

Unified San Diego
County Emergency
Services Organization
And
County Of San Diego

Operational Area
Emergency Plan

ANNEX G

Care And Shelter Operations

October 2010

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Unified San Diego County Emergency Services Organization

ANNEX G

Care And Shelter Operations

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ANNEX G

CARE AND SHELTER OPERATIONS

I. General

Introduction

Mass care and shelter is an organized way of providing safe havens for large numbers of people temporarily displaced from their dwellings by natural, technological or man-made emergencies or disasters. This plan is specifically designed to address the need for temporary shelter during large-scale emergencies and/or major disasters. This plan does not apply to day-to-day emergencies. Typically, the American Red Cross Chapter is capable of responding to day-to-day emergencies that require sheltering, using their own resources.

Purpose

The purpose of this plan is to:

1. Define the collective and individual responsibilities of County and/or City governments and non-governmental agencies responding to or acting in support of mass care and shelter operations.
2. Establish lines of authority and communications in support of the activation and operation of this plan.
3. Describe Care and Shelter operations within the County of San Diego

Situation and Assumptions

Situation

Based upon the County's hazard analysis, there are several emergencies for which shelters may be required including floods, hazardous material accidents, fires, earthquakes, wildfires or acts of terrorism. The County of San Diego is responsible for shelter operations.

There are many identified locations that may be used as shelters. These locations will be used depending on area of impact and type of situation.

Sheltering for San Diego County evacuees will be coordinated through the Operational Area Emergency Operations Center (OA EOC) a.

Assumptions

A high percentage of evacuees will seek shelter with friends, relatives or find their own means of shelter rather than go to a public shelter. Typically only 10% - 20% of the affected population will seek public shelter.

Evacuees will be provided with information in the shelter concerning the current situation of the disaster.

Objectives

The overall objectives of care and shelter operations are to:

1. Coordinate and provide food, shelter, medications, medical assistive equipment, crisis counseling and other basic disaster caused needs.
2. Coordinate and provide inquiry service to reunite separated families or respond to inquiries from relatives and friends outside of the affected areas.

II. Organization

Shelter Management/Operations

The County of San Diego Health and Human Services Agency (HHSA) will be the lead agency responsible for providing mass care. The American Red Cross (ARC) will provide mass care services until the ARC determines that it has reached its maximum capability to provide mass care services.

Below is a list of potential ways that shelter operations could be organized:

American Red Cross (ARC) Shelters

The traditional ARC shelter model is one in which the ARC occupies a facility, plans, organizes, directs and controls every aspect of the services provided at the shelter.

County Operated Shelters

The County of San Diego assumes all responsibility for the services provided in the shelter, including liability and fiscal accountability. The primary workers will be the members of the County's Shelter Team Program.

City Operated Shelter

Shelters operated by a City government assume all responsibility for the services provided in the shelter, including liability and fiscal accountability.

ARC managed shelters with City/County support

Also referred to as Partner Shelters, the majority of the shelter staffing will come from the partner agencies (City/County). The shelter will be under the administrative control of the American Red Cross. The American Red Cross will plan, organize, direct and control the services provided at the shelter. Direct delivery related expenses will be provided by the American Red Cross. However, liability will be shared by the American Red Cross, the facility owner, and the partner based upon their respective responsibilities. All agencies participating in such a shelter must adhere to the American Red Cross' Code of Conduct.

City/County managed shelters with ARC support

The managing agency maintains administrative control and assumes responsibility for planning, organizing, directing, and controlling every aspect of the shelter and the relief services provided.

The American Red Cross may support the shelter with pre-negotiated levels of financial, logistical, material or technical support. All agencies participating in such a shelter must adhere to the American Red Cross' Code of Conduct.

Independent Shelters

These are shelters that spontaneously appear due to community-based organizations or faith-based organizations trying to meet a perceived need. Independent shelters are outside of the established response mechanism. In the event that a group of citizens or a community organization opens a shelter without American Red Cross, OA EOC or local jurisdiction approval, that entity will assume financial and legal responsibility for the shelter.

Types of Shelters

Three levels of sheltering have been developed for shelter operations in San Diego County. The tiered levels were created to ensure appropriate care is provided, and adequate shelter staff is available at each shelter depending upon the needs of the population residing in the shelter.

Level I – Congregate Care Shelter

Description

Those who are independent and capable of self-care requiring only minimal support for minor illnesses and injuries.

Those with conditions requiring observation or minor supportive assistance in activities of daily living. Independent with some family/caretaker support.

Those with conditions requiring some level of privacy or separations but do not require skilled or continuous health care support from facility staff. *If adequate staff and privacy are not present, this population will need to be referred to Level II Facility.*

Examples

Well, able-bodied; sprains, strains, cuts, colds; those taking medication for stable acute or chronic conditions such as arthritis.

Those that require the use of wheelchair or assistive device but can transfer; stable diabetics (insulin or diet controlled); those who are currently stable but on medications for cardiac or respiratory conditions; and those with controlled hypertension, or renal problems.

Those requiring assistance from family member/caretaker in activities of daily living and have that person with them; those with portable Oxygen in use and with knowledge of how to administer; those with non-infectious TB case receiving daily treatment; and those with moderate Alzheimer's or dementia.

Level II – Designated Care Shelter

Description

Those requiring frequent or continuous surveillance for potentially life threatening conditions or require bedding or bathroom facilities not available in a congregate shelter.

Examples

Incontinent persons or those requiring assistance with toileting; those with limited mobility who cannot sleep on a cot or transfer; or those with severe dementia.

NOTE: Congregate Care sheltering is not ideal for the following individuals: Every effort should be made to place them in an appropriate (like-bed) facility. Only in extreme situations would Skilled Nursing Facilities be housed and cared for in a congregate care shelter serving as an Alternate Care Site. All decisions regarding relocation of a resident in a Skilled Nursing Facility must be approved through the Emergency Medical Services Department Operations Center.

Level III – Alternate Care Site

Description

Those requiring skilled care, continuous observation, or special equipment and services usually found in a hospital.

Examples

Those needing IV feeding or medication; those completely bedridden requiring total care; those with uncontrolled chronic or acute physical or mental conditions.

Unique Populations

Convicted Sex Offenders

The safety of all shelter residents and children is paramount. It is essential that parents/guardians provide oversight of their children at all times.

Pursuant to California Penal Code 3003.5 (b) "Notwithstanding any other provision of law, it is unlawful for any person for whom registration is required pursuant to Section 290 to reside within 2000 feet of any public or private school, or park where children regularly gather." An emergency temporary shelter is not a residence, and therefore the law does not apply. A convicted sex offender may temporarily reside at a school or facility in a park, provided the stay is provisional and not permanent.

Pursuant to the provisions of the California Emergency Services Act, during a locally proclaimed disaster, the County of San Diego has the ability to authorize functions or duties to be performed in order to provide emergency services to the residents of San Diego County.

Convicted sex offenders have the legal right to lodge at all mass care shelters without the need to divulge criminal record information. If the offender chooses to inform any authority, this information shall only be provided to the appropriate personnel. No information shall be publicly revealed.

