

Individual/Family Crisis Counseling Services Encounter Log

Variable name	Description	Value format
ID	Participant ID	Sequence ID(e.g., 1,2,3,...)
FormVersion	OMB Form Version	YYYY (e.g. 2018)
ProjectNumber	Project Number	FEMA disaster declaration number. e.g., NJ-4086
ProviderName	The name of the program/agency	Text
ProviderNumber	The unique number for your program/agency.	Identifier consisting of numbers and/or letters. The number is system generated.
disaster_ISP	Project Phase	1 'ISP' 2 'ISP Extension' 3 'RSP' 4 'RSP Extension'
DateOfService	The date of the encounter	MM/DD/YYYY, e.g., 01/01/2008.
County	The 3 digit of the 5 digit FIPS code for the county where the service occurred.	3 digit number
employee_number1	The number a provider or State disaster mental health coordinator assigns to an individual employee.	Identifier consisting of numbers and/or letters. The format can vary by project.
employee_number2	The number a provider or State disaster mental health coordinator assigns to an individual employee.	Identifier consisting of numbers and/or letters. The format can vary by project.
zipcode	The zip code of the location where the service occurred.	5 digits
visittype_code	Type of visit - with one person (individual) or with two or more individuals living as a family or household	1 'individual' 2 'family or household (2 individuals)' 3 'family or household (3 individuals)' 4 'family or household (4 individuals)' 5 'family or household (5 individuals)' 6 'family or household (6 or more individuals)'
visitnumber_code	Number of visit	1 'First visit' 2 'Second visit' 3 'Third visit' 4 'Fourth visit' 5 'Fifth visit or later'
duration_code	Duration of the encounter	1 '15-29 minutes', 2 '30 - 44 minutes', 3 '45-59 minutes', 4 '60 minutes or more'
male_preschool	Number of Males preschool (0 - 5 years)	Number e.g., 1,2,3,4,...
male_child	Number of Males child (6 - 11 years)	Number e.g., 1,2,3,4,...
male_adolescent	Number of Males adolescent (12 - 17 years)	Number e.g., 1,2,3,4,...
male_adult18	Number of Males adult (18 - 39 years)	Number e.g., 1,2,3,4,...
male_adult40	Number of Males adult (40 - 64 years)	Number e.g., 1,2,3,4,...
male_adult65	Number of Males older adult (65 years or older)	Number e.g., 1,2,3,4,...
female_preschool	Number of Females preschool (0 - 5 years)	Number e.g., 1,2,3,4,...
female_child	Number of Females child (6 - 11 years)	Number e.g., 1,2,3,4,...
female_adolescent	Number of Females adolescent (12 - 17 years)	Number e.g., 1,2,3,4,...
female_adult18	Number of Females adult (18 - 39 years)	Number e.g., 1,2,3,4,...
female_adult40	Number of Females adult (40 - 64 years)	Number e.g., 1,2,3,4,...
female_adult65	Number of Females older adult (65 years or older)	Number e.g., 1,2,3,4,...
transgender_preschool	Number of Transgender preschool (0 - 5 years)	Number e.g., 1,2,3,4,...
transgender_child	Number of Transgender child (6 - 11 years)	Number e.g., 1,2,3,4,...
transgender_adolescent	Number of Transgender adolescent (12 - 17 years)	Number e.g., 1,2,3,4,...
transgender_adult18	Number of Transgender adult (18 - 39 years)	Number e.g., 1,2,3,4,...
transgender_adult40	Number of Transgender adult (40 - 64 years)	Number e.g., 1,2,3,4,...
transgender_adult65	Number of Transgender older adult (65 years or older)	Number e.g., 1,2,3,4,...
participant_total	Number of total participants	Number e.g., 1,2,3,4,...
ethnicity_1	Hispanic or Latino	1 'Yes' 0 'No'
ethnicity_2	Not Hispanic or Latino	1 'Yes' 0 'No'
race_1	American Indian/Alaska Native	1 'Yes' 0 'No'
race_2	Asian	1 'Yes' 0 'No'
race_3	Black or African American	1 'Yes' 0 'No'
race_4	Native Hawaiian/Pacific Islander	1 'Yes' 0 'No'
race_5	White	1 'Yes' 0 'No'
Race_6	Hispanic or Latino	1 'Yes' 0 'No'

