



Emergency Management  
NC DEPARTMENT OF PUBLIC SAFETY

# NC CERT Forum

September 18, 2023



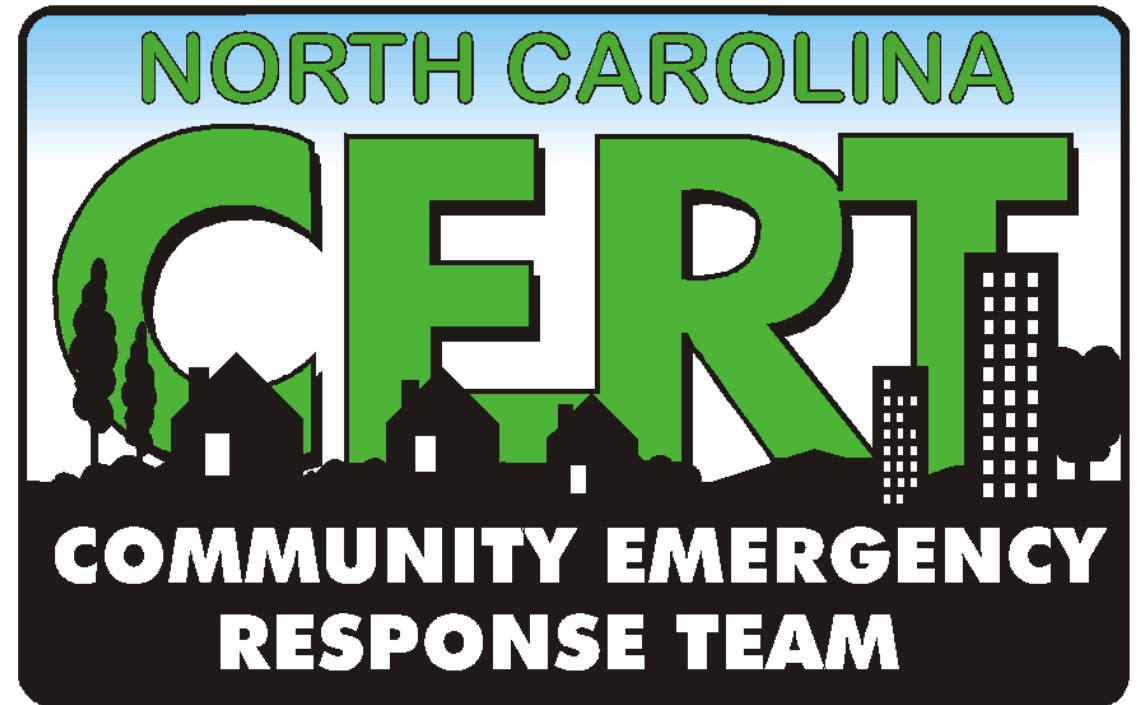
*This presentation will be recorded and posted to the NC CERT YouTube Channel.*





## Agenda

- NC CERT Program Updates
  - NC Shelter Corps
  - TERMS Teams
- Q&A





# NC CERT Shelter Corps

- Required training:
  - ICS 100, 200, 700, 800
  - Shelter Fundamentals
  - Current TERMS Teams Profile
- If interested in joining NC CERT Shelter Corps, please fill out this [simple form](https://forms.gle/hwokBqNaQzU4GpZV8).  
<https://forms.gle/hwokBqNaQzU4GpZV8>





# Required Training

- IS-100
- IS-200
- IS-700
- Available at <https://training.fema.gov/is/>





## Required Training

- Shelter Fundamentals
- Training provided by the American Red Cross is free and accessible through a web-based portal. To access the American Red Cross Training Website, each staff person must register through the portal at [http://bit.ly/ext\\_register](http://bit.ly/ext_register)
- <https://arc.csod.com/selfreg/register.aspx?c=edge%20ext>





Emergency Management  
NC DEPARTMENT OF PUBLIC SAFETY

# Required

- TERMS Response Profile



## NORTH CAROLINA TERMS TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM





<https://terms.ncem.gov>



## NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



One account to register for trainings, exercises and response activities.