When a convicted sex offender does disclose their status:

1. If only the Shelter Manager/workers are aware of the situation, confidentiality must be maintained and the person should remain in the shelter until they are able to return home, unless other actions are determined necessary by the Shelter Manager/Workers.
2. If other shelter residents are aware of the situation, the resident must be relocated to another facility for their safety.
3. Individual agencies may provide alternate housing at the agencies' expense as the situation warrants.

Pre-disaster Homeless Population

Congregate care shelters are designed to assist residents displaced from their homes due to a disaster by providing for their disaster caused emergency needs.

Pre-disaster homeless populations may reside at a shelter and have their basic needs met, however, a shelter will not remain open only for the homeless population.

Every effort should be made to assist the pre-disaster homeless population with relocation and other assistance they may require.

The OA EOC will be able to assist in requesting resources from the homeless resources in San Diego County. These resources include, but are not limited to the Homeless Outreach Team, Interfaith Shelter Network, and St. Vincent de Paul Village. 211 San Diego is another resource to find available services for the pre-disaster homeless.

Unaccompanied Minors

Mass care shelters shall provide food, shelter, and safety for those under the age of 17 that arrive at a shelter without their parents/guardians.

In order to ensure the health and safety of unaccompanied minors, they must reside in a separate but co-located area/room within the shelter where they shall be monitored and cared for by appropriate staff until they can be relocated with their parents.

If a child is unable to be reunited with their parents, the Law Enforcement Branch in the OA EOC should be contacted to request the Sheriff's Juvenile Investigators for assistance.

Language Barriers

When a population is affected that is unable to communicate with the shelter team on site, there are various sources for translators: County of San Diego Department of Human Resources, 211 San Diego, American Red Cross, and Deaf Community Services for American Sign Language specifically.

III. Authorization

County of San Diego Health and Human Services Agency (HHSA)

HHSA will be responsible for leading care and shelter operations.

Responsibilities are defined as follows:

1. During an emergency or proclaimed disaster, the Director of the County Health and Human Services Agency, or designee, shall report to the OA EOC and serve as the Care and Shelter Branch Coordinator.
2. The Care and Shelter Branch Coordinator shall:
3. Coordinate local government support for Care and Shelter Operations.
4. Coordinate resources and mutual aid requests for government agencies or departments.
5. During an EOC activation, HHSA shall:
 - A. Assist with communications as needed, to establish required communication between the OA EOC, American Red Cross Disaster Operations Center, and other locations.
 - B. Continue to provide essential public assistance services.
 - C. Provide trained personnel to mass care shelters as available and upon request.
 - D. Provide care for unaccompanied minors.
6. Ensure that an adequate number of HHSA personnel are trained in shelter operations.
7. Co-chair the Care and Shelter Subcommittee of the Unified Disaster Council.
8. Develop, maintain, and test Care and Shelter Operations plans for the Operational Area in conjunction with UDC Care and Shelter Subcommittee.

Health and Human Services Agency, Public Health Nursing

When requested by the American Red Cross/City operated shelters through the OA EOC Care and Shelter Branch and when resources are available:

1. Administer first aid following American Red Cross protocols for minor illness and injury and refer clients to a higher level of care when appropriate.
2. Perform health assessments of shelter residents who self identify with health problems and develop a plan to meet clients' immediate health needs.
3. Monitor persons identified with special health concerns such as chronic diseases and pregnancy.

4. Assist the shelter manager with maintaining the shelter in a manner that protects the clients from contracting communicable diseases common in group living situations.
5. Provide resources to crisis counseling services and provide support to clients.
6. Monitor food preparation and distribution to promote the protection from food-borne diseases in cooperation with Environmental Health.
7. Assist shelter residents with general health education and advice.
8. Assist shelter residents with replacing lost medications and medical devices.
9. Provide referrals to other local, county and State agencies that provide medical and social services.
10. Provide status reports to the Public Health Nurse Management representative at the Emergency Medical Services Departmental Operations Center or the HHS Department Operations Center.
11. Assist with requests for trained nurses, health care providers, social services, and supplies based on shelter needs and assessment to the Emergency Medical Services Departmental Operations Center.

In addition to above, the Public Health Nurse may perform the following additional duties in a County operated shelter:

1. Assist with the initial screening of evacuees as they come to the shelter and refer as needed
2. Filling the role of a Medical Manager to oversee the overall management of the medical services in the shelter.
3. Perform additional duties as assigned by the Chief Public Health Nurse or designee.

In addition to above, the Public Health Nurse may perform the following additional duties in the County Level II shelter working alongside Medical Reserve Corp:

1. Oversee and assist evacuees with Activities of Daily Living (ADLs).
2. Oversee and monitor evacuees with stable chronic medical conditions (such as obtaining vital signs and glucose levels).
3. Oversee and assist with coordination of care for evacuees to receive hospice care, home health, and other services.

Health and Human Services Agency, Behavioral Health Services

Provide crisis counseling at sites as requested, per Annex M, Behavioral Health Operations, as available. Collaborate with community partners to extend required services as necessary.

County of San Diego, County Shelter Team Program

1. The County Shelter Team Program is designed to augment the sheltering resources of the American Red Cross.
2. The County Shelter Team Program may administer Level I shelters once American Red Cross resources are exhausted.
3. The County Shelter Team Program will be the primary operators for Level II shelters.
4. Teams are made up of County employees from various departments that have been trained prior to a disaster in either Shelter Management or Shelter Operations. The medical services providers will be assigned through the Emergency Medical Services Department Operations Center.
5. For an average shelter accommodating 100-200 residents, teams are made up of one Shelter Manager and three to four Shelter workers per shift, and can be scaled up depending upon the size of the shelter.

American Red Cross, San Diego/Imperial Counties Chapter

The American Red Cross (ARC), as mandated by Federal Law 36-USC-3 and reaffirmed in Public Law 93-288 (Federal Disaster Relief Act of 1974), provides disaster relief in peacetime and works cooperatively with state and local governments and other private relief organizations.

The American Red Cross (San Diego/ Imperial Counties Chapter) may open a maximum of 7 shelters (estimated population between 5,000 to 10,000 people) within the first 72 hours of an incident. These figures are dependent upon the facilities available during a given disaster and overall situational safety.

1. Prior to a disaster requiring congregate sheltering, the American Red Cross will assist in the following ways:
 - A. Assist in the development and maintenance of the Care and Shelter Annex to the Operational Area Emergency Plan in conjunction with HHS, OES, and the Care and Shelter Subcommittee of the Unified Disaster Council.
 - B. Provide mass care training to requesting government agencies, non-governmental agencies, and community based organizations.
2. During an emergency or when requested, provide:
 - A. Emergency lodging in congregate care facilities for disaster victims.
 - B. Food for persons in emergency congregate care facilities.
 - C. In a non-federally declared disaster, if funding exists and with the support of other disaster response agencies/organizations; a means to purchase new clothing, temporary housing, possible assistance with rent and security deposit, medication and health needs and occupational supplies.
 - D. In a federally declared disaster, with the approval from the National American Red Cross office; the local chapter will provide for the

emergency support needs (such as food, shelter, and medical services), and bulk distribution of mass care supplies as defined by the incidents' needs to support the efforts of government agencies.