primarylanguage_code	Primary Language Code	1 'English', 2 'Spanish', 3 'Other'
primarylanguageother	Primary Language Other (specify in box)	Text
disability_1	Physical (mobility, visual, hearing, medical, etc.)	1 'Yes' 0 'No'
disability_2	Intellectual/Cognitive (learning disability, developmental delay, etc.)	1 'Yes' 0 'No'
disability_3	Mental Health/Substance Abuse (psychiatric, substance dependence, etc.)	1 'Yes' 0 'No'
servicelocation_code	Location of Service	1 'school or child care (all ages through college)' 2 'community center (e.g., recreation club)' 3 'provider site/mental health agency (agency involved with CCP)' 4 'workplace (workplace of the disaster survivor and/or first responder)' 5 'disaster recovery center (e.g., FEMA, American Red Cross)' 6 'place of worship (e.g., church, synagogue, mosque)' 7 'retail (e.g., restaurant, mall, shopping center, store)' 8 'public place/event (e.g., street, sidewalk, town square, fair, festival, sports)' 9 'temporary home (including friend or family homes, group homes, shelters, apartments, trailers, and other dwellings)' 10 'TEMPORARY HOME, ANY CHILDREN < AGE 18 LIVE IN THIS HOME.' 11 'permanent home' 12 'PERMANENT HOME: ANY CHILDREN < AGE 18 LIVE IN THIS HOME.' 13 'phone counseling (15 minutes or longer)' 14 'HOTLINE, HELPLINE, or CRISIS LINE' 15 'medical center (e.g., doctor, dentist, hospital, mental health or substance abuse specialty center)' 16 'other'
servicelocationother	Location of Service Other (specify in box)	Text
risk_01	family missing/dead	1 'Yes' 0 'No'
risk_02	friend missing/dead	1 'Yes' 0 'No'
risk_03	pet missing/dead	1 'Yes' 0 'No'

risk_04	home damaged or destroyed	1 'Yes' 0 'No'
risk_05	vehicle or major property loss	1 'Yes' 0 'No'
risk_06	other financial loss	1 'Yes' 0 'No'
risk_07	disaster unemployed (self or household member)	1 'Yes' 0 'No'
risk_08	injured or physically harmed (self or household member)	1 'Yes' 0 'No'
risk_09	life was threatened (self or household member)	1 'Yes' 0 'No'
risk_10	witnessed death/injury (self or household member)	1 'Yes' 0 'No'
risk_11	assisted with rescue/recovery (self or household member)	1 'Yes' 0 'No'
risk_12	had to change schools (for children or youth)	1 'Yes' 0 'No'
risk_13	prolonged separation from family	1 'Yes' 0 'No'
risk_14	evacuated quickly with no time to prepare	1 'Yes' 0 'No'
risk_15	displaced from home 1 week or more	1 'Yes' 0 'No'
risk_16	sheltered in place or sought shelter due to immediate threat of danger	1 'Yes' 0 'No'
risk_17	past substance use/mental health problem	1 'Yes' 0 'No'
risk_18	preexisting physical disability	1 'Yes' 0 'No'
risk_19	past trauma	1 'Yes' 0 'No'
eventparticipant_code	Total number of participants experiencing event reaction	1. '1', 2. '2', 3. '3', 4. '4', 5. '5', 6. '6 or more'
behavioral_1	extreme change in activity level	1 'Yes' 0 'No'
behavioral_2	excessive drug or alcohol use	1 'Yes' 0 'No'
behavioral_3	isolation/withdrawal	1 'Yes' 0 'No'
behavioral_4	on guard/hypervigilant	1 'Yes' 0 'No'
behavioral_5	agitated/jittery/shaky	1 'Yes' 0 'No'
behavioral_6	violent or dangerous behavior	1 'Yes' 0 'No'
behavioral_7	acts younger than age (children or youth)	1 'Yes' 0 'No'
emotional_1	sadness, tearful	1 'Yes' 0 'No'
emotional_2	irritable, angry	1 'Yes' 0 'No'
emotional_3	anxious, fearful	1 'Yes' 0 'No'
emotional_4	despair, hopeless	1 'Yes' 0 'No'
emotional_5	feelings of guilt/shame	1 'Yes' 0 'No'
emotional_6	numb, disconnected	1 'Yes' 0 'No'
physical_1	Headaches	1 'Yes' 0 'No'
physical_2	stomach problems	1 'Yes' 0 'No'
physical_3	difficulty falling or staying asleep	1 'Yes' 0 'No'
physical_4	eating problems	1 'Yes' 0 'No'
physical_5	worsening of health problems	1 'Yes' 0 'No'
physical_6	fatigue, exhaustion	1 'Yes' 0 'No'
cognitive_1	distressing dreams, nightmares	1 'Yes' 0 'No'