Have an Account?

[Log In](#)

[Create Account Now](#)

### Trainings & Exercises

Register for training courses and exercises.

- » [Calendar](#)
- » [Online Training](#)

### Response

Register to provide services during a disaster or emergency situation.

### Announcements

#### New Email Subscription Feature Added:

TERMS has updated the way new course offerings are communicated to you. Please take a moment to update your subscriptions. This new feature allows you to be notified only for classes you need versus all newly added classes. To subscribe to notifications of courses you are interested in, please go to "My Account" then "Course Notifications" on your profile. From the course notifications page, you can select what courses you are interested in and elect to receive weekly emails on any new offerings. Additional information on this new feature can be found in the Course Specific Notifications document in the Document Library. If you choose not to update your subscriptions, you will not receive emails from TERMS making you aware of new class offerings.

#### Training Opportunities:

**Western Branch Training Week** is posted for the week of July 31st, 2023 at Mitchell Community College.

**Central Branch Training Week** is posted for the week of September 24th, 2023, at Randolph Community College

#### Training Updates:

NCEM Training staff are accepting training requests from local emergency managers and will prioritize classes based upon timing, logistical support, instructor availability, and other factors. If you have training needs, please complete the training request located in the document library of TERMS and submit as directed on the form.

### Training Partner Links

- ▼ [Federal Training Partners](#)
- ▼ [State Training Partners](#)



[Get Adobe Reader](#)



## NORTH CAROLINA TERMS TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



### Login

\* Login ID

\* Password

[First Time Registration](#)

[I forgot my Login ID/Password](#)

If you haven't used the TERMS system to register online before, click the link for [First Time Registration](#). You will be prompted for key identifying information in order to first check for an existing account. If an account is located, it may have been created by an import or conversion process. You should review the information carefully to ensure that it is accurate. Otherwise, you will create a new account in TERMS.

If you have registered online before but have forgotten your Login ID or Password, click [I forgot my Login ID/Password](#). If you need other assistance logging in, please contact one of the HelpDesk numbers listed at the bottom of this page.

#### Security and Privacy

This site uses session cookies. A session cookie does not collect any personal information about you and is temporary. It is removed when you log out of the application or close your browser.







## NORTH CAROLINA TERMS TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



Welcome [My Account](#) [Calendar](#) [Course Management](#) [Team Management](#) [Utilities](#) [Reports](#) [Imports/Exports](#) [Course Manager Offerings](#) [About](#)  
[Document Library](#) [Badge Utility](#) [Logoff](#)

Samantha Royster

[Logoff](#)

### Trainings & Exercises

Register for training courses and exercises.

- » [Calendar](#)
- » [Online Training](#)

### Response

Register to provide services during a disaster or emergency situation.

- » [Response Participation](#)

### Announcements

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▼ [State Training Partners](#)



[Get Adobe Reader](#)





Emergency Management  
NC DEPARTMENT OF PUBLIC SAFETY



# NORTH CAROLINA TERMS

## TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



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## NORTH CAROLINA TERMS

TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



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[Bottom of Page](#)

[Help](#) ?

### Personal Profile

Samantha Royster

#### Name

* First Name	<input type="text" value="Samantha"/>	Middle Name	<input type="text"/>
* Last Name	<input type="text" value="Royster"/>	Suffix	<input type="text"/>
* Certificate Name	<input type="text" value="Samantha Royster"/>		

#### Key Identifiers used for verification

*Date of Birth	*Last 4 SSN/PIN	OEMS P-Number	Federal Student ID
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text"/>	<input type="text" value=""/>

#### Discipline/Profession

* Discipline	<input type="text" value="NC Division of EM Employees (EMPG)"/>
Profession/Position	<input type="text" value="NC CERT Program Manager"/>
Title	<input type="text" value="NC CERT Program Manager"/>
Agency Represented	<input type="text" value="NCEM"/>





