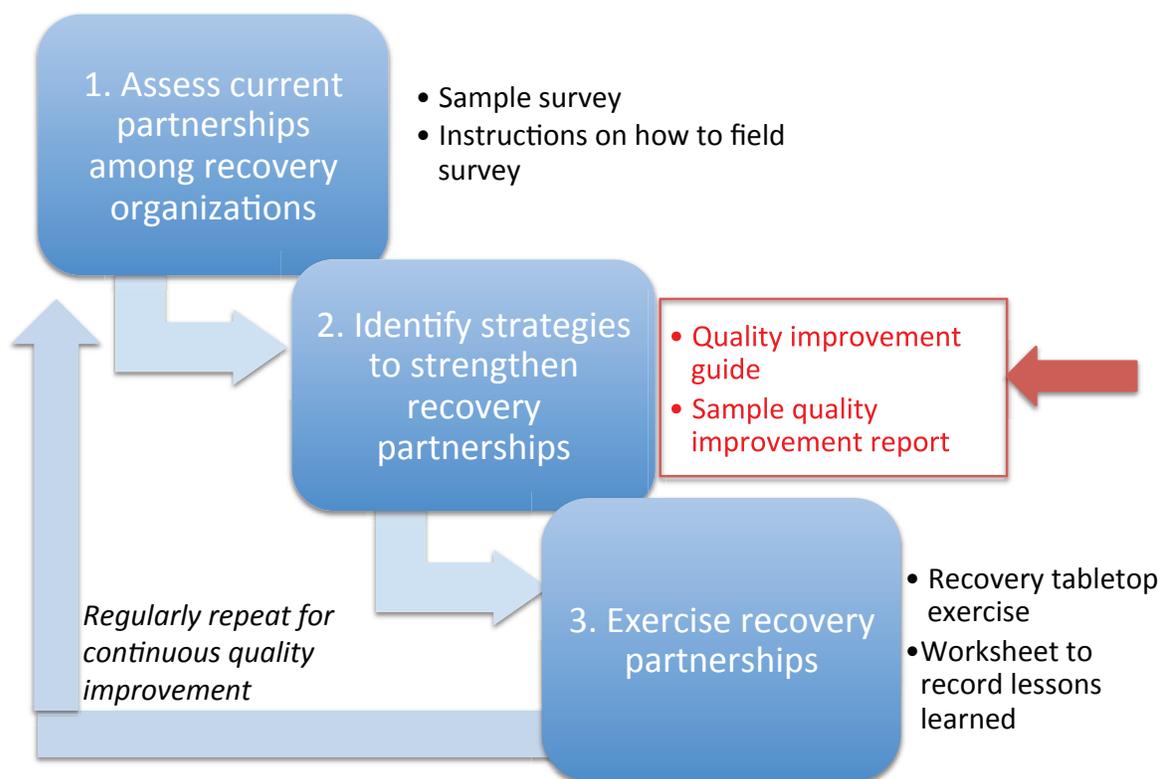
## Chapter 3: Tools to Identify Strategies to Strengthen Recovery Partnerships

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Quality improvement consists of systematic and continuous actions to improve the effectiveness and efficiency of an organization or group of organizations. This chapter contains two tools to identify strategies to strengthen recovery partnerships (Figure 3.1):

- A how-to guide to creating a report that will allow users to conduct quality improvement using the PARTNER survey data. This guide describes how to use the data from the partnership survey to understand and improve recovery partnerships. This includes recommendations for presenting survey data in user-friendly figures and tables, as well as specific questions to prompt discussion about opportunities and areas for improvement.
- A sample quality improvement report based on an analysis of organization partnerships formed during recovery from Hurricane Sandy in New York City.

**Figure 3.1. Components of the PRACTIS Toolkit**



By building on partnership survey data, the quality improvement process is intended to provide LHDs with a picture of what partnerships they currently have with community

organizations, where they have stronger partnerships, and where partnerships can be improved to support long-term recovery after disaster.

LHDs need to implement an organizational partnership survey and analyze the data (using these tools in the PRACTIS toolkit) before engaging in quality improvement. After creating a quality improvement report, users should assemble a team of LHD colleagues and CBO partners to review the report and answer the quality improvement discussion questions. This may be most easily done during a group meeting.

## Quality Improvement Guide

This guide describes how to organize the survey questions into a quality improvement report. The quality improvement report should contain an overview of the survey, which describes the survey time frame and participants and four sections summarizing survey findings:

1. a description of community recovery services
2. a summary of community partnership functions and outcomes
3. an overview of LHD partnerships and associated benefits
4. a description of how lack of partnerships compares with other recovery barriers.

This chapter reviews the type of questions that should be covered in each section, references specific survey questions from the sample PARTNER survey (Chapter 2), describes why each type of question is important, and provides a series of reflection questions to help users interpret and apply the data to quality improvement of LHD activities.

Two icons help users navigate the guide:

- ★ identifies specific survey questions that should be presented in each section of the quality improvement report.
- ❓ identifies the questions that help LHDs and community partners interpret survey data. These question numbers refer to the questions in the sample PARTNER survey (Chapter 2).

## Survey Overview

This section should include a summary of the survey time frame and survey participants.

- ★ Survey questions: Q1–Q5

### *Time Frame*

Report the date that the survey was fielded and the time frame that the survey asked about (e.g., recovery over the past year or recovery over the past month).

## Participants

Specifically, report the following information:

- how survey participants were identified
- the total number of individuals that were recruited to participate in the survey and the total number that responded to the survey
- the total number of organizations represented by these individuals (as some organizations may have more than one individual completing the survey)
- the total number of partnerships.

These data are important because they provide users of the quality improvement report with details about the scope and scale of the organizational survey. Users will employ this information to determine how well the organizational survey captured the recovery network in the community.

## Survey Findings

### *Section 1: Community Recovery Services*

This section should include

- whether organizations provided recovery services
- what types of services were provided
- the roles and missions of community organizations in disaster response and recovery.

★ Survey questions: Q6–Q9, Q22

These data are important to consider because determining the type and amount of recovery services that are currently being offered (or that are planned for the following year) can help identify key gaps in services. For example, a gap that could be identified using these data is that there are not enough organizations offering mental health or counseling to meet the needs of the disaster-affected population.

? Use the following questions when discussing the data with LHD staff and community partners:

- 1.1. Look at the types of recovery services offered pre- and postdisaster.
  - How did services offered by recovery organizations change? Are the services provided postdisaster sufficient to meet the needs of the community?
  - How many said that they plan to continue providing services? Is that sufficient to meet the ongoing needs? If yes, how can those services be leveraged for the most benefit? If no, how can gaps in services be addressed?
- 1.2. How many organizations in your network have disaster recovery as part of their mission? Does this percentage meet the needs observed during and after disaster? Where are there gaps for the future?

## Section 2. Community Partnerships Function and Outcomes

This section should include

- the number of recovery partnerships and the function of those partnerships
- when partnerships were formed and whether they were maintained over time through recovery
- the facilitators and barriers to developing successful partnerships
- the resources needed to improve partnerships.

★ Survey questions: Q10, Q31–Q33

This section should also include information on long-term recovery committees (LTRC), a common type of community recovery partnership. Specifically, include summary data on

- how many organizations participated in LTRCs
- whether membership in LTRCs contributed to organizations' ability to impact recovery
- perceived benefits of participating in a LTRC
- whether participating in a LTRC improves perceptions of partnership success

★ Survey questions: Q26–Q29

These data are important because they provide users with a summary of the reach and function of partnerships. Together, these data begin to describe why partnerships may be important for recovery. The data on facilitators and barriers to partnership and resources needed to improve partnerships provide actionable areas to address if LHDs determine that certain supports or steps are needed to support or maintain partnerships. These data also provide insight into the role of LTRCs.

🔍 Use the following questions when discussing the data with LHD staff and community partners:

- 2.1. Look at the function of recovery partnerships. Are there enough organizations partnering on key functions to adequately meet recovery needs? What might the LHD do to address any gaps in partnerships for each function?
  - Information exchange is the least formal way that organizations can collaborate. Shared staff, services, or resources via a formal MOA/MOU are the most formal ways that organizations can collaborate. Are there enough formal partnerships to adequately meet recovery needs? How about informal partnerships? What might the LHD do to address any gaps in formal or informal partnerships?
- 2.2. Look at the organizational partnerships that started before the disaster and those that started after. Is there a difference in function of these partnerships? What might the LHD do differently in the future to better support needed partnerships?
- 2.3. Look at the barriers and facilitators to partnerships and the resources needed to improve partnerships. Are there any that the LHD could help to address or support?

- 2.4. To what extent is participating in long-term recovery committees (LTRCs) linked to perceived impacts of partnering by organizations in these neighborhoods? If so, how might the LHD help community organizations participate in LTRCs?

### ***Section 3: LHD Partnerships, Quality, and Associated Benefits***

This section should include

- the types of recovery services delivered by recovery organizations that have partnerships with their LHD
- the degree to which recovery organizations feel they need a strong relationship with their LHD to promote disaster recovery
- the types of recovery activities that organizations have done in partnership with their LHD
- organizations' perceived benefits of working with their LHD
- the extent to which having a partnership with their LHD aides in an organization's recovery mission
- perceived benefits of working with a LHD

★ Survey questions: Q23–Q25

These data are important because they provide feedback to LHDs about whether recovery organizations value their partnership and why their partnership may be valuable. Conversely, these data provide insight to LHDs about how to improve relationships with community recovery organizations.