- E. Physical Health Services: provide support to persons who have disaster-related or disaster-aggravated health needs. Assist clients in the procurement of prescribed medications lost in the disaster. Provide financial assistance as needed for medications and medical-related items. Provide minor first aid treatment of patients. Disaster Health workers do not provide treatment for pre-existing injuries or provide medical diagnosis.
- F. Crisis Counseling Services: provide emergency and preventive crisis counseling services to people affected by the disaster. This includes methods to cope with disasters, crisis intervention and referral services to meet behavioral health-related concerns. Disaster crisis counselors do not provide diagnosis, long term therapy, or prescribe/administer medications.
- G. Food for disaster workers if normal commercial feeding facilities are not available.
- H. Welfare Inquiry for family members and friends trying to relocate/reunite with people in the affected area. Individuals must register themselves and their families by calling or through the American Red Cross website. Typically, there is a 48-72 hour moratorium on requests in order for the American Red Cross to concentrate on the immediate needs of the disaster victims.
- I. Liaison personnel to the OA EOC and/or to the Incident Command Post. This position must possess:
 - 1. A thorough knowledge of the American Red Cross system and procedures.
 - 2. Understanding of the OA EOC and it's purpose.
 - 3. Familiarization with WebEOC.
 - 4. Ability to work within the established County protocols to meet the needs of the community.
 - 5. Ability to assist the Department of Animal Services with coordinating and management of animals brought to American Red Cross Shelters.
- J. Distribute appropriate bulk supplies as required by the needs of the affected community.
- K. During a disaster when local American Red Cross resources are exhausted, initiate mutual aid requests from neighboring American Red Cross Chapters and/or if needed, request assistance from National American Red Cross.

- L. Co-chair the Care and Shelter Subcommittee of the Unified Disaster Council.

Unified Disaster Council Care and Shelter Subcommittee

Responsibilities of this subcommittee shall include the following:

1. Develop, maintain, and test Care and Shelter Operations plans for the Operational Area in conjunction with American Red Cross and the HHSA.
2. Delineate criterion and method of justification for activation of this Annex.
3. Review and update Care and Shelter Annex as needed.

County of San Diego, Office of Emergency Services (OES)

As primary responsibilities, the OES shall:

1. Support the American Red Cross, HHSA, local municipalities, and School Districts in the coordination and planning activities of the Care and Shelter Subcommittee of the Unified Disaster Council.
2. Activate and manage the OA EOC.

Area Law Enforcement Coordinator

Responsibilities of the Area Law Enforcement Coordinator are as follows:

1. Law Enforcement agencies will ensure that they coordinate with the Care and Shelter Branch of the OA EOC during a disaster, so as to ensure adequate locations for sheltering or temporary evacuation points are identified for residents that may be displaced from their homes. Whenever possible, coordination with the Care and Shelter Branch Coordinator should occur prior to evacuation of a given area.
2. Any time additional evacuations are ordered, Law Enforcement agencies should be in contact with the Care and Shelter Branch of the OA EOC.
3. Law Enforcement must confer with the Care and Shelter Branch of the OA EOC before announcing shelter facility locations.
4. Law Enforcement agencies will provide temporary security at shelter sites if theft or aggression issues become problematic. This is only temporary until alternate arrangements can be made for security at the site.

County of San Diego, Department of Animal Services

The Department of Animal Services shall:

1. Coordinate with the Care and Shelter Branch in the OA EOC to ensure care for pets brought to shelters as required.

2. Provide referrals to evacuees for animal services and resources.
3. Assist with lost and found inquiries.

County of San Diego, Department of Human Resources

The Department of Human Resources, Director shall appoint a Vulnerable Population Unit Leader to the OA EOC, who shall:

1. Ensure specialized services are provided as required for the vulnerable population groups including the aged and disabled.
2. Coordinate local government support for vulnerable populations at shelters.
3. Collaborate with the Care and Shelter Branch Coordinator to coordinate resources and requests for the vulnerable populations in shelters.

Emergency Medical Services Department Operations Center (EMS DOC)

Emergency Medical Services (EMS) will be responsible for the activation of the Emergency Medical Services Department Operations Center (EMS DOC).

Upon this activation, the DOC will coordinate the following to support shelter operations:

1. The overall medical response to the specific event.
2. The dispatching of medical service providers to shelters as requested – either with the Medical Reserve Corps (MRC) members, Public Health Nurses (PHN), and others.
3. Dispatching the Disaster Rapid Assessment Team (DRAT)

County of San Diego, Medical Reserve Corps

1. Upon the orders of the Public Health Officer, the Medical/Health Branch Manager at the OA EOC, or the EMS Duty Officer through the EMS DOC, will activate Medical Reserve Corps volunteers during an event in which local established clinical resources are exceeded.
2. These volunteers, as clinical disaster service workers, will provide medical support to shelters as needed and as available.

Disaster Rapid Assessment Team (DRAT)

1. A DRAT is a designated unit of volunteer and County of San Diego health care professionals, trained to operate in a disaster situation as a coordinated team to assess potential/current shelters for the need of medical resources.
2. The intent and purpose of the DRAT will be to provide health intelligence for the EMS DOC regarding the need for medical staff, supplies and care at shelters that have been established or spontaneously opened during an evacuation event.

3. The DRAT will respond to events requiring sheltering. They will perform assessments at shelter sites for the medical needs. They will never be sent into a hot or warm zone, but may serve in a field situation.
4. DRATs will be made up of appropriate compositions of staff as needed, determined at the time of the disaster.
5. Specialized DRATs respond to just one type of incident, such as a mass evacuation of an acute care hospital or Skilled Nursing Facility where a specific specialty may be required. They will be called upon to respond in their area if needed after the general DRATs are deployed and have requested further assessment for that specific event.
6. A specialized DRAT will consist of the required health care or response personnel, such as Behavioral Health, Child Protective Services, or Aging and Independence Services.

San Diego County, Public School Districts

Reference Section 40041.5 of the Education Code, concerning the granting of school facilities for "mass care and welfare shelters during disasters or other emergencies affecting the public health and welfare."

1. Collaborate with the OA EOC in the post-incident designation of facilities for use as Mass Care Shelters.
2. Enter into written agreements with the American Red Cross and the County of San Diego concerning the use of facilities and each year provide an updated 24-hour emergency contact for each facility.
3. Insure that building maintenance, and if required, food service personnel are provided in those facilities opened as Mass Care Shelters.

San Diego County Office of Education

1. Assist School Districts in the development of Standard Operating Procedures to facilitate "furnishing and maintaining such services as the governing board may deem necessary to meet the needs of the community." (Reference: Section 40041.5, Education Code).
2. Annually provide two copies of the directory of schools and school districts in San Diego County to both the Office of Emergency Services and the local American Red Cross.

All Affected Agencies and Organizations

Responsibilities of all other affected agencies and organizations are as follows, where appropriate:

1. Prepare Standard Operating Procedures (SOP) for response to Care and Shelter Operations, including a system for automatic personnel reporting and disaster assignment.

2. Train personnel and alternates.
3. Each city shall designate a representative for the Care and Shelter Subcommittee of the Unified Disaster Council. This representative should maintain an active involvement with the Care and Shelter Subcommittee of the Unified Disaster Council.

IV. Functions

Activation and Termination

Activation Conditions: This Annex is activated when a real or potential emergency or situation exists in which Mass Care is required.