## Volunteer & Incident Response Team Participation

[Response Profile](#)

### Home Address

Address Line 1	<input type="text"/>		
Apt/Unit	<input type="text"/>		
Address Line 2	<input type="text"/>		
City	<input type="text" value="Raleigh"/>		
State	<input type="text" value="NC"/>	Zip Code	<input type="text" value="27606"/>

### Work Address

* Address Line 1	<input type="text" value="1636 Gold Star Drive"/>		
Suite/Unit	<input type="text"/>		
Address Line 2	<input type="text"/>		
* City	<input type="text" value="Raleigh"/>		
Other City	<input type="text"/>		
* State	<input type="text" value="NC"/>	* Zip Code	<input type="text" value="27607"/>

### Contact Information

* Primary Email	<input type="text" value="samantha.royster@ncdps.gov"/>		
* Confirm Email	<input type="text" value="samantha.royster@ncdps.gov"/>		
Mobile Phone	<input type="text" value="919"/>	<input type="text"/>	
Mobile Carrier	<input type="text" value="Verizon"/>		
Text Message notifications require Mobile Phone and Carrier information			
* Contact Preference	<input type="text" value="Email"/>		





## Other Phone Numbers

\* Work Phone

919

825-2288

Fax Phone

Home Phone

919

## Login & Password

\* Login ID (minimum 8 characters)

samantha

\* Password

\* Confirm Password

Your password must be at least 8 characters and must include a combination of letters and numbers. You must include at least one UPPERCASE character and may include special characters. Your password may not match your Login ID.

## Security Questions

- |     |                                    |   |
|-----|------------------------------------|---|
| # 1 | What is your city of birth?        | ▼ |
| # 2 | What was your elementary school?   | ▼ |
| # 3 | What is your Father's middle name? | ▼ |

Response 1 xxxxxxxxxxxx

Response 2 xxx

Response 3 xxxx

Edit

## FOR ADMINISTRATIVE USE ONLY

Email Verification

☒ Active Account

Verified ▼

Save

Return to Previous Page





# NORTH CAROLINA TERMS

## TRAINING · EXERCISE · RESPONSE MANAGEMENT SYSTEM



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[Logoff](#)

[Home](#) / [My Account](#)





## Response Profile: Samantha Royster

### Team Participation

- Badge
- Home Address
- Contact Info
- Deployment Preferences
- Emergency Contact
- Driver's License/ID
- Languages
- Medical
- Skills
- Occupation
- DEA Registration
- Licenses/Certifications
- Trainings
- Degrees & Other

### Team Participation

#### Credentials for Team Participation

***What response team positions do you feel you are credentialed to fill?***

The credentials you have on file are listed below. You may select and **Request a Credential** be added to your profile.

[Request a Credential](#)[Details and Renewals](#)

#### Request for Team Membership

To request membership on a response team, click the button to Join a Team. Select one or more teams and Request Membership.

You can check the status of your requests at any time. The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership [Join a Team](#)

[Team Memberships](#)[Membership Requests & Invitations](#)[Response History](#)



## Response Profile: Samantha Royster

Team Participation

**Badge**

Home Address

Contact Info

Deployment Preferences

Emergency Contact

Driver's License/ID

Languages

Medical

Skills

Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

### Badge Photo/Sizing Information



Current Photo

Add/Update Photo

### Clothing/Sizing Information

Clothing/Sizing information is needed in order to ensure proper sizing of equipment and/or uniforms.