? Use the following questions when discussing the data with LHD staff and community partners:

- 3.1. What perception do partners have of the LHD and the importance of partnerships?
  - Can those perceptions be improved? Are they already high? What can the LHD do to increase the way it is perceived as a partner?
- 3.2. Among the benefits identified in working with the LHD, is anything surprising? How would you support continuation of these benefits? Are there any that were not identified that the LHD can work to improve?
- 3.3. Are there specific supports that the LHD can provide partner organizations to build recovery capacity better?

### ***Section 4: How a Lack of Partnerships Compares with Other Recovery Barriers***

This section contains summary data on the barriers to overall community recovery.

★ Survey questions: Q30

Understanding how barriers related to partnerships (e.g., lack of preestablished relationships between trusted grassroots organizations and disaster response organizations) are associated with barriers to disaster recovery (e.g., lack of financing for disaster recovery services) will help LHDs determine which activities to prioritize to improve partnerships.



Use the following questions when discussing the data with LHD staff and community partners:

- 4.1. How impactful are the barriers most related to partnerships?
- 4.2. Which barriers may be addressed by improving partnerships among community recovery organizations?
- 4.3. Which barriers may be addressed by improving LHD-community organization partnerships?

## Sample Quality Improvement Report on Hurricane Sandy Recovery Partnerships in New York City

### *Survey Overview*

In May 2014, 292 organizations answered questions about their relationships with other groups engaged in recovery efforts in New York City. We recruited all of the organizations that participated in recovery in the New York City Advanced Warning System (N = 820), a system that allows organizations to enter information into an interface for hazard and emergency information distribution. To examine the change in recovery partnerships, we assessed the number of organizational ties and the nature and quality of those partnerships.

### *Time Frame*

We assessed how partnerships and recovery services varied over time from before Hurricane Sandy to one year after.

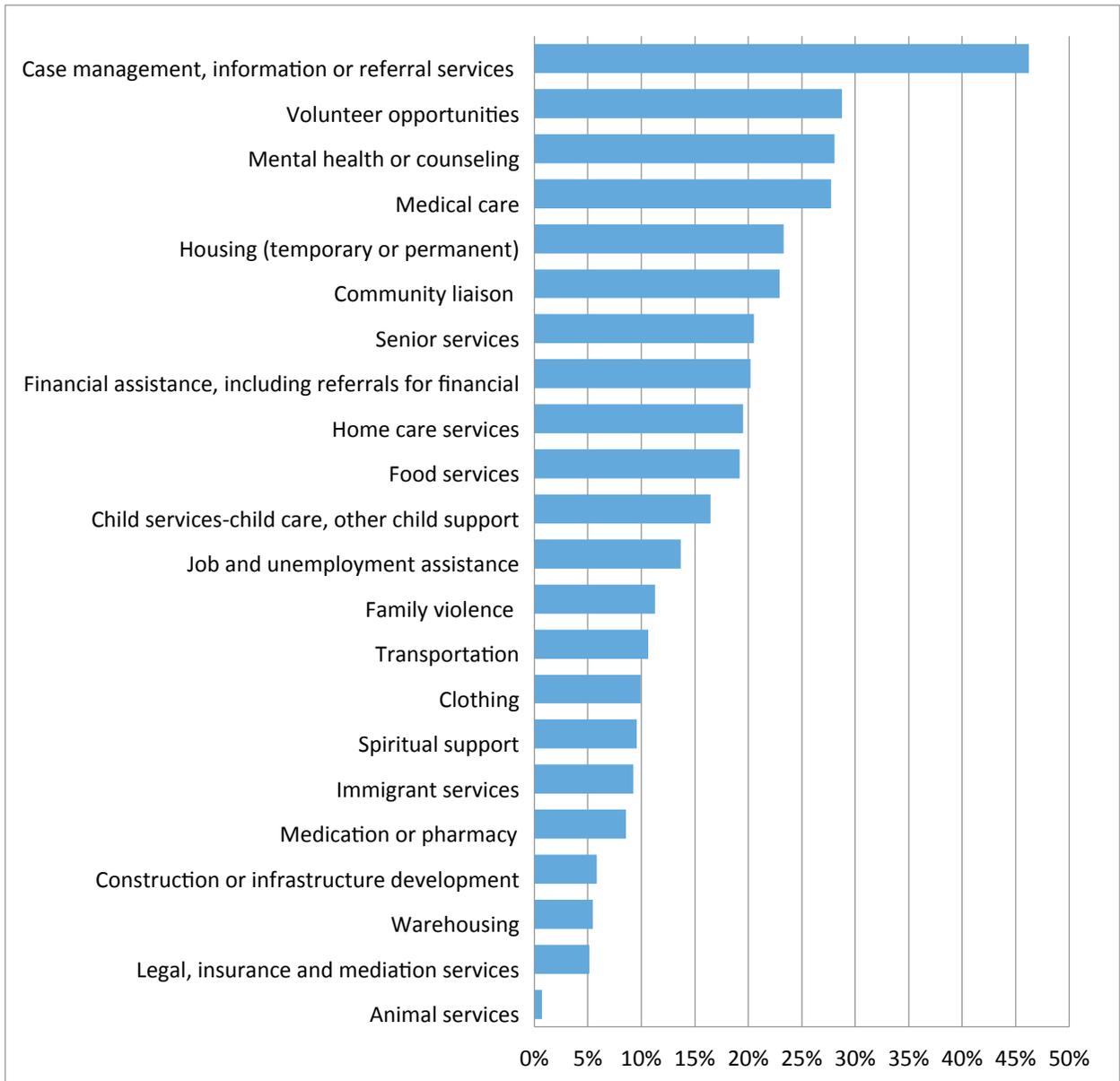
### *Participating Recovery Organizations*

In total, survey findings are based on 292 respondents. These respondents collectively described 481 partnerships (i.e., one organization reported working with another organization during recovery). A total of 547 different organizations were identified, either as respondents or as partners of those respondents.

### What geographic areas do recovery organizations serve?

- 37 percent said they provide services in all of New York City.
- 11 percent said they provide services in all of Staten Island.
  - 7% said they provide services in part of Staten Island.
- 13 percent said they provide services in all of Queens.
  - 13 percent said they provide services in part of Queens.
- 18 percent said they provide services in all of Brooklyn.
  - 11 percent said they provide services in part of Brooklyn.
- 17 percent said they provide services in all of the Bronx.
  - 10 percent said they provide services in part of the Bronx.
- 12 percent said they provide services in all of Manhattan.
  - 15 percent said they provide services in part of Manhattan.

## What services did recovery organizations provide prior to Hurricane Sandy?



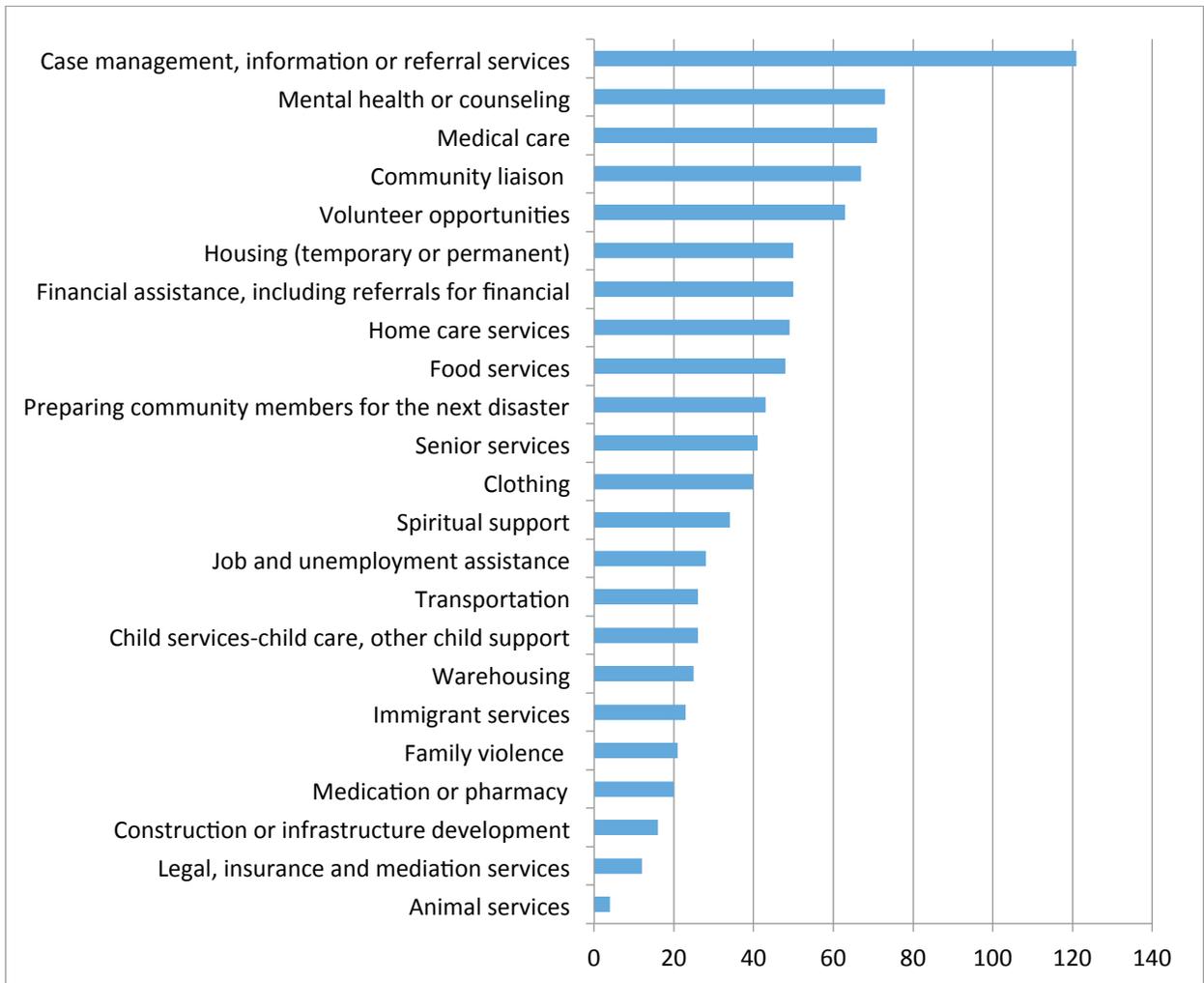
*NOTE: Not reported in table: Other, 28 percent.*