cognitive_2	intrusive thoughts, images	1 'Yes' 0 'No'
cognitive_3	difficulty concentrating	1 'Yes' 0 'No'
cognitive_4	difficulty remembering things	1 'Yes' 0 'No'
cognitive_5	difficulty making decisions	1 'Yes' 0 'No'
cognitive_6	preoccupied with death/destruction	1 'Yes' 0 'No'
copingwell	Coping well. There are no participants experiencing the event reactions	1 'Yes' 0 'No'
informationabout_1	Information/education about reactions to disaster	1 'Yes' 0 'No'
informationabout_2	Information/education about community resources	1 'Yes' 0 'No'
informationabout_3	Information/education about this crisis counseling program	1 'Yes' 0 'No'
tipsfor_1	Tips for reducing negative thoughts	1 'Yes' 0 'No'
tipsfor_2	Tips for managing physical and emotional reactions (e.g., breathing techniques)	1 'Yes' 0 'No'
tipsfor_3	Tips for doing positive things	1 'Yes' 0 'No'
tipsfor_4	Tips for problem solving	1 'Yes' 0 'No'
healthyconnection_1	Mutual support/ building social network(s)	1 'Yes' 0 'No'
healthyconnection_2	Participating in community action	1 'Yes' 0 'No'
focusother	Focus of Encounter Other(specify in box)	Text
materialprovided_yesno_code	If flyers, brochures, handouts, or other materials were provided to this/these participant(s)	1. 'Yes', 2. 'No'
referral_1	crisis counseling program services (e.g., group counseling, referral to team leader, follow up visit)	1 'Yes' 0 'No'
referral_2	mental health services (e.g., professional, longer-term counseling, treatment, behavioral, or psychiatric services)	1 'Yes' 0 'No'

referral_3	substance abuse services (e.g., professional, behavioral, or medical treatment or self-help groups, such as Alcoholics Anonymous or Narcotics Anonymous)	1 'Yes' 0 'No'
referral_4	community services (e.g., FEMA, loans, housing, employment, social services)	1 'Yes' 0 'No'
referral_5	resources for those with disabilities, or other access or functional needs	1 'Yes' 0 'No'
referral_6	other	1 'Yes' 0 'No'
referralother	Referral other than listed (specify in box)	Text
noreferral	No Referral Provided	1 'Yes' 0 'No'
createdby	Person who created the record	Text
createdon	Date the record is created	Date
updatedby	Person who updated the record	Text
updatedon	Date the record is updated	Date