\*Height-Feet

5

\*Height-Inches

2

Weight

Hat Size

Medium

Pants Waist

Pants Length

30

T-Shirt

Shoe Size

6

Respirator Size/Type

Save

Cancel





## Response Profile: Samantha Royster

Team Participation

Badge

**Home Address**

Contact Info

Deployment Preferences

Emergency Contact

Driver's License/ID

Languages

Medical

Skills

Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

### Address

#### Home Address

\* Address Line 1

Apt/Unit

Address Line 2

\* City

Raleigh

\* State

North Carolina

\* Zip Code/Zip+4

27606

#### Mailing Address

☐ Same as Home Address

\* Address Line 1

Apt/Unit

Address Line 2

\* City

Raleigh

\* State

North Carolina

\* Zip Code/Zip+4

27606

Save

Cancel





## Response Profile: Samantha Royster

[Team Participation](#)[Badge](#)[Home Address](#)[Contact Info](#)[Deployment Preferences](#)[Emergency Contact](#)[Driver's License/ID](#)[Languages](#)[Medical](#)[Skills](#)[Occupation](#)[DEA Registration](#)[Licenses/Certifications](#)[Trainings](#)[Degrees & Other](#)

### Contact Information for Team Response

The contact email and phone numbers that you provide on this page will be used to contact you for matters related to team activity and in the event of an incident. It is critical that you keep this information current.

#### Primary Contact Information

\* Primary Email

\* Confirm Primary

Secondary Email

Confirm Secondary

#### Primary Phone Contact

\* Contact Type

Phone Number

\* Area Code

\* Phone Number

#### Additional Contact Numbers

Add Number

Work

919-8252288



SMS/Text



Save

Cancel





## Response Profile: Samantha Royster

Team Participation

Badge

Home Address

Contact Info

**Deployment Preferences**

Emergency Contact

Driver's License/ID

Languages

Medical

Skills

Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

### Deployment Preferences

\* Where are you willing to be deployed? ☒ Local ☒ In-State ☒ Out-of-State

\* How many days are you willing to be deployed?

14

Days

\* How far from your home are you willing to be deployed?

More than 500

Miles

\* In the event of a declared national emergency, would you consider volunteering to work under the auspices of the Federal Government?

No

*If you select yes, in the event of a national emergency, the information you provide will made available to the Federal Government upon its request.*

\* Do you hold a valid US passport

Yes

\* Do you have commitments that might pose a conflict?

Yes

If YES, Describe: (maximum of 250 characters)

My employment with NCEM may mean that I have to stay at the State EOC in Raleigh during an activation.

Save

Cancel





## Response Profile: Samantha Royster

Team Participation

Badge

Home Address

Contact Info

Deployment Preferences

**Emergency Contact**

Driver's License/ID

Languages

Medical

Skills

Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

### Emergency Contacts

Add Emergency Contact

To add an entry, press the button to Add Emergency Contact. Click the hyperlink on a listed Emergency Contact to update that entry.

Emergency Contact	Primary	Relation	Contact Numbers	
<a href="#">Jay Royster</a>	N	Spouse		





## Response Profile: Samantha Royster

Team Participation

Badge

Home Address

Contact Info

Deployment Preferences

Emergency Contact

**Driver's License/ID**

Languages

Medical

Skills

Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

### Driver's License/State ID

\* First Name

Samantha

Middle Name

\* Last Name

Royster

Suffix

\* State

North Carolina

\* License/ID #

\* Expiration Date

#### Endorsements

- ☐ Regular License Class A
- ☐ Regular License Class B
- ☒ Regular License Class C
- ☐ Commercial Driver's License Class A
- ☐ Commercial Driver's License Class B
- ☐ Commercial Driver's License Class C
- ☐ Certified to transport hazardous materials

☐ Federal ID/ Real Act ID Compliant

Save

Cancel





## Response Profile: Samantha Royster

Team Participation

Badge

Home Address

Contact Info

Deployment Preferences

Emergency Contact

Driver's License/ID

**Languages**

Medical

Skills

Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

### Language Skills [Add Language](#)

To add an entry, press the button to Add Language. Click the hyperlink on a listed Language to update that entry.

