American Red Cross

Shelter Shift Inspection Form Instructions

The *Shelter Shift Inspection Form* is completed at the end of every shift, as well as other times established by the shelter manager. This job tool is used in conjunction with the following doctrine:

- Sheltering Standards and Procedures
- Job Tool: Operating a Shelter

Follow the steps below to complete this form:

1. Enter the date the inventory is being completed.
2. Consult with the shelter manager if necessary to identify the "DR Number" and the "Shelter Name/Location."
3. Indicate for which shift the inspection is being conducted.
4. Enter the time the inspection was conducted.
5. Enter the name of the shift supervisor. During the day shift, this is often the shelter manager.
6. Enter the name of the worker conducting the inspection.
7. Indicate Yes, No, or not applicable (N/A) for each question on the form. N/A only applies if the item in question does not exist. For example, if there are no restricted areas requiring limited access, indicate N/A to the question, "Are controls in place for restricted areas requiring limited access?"
8. For any item marked "No," list the resolution to the issue in the *Resolution of Issues Identified Above* section.
9. Note any identified issues in the shelter log.

Shelter Shift Inspection

Date: _____ Incident/DR#:_____ Shelter Name/Location:_____

Shift: □ Day □ 2ⁿᵈ □ Night	Inspection Time:

Shift Supervisor:

Inspector:

General Condition	
□ Yes □ No	Are all areas free of excessive wear and tear?

Entrances, Exits, and Access to Shelter	
□ Yes □ No	Are all entrances and exits visible and unobstructed?
□ Yes □ No	Are all entrances and exits marked with a visible sign that is properly illuminated?
□ Yes □ No	Are accessible entrances clearly marked?
□ Yes □ No □ N/A	Are controls in place for any restricted areas requiring limited access?

Exterior of Shelter	
□ Yes □ No	Are all walkways clear of trip or fall hazards?
□ Yes □ No □ N/A	In inclement weather, are all walkways clear of snow and ice?
□ Yes □ No □ N/A	Are all accessible ramps and handrails maintained?
□ Yes □ No	Are there appropriate containers for disposal of cigarettes and trash?
□ Yes □ No	Is there an appropriate area for service and assistance animals to relieve themselves?

Interior of Shelter	
□ Yes □ No	Are the routes between service delivery areas and restrooms at least 36" wide, free of protruding objects, and accessible to all clients and workers?
□ Yes □ No	Are all areas and floors clean, dry, sanitary, and free of hazards?
□ Yes □ No	Is floor protection adequately secured to avoid slips, trips, and falls?
□ Yes □ No	Are all service delivery areas sanitized and clean of debris?
□ Yes □ No	Is signage for designated areas legible and large enough for all clients and workers to see?
□ Yes □ No	Does signage reflect all languages spoken by the shelter resident population?
□ Yes □ No	Are restrooms clean, orderly and free of standing water, trip and fall hazards, and chemicals?
□ Yes □ No □ N/A	Are diaper-changing areas sanitized with available hand wipes?
□ Yes □ No	Is there an adequate power supply for clients with durable medical equipment and portable electronic device charging stations?
□ Yes □ No	Are electrical cables and outlets routed and covered safely?
□ Yes □ No	Are doors and windows secured?
□ Yes □ No	Are reception workers appropriately controlling access to the shelter and securing the shelter entrance?
□ Yes □ No	Are dormitory registration workers appropriately controlling access to the dormitory and securing the dormitory entrance?

Resolution of Issues Identified Above

NOTE ANY ISSUES ON THE SHELTER LOG