## Survey Findings

### Section 1: Community Recovery Services

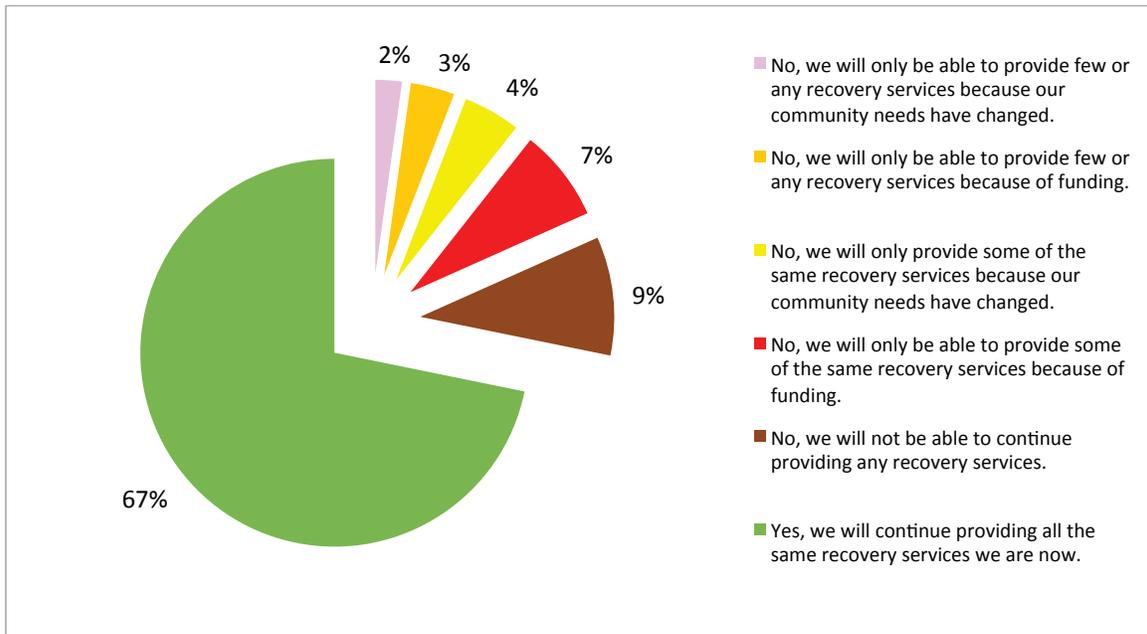
This section includes summary data on whether organizations have been providing recovery services and what types of services have been provided. This section also includes information about the roles and missions of community organizations in disaster response and recovery.

What services were provided by organizations during Hurricane Sandy recovery?



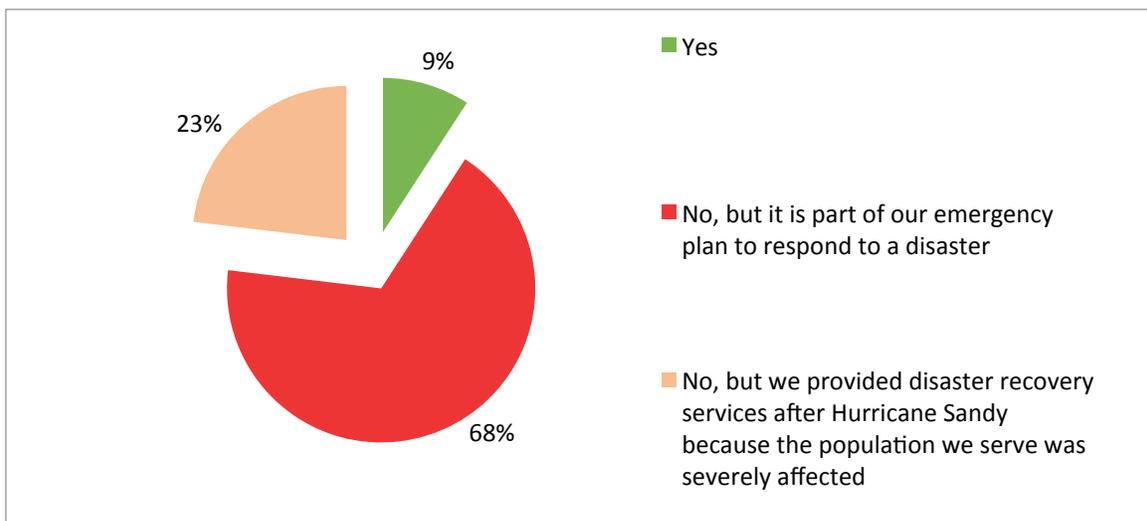
*NOTE: Based on responses of 292 organizations. Not reported in table: Other, 64.*

How many organizations planned to continue providing the same level of recovery services over the following year (at the time of the survey)?



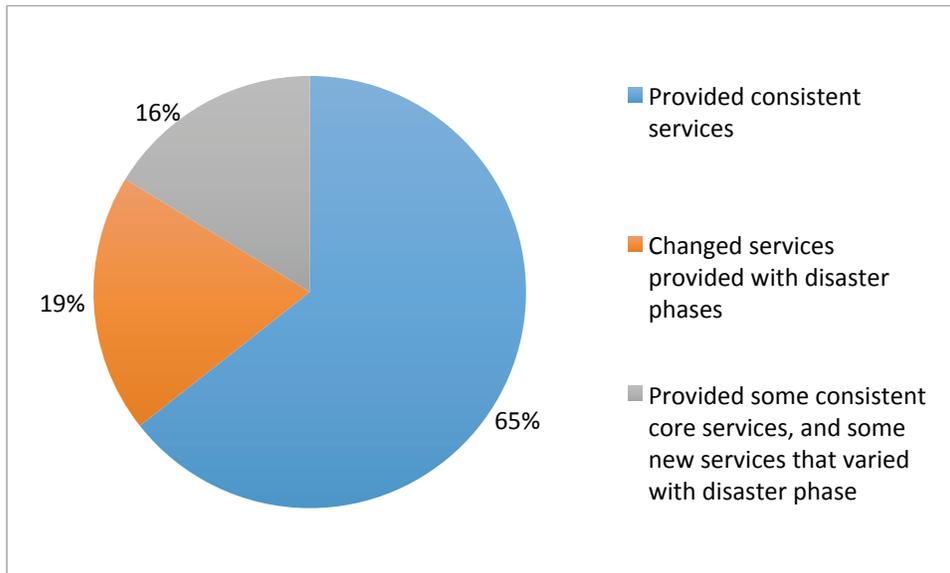
NOTE: Based on responses of 292 organizations.

Is disaster recovery a part of the primary organizational mission of recovery organizations?



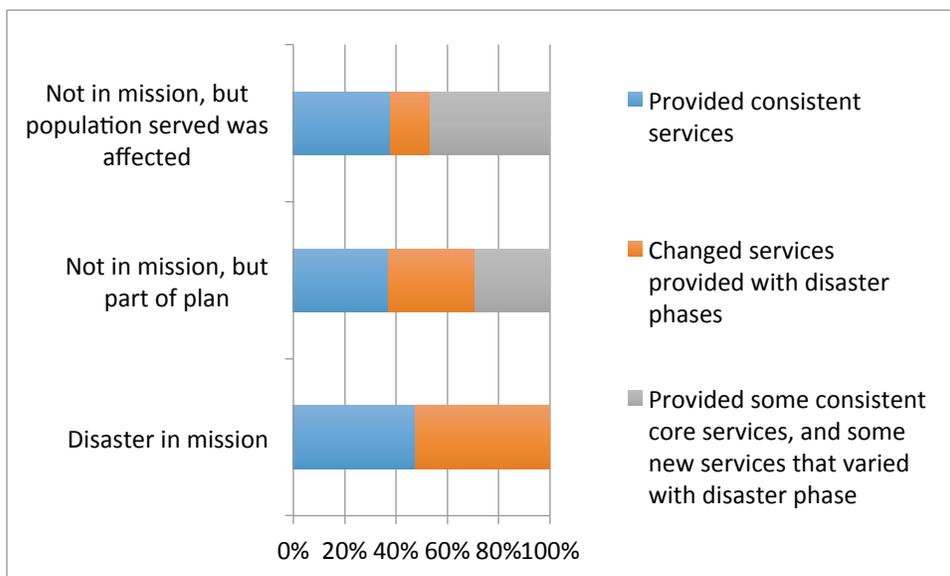
NOTE: Based on responses of 292 organizations.