Group Encounter Log

Variable name	Description	Value format
ID	Group ID	Sequence ID unique to each group form
FormVersion	OMB Form Version	YYYY (e.g. 2018)
ProjectNumber	Project Number	FEMA disaster declaration number. e.g., NJ-4086
ProviderName	The name of the program/agency	Text
ProviderNumber	The unique number for your program/agency.	Identifier consisting of numbers and/or letters. The format can vary by project.
disaster_ISP	Project Phase	1 'ISP' 2 'ISP Extension' 3 'RSP' 4 'RSP Extension'
DateOfService	The date of the encounter	MM/DD/YYYY, e.g., 01/01/2008.
County	The 3 digit of the 5 digit FIPS code for the county where the service occurred.	3 digit number
employee_number1	The number a provider or State disaster mental health coordinator assigns to an individual employee.	Identifier consisting of numbers and/or letters. The format can vary by project.
employee_number2	The number a provider or State disaster mental health coordinator assigns to an individual employee.	Identifier consisting of numbers and/or letters. The format can vary by project.
zipcode	The zip code of the location where the service occurred.	5 digits
servicetype_code	Type of services	1 Group Counseling, 2 Public Education
groupservicelocation_code	Location of service	1. school and child care (all ages through college) 2. Community center (e.g., recreation club) 3. Provider site/mental health agency (agency involved with the CCP) 4. Workplace (workplace of the disaster survivor and/or first responder) 5. Disaster recovery center (e.g., FEMA, American Red Cross) 6. Place of worship (e.g., church, synagogue, mosque) 7. Home (temporary or permanent residence, including friend/family home; group homes, including houses, apartments, trailers, and other dwellings) 8. Retail (e.g., restaurant, mall, shopping center, store) 9. Medical center (e.g., doctor, dentist, hospital, substance abuse specialty center) 10. Public place/event (e.g., street, sidewalk, town square, fair, festival, sports) 11. Other
groupservicelocationother	Location of service other than listed	Text
sessionnumber_code	Session number	1 First session of group expected to meet once 2 First session of group expected to meet more than once 3 Second or greater session of ongoing group
participant18	Number of participants under age 18	Whole Number
participant64	Number of participants ages 18 - 64	Whole Number
participant65	Number of participants age 65 and older	Whole Number
participanttotal	Number of Participants Total	Whole Number
duration_code	Duration of the session	1. 15 - 29 minutes 2. 30 - 44 minutes 3. 45 - 59 minutes 4. 60 minutes or more

identities_code	The identities that are represented by all participants of the group	<ol style="list-style-type: none"> 1. Children or youth (under age 18) 2. Adult survivors (adults who were directly affected by the disaster) 3. Public safety workers and first responders (e.g., police, fire, emergency medical services, rescue). 4. Other recovery workers (e.g., health care, disaster relief, social services) 5. Was the group composed of a mixture of the above or none of the above (i.e., no clear group identity)
ethnicity_1	Hispanic or Latino	0 'No', 1 'Yes'
ethnicity_2	Not Hispanic or Latino	0 'No', 1 'Yes'
race_1	American Indian/Alaska Native	0 'No', 1 'Yes'
race_2	Asian	0 'No', 1 'Yes'
race_3	Black or African American	0 'No', 1 'Yes'
race_4	Native Hawaiian/Pacific Islander	0 'No', 1 'Yes'
race_5	White	0 'No', 1 'Yes'
race_6	Hispanic or Latino	0 'No', 1 'Yes'
disability_1	Physical (mobility, visual, hearing, medical, etc.)	0 'No', 1 'Yes'
disability_2	Intellectual/Cognitive (learning disability, developmental delay, etc.)	0 'No', 1 'Yes'
disability_3	Mental Health/Substance Abuse (psychiatric, substance dependence, etc.)	0 'No', 1 'Yes'
informationabout_1	Information about reactions to disaster	0 'No', 1 'Yes'
informationabout_2	Information about community resources	0 'No', 1 'Yes'
informationabout_3	Information about this crisis counseling program	0 'No', 1 'Yes'
tipsfor_1	Tips for reducing negative thoughts	0 'No', 1 'Yes'
tipsfor_2	Tips for managing physical and emotional reactions (e.g., breathing techniques)	0 'No', 1 'Yes'
tipsfor_3	Tips for doing positive things	0 'No', 1 'Yes'
tipsfor_4	Tips for problem solving	0 'No', 1 'Yes'
healthyconnection_1	mutual support/ building social network(s)	0 'No', 1 'Yes'
healthyconnection_2	participating in community action	0 'No', 1 'Yes'
focusother	Focus of Group Session Other	Text
materialprovided_yesn_o_code	Whether flyers, brochures, handouts, or other materials were provided to participants	0 'No', 1 'Yes'
createdby	Person who created the record	Text
createdon	Date the record is created	Date
Updatedby	Person who updated the record	Text
updatedon	Date the record is updated	Date