Language	Spoken Ability	Written Ability
----------	----------------	-----------------





## Response Profile: Samantha Royster

[Team Participation](#)[Badge](#)[Home Address](#)[Contact Info](#)[Deployment Preferences](#)[Emergency Contact](#)[Driver's License/ID](#)[Languages](#)**Medical**[Skills](#)[Occupation](#)[DEA Registration](#)[Licenses/Certifications](#)[Trainings](#)[Degrees & Other](#)**Medical Information**[Print Medical Report](#)

\* Are you physically able to participate in field deployment?

Yes ▼

\* Do you have health conditions which might prevent you from deployment in a disaster situation?

No ▼

If YES, Describe

Max of 400 characters

**American with Disabilities Act**

\* Do you require any reasonable accommodations to perform any disaster related duties?

No ▼

If YES, Describe

Max of 400 characters

**Allergies** (check all that apply)

☐ Animals

☐ Food

☐ Insects/Pests

☐ Latex

☒ Medicine

☐ Other

For any allergy checked, describe the allergy and your reaction:

Max of 200 characters

**Blood Type**

O negative ▼





### Hepatitis A Vaccine

Dose #1

YEAR

Dose #2

YEAR

Hepatitis A Comments

Max of 250 characters

### Hepatitis B Vaccine

Dose #1

YEAR

Dose #2

YEAR

Dose #3

YEAR

Titer

Hepatitis B Comments

Max of 250 characters

### Measles, Mumps, Rubella (MMR)

Dose #1

2019

Dose #2

YEAR

Measles Titer

YEAR

Mumps Titer

YEAR

Rubella Titer

YEAR

Have you ever had a case of  
Measles, Mumps, Rubella  
(MMR)?

MMR Comments

Max of 250 characters







#### Inactivated Polio Vaccine (IPV) or Oral Polio Vaccine (OPV)

Dose #1

YEAR

Dose #2

YEAR

Dose #3

YEAR

IPV/OPV Booster

YEAR

IPV/OPV Comments

Max of 250 characters

#### Pneumococcal Polysaccharide (Pneumonia Vaccine)

Dose #1

YEAR

Dose #2

YEAR

Pneumonia Comments

Max of 250 characters

#### Vaccinia (Smallpox)

Dose #1

YEAR

Was there a major take response?

Smallpox Comments

Max of 250 characters

#### Varicella (chickenpox)

Dose #1

YEAR

Dose #2

YEAR

IgG Antibody Titer

Have you ever had a case of  
Varicella (chickenpox)?