Activation Authority

Activation of this Annex shall be by the direction of:

1. The County's Chief Administrative Officer (CAO), or designated Assistant CAO, in the capacity of Director of the Unincorporated area, or as Operational Area Coordinator of the Unified San Diego County Emergency Services Organization; or
2. The Director of HHSA, County of San Diego; or
3. The Director, San Diego County Office of Emergency Services (OES); or
4. The Incident Commander; or
5. The Emergency Services Director or the designee of any jurisdiction signatory to the Emergency Services Agreement; or
6. The Manager of Response, or designee, American Red Cross, San Diego/Imperial Counties Chapter.

Termination

Termination of this Annex shall take place once there is no longer a threat to community members, and all displaced residents are able to find alternate lodging. The care and shelter provider must indicate that there is no need for this Annex to remain activated.

V. Notification And Communication

Notification

Responsibility for notifying the American Red Cross of an incident requiring Shelter Operations rests with the Incident Commander/Scene Manager of the agency in charge at the scene of the incident. Procedures for alerting and notifying the American Red Cross should be incorporated into departmental Standard Operating Procedures. Each department with potential for being an Incident Commander/Scene Manager should establish procedures for notifying the American Red Cross during emergency and disaster situations.

Notification shall consist of access to the Incident/Scene Commander for current situation intelligence, including human resource and information needs and ongoing updates. This information should include incident type, Command Post locations, Incident Commander/Scene Commander's name, number of persons affected, estimated duration, communications frequencies in use and specific requests of American Red Cross. Notification can also be initiated by the Office of Emergency Services.

Should the American Red Cross be unable to respond, the Office of Emergency Services Staff

Duty Officer must be notified immediately to activate the County Shelter Team Program.

Communications

Communications in support of Care and Shelter Operations are primarily determined by the available infrastructure (i.e. Land-line, Cellular phones, etc...). However, when these methods are not available, the use of Radio Amateur Civil Emergency Service (RACES) through the Sheriff's Department when available, could be dispatched to shelter facilities in order to relay information to the OA EOC. The alternate form of communications for the San Diego/Imperial Counties Chapter of the American Red Cross is a commercial trunk UHF radio system. The American Red Cross also works closely with the San Diego County RACES group by providing an amateur radio operator liaison to them. This relationship provides the American Red Cross a direct link to the OA EOC in the event of a major disaster resulting in communication outages.

VI. Administration Of Mass Care

In coordination with the Care and Shelter Branch Coordinator or designee, the American Red Cross will determine where mass care facilities will be needed and which facilities are suitable.

The American Red Cross will initiate shelter openings, assign shelter staff, and request that the opening of American Red Cross shelters and mass feeding centers be announced through the Emergency Alert System (EAS) or other established public information channels.

First Aid and Health Services

1. Medical services and basic emergency First Aid will be provided in all shelters either by American Red Cross Disaster Health Services, County of San Diego Public Health Nursing, or the County of San Diego Medical Reserve Corps.
2. The task of medical services in the shelters is to promote health, to prevent disease, to treat minor illnesses and injuries, and to refer for the care of the seriously ill and injured.
3. San Diego County HHSA, Behavioral Health Services will be available to provide crisis counseling at identified sites, if requested (refer to Annex M).

Resources and Support

All requests for mass care assistance should be requested through the OA EOC Care and Shelter Branch Coordinator(s) as required. This could include requesting trained personnel, emergency services support, or assistance in securing supplies.

Records and Reports

1. The American Red Cross is responsible for the maintenance of mass care records, specifically the Shelter Resident Registration form. Even in a County Shelter, the forms will be provided to the American Red Cross for safe keeping and to provide a quicker mechanism for follow-up.
2. As requested by the Care and Shelter Branch Coordinator, American Red Cross will share statistics on care and shelter operations which do not violate their client confidentiality requirements.

Closing Shelters

Shelters will remain open until victims can return to their own homes, make their own arrangements for shelter, or until an alternate longer-term housing plan is implemented.

ATTACHMENT A

SAN DIEGO COUNTY CARE AND SHELTER SUBCOMMITTEE OF THE UNIFIED DISASTER COUNCIL

American Red Cross

County Health and Human Services Agency

County Office of Emergency Services

County Office of Education

County HHSA, Behavioral Health Services

County Fire Coordinator

County Law Coordinator

County HHSA, Public Health Services

City Care and Shelter Coordinators (18)

ATTACHMENT B

SAN DIEGO COUNTY CARE AND SHELTER COORDINATORS

City	Title of Designee
Carlsbad	*
Chula Vista	*
Coronado	*
County of San Diego	Director, Health and Human Services Agency
Del Mar	*
El Cajon *	
Encinitas	*
Escondido	Assistant Director, Community Services
Imperial Beach	*
La Mesa	*
Lemon Grove	*
National City	*
Oceanside	*
Poway	Assistant Director, Department of Community Services
City of San Diego	*
San Marcos	*
Santee	*
Solana Beach	*
Vista	*

***To be identified by the local Jurisdiction**

ATTACHMENT C

UNDERSTANDING BETWEEN THE UNIFIED SAN DIEGO COUNTY EMERGENCY SERVICES ORGANIZATION AND THE SAN DIEGO COUNTY CHAPTER OF THE AMERICAN RED CROSS

Purpose

This understanding defines the cooperative relationship existing between the San Diego County Chapter of the American Red Cross and the Unified San Diego County Emergency Services Organization in preparing for and dealing with disasters and other emergency situations. It is designed to implement, at a local level, those agreements reached at federal and state levels between the American Red Cross, the Defense Civil Preparedness Agency, and the State of California Office of Emergency Services.

Recognition

The San Diego County Chapter of the American Red Cross (hereinafter referred to as American Red Cross) recognizes the Unified San Diego County Emergency Services Organization as a special purpose body created by mutual agreement between and among the County of San Diego and the cities in the county, to perform extraordinary functions for both city and county governments in planning for and during the time of disaster.

The Unified San Diego County Emergency Services Organization recognizes American Red Cross as a volunteer disaster relief agency chartered by Congress through which the American people extend assistance to individuals and families affected by disaster. The American Red Cross does not assume responsibility for government functions but supports the work of government authorities in alleviating the results of disaster.

Cooperation And Coordination

American Red Cross and the Unified San Diego County Emergency Services Organization responsibilities in natural disasters have a close relationship. In order to achieve effective operations, avoid duplication of effort, and to ensure that all disaster needs are met, it is essential that the employment of all available resources be coordinated.

Therefore, it is agreed that:

1. Cooperative arrangements for planning, exchange of information and continuing liaison regarding preparedness for disaster operations will be maintained. Upon activation of the emergency plan, American Red Cross will provide liaison personnel at the Primary Decision Center, field operations center (assistance center), and such other disaster operational headquarters as may be designated.
2. During natural disasters, the American Red Cross will carry out its responsibilities in coordination with the Unified San Diego County Emergency Services Organization.

Special emphasis will be placed upon Mass Care Service with mutual selection, staffing and equipping of congregate care facilities. Additionally, American Red Cross will assist the Medical and Health Service, to the extent practicable, in the handling of mass casualties and the selection, staffing and equipping of Emergency Aid Stations.