Did organizations provide a core set of services or adapt services to meet the needs during disaster response and recovery?



NOTE: Based on responses of 292 organizations.

Is having recovery as part of the organizational mission linked to whether organizations provide a consistent set of services during disaster response and recovery?



NOTE: Based on responses of 292 organizations.

## Discussion Questions

After reviewing the summary data described above, consider the following. You can discuss as LHD staff or in a group with community organizations.

- 1.1. Look at the types of recovery services offered pre- and postdisaster.
  - How did services offered by recovery organizations change? Are the services provided postdisaster sufficient to meet the needs of the community?
  - How many said they plan to continue providing services? Is that sufficient to meet the ongoing needs? If yes, how can those services be leveraged for the most benefit? If no, how can gaps in services be addressed?
- 1.2. How many organizations in your network have disaster recovery as part of their mission? Does this percentage meet the needs observed during and after disaster? Where are there gaps for the future?

### *Section 2. Community Partnership Function and Outcomes*

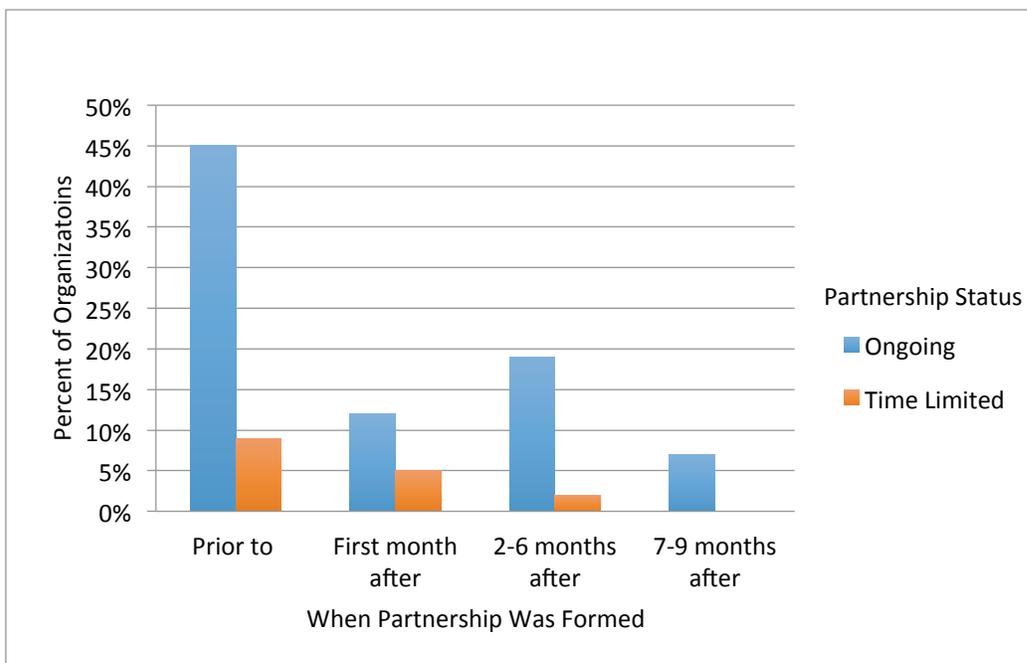
This section includes summary data on the partnerships that the LHD has with community organizations, the nature and quality of the partnerships, how those have varied over time and through recovery, and the supports for those relationships.

How many partnerships exist in this recovery network? What is the function of these partnerships?

The 292 organizations identified 468 partnerships among them. Of these, organizations reported that partnerships served the following functions:

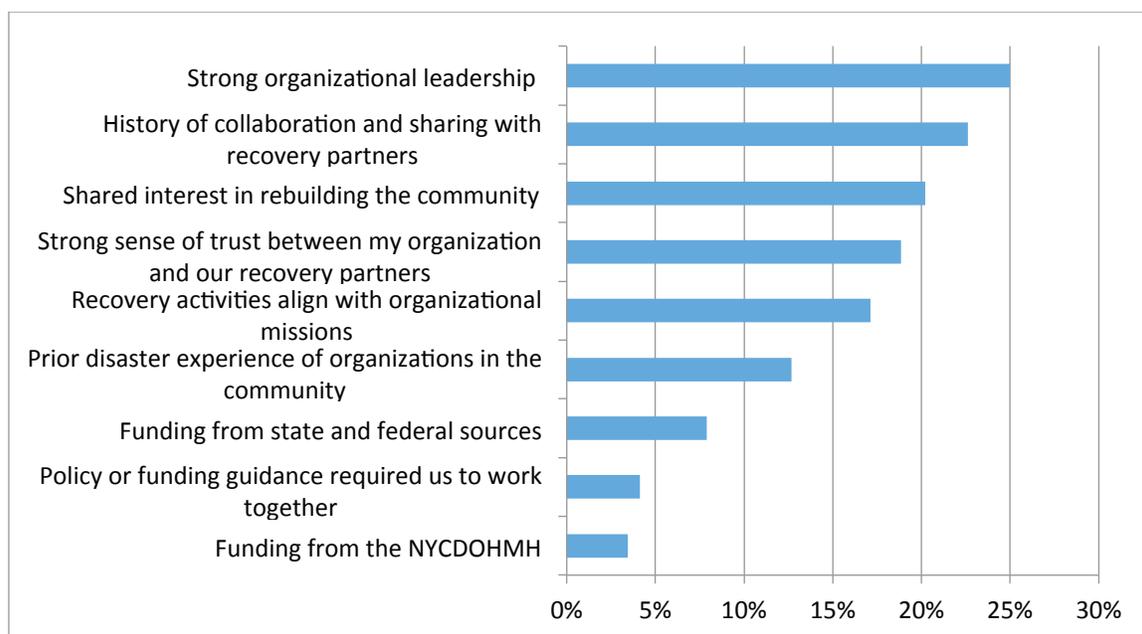
- Shared information or clients (24 percent)
- Worked with them as part of a larger partnership to rebuild our community (26 percent)
- Provided joint services (30 percent)
- Shared staff, funding, or other resources via a formal MOU/MOA (20 percent)

## When were partnerships formed, and how long were these partnerships maintained?



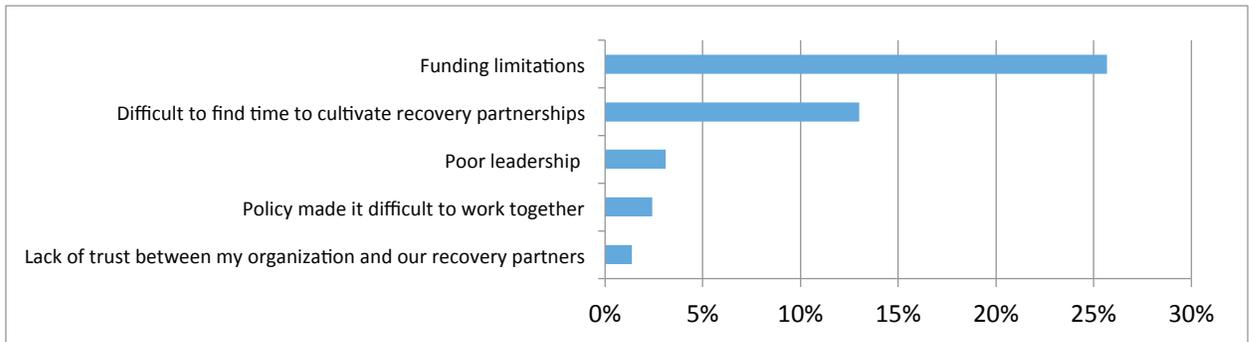
NOTES: Based on responses of 292 organizations. “When Partnership Was Formed” is gauged based on timing of Hurricane Sandy. “Time Limited” denotes that the partnership was not continuing at the time of the survey (i.e., one year after Hurricane Sandy).

## What facilitated partnership development?



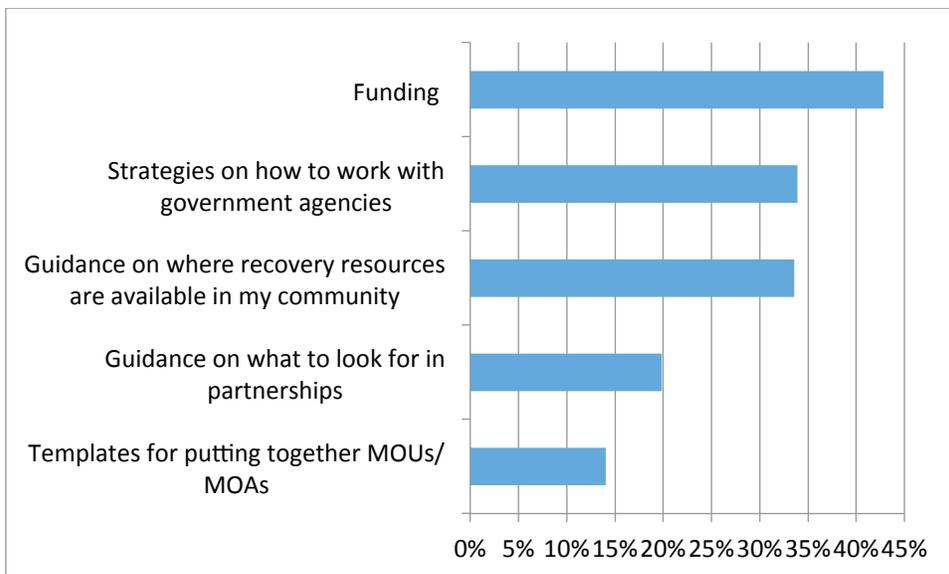
NOTE: Based on responses of 292 organizations. Not reported in table: Other, 9 percent; None, 24 percent (n=70).