Weekly Tally Sheet

Variable name	Description	Value format
Id	Record ID	Sequence ID unique to each week tally form
ProjectNumber	project number	FEMA disaster declaration number. e.g., NJ-4086
ProviderName	the name of the program/agency	Text
ProviderNumber	the unique number for your program/agency	Consists of numbers and/or letters. The format can vary by project.
Disaster_ISP	Project phase	1 'ISP' 2 'ISP Extension' 3 'RSP' 4 'RSP Extension'
Weekbeginning	Week that begins for this report	Date
County	The 3 digit of the 5 digit FIPS code for the county where the service occurred.	3 digit number
Employee_number1	The number a provider or State disaster mental health coordinator assigns to an individual employee.	Consists of numbers and/or letters. The format can vary by project.
Employee_number2	The number a provider or State disaster mental health coordinator assigns to an individual employee.	Consists of numbers and/or letters. The format can vary by project.
Sunday11	Sunday - In-person brief educational or supportive contact	Whole numbers
Monday11	Monday - In-person brief educational or supportive contact	Whole numbers
Tuesday11	Tuesday - In-person brief educational or supportive contact	Whole numbers
Wednesday11	Wednesday - In-person brief educational or supportive contact	Whole numbers
Thursday11	Thursday- In-person brief educational or supportive contact	Whole numbers
Friday11	Friday - In-person brief educational or supportive contact	Whole numbers
Saturday11	Saturday - In-person brief educational or supportive contact	Whole numbers
Total11	Total - In-person brief educational or supportive contact	Whole numbers
Sunday12	Sunday - Telephone contact by crisis counselor	Whole numbers
Monday12	Monday - Telephone contact by crisis counselor	Whole numbers
Tuesday12	Tuesday - Telephone contact by crisis counselor	Whole numbers
Wednesday12	Wednesday - Telephone contact by crisis counselor	Whole numbers
Thursday12	Thursday - Telephone contact by crisis counselor	Whole numbers
Friday12	Friday - Telephone contact by crisis counselor	Whole numbers
Saturday12	Saturday - Telephone contact by crisis counselor	Whole numbers
Total12	Total - Telephone contact by crisis counselor	Whole numbers
Sunday13	Sunday - Hotline/helpline/lifeline contact	Whole numbers
Monday13	Monday - Hotline/helpline/lifeline contact	Whole numbers
Tuesday13	Tuesday - Hotline/helpline/lifeline contact	Whole numbers
Wednesday13	Wednesday - Hotline/helpline/lifeline contact	Whole numbers
Thursday13	Thursday - Hotline/helpline/lifeline contact	Whole numbers
Friday13	Friday - Hotline/helpline/lifeline contact	Whole numbers
Saturday13	Saturday - Hotline/helpline/lifeline contact	Whole numbers
Total13	Total- Hotline/helpline/lifeline contact	Whole numbers
Sunday14	Sunday - Email contact	Whole numbers
Monday14	Monday - Email contact	Whole numbers
Tuesday14	Tuesday - Email contact	Whole numbers
Wednesday14	Wednesday - Email contact	Whole numbers
Thursday14	Thursday - Email contact	Whole numbers
Friday14	Friday - Email contact	Whole numbers