3. Regardless of responsibility, whenever there is suffering and want from any cause, and basic human needs are not being met, American Red Cross will participate in community action in extending relief.
4. Although American Red Cross responsibilities in civil disturbance and war-caused disaster are clearly defined, American Red Cross will incorporate its activities, to the extent possible, and continue to serve as a component of the Unified San Diego County Emergency Services Organization with administrative and financial responsibility resting with the local government.

Signatory

COUNTY OF SAN DIEGO

By: *William A. Nelson*
Asst. Clerk of the Board of Supervisors

Ralph K. Kraft
Disaster Chairman,
San Diego County Chapter
American Red Cross

APR 10 1979

Date approved

Approved by the Board of Supervisors of
the County of San Diego

APR 10 1979 # 14

Porter D. Cronson
Clerk of the Board of Supervisors

A. L. Bailey
Chairman,
San Diego County Chapter
American Red Cross

APR 10 1979

Date approved

APPROVED AS TO FORM AND LEGALITY
JUNTY COUNSEL

David N. Brown
DEPUTY

ATTACHMENT D

MEMORANDUM OF UNDERSTANDING BETWEEN THE AMERICAN NATIONAL RED CROSS AND THE STATE OF CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

Purpose

- A. To recognize the respective roles and responsibilities of the American National Red Cross (herein referred to as the ANRC) and the State of California Department of Social Services (herein referred to as the DSS) in disaster preparedness planning and operations for natural and war related disasters, nuclear accidents, other emergencies, and civil disorders;
- B. To serve as a basis for mutual understanding and collaboration by which the resources of the ANRC and the DSS can be most effectively brought to bear for the relief of all persons affected by the above-mentioned types of disasters;
- C. To reaffirm that the ANRC and the DSS will discharge their respective responsibilities as described in the State of California Emergency Plan and as the ANRC is mandated to do by Congressional Charter and described in the Statement of Operational Relationships between the ANRC and the California State Office of Emergency Services (herein referred to as the OES); and
- D. To recommend working relationships between American Red Cross chapters and county welfare departments.

Legal Basis For Operational Relationships

- A. The ANRC is mandated by Federal law as defined in 36 USC-5 to undertake activities for the purpose of mitigating the suffering caused by natural disasters and other emergencies. The ANRC does not have the power to surrender the mandate created by its charter. This responsibility has been restated in the Federal Disaster Relief Act of 1974 (Public Law 93-288) and is recognized in the Statement of Operational Relationships between the ANRC and the California Office of Emergency Services.
- B. DSS and state government responsibilities derive from the California Emergency Services Act, the California Emergency Plan and Administrative Order 79-35.

Role Of The ANRC

- A. In all natural disasters and other emergencies the ANRC provides relief assistance in accordance with its established policy, procedures, and guidelines and as described in the Statement of Operational Relationships between ANRC and OES.
- B. The ANRC response in disasters does not require a governmental declaration of any type. Regardless of the size of the disaster or the number of families

affected, all assistance will be provided on a uniform basis. All ANRC assistance to disaster victims is an outright gift. No payment is ever required or requested and no ANRC supplies are ever sold.

- C. In time of major disasters or other emergencies, ANRC recognizes DSS as a resource for staff whose skills are readily adaptable to ANRC relief assistance programs.
- D. ANRC will provide training for state and local DSS staff who may be assigned to ANRC operations.
- E. In time of disaster ANRC will provide transportation and maintenance to DSS staff assigned to ANRC operations when duties are performed away from their local jurisdiction.
- F. The ANRC may act for or in behalf of local, State or Federal government disaster assistance programs on a purchase of services or other mutually acceptable reimbursable basis.

Role Of The Department Of Social Services

- A. The DSS recognizes that in time of natural disasters the ANRC has the primary responsibility for meeting urgent and emergency needs of disaster victims by providing food, clothing, shelter in congregate care or other facilities, welfare registration and inquiry, and other basic elements for human comfort and survival.
- B. DSS will coordinate the capability of all county welfare departments to respond to disasters of all types as outlined in state legislation and will coordinate support from other state agencies.
- C. DSS will continue to provide usual public assistance services during a disaster situation or a declared emergency.
- D. DSS will provide needed staff, as available, to assist ANRC in disaster operations. DSS staff may also be given time off to participate in ANRC training courses. Staff salaries and benefits will be provided by DSS in both preparedness training and operational assignments of DSS staff.
- E. The provision of Emergency Welfare Services falls within the authority of state supervised-county administered public Social Services. In the event of an officially declared state of emergency, and pursuant to the rules and regulations of the California Emergency Council, all state, regional and local government employees will become disaster workers; duties may include support of the American National American Red Cross.
- F. The DSS will work with the ANRC in time of disaster in the coordination of other private agencies.

Administrative And Financial Controls

- A. It is basic ANRC policy that administrative and financial control of its disaster related services cannot be delegated or assumed by others (as per ARC 3000 Series). Individuals and organizations, including government, cannot represent ANRC without prior agreement with and approval by ANRC.

Other Functional Understandings

- A. The ANRC has agreements with a number of United States Government agencies, including the U.S. Department of Defense, for the obtaining and shipment of essential equipment and personnel to supplement emergency operations.
- B. The ANRC may enter into contracts with public and private agencies, on a reimbursable basis, to provide ANRC support in rendering assistance to victims in emergency situations (e.g., Repatriation of Refugees).
- C. The ANRC will support, to the best of its ability, State and Federal efforts to alleviate suffering in war-caused disaster situations.

Other Provisions

- A. This Memorandum of Understanding shall become effective on date of signature below and shall remain in effect until 30 days after either party gives notice to the other party that it desires to terminate or modify the agreement.
- B. This Memorandum of Understanding does not supersede or replace the existing Statement of Operational Relationships between ANRC and the OES dated October 26, 1979.

APPROVED October 27, 1982



Gilbert R. Tills, Manager
Western Field Office, ANRC
Burlingame, California

APPROVED October 18, 1982



Marion J. Woods, Director
Department of Social Services
State of California

ATTACHMENT E

STATEMENT OF OPERATIONAL RELATIONSHIPS BETWEEN THE AMERICAN RED CROSS AND CALIFORNIA OFFICE OF EMERGENCY SERVICES (This statement supersedes all previous agreements.)

Purpose

This statement will:

- A. Outline the natural disaster program of the American Red Cross and the Office of Emergency Services, which coordinates the emergency activities of all state agencies;
- B. Show the relationship between the Office of Emergency Services (OES) and the American Red Cross (ARC) in conducting these programs;
- C. Recommend working relationships between American Red Cross chapters and local emergency (civil defense and disaster) organizations* for natural disasters; and
- D. Include an attachment defining ARC activities for war disaster and civil disturbance. (This information is treated separately because of distinct legal and operational differences.)

Legal Basis For Operational Relationships

- A. The OES, local government, and ARC are among the several agencies having statutory responsibilities in connection with natural disasters.
- B. American Red Cross responsibilities derive from Public Law 4 (33 Stats. 599).
- C. The OES and local government responsibilities derive from the California Emergency Services Act and related codes, ordinances, resolutions, agreements, and plans.
- D. Nothing contained in the California Emergency Services Act is construed to alter the ARC statutory obligations.

Basis For Agreements Concerning Natural Disasters

- A. ARC and OES responsibilities in natural disaster have a close relationship. Therefore, ARC Western Field Office and the American Red Cross California divisions and chapters will plan and act in unison with the OES, the emergency plans of the state and local governments, pertinent federal statutes, and this agreement.