### What are the barriers to developing partnerships?



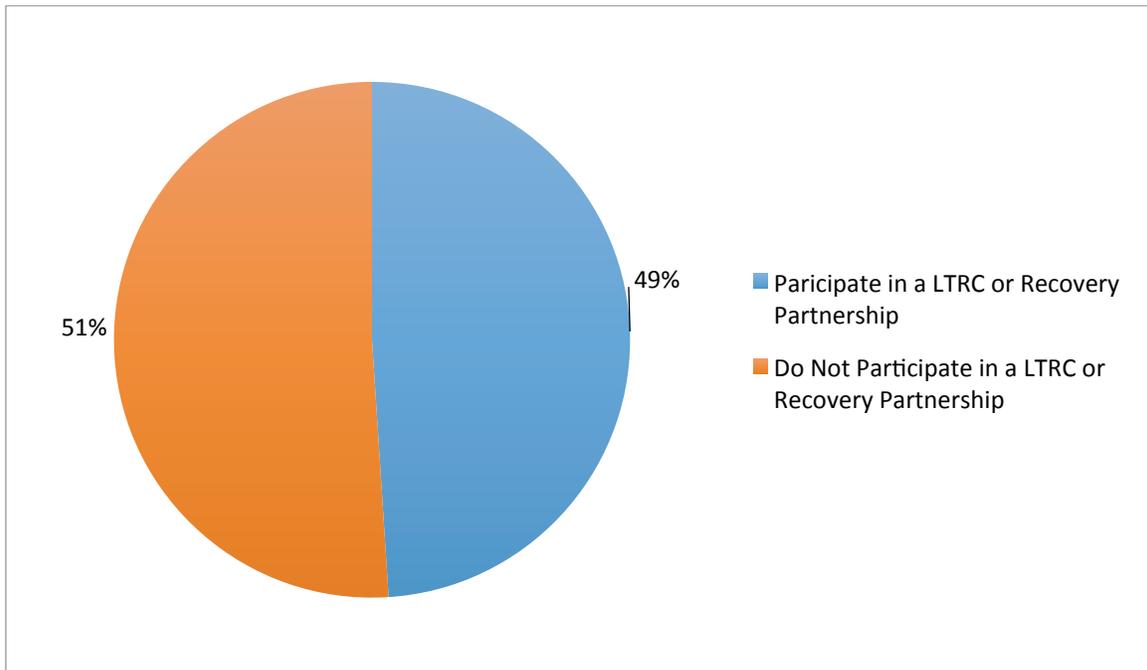
NOTES: Based on responses of 291 organizations. Not reported in table: Other, 8 percent.

### What resources would help to improve recovery partnerships?



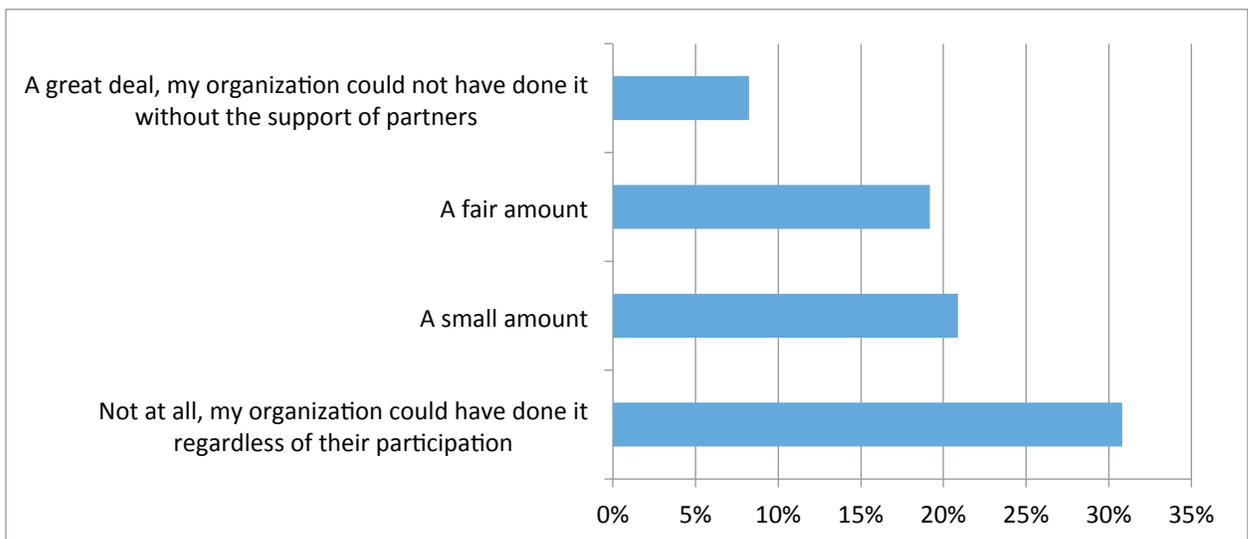
NOTES: Based on responses of 292 organizations. Not reported in table: Other, 8 percent; None, 14 percent (n=40).

How many organizations participate in a long-term recovery committee (LTRC) or other recovery partnership?



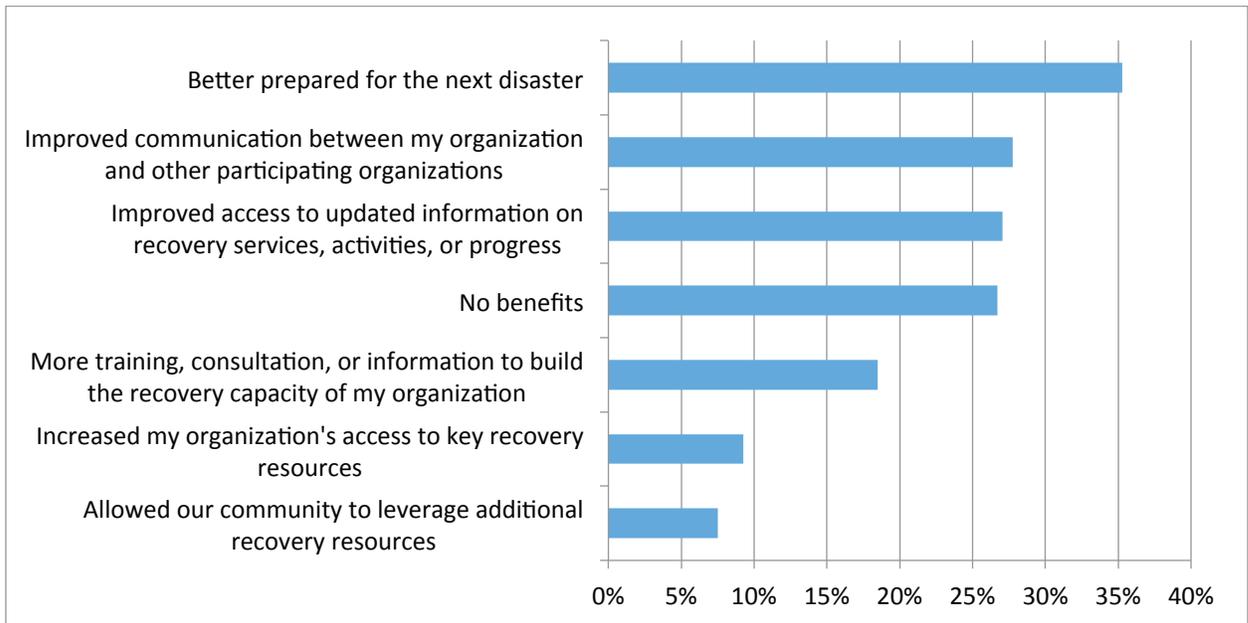
NOTE: Based on responses of 292 organizations.

Did membership in an LTRC contribute to an organization's ability to have an impact on recovery?



NOTE: Based on responses of 292 organizations.

### What are the benefits of participating in an LTRC?



NOTES: Based on responses of 292 organizations. Not reported in table: Other, 10 percent.