Saturday14	Saturday - Email contact	Whole numbers
Total14	Total- Email contact	Whole numbers
Sunday15	Sunday - Community networking and coalition building	Whole numbers
Monday15	Monday - Community networking and coalition building	Whole numbers
Tuesday15	Tuesday - Community networking and coalition building	Whole numbers
Wednesday15	Wednesday - Community networking and coalition building	Whole numbers
Thursday15	Thursday - Community networking and coalition building	Whole numbers
Friday15	Friday - Community networking and coalition building	Whole numbers
Saturday15	Saturday - Community networking and coalition building	Whole numbers
Total15	Total - Community networking and coalition building	Whole numbers
Sunday21	Sunday - Material handed to people	Whole numbers
Monday21	Monday - Material handed to people	Whole numbers
Tuesday21	Tuesday - Material handed to people	Whole numbers
Wednesday21	Wednesday - Material handed to people	Whole numbers
Thursday21	Thursday - Material handed to people	Whole numbers
Friday21	Friday - Material handed to people	Whole numbers
Saturday21	Saturday - Material handed to people	Whole numbers
Total21	Total - Material handed to people	Whole numbers
Sunday22	Sunday - Material mailed to people's homes and/or left at a person's unattended home	Whole numbers
Monday22	Monday - Material mailed to people's homes and/or left at a person's unattended home	Whole numbers
Tuesday22	Tuesday - Material mailed to people's homes and/or left at a person's unattended home	Whole numbers
Wednesday22	Wednesday - Material mailed to people's homes and/or left at a person's unattended home	Whole numbers
Thursday22	Thursday - Material mailed to people's homes and/or left at a person's unattended home	Whole numbers
Friday22	Friday - Material mailed to people's homes and/or left at a person's unattended home	Whole numbers
Saturday22	Saturday - Material mailed to people's homes and/or left at a person's unattended home	Whole numbers
Total22	Total - Material mailed to people's homes and/or left at a person's unattended home	Whole numbers
Sunday23	Sunday - Material left in public places	Whole numbers
Monday23	Monday - Material left in public places	Whole numbers
Tuesday23	Tuesday - Material left in public places	Whole numbers
Wednesday23	Wednesday - Material left in public places	Whole numbers
Thursday23	Thursday - Material left in public places	Whole numbers
Friday23	Friday - Material left in public places	Whole numbers
Saturday23	Saturday - Material left in public places	Whole numbers

Total23	Total - Material left in public places	Whole numbers
Sunday24	Sunday - Mass media	Whole numbers
Monday24	Monday - Mass media	Whole numbers
Tuesday24	Tuesday - Mass media	Whole numbers
Wednesday 24	Wednesday - Mass media	Whole numbers
Thursday2 4	Thursday - Mass media	Whole numbers

Friday24	Friday - Mass media	Whole numbers
Saturday24	Saturday - Mass media	Whole numbers
Total24	Total - Mass media	Whole numbers
Sunday25	Sunday - Social networking messages	Whole numbers
Monday25	Monday - Social networking messages	Whole numbers
Tuesday25	Tuesday - Social networking messages	Whole numbers
Wednesday25	Wednesday - Social networking messages	Whole numbers
Thursday25	Thursday - Social networking messages	Whole numbers
Friday25	Friday - Social networking messages	Whole numbers
Saturday25	Saturday - Social networking messages	Whole numbers
Total25	Total - Social networking messages	Whole numbers
Createdby	Person who created the record	Text
Createdon	date the record is created	Date
Updatedby	Person who updated the record	Text
Updatedon	date the record is updated	Date