***The term "civil defense" connotes government response to an emergency. References throughout this statement to state and local civil defense are synonymous with state and local governments.**

- B. This unified action denotes coordination between government and the American Red Cross but does not impose any administrative authority or fiscal control by government or its emergency organizations over the American Red Cross organizations, its policies, volunteers or employees.

American Red Cross Program In Natural Disaster

In accordance with the foregoing statements, the ARC will provide and finance services to meet human needs in natural disaster. Specifically, these services, extended on a grant basis, are listed and explained in paragraphs A and B below

- A. In Non-Presidentially declared disasters the services consist of:
1. Emergency Congregate Care (frequently termed Mass Care) which includes the:
 - a. Provision of emergency lodging for disaster victims in public or private buildings available for congregate care occupancy.
 - b. Provision of food and clothing for persons in emergency congregate care facilities.
 - c. Provision of food for disaster workers if normal commercial feeding facilities are not available.
 - d. Provision of welfare inquiry service.
 - e. Provision of blood and blood derivatives to hospitals and clinics for treatment of persons ill or injured as a result of a disaster.
 - f. Provision of medical and nursing care in American Red Cross shelters and operational facilities.
 2. Emergency Individual Assistance, which is given on the basis of uniform guidelines and procedures to individuals and families having urgent and verified disaster-caused needs, and which include funding for:
 - a. Food and clothing for disaster victims on an individual basis.
 - b. Rental of temporary housing; comfort and toilet articles; fare for payment of commercial transportation or the operation of personally owned vehicles; cleaning and laundry supplies; and other basic necessities.
 - c. Minor emergency home repairs essential to making home habitable.
 - d. Essential items of household furnishings such as bedding, towels, linens, table and chairs, repair/replacement of stoves, refrigerators, washing machines, and mattresses, springs and bed frames.
 - e. Emergency medical assistance, such as replacement of eyeglasses, dentures, prescriptions, etc.
 - f. Essential occupational supplies and equipment.

3. Additional Assistance which is given after the emergency period, is based on individual application and is designed to help families or individuals effect part or all of their recovery when they lack sufficient resources (which include the ability to borrow from commercial or government agencies or arrange credit buying). This program, based on need, not loss, includes the following types of assistance:
 - a. Food, clothing and maintenance.
 - b. Construction, purchase or repair of owner-occupied homes.
 - c. Extended medical and nursing care.
 - d. Household furnishings.
 - e. Occupational supplies and equipment.
- B. In Presidentially declared major disasters - The American Red Cross programs may be modified according to the availability of certain government benefits. The potential modifications are as follows:
 1. During the emergency phase the federal disaster program of food stamps, unemployment insurance, mini home repairs, short-term rental and mortgage payments may be rapidly available, reducing to some extent the need for all Red Cross emergency assistance described in paragraph A,2 above.
 2. During the long-range recovery phase, the additional needs of disaster victims, described in paragraph A,3, may be met by state and federal disaster assistance programs provided by the Disaster Relief Act of 1974 (Public Law 93-288). The American Red Cross gives or augments additional assistance only when a victim's total recovery needs cannot be met through the combined resources of state and federal assistance programs.

State And Local Government Responsibilities In Natural Disasters

State and local governments have inherent and statutory responsibilities in mitigating the effects of natural disaster. The more important of these responsibilities are as follows:

- A. Disseminating of danger warnings.
- B. Designation of dangerous areas.
- C. Ordered evacuation from endangered areas.
- D. Law enforcement.
- E. Fire suppression.
- F. Light and heavy rescue operations.
- G. Safeguards to public health and sanitation.
- H. Identification and disposition of the dead, including the operation of temporary morgues.
- I. Institutional care for the sick, aged, and orphaned.
- J. Repair and restoration of public facilities and buildings.

- K. Debris removal from public property.
- L. Salvage of unclaimed property.
- M. Arrangements with federal agencies for assistance under federal disaster relief programs.

Coordination Of Health, Medical And Welfare Programs

- A. Public Health and Sanitation
 - 1. Government is responsible for public health and sanitation. Public health authorities should arrange health inspection and sanitation controls in American Red Cross shelters.
- B. Medical Care of Disaster Victims
 - 1. The primary responsibility for the care of ill and injured disaster victims is vested in local emergency organizations by reason of disaster ordinances and plans. The American Red Cross will supplement medical requirements when local resources and additional mutual aid resources are exhausted. The supplementation may be as follows:
 - a. The recruitment of nurses to augment hospital staffs.
 - b. The assignment of nurses to hospitals for individual bedside care of disaster victims.
 - c. The establishment of first-aid stations.
- C. Welfare Programs
 - 1. The American Red Cross considers tax source benefits provided by state and local welfare departments (and other state and federal agencies) for disaster victims as resources, and the American Red Cross will not duplicate or underwrite these programs.

Natural Disaster Operating Principles

- A. Financing

An American Red Cross principle is that its administrative and fiscal controls are inseparable. Therefore, the American Red Cross does not assume costs for commitments made by other agencies or organizations.
- B. Personnel
 - 1. In some instances, individuals represent both government disaster organizations and American Red Cross Disaster Committees. Dual representation is inadvisable because of conflicting administrative and financial responsibilities.
 - 2. When the ARC is incorporated into the disaster plans of the state or local governments or is asked by them for a specific disaster assignment, the American Red Cross volunteers involved may be registered as disaster workers and thus become eligible for workmen's compensation benefits

authorized by the California Emergency Services Act.

C. Supply

1. The American Red Cross does not stockpile large quantities of supplies for disaster preparedness. Its requirements are met by purchase, rental, or borrowing. The American Red Cross will assume fiscal responsibility for loss, damage, or destruction of all equipment under its operational control, unless otherwise agreed to by the vendor of loaned or rented property.
2. The ARC has an agreement with the Department of Defense and the Coast Guard for obtaining military supplies, equipment and personnel to supplement its disaster activities and is financially liable for certain services, and for loss, damage, or destruction of borrowed material. Therefore any government or private agency request for military assistance, including air or surface transportation for accumulation of used clothing and other commodities, should not be channeled through the American Red Cross.

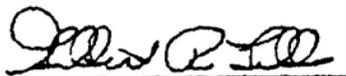
D. Communications and Liaison

1. The ARC will provide liaison personnel at OES state headquarters, affected mutual aid regional offices, and the civil defense and disaster operations headquarters of affected local governments, to the extent necessary to carry out the terms of this agreement.
2. The ARC will furnish or authorize the use of the communications necessary to effective liaison.

E. Disaster Declaration

The ARC response to disasters does not require a declaration of any type. Therefore American Red Cross divisions and chapters will act in numerous situations which constituted government may not consider sufficiently severe to proclaim the existence of a disaster. When minor disasters occur wherein only a few families are affected and the local chapter cannot finance relief costs, the National organization will provide funding for relief assistance.