## Does participating in the LTRC improve organizations' contributions to community recovery?

		Participation in LTRC	
		Yes	No
<b>Perceived Contributions to Recovery</b>	Identified needs of affected residents	39%	27%
	Shared important recovery information with residents in the community	33%	12%
	Engaged community leadership in recovery activities	23%	2%
	Helped with broader community development	20%	6%
	Shared community information with the recovery services contractors	17%	1%
	Supported residents financially	16%	7%
	Informed the media on recovery progress or activities	13%	0%
	Helped rebuild damaged houses or infrastructure	11%	3%
	Provided education on mold	9%	3%
	Provided resources for mold cleanup	8%	1%
	Physically assisted with mold cleanup	7%	1%
	Expanded or established a community emergency response team	3%	1%

*NOTE: Based on responses of 292 organizations.*



### Discussion Questions

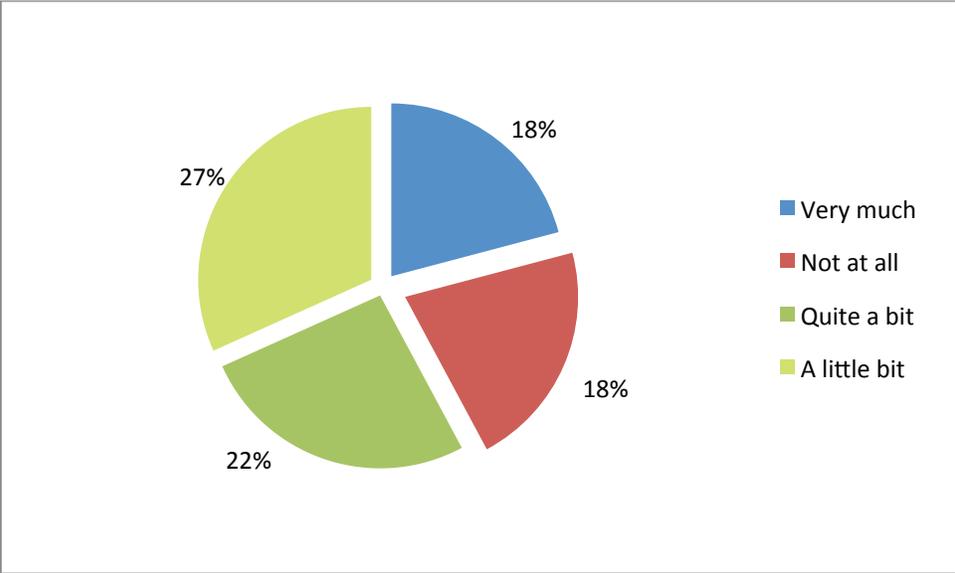
After reviewing the summary data described above, consider the following questions in your group discussion:

- 2.1. Look at the function of recovery partnerships. Are there enough organizations partnering on key functions to adequately meet recovery needs? What might DOHMH do to address any gaps in partnerships for each function?
  - Information exchange is the least formal way that organizations can collaborate. Shared staff, services, or resources via a formal MOA/MOU are the most formal ways that organizations can collaborate. Are there enough formal partnerships to adequately meet recovery needs? How about informal partnerships? What might DOHMH do to address any gaps in formal or informal partnerships?
- 2.2. Look at the organizational partnerships that started before Sandy and those that started after. Is there a difference in function of these partnerships? What might DOHMH do differently in the future to better support needed partnerships?
- 2.3. Look at the barriers and facilitators to partnerships and the resources needed to improve partnerships. Are there any that DOHMH could help to address or support?
- 2.4. To what extent is participating in LTRCs linked to perceived impacts of partnering by organizations in these neighborhoods? If so, how might DOHMH help community organizations participate in LTRCs?

**Section 3: LHD Partnerships, Quality, and Associated Benefits**

This section includes summary data on partnerships with the LHD specifically, quality of LHD partnership, the benefits of those partnerships, and whether and how the nature of partnership changes over time in the post-disaster period. This section also includes data on the *association* between partnership quality and recovery-related outcomes. It does not provide any information on causal effects or the exact role or influence of the LHD but can offer a guide for LHD planning.

To what degree do organizations feel that they need a strong relationship with NYCDOHMH to promote recovery from Hurricane Sandy?



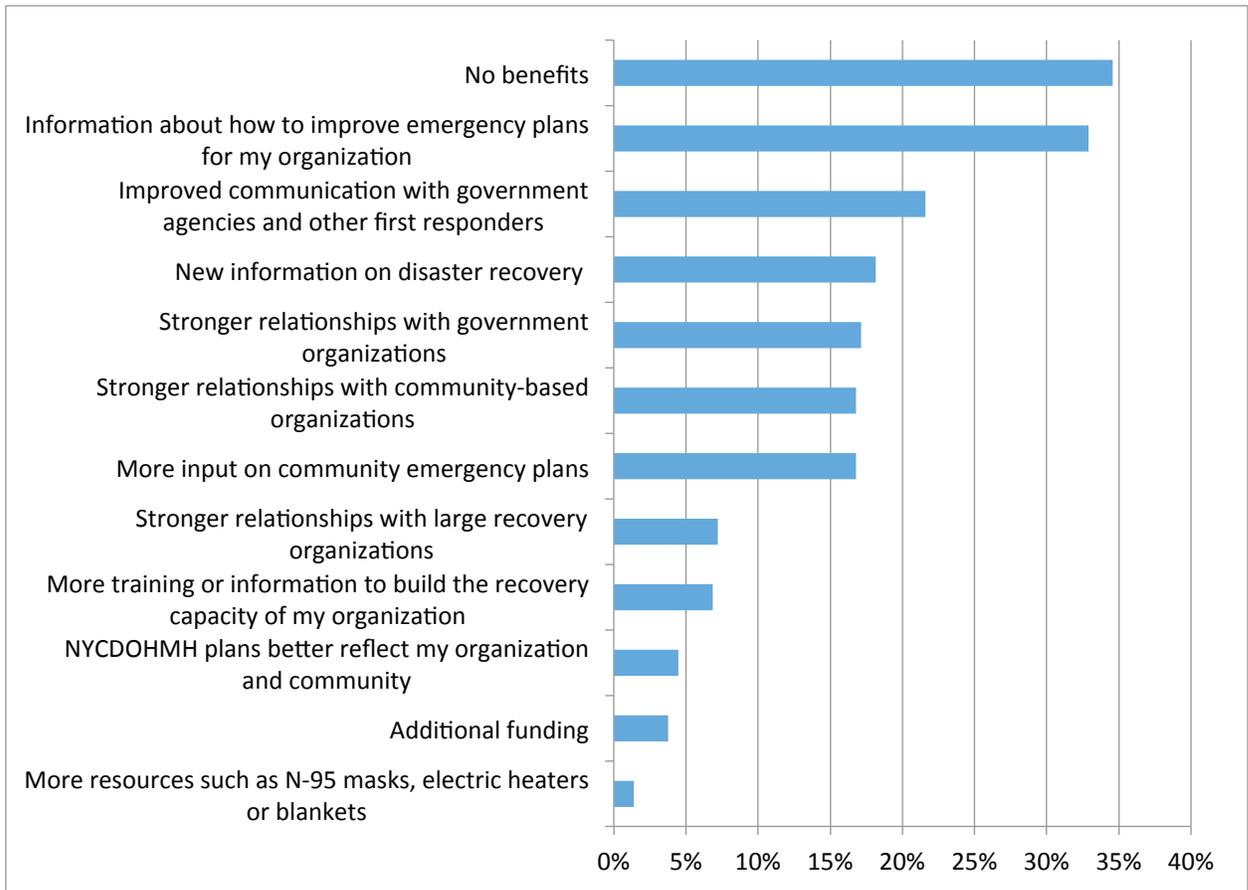
NOTE: Based on responses of 292 organizations.

In what types of recovery activities are organizations who partner with DOHMH engaged?

Type of Recovery Activity	Percentage Reported Partnering with DOHMH on Activity
Continuity planning or disaster planning	27%
Reviewing city emergency plans	19%
Planning disaster recovery training or education	13%
Representing community’s recovery needs or interests	12%
Improving capacity to reach vulnerable populations	11%
Serving on a committee on recovery-related issues	7%
Organizing PODs	3%
Gathering disaster recovery supplies	2%

NOTES: Based on responses of 272 organizations. 20 organizations reported not partnering with DOHMH on any recovery activities.