Varicella (chickenpox) Comments

Max of 250 characters





#### Inactivated Influenza Vaccine / Live Attenuated Influenza Vaccine (LAIV)

Vaccine received

Most Recent Dose  YEAR

Influenza Comments

Max of 250 characters

#### Tetanus / Diphtheria (Td)

Most Recent Dose  April  2019

Td Comments

Max of 250 characters

#### Meningococcal Conjugate (MCV4)

Most Recent Dose  YEAR

MCV4 Comments

Max of 250 characters

#### Meningococcal Polysaccharide (MPSV4)

Dose #1  YEAR

Dose #2  YEAR

MPSV4 Comments

Max of 250 characters

#### Pertussis

Dose #1  YEAR

Dose #2  YEAR

Dose #3  YEAR

Dose #4  YEAR

Dose #5  YEAR

Pertussis Comments

Max of 250 characters





## Tuberculosis Testing

Most Recent PPD

YEAR

Result of PPD

Tuberculosis Comments

Max of 250 characters

## Other Immunizations

List any other immunizations that you have received

Max of 500 characters

## Medical History (check all that apply)

☐ Aortic stenosis

☐ Asthma

☐ Chronic respiratory disease

☐ Myocardial infarction

☐ Other cardiac disease

☐ Other relevant medical condition

☐ Phobias to Animals

☒ Phobias to Confined Spaces

☐ Phobias to Darkness

☐ Phobias to Light

☐ Severe angina pectoris

☐ Severe musculoskeletal disease

☐ Severe obesity

☐ Skin: open sores, rash, sunburn

☐ Spontaneous pneumothorax

☐ Symptoms of fever, N/V/D, cough

☐ Uncontrolled hypertension

Describe any Medical History options that have been checked

Max of 500 characters





Describe any Medical History options that have been checked

*Max of 500 characters*

**Current Medications**

*Max of 500 characters*

Save

Cancel



## Response Profile: Samantha Royster

Team Participation

Badge

Home Address

Contact Info

Deployment Preferences

Emergency Contact

Driver's License/ID

Languages

Medical

**Skills**

Occupation

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

### Skills

#### Healthcare Skills

- ☐ \*Placeholder Value\*
- ☒ Animal First Aid
- ☒ Automated External Defibrillator
- ☒ Bloodborne Pathogens
- ☒ Cardio-pulmonary Resuscitation
- ☐ Contamination Control
- ☐ Disease Surveillance
- ☒ First Aid
- ☐ Hospital Emergency ICS
- ☐ Hospital Preparedness
- ☒ Patient Care/Positioning
- ☐ Radiation Physics
- ☐ Radiation quality assurance
- ☐ Radiological laboratory analyses
- ☒ Radiological Monitoring
- ☐ Radiology and CT
- ☐ SNS Mass Dispensing
- ☐ Vaccination Administration
- ☐ Vaccine Administration, Smallpox
- ☐ Veterinary Medicine

#### Other Skills

- ☒ Animal Handling
- ☒ Clerical Work
- ☒ Community Emergency Response Team Training
- ☐ Computer Networking
- ☒ Data Entry
- ☐ Data Processing Software
- ☐ Farm Biosecurity
- ☒ Forklift Operator
- ☒ Inventory Management
- ☐ Loading/Shipping
- ☒ Office Management
- ☐ Personal Protection Equipment Training
- ☐ Psychosocial Support Training
- ☐ Risk Communication/Media Relations
- ☒ Search and Rescue
- ☐ Security/Law Enforcement
- ☐ Special Populations Training
- ☒ Volunteer Management
- ☒ Volunteer Reception Center Training
- ☒ Word Processing Software
- ☐ Workforce Resilience Program Training

Save

Cancel





## Response Profile: Samantha Royster

Team Participation

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Home Address

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Emergency Contact

Driver's License/ID

Languages

Medical

Skills

**Occupation**

DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

Occupations [Add Entry](#)

**Your Primary Occupation is required!**

To add an entry, press the button to Add Entry. Click the hyperlink on a listed Occupation to update that entry.

Occupation	Facility	
<a href="#">Emergency Manager</a>	NC State EOC	





## Occupations

Add Entry

### Your Primary Occupation is required!

To add an entry, press the button to Add Entry. Click the hyperlink on a listed Occupation to update that entry.

Occupation	Facility	
Emergency Manager	NC State EOC	

Occupation

\* Type of Occupation

\* Occupation

Medical  
Non-Medical

\* Current Professional Status

Continue

Cancel



## Response Profile: Samantha Royster

Team Participation

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Languages

Medical

Skills

Occupation

**DEA Registration**

Licenses/Certifications

Trainings

Degrees & Other

### DEA Registration

\* Do you currently have a DEA Registration?

No



### Registration

Name on Registration

*For an Individual registration, enter Last Name only.*

*For a Business registration, enter the Business Name*

Registration Number

Have you ever involuntarily surrendered or had a federal controlled substance registration revoked, suspended, restricted, or denied?

No



Save

Cancel







## Participant Qualifications and Credentials

Qualifications & Credentials Currently on File for: Samantha Royster

Item	Description	Status	Number	Effective	Expiration
------	-------------	--------	--------	-----------	------------

[Back](#)

### Requests to Add Items to Transcript

You may request to add a License, Certification, Registration or Credential to your transcript. If your request is approved, the requested item will be added to your transcript. You may withdraw a request if it has a status of Requested.