Approved: Oct 26 1979


Gilbert R. Tills, Manager
Western Field Office, ARC
Burlingame, California

Approved: October 26, 1979


Alex R. Cunningham, Director
Office of Emergency Services
State of California

ATTACHMENT F

MEGA-SHELTER OPERATIONS

Introduction

Hurricane Katrina and the 2007 Southern California Firestorms have proven the significance of an infallible emergency plan for mass evacuations. In the event of a prolonged disaster, the government may need to activate and operate a mega-shelter. A mega-shelter is a major facility that is used to house thousands of evacuees from a major disaster area. Attachment F of Annex G is a standard operating procedure for the establishment and operation of a mega-shelter in San Diego County. It is a conglomeration of “best practices,” lessons learned, and standards from valuable resources such as the International Association of Assembly Managers (IAAM), the American Red Cross (ARC), and the 2007 Southern California Firestorms After-Action Report.

Mega-Shelter Activation/Termination

The selection and activation of a Mega-Shelter site is facilitated by the Activating Authority outlined in Annex G. All efforts should be taken to ensure that the facility meets safety, health, and security standards and/or indicators:

- Air-Conditioned
- Back-up Power Supply
- Adequate Restroom Facilities
- Adequate Area for Feeding Sheltered Population
- Located on Public Transportation Route
- Meet Americans with Disabilities Act Accessibility Guidelines

In the event of an earthquake, contact the following personnel for facility inspections:

- City’s Development/Engineering/Maintenance and Inspection Department of the designated facility’s jurisdiction
- County of San Diego Department of General Services

Within the San Diego County Operational Area are various facilities that could potentially be utilized as a mega-shelter. As planning continues, each facility will undergo a hazard-analysis inventory to determine its vulnerability to differing disasters. MOUs with the said facilities will be pursued at a later date. The following is a list of potential sites for a mega shelter facility within San Diego County:

San Diego Convention Center 111 W. Harbor Dr. San Diego, CA 92101

Petco Park 100 Park Blvd. San Diego, CA 92101

Qualcomm Stadium 9449 Friars Rd. San Diego, CA 92108

San Diego Sports Arena 3500 Sports Arena Blvd. San Diego, CA 92110

San Diego State University (Cox Arena) 5500 Canyon Crest Dr. San Diego, CA 92182
 University of San Diego (Jenny Craig Pavilion) 5998 Alcalá Park San Diego, CA 92110
 University of California San Diego (RIMAC Arena) 9500 Gilman Dr. San Diego, CA 92093
 Del Mar Fairgrounds 2260 Jimmy Durante Blvd. San Diego, CA 92014

The Activating Authority will coordinate the shelter contracts, liabilities, and reimbursements through the Operational Area Emergency Operations Center (EOC). Upon activation, a Shelter Manager will be appointed in which he/she will review the Shelter Manager Handbook located at the Operational Area EOC, and commence shelter operations.

NOTE: Termination of the mega-shelter operations will commence after the Activating Authority has officially secured from the disaster situation, and normal phase-down and deactivation operations have been completed.

Organization

The functional organization structure of a mega-shelter operation is shown in Figure G.F. 1.

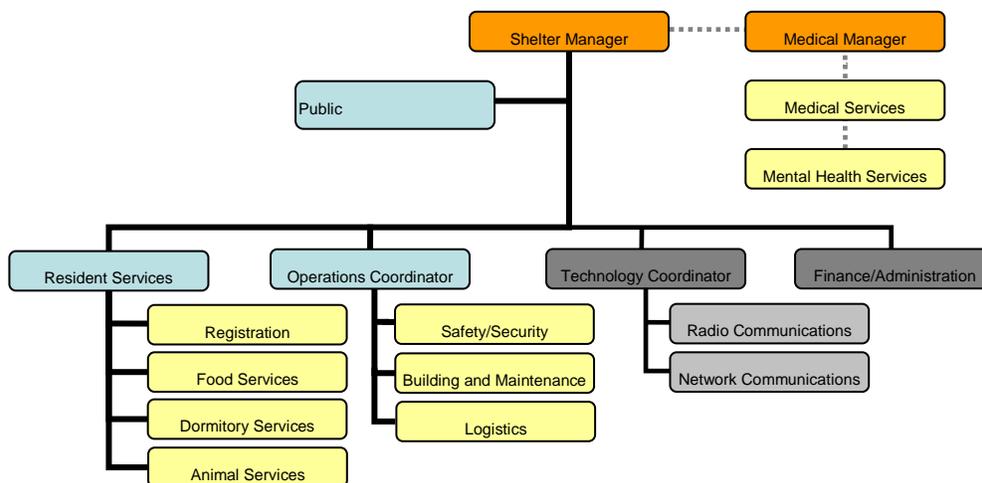


Figure G.F. 1

Shelter Manager – Responsible for overall operations at the mega-shelter. Will coordinate resources and services with the appointed directors and report to the Care and Shelter Coordinator at the Operational Area EOC. Shall be a San Diego County government representative.

Medical Manager – If activated, will be responsible for the coordination and operation of medical services. Will maintain communications and provide updates to the Shelter Manager. Shall be a representative from the San Diego County Health and Human Services Agency.

Resident Services Coordinator – Responsible for the coordination and operation of shelter resident services. Will report all updates to the Shelter Manager and maintain communications with appropriate directors. Shall be a San Diego County representative, or from the American Red Cross.

Operations Coordinator – Responsible for coordinating services vital to shelter operations.

Will report updates to the Shelter Manager and maintain communications with appropriate directors. Shall be a San Diego County government representative.

Technology Coordinator – If activated, will be responsible for the coordination and operation of technology services. Will report all updates to the Shelter Manager. Shall be a San Diego County Technology Office representative.

Finance/Administration Coordinator – If activated, will be responsible for finance and administration services. Will report updates and make requests through the Shelter Manager. Shall be a San Diego County government representative.

Public Information/Relations Coordinator – Responsible for establishing and maintaining effective relations with the public, the media, facility clients, shelter partners and shelter residents. Will report all updates to the Shelter Manager. Shall be a representative from the San Diego County Department of Media/Public Relations.

Mega-Shelter Operations

Registration Services

The Resident Services Coordinator will coordinate assistance and oversee the following services:

1. Evacuee Registration – Registration shall be conducted at a dedicated entry point in order to maintain flow of operations. Different colored wristbands will be used to identify the resident's accessible areas.
2. Spontaneous Volunteer Registration – Registration, credentialing and tracking of all volunteers for mega-shelter operations shall be held at an alternate site to ensure proper credentialing procedures. A form of identification will be utilized to identify volunteers.

Food Services

The Resident Services Coordinator will coordinate assistance with the appropriate agencies to provide the following services:

Kitchen Management – Cook and prepare all meals for shelter residents and volunteers.

- All Kitchen units abide by local, State, and Federal sanitation codes.
- The projected food is forecasted within the initial 24-48 hours. Prepare only the quantity of food sufficient for immediate use.
- Food temperatures are kept within appropriate ranges to preserve their quality. Store and maintain food outside the temperature danger zone (TDZ) of 41° F and 135° F.
- Food or water from unapproved sources ARE NOT ACCEPTED.

Catering Management – Ensure that all food and beverages are served in a safe and efficient manner.

- All catering staff has received required training, including safe food handling, and possesses appropriate qualifications to deliver feeding services.
- A designated dining area is established. Food is not permitted outside the area.
- Require all residents to sanitize hands before entering the food service line.

Beverage/Snacks Management – Provide beverages and snacks for the facility to shelter residents, volunteers, and staff.

