Tips for Community Leaders: Establishing a Family Assistance Center (FAC)

During the immediate aftermath of a mass violence incident, law enforcement officials, first responders, victim assistance professionals, and others must coordinate their activities to ensure a timely and effective response.

A family assistance center needs to be available quickly and is initially established by law enforcement. Victim assistance programs must be prepared to mobilize as soon as first responders are finished.

The need to determine if loved ones are safe is universal. In the chaos of a mass violence incident, the communication infrastructure can be overwhelmed. A centralized family assistance center facilitates communication.

Generally, local law enforcement and victim assistance professionals are first on the scene to communicate with the families of the victims. Other agencies such as the state Office of Victims of Crime or a local mental health or social services agencies may step in at a later time to provide additional services.

Factors to consider

- Choose a warm, safe, and inviting place for families and friends to gather and await information.
- Fire stations, churches, municipal buildings, schools, hotels, conference centers or local businesses are commonly used. Hotels have proven to be effective FAC spaces because food, lodging and parking are easily available.
- Attempt to locate a space that is nearby, but not too close, to the incident site.
- Ensure the space has ample parking and security at all entrances and exits.
- Access for people with disabilities and other functional needs.
- Population capacity- you may need more space than you think in the beginning
- Layout of building-secure, easy to navigate, multiple private interview rooms
- Directional signage to help visitors identify where to go for their specific needs
- Check-in table in the reception area with contact information and instructions on where to wait
- Separate rooms for interviews to insure privacy and confidentiality of records
- Communication sources-internet access/phones/call center/radio contact with emergency services and law enforcement. If needed, request private sector resources such as telephones and mobile telephone banks, cell phones and wireless access (i.e., Cells on Wheels), charging stations and/or computers with internet access for survivor communications.
• Limit TV access to those who want to watch. Do not have it running in common areas. Television can be helping in getting news but harmful if displaying highly emotional or terrible images that further distress victims and staff.

Best Practices

• The goal is to provide well-organized and streamlined access for victims, survivors and families to multiple partner agencies and resources. Integrate your services with other agencies and share information, especially about the location of victims.

• Services are primarily to provide immediate care followed by referrals to local and regional services for mental health counseling, health care and childcare, information on crime victim compensation, and assistance with legal matters, travel, creditors, work-related issues, financial planning, insurance benefits, IRS/tax policies, social security/disability, FEMA and so forth.

• Assign one staff director and a back up to coordinate activities, needs and interagency response.

• Identify and organize all service providers in one location. Invite trained counselors from the community or surrounding locations as needed.

• Badges with name, agency and role should be worn by all staff for security and to avoid confusion.

• Assign a volunteer supervisor to recruit volunteers from local agencies, screen, supervise, schedule and make assignments.

• All personnel should be briefed on the importance of establishing a human connection in a non-intrusive, compassionate manner. Staff should provide calm and reflective listening, find out what the immediate needs and concerns are, identify what is most pressing for families, provide physical and emotional comfort and help families to reach out their social support networks.

• Establish a victim/family member list and keep it constantly updated as new victims or family members arrive.

• Assign victim assistance professionals or case managers to victims and families (including hospitalized victims and those who are not present.) Ideally, this person follows the family throughout the process of hospital visits, funerals, and court proceedings that may occur weeks or months later. (Sample Victim Liaison Job Description)

• Provide information to family on the whereabouts and status of victim as it comes in. Timely information is important.

• Provide meals, beverages and practical assistance to family members. Local businesses may be willing to donate and some costs may be reimbursed by the OVC through grants.

• Hold briefings for families and personnel regarding what happened, recovery efforts, hospitalization locations, etc.

• Limit media access to victims and families. Assign a public information officer to every family and require specific permission from victims or family members for media access.
• The media should be asked to disseminate general information about the center’s services and location to the public, including a broad definition of who can come. Typically, only direct victims and families are served the first day of operation. Emphasize that services are free.
• Include services for first responders and victim assistance professionals who may have vicarious trauma.
• Separate families whose loved one is deceased from families whose loved ones are missing and unaccounted for. It is heartbreaking for family members whose loved one is not coming back to see other families joyfully reunited.
• Families should be reunited in private with law enforcement officer and victim assistance professional or trauma trained counselor present.
• Family members whose loved one is deceased should be notified in private with law enforcement officer and victim assistance professional or trauma trained counselor present.
• Provide information on the identification process, death certification and return of remains, including transportation to disaster morgue.
• Give information about emotional reactions to trauma, both immediate and long term. Normalize extreme reactions such as panic, despair and numbness. Do not offer advice expect on practical matters.
• Provide access to spiritual care, health and social services in the center as well as referrals.
• Avoid duplication of services and multiple victim interviews to get the same information.
• Create a system for processing, cleaning and return of personal belongings in coordination with law enforcement.
• Provide information on victims’ rights, possible victim compensation for the state, and other logistical information. Provide emergency release forms, financial compensation forms and information on what might be covered such as temporary financial assistance for pending bills, funeral costs, transportation costs, or replacement of essential items.
• Include language interpretation and culturally sensitive counseling as needed.
• Until a more long term resiliency center can be set up, the family assistance center can be moved to a different location and continue to provide services. Staff can provide assistance with death certificates, autopsy reports and information, and other documentation for legal needs and benefits.