## What are the benefits of working with DOHMH?



*NOTE: Based on responses of 292 organizations.*

*For organizations that indicate a relationship with DOHMH is important, what benefits do they cite from working on recovery with DOHMH?*

Benefits of Working with DOHMH	Agreement with the following statement: My organization needs a strong relationship with DOHMH to promote recovery from Hurricane Sandy in my community.		
	Not at All	A Little Bit	Quite a Bit or Very Much
Information about how to improve emergency plans for my organization	4%	9%	20%
Stronger relationships with government organizations	1%	2%	14%
New information on disaster recovery	1%	5%	11%
Additional funding	0%	2%	2%
Improved communication with government agencies and other first responders	2%	5%	15%
More input on community emergency plans	1%	4%	12%
More resources, such as N-95 masks, electric heaters, or blankets	0%	1%	1%
More training or information to build the recovery capacity of my organization	0%	2%	5%
DOHMH plans better reflect my organization and community	0%	1%	4%
Stronger relationships with community-based organizations	1%	2%	14%
Stronger relationships with large recovery organizations	0%	1%	6%
No benefits	13%	12%	9%
<i>Total organizations</i>	18%	27%	41%

*NOTE: Based on responses of 280 organizations; 12 organizations did not answer the question about whether a strong relationship with DOHMH is needed. 98 organizations reported no benefits from partnering with DOHMH. Note that these percentages do not add up to 100 because organizations could select more than one of the benefits listed.*

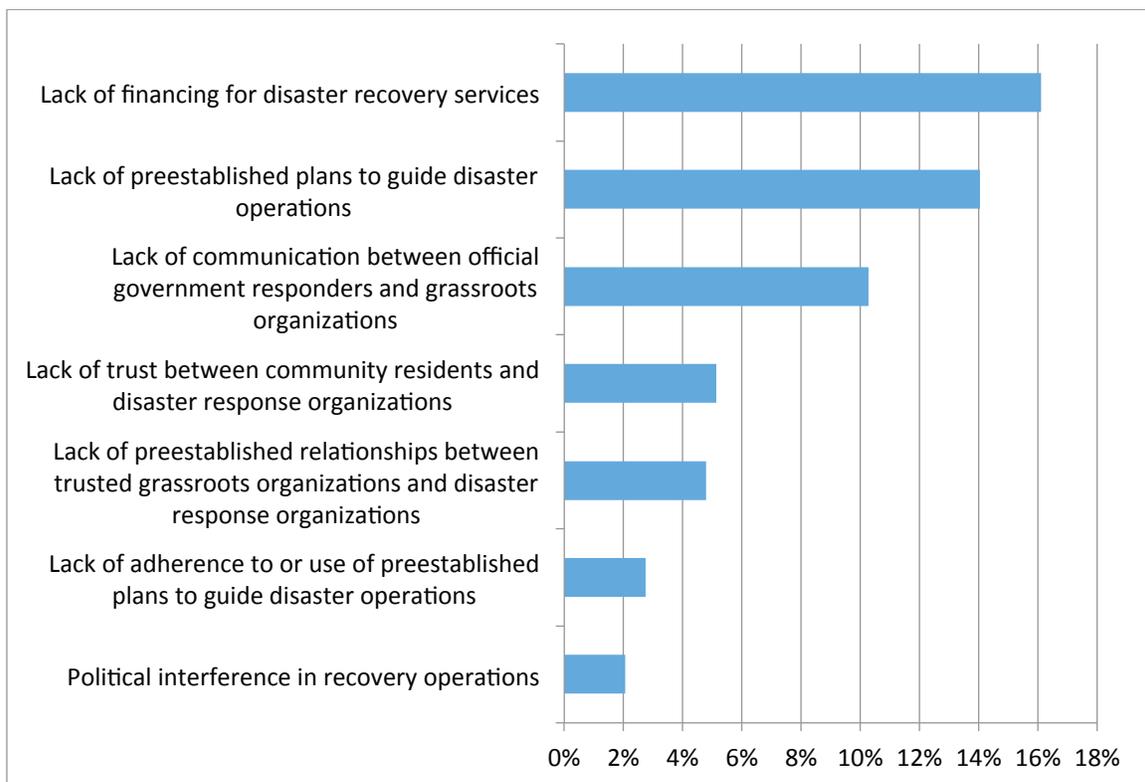
## Discussion Questions

After reviewing the summary data noted above, consider the following in your group discussion:

- 3.1. What perception do partners have of DOHMH and the importance of partnerships?
  - Can those perceptions be improved? Are they already high? What can DOHMH do to improve or maintain the way it is perceived as a partner?
- 3.2. Among the benefits identified in working with DOHMH, is anything surprising? How would you support continuation of these benefits? Are there any that were not identified that DOHMH can work to improve?
- 3.3. Are there specific supports that the DOHMH can provide partner organizations to build recovery capacity?

### *Section 4: How a Lack of Partnerships Compares with Other Recovery Barriers*

What are the greatest barriers to New York City's recovery from Hurricane Sandy?



NOTES: Based on responses of 292 organizations. Not reported in table: Other, 7 percent; None, 21% (n=61).

## Discussion Questions

After reviewing the summary data noted above, consider the following in your group discussion:

- 4.1. How impactful are the barriers most related to partnerships?
- 4.2. Which barriers may be addressed by improving partnerships among community recovery organizations?
- 4.3. Which barriers may be addressed by improving DOHMH–community organization partnerships?



## Chapter 4: Tools to Exercise Recovery Partnerships

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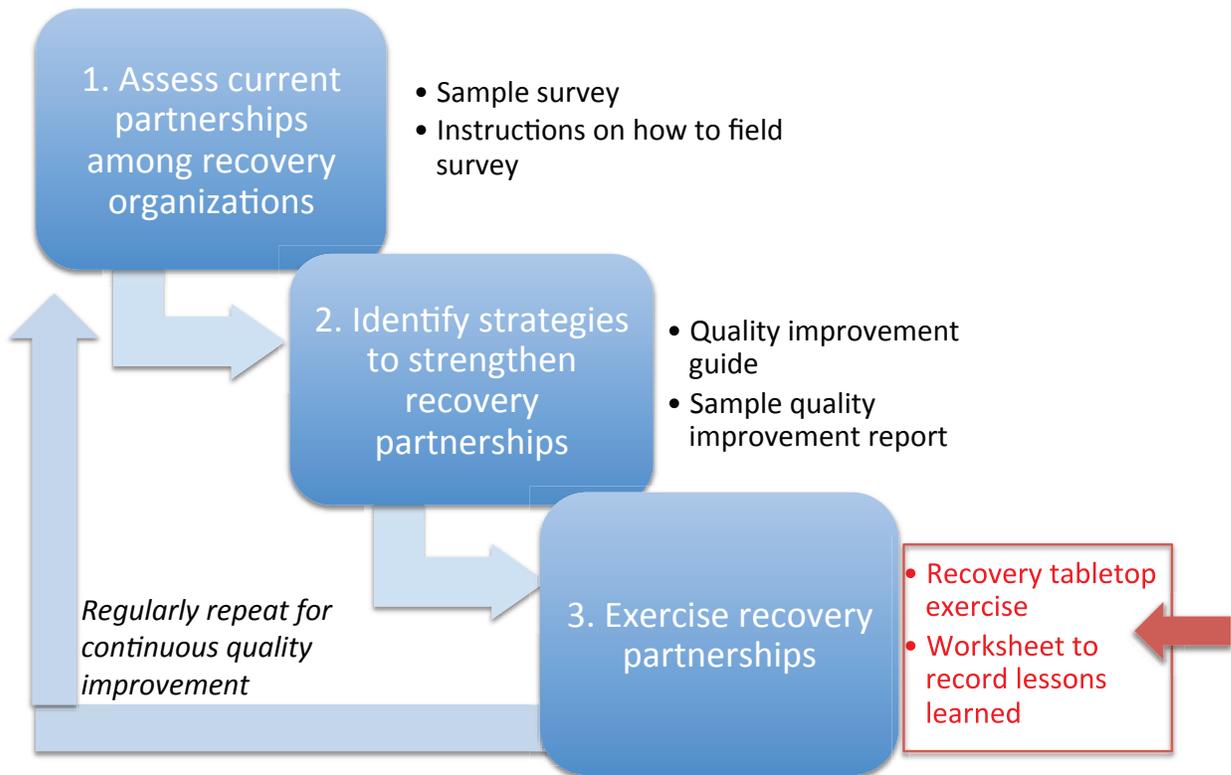
This chapter contains two tools to exercise recovery partnerships (Figure 4.1):

- A set of annotated PowerPoint slides that can be used to guide your colleagues and CBO partners through a recovery tabletop exercise (i.e., a group exercise to assess how you and your partners are preparing for disaster recovery operations). The slides are intended for a facilitator and use a hurricane as the example scenario. However, the same exercise structure can be used for any type of emergency. The tabletop exercise is designed to last two hours and assess four aspects of recovery planning: workforce, continuity of operations, transition services, and financing. Workforce relates to engagement of a wider variety of organizations as well as the capabilities and capacities they bring to recovery operations. Continuity of operations refers to essential or basic services that must be established quickly after a disaster. Transition services includes the range of health and human services that are needed to restore healthy community functioning and require robust data monitoring systems. Financing includes government and nongovernmental support in recovery.
- A worksheet to be used to document lessons learned about what is and is not working in your preparation for disaster recovery operations.

Using these tools will allow you and your CBO partners to identify strengths in your plans for disaster recovery and any remaining areas for improvement. These tools were developed as a complement to the survey and quality improvement guide, providing a qualitative complement to the more quantitative assessment using the survey. The same partners that LHDs engage in the survey are the partners that should be invited to participate in the exercise.

The tabletop is specifically intended to target elements of recovery that are most dependent on partnerships: workforce, continuity of operations, transition services, and financing. These elements emerged from a review of relevant literature and policies and a review of a sample of 62 recovery plans to identify how communities are addressing recovery and what elements they included in their recovery plans. From the literature and plans, we extracted a set of core recovery components that were then vetted by stakeholders to ensure their face and content validity. More detailed findings from this review are available from the authors by request.

**Figure 4.1. Components of the PRACTIS Toolkit**



## Annotated Slides to Facilitate Recovery Tabletop Exercise

The slide deck is intended as a facilitator guide for a recovery tabletop exercise. Notes in the text field of the slides are intended to provide instructions for the facilitator and a guiding script. A version of this tabletop exercise for resilience assessment was developed for the Los Angeles County Community Disaster Resilience Project and was successfully executed (see Chandra et al., 2015). Two scenarios were tested: an evolving heat wave and a measles outbreak. The same format is used here, though the focus is more on recovery planning.

