

FACILITY NEEDS ASSESSMENT WORKSHEET (ICS-235-CG (rev 12/11))

Instructions for filling out the form

Purpose. The ICS-235 USCG Facility Needs Assessment Worksheet is a planning tool used to develop the Incident Command Post (ICP) Plan in a structured and disciplined manner.

Preparation. The Facility Needs Assessment Worksheet is completed by the Logistics Section Chief but may also be completed by Command and General Staff to help them determine their ICP or other space needs.

Distribution. The Facility Needs Assessment Worksheet is found as page-sized form.

| <u>Item # & Title</u> | <u>Instructions</u> |
|-----------------------------|--|
| 1. Incident Name | Enter the name assigned to the incident. |
| 2. Location | Location (ICP, JIC, etc). |
| 3. Facilities | Enter the specific entity being supported (e.g. Unified Command). This is already filled in for the ICP. There is space to fill in for other facilities or entities that may need to be supported (e.g. Volunteer processing center). For Staging Area – note specific staging area supported (as there may be more than one). |
| 4. Requirements | Fill in the information requested as best as possible. Use open space beyond Paper Shredders to add additional support requirements, if needed. |
| Expected Personnel | Expected Number of personnel in the location. |
| Internal/Building Workspace | Enter workspace square feet requirement. Multiply expected number of personnel by 50 to 80 to get this number. |
| Wall Space | Enter linear wall space requirement in square feet. |
| Multi-Purpose Meeting Rm | If needed, enter Multi-Purpose Meeting Rm square feet requirement. |
| External/Outside Lay down | If needed, enter External/Outside Lay down square feet requirement. |
| Parking Space | If needed, enter Parking Space square feet requirement. This would be multiplication of number of parking spaces needed times 120 sq ft per vehicle times 1.4 circulation factor. |
| Climate Control | Enter Yes or No if Climate Control is needed in the building. |
| Toilet Rooms | Enter number of Toilet Rooms/Water Closets required. This is based on the OSHA requirement for the number of personnel expected to be supported at that facility (see 29CFR1910.141) – 1 to 15 personnel = 1 fixture, 16 to 35 = 2, 36 to 55 = 3, 56 to 80 = 4, 81 to 110 = 5, 111 to 150 = 6, and over 140 personnel one fixture for each additional 40 personnel. See CFR for more specific information. |
| Work Tables | Enter the number of work tables required. Note dimensions in work table name block or note dimensions in comments. |
| Conf Table | Enter the number of conference tables, if needed. Note dimensions in work table name block or note dimensions in comments. |
| Chairs | Enter the number of chairs, if needed. |
| Telephones | Enter the number of telephones required. |
| Speaker Phone | Enter the number of speaker phones, if needed. |
| Fax Machines | Enter the number of fax machines, if needed. |
| Power Outlets | Enter the number of power outlets required. |
| Comp Workstations | Enter the number of computer workstations required. |
| Printers | Enter the number of printers required. Note color or black and white. |
| Chart Printer/ChartPro | Enter the number of Chart Printer/ChartPro, if needed. |
| Video Projectors | Enter the number of Video Projectors, if needed. |
| Copy Machines | Enter the number of copy machines, if needed. |
| 5.. Prepared by | Enter the name of the person completing the form, normally the Logistics Section Chief. |
| 6. Total | Enter totals for each support item (if desired). |
| 7.. Date/Time Prepared | Enter the date/time prepared. |
| 8. Comments | Enter comments as desired. |