- Beverages and snacks should be available 24/7.
- Water quality must meet all applicable local, state, and federal sanitation standards.

Nutrition Management – Ensure that foods are consistent with individual needs and dietary recommendations of USDA Guidelines.

- Provide a daily diet of at least 2,000 calories with sufficient amounts of vitamins and nutrients.
- When able, strive to serve meals that meet the cultural and ethnic needs of the shelter population.
- Ensure that serving sizes for meals are 8 oz. entrées, 6 oz. side dishes and 6 oz. desserts, measured in volume. Establish standard meal service times. Avoid serving food after 8:00 pm.

Shelter Resident Services

The Resident Services Coordinator will coordinate assistance with the appropriate agencies to provide the following services:

Lodging – The essential supplies to sustain life in a mega-shelter include:

- Cots/ air mattresses
- Pillows & Blankets
- First aid supplies
- Personal care products
- Sanitation supplies
- Hand/bath towels, antibacterial hand soap
- Diapers
- Baby food, infant formula
- Infant care products

Laundry – Coordinate with various agencies/organizations.

Pet and Large Animal Services – Shelter and feed animals for shelter residents.

- Plan and establish a safe but separate environment for pets at the mega-shelter. Household pets are not permitted to reside in the shelter.
- Service animals will be allowed into the shelter to assist their owners; however, the owner should be prepared to care for the animal.
- When necessary, identify a location, may be offsite, to house large animals.

Provide Information – Provide periodic briefings to shelter residents.

- When appropriate, provide access to media regarding situation of disaster.
- Schedule regular briefings, when possible have law enforcement/ fire officials available.

Spiritual Care Services and Crisis Counseling – Provide services and counseling.

- Spiritual care services and counseling should be provided at identified sites.

Recreation – Provide recreational activities.

- Board games, playing cards, books, and stuffed animals would be a welcome diversion for children.
- Family movies can be played on independently run screens.
- If the mega-shelter is expected to be open for more than a week, an entertainment schedule should be created.

Social Services – Provide information on local services, if available.

- Flyers should be readily available to provide the following information:
 - a. Job opportunities
 - b. Banking needs
 - c. Pharmacies and hospitals (for services not provided on-site)

Transportation – Provide information regarding possible transportation modes for evacuees to/from shelter facilities.

Quality Control – All personnel

It is the responsibility of all personnel to assess and report quality control issues that may be detrimental to the morale, welfare, or safety of shelter residents.

Public Information and Shelter Relations

The Public Information/Relations Coordinator will coordinate with the appropriate agencies to provide the following services:

Information flow – Ensure accurate, timely information is provided to the Operational Area Emergency Operations Center, Joint Information Center.

Public Relations – Coordinate media events and coverage

The following information should be determined:

- A. Designated parking at the facility for all media vehicles
- B. Press conference area
- C. Spokesperson for the facility
- D. Press release writer for the facility
- E. Telephone policy for dealing with the media
- F. Drop-off location for special appearances
- G. Holding location for VIP's while awaiting PIO
- H. Communication plan to include facility, Red Cross, and FEMA
- I. Maintain communications with the Shelter Manager.

Resident Relations – Provide disaster recovery assistance to shelter residents

In coordination with the American Red Cross, FEMA and other shelter partners, provide shelter residents with information pertaining to temporary housing and other financial assistance programs.

Booths should be established that provide the following information to residents:

- A. The status of disaster and relief efforts
- B. List of repopulations as they occur
- C. Status of family members (if possible)
- D. Types of available assistance
- E. A general map of the facility
- F. Information on bus and trolley times
- G. A list of Frequently Asked Questions
- H. Announcements and Updates

Shelter Partner Relations – Coordinate resources/services from supporting agencies. Establish relations with the multiple nonprofit agencies and faith-based organizations to augment services for the mega-shelter operation.

Medical Services

If activated, the Medical Manager will coordinate with the appropriate agencies to provide the following services:

Assessment Team – An assessment team will assess the medical conditions of evacuees to determine the priority of medical attention/services required.

Medical Clinic – Assess the need and coordinate personnel for the following medical services:

- A. Basic First Aid
- B. Primary care
- C. Nephrology
- D. OB/GYN
- E. Ear, Nose and Throat
- F. Pediatrics
- G. Optometry
- H. Orthopedics
- I. Psychology

Assess the need and coordinate the following medical staff:

- A. Physicians
- B. Mental Health Counselors
- C. Nurses
- D. Emergency Medical Technicians (BLS and ALS)
- E. Dentists
- F. Physicians Assistants
- G. Nurse Practitioners

Medical Transportation – Provide transportation for medical patients to surrounding hospitals and other care facilities.

Morgue – The San Diego County Medical Examiner will assess and facilitate the proper handling of deceased victims at the mega-shelter.

Functional Needs – The Resident Services Coordinator should coordinate with the medical staff on-site to provide the necessary other-than-medical-services for residents with functional needs.

Mental Health Services

When needed, the Medical Manager will coordinate with the appropriate agency to provide crisis counseling at identified sites. If necessary, extended services can be collaborated with community partners.

Technology Services

When activated, the Technology Coordinator will coordinate with the appropriate agencies to provide the following services:

Radio Communications – Provide radios and certified radio operators.

- Assign radio frequencies to designated talk groups.
- Identify and map locations of radio infrastructures to maintain continuity of communications.
- Assign and distribute radios to essential personnel.
- Ensure large inventory of spare radio batteries and harnesses for replenishment.

Network Communications – Provide computer and network services to mega-shelter facility

- Assess the resource compatibility with existing technology services
- Install and configure laptops, facsimile and scanning devices, printers, PDA's, pagers, and 3C video conferencing equipment as necessary.
- Provide network and data support to system operators.

Telephone Banks/Internet Connection Centers/Message Centers – Phone banks, internet connection centers, and a message board for should be established for shelter residents in order to allow communications with loved ones.

- Phone banks should be located in the dormitory area as well as in the services area.
- 24 phones/1,000 residents.
- Internet communication centers should be located in an area that can be locked.
- Message center should be a large wall, dry erase board, or chalk board, and in a central location near the dormitory.

Building Maintenance

The Operations Coordinator will coordinate with the appropriate agencies to provide the following services:

General Repairs – Coordinate facility repairs with the facility manager/maintenance director.

Custodial Services

Cleaning crews should be posted at each restroom using a ratio of one person for every eight toilets/urinals. Normal and customary cleaning schedules should be maintained.

Neoprene rubber gloves and tongs that are 12 inches long should be distributed for protection. Anti-bacterial soap should be distributed throughout the facility.

Custodians and housekeepers should be trained to handle trash cautiously to make sure that they protect themselves against hazards such as needles, blood, stool, and vomit.

Every four hours, cleaning crews should clean the following surfaces in each restroom:

- A. Walls, up to 8 ft. high
- B. Partitions
- C. Doors and knobs
- D. Counters and face bowls
- E. Mirrors
- F. Floors, including around and in back of toilets and urinals
- G. Trash cans and Diaper bins, cleaned inside and out after each change
- H. Urinals and Toilets
- I. Diaper changing stations
- J. Hand towel surfaces
- K. Faucets
- L. Showers

The following areas, throughout the facility, should be cleaned at least once a day:

- A. Hand rails