In addition to the facilitator guide, we recommend that LHDs interested in implementing the tabletop exercise prepare for the exercise by

- sending an invitation to participate to all community partners that participated in their partnership survey
- identifying one or two LHD staff members who can serve as facilitators for the exercise (Ideally, these would be the same staff members who interact regularly with community partners on behalf of the LHD. Facilitators should review the slides in advance and modify them to better fit the context of the coalition that is participating in the exercise.

In addition, the facilitator should familiarize himself/herself with the agenda and serve as the timekeeper, keeping the exercise on schedule.)

- identifying LHD staff members that can serve as note takers for the event
- printing out the lessons learned worksheet for all participants.

After the exercise, share notes with participants that highlight key strengths and weaknesses identified, as well as the next steps for the coalition.

The exercise may generate an array of recommendations. If there is time during the exercise, the facilitator may consider leading a ranking or rating process for each recommendation to determine which are priorities. For example, the facilitator could go around the room and ask each participant to state his or her top two priorities. If additional partnership development is identified as a priority, users may wish to consult the following coalition-building resources:

- The Community Tool Box: <http://ctb.ku.edu/en/table-of-contents/assessment/promotion-strategies/start-a-coalition/main>
- The Prevention Institute's coalition-building resources: <http://www.preventioninstitute.org/component/taxonomy/term/list/97/127.html>

## Lessons Learned Worksheet

*Your Notes:*

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### *Exercise Scores*

Record your scores here.

1. Workforce: \_\_\_\_\_

1	2	3	4	5
Very few sectors that were needed in response were at the table.	A modest number of sectors are at the table, but a few key ones are not at the table.	The main sectors are at the table for the exercise.	All the right sectors are at the table.	All sectors are included and around the table.
No one had clear ideas on what each organization was supposed to do.	Some organizations knew what to do, but most did not.	Some roles and responsibilities are clear, but the group was not able to work together to coordinate.	Most roles and responsibilities are clear and worked well in the exercise.	Recovery workforce needs were well addressed.
			There are some areas for improvement.	Roles and responsibilities, including what each organization will do and provide, and how organizations will work together, were well specified.
				Participants were able to count on partnerships as the situation got worse.

2. Continuity of Operations: \_\_\_\_\_

1	2	3	4	5
No continuity of operations plans were in place.	Some plans were in place, but not across all essential services.	Plans were in place but were not well exercised or articulated.  There was some confusion over roles and expectations.	Plans were in good shape, but there were a few gaps when certain services were not up and running as quickly as expected.	The community had strong continuity of operations plans.  All essential or basis services were covered in the continuity of operations plans.  There was no disruption to those plans after the hurricane hit.

3. Transition Services: \_\_\_\_\_

1	2	3	4	5
There was no real plan for transition services, and there were significant gaps in supports available.	There were some transition services, but they were not well distributed across needs and/or neighborhoods.	Transition services were in place, but linkages with routine systems were not robust.	Transition services were in place and linkages were strong, but ongoing monitoring and evaluation of recovery were not well specified.	The community had transition services across health, social, and economic needs.  The links with routine providers and systems were robust.  Data and other monitoring to ensure that there were no gaps in services were well established.

4. Financing: \_\_\_\_\_

1	2	3	4	5
The community has no real plan for recovery financing.	The community has a plan for federal support of recovery but limited clarity on local financing.	The community has a local plan, including the private sector, but it is not robust for changes that may extend recovery (e.g., long-term mental health impacts).	The community has local plans and some financing support for the long term, but the plans are not well integrated or coordinated.	The community has a plan for financial support of recovery, including into the long-term recovery period.  The community has well-established plans for public sector and private sector engagement in supporting recovery and transition to full rebuilding.

*Lessons Learned*

Review your scores and the notes from this exercise. Now answer the following questions.

- 1. What are your strengths currently as a community or coalition? Did anything surprise you? Why?

For each essential component of recovery—workforce, continuity of operations, transition services, and financing—what were your strengths?

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- 2. What are the biggest gaps or challenges you noted? Did anything surprise you? Why?

For each essential component of recovery—workforce, continuity of operations, transition services, and financing—what were your challenges?

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- 3. What problem areas are the biggest priority?

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- 4. What will your community or coalition do first?

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- 5. What help does your community or coalition need to build on its strengths?

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## Chapter 5: Conclusion

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Thank you for using the PRACTIS toolkit to strengthen disaster recovery partnerships between LHDs and CBOs in your community. The toolkit aims to strengthen community-wide disaster response and recovery by offering LHDs three tools:

1. a sample survey and steps for fielding the survey to help LHDs identify the key CBOs that contribute to disaster response and recovery
2. a quality improvement guide and sample quality improvement report to help generate guidance about the strengths and weaknesses of the partnerships between LHDs and CBOs and between CBOs
3. a tabletop recovery exercise that can be used to improve the relationship between LHDs and CBOs.

When used together, these three tools create a comprehensive process for improving recovery partnerships. To continue improving partnerships, it is recommended that LHDs regularly assess and exercise partnerships with CBOs. These tools are intended to be used repeatedly to help continually improve partnerships. To keep the tabletop exercise fresh, consider selecting another scenario. The Federal Emergency Management Agency provides a set of scenarios for use with nongovernmental organizations that cover power failure, earthquake, cyber attack, and chemical incidents (<http://www.fema.gov/emergency-planning-exercises>).

For more information on the role of partnerships in disaster, see the following references:

- Baezconde-Garbanati, L., J. Unger, C. Portugal, J. L. Delgado, A. Falcon, and M. Gaitan, “Maximizing Participation of Hispanic Community-Based/Non-Governmental Organizations (NGOs) in Emergency Preparedness,” *International Quarterly of Community Health Education*, Vol. 24, No. 4, 2006, pp. 289–317.
- Buckland, J., and M. Rahman, “Community-Based Disaster Management During the 1997 Red River Flood in Canada,” *Disasters*, Vol. 23, No. 2, 1999, pp. 174–191.
- Chandra, A., J. Acosta, S. Howard, L. Uscher-Pines, M. Williams, D. Yeung, J. Garnett, and L. S. Meredith, *Building Community Resilience to Disasters: A Way Forward to Enhance National Health Security*, Santa Monica, Calif.: RAND Corporation, TR-915-DHHS, 2011. As of August 26, 2015:  
[http://www.rand.org/pubs/technical\\_reports/TR915.html](http://www.rand.org/pubs/technical_reports/TR915.html)
- Chandra, A., M. Williams, A. Plough, A. Stayton, K. B. Wells, M. Horta, and J. Tang, “Getting Actionable About Community Resilience: The Los Angeles County Community Disaster

- Resilience Project,” *American Journal of Public Health*, Vol. 103, No. 7, 2013, pp. 1181–1189.
- Hurlbert, J. S., V. A. Haines, and J. J. Beggs, “Core Networks and Tie Activation: What Kinds of Routine Networks Allocate Resources in Nonroutine Situations?” *American Sociological Review*, Vol. 65, No. 4, 2000, pp. 598–618.
- Kapacu, N., “Inter-Organizational Coordination in Dynamic Context: Networks in Emergency Response Management,” *Connections*, Vol. 26, No. 2, 2005, pp. 33–48.
- Magsino, S. L., *Applications of Social Network Analysis for Building Community Disaster Resilience*, Washington, D.C.: National Academy of Sciences, 2009.
- Norris, F. H., S. P. Stevens, B. Pfefferbaum, K. F. Wyche, and R. L. Pfefferbaum, “Community Resilience as a Metaphor, Theory, Set of Capacities, and Strategy for Disaster Readiness,” *American Journal of Community Psychology*, Vol. 41, No. 1–2, 2008, pp. 127–150.
- Pant, A. T., T. D. Kirsch, I. R. Subbarao, Y.-H. Hsieh, and A. Vu, “Faith-Based Organizations and Sustainable Sheltering Operations in Mississippi After Hurricane Katrina: Implications for Informal Network Utilization,” *Prehospital and Disaster Medicine*, Vol. 23, No. 1, 2008, pp. 48–54.
- Quinn, S. C., “Crisis and Emergency Risk Communication in a Pandemic: A Model for Building Capacity and Resilience of Minority Communities,” *Health Promotion Practice*, Vol. 9, No. 4, Supplement, 2008, pp. 18S–25S.
- Schellong, A., *Increasing Social Capital for Disaster Response Through Social Networking Services (SNS) in Japanese Local Governments*, Arlington, Va.: National Science Foundation, 2007.
- Stewart, G. T., R. Kolluru, and M. Smith, “Leveraging Public-Private Partnerships to Improve Community Resilience in Times of Disaster,” *International Journal of Physical Distribution and Logistics Management*, Vol. 39, No. 5, 2009, pp. 343–364.
- Varda, D. M., A. Chandra, S. A. Stern, and N. Lurie, “Core Dimensions of Connectivity in Public Health Collaboratives,” *Journal of Public Health Management and Practice*, Vol. 14, No. 5, 2008, pp. E1–E7.
- Varda, D. M., R. Forgette, D. Banks, and N. Contractor, “Social Network Methodology in the Study of Disasters: Issues and Insights Prompted by Post-Katrina Research,” *Population Research and Policy Review*, Vol. 28, 2009, pp. 11–29.