[License, Certification, Registration](#)

[Request Credential](#)

Item Type	Item Description	Requested	Request Status	Status Date
-----------	------------------	-----------	----------------	-------------



## Training & Exercise Participation

### Registration History for: Samantha Royster

By default, registrations that you have on file with a status of REGISTERED, WAIT LIST or PENDING are listed. Select a different Status (or no Status at all) and press the [Refresh Listing](#) button to view other/all registrations.

Registrations with a COMPLETED status and a certificate on file will include a Certificate link to access your certificate.

Filter by Status

REGISTERED, WAIT LIST or PENDING ▼

From

Thru

Order By

Earliest Start Date ▼

[Refresh Listing](#)

[Back](#)

Title/Location	Start-End	Status	CEUs	Grade
<b>CERT - Community Emergency Response Team Basic Training Class (NC-317)</b> Location: Mountain Retreat Center (Macon County), Highlands	02/07/2014 02/12/2014	WAIT LIST		
<b>Lift Truck Safety (NC-4100)</b> Location: CapRAC Warehouse - Wake County, Garner	06/30/2017	WAIT LIST		
<b>Technical Rescue Awareness &amp; Considerations for Animal Emergencies (NC-PEART-24)</b> Location: Kernersville FD, Station 42, Kernersville	08/19/2023	REGISTERED <a href="#">Withdraw</a>		





## Response Profile: Samantha Royster

Team Participation

Badge

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DEA Registration

Licenses/Certifications

Trainings

Degrees & Other

### Degrees [Add Degree](#)

To add an entry, press the button to Add Degree. Click the hyperlink on a listed Degree to update that entry.

Degree	Institution	Conferred	
<a href="#">Bachelor</a>	NC State University	December 1998	
<a href="#">Master</a>	NC State University	December 2009	

### Other Relevant Experience [Add Experience](#)

To add an entry, press the button to Add Experience. Click the hyperlink on a listed Experience to update that entry.

Experience	Start Year	End Year	
<a href="#">CERT Training</a>	2010		
<a href="#">Search and Rescue</a>	2009		





## Response Profile: Samantha Royster

### Team Participation

Badge

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### Team Participation

#### Credentials for Team Participation

***What response team positions do you feel you are credentialed to fill?***

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Request a Credential

Details and Renewals

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To request membership on a response team, click the button to Join a Team. Select one or more teams and Request Membership.

You can check the status of your requests at any time. The Membership Requests & Invitations panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership

Join a Team

Team Memberships

Membership Requests & Invitations

Response History





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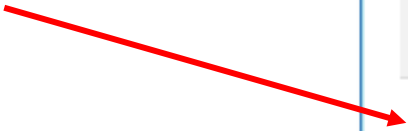
Request Team Membership

Join a Team

- ▼ 2 ESF6 - Mass Care and Human Services
- ▼ 1 ESF7 - Logistics
- ▼ 56 NC Community Emergency Response Team (CERT) Program
- ▼ 7 ESF8 - Public Health and Medical Services
- ▼ 2 ESF9 - Search and Rescue
- ▼ 1 ESF10 - Hazardous Materials



- ☐ Moore County CERT
- ☐ Mooresville CERT
- ☐ Morrisville CERT
- ☐ NC CERT Statewide Deployment
- ☐ NCCU Campus CERT
- ☐ New Bern CERT
- ☐ New Hanover County CERT



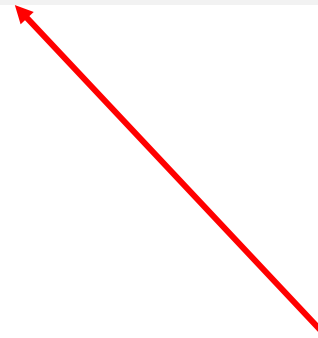


▼ **1** ESF7 - Logistics

▼ **56** NC Community Emergency Response Team (CERT) Program

Select the Response Teams you wish to join.

[Request Membership](#)





Emergency Management  
NC DEPARTMENT OF PUBLIC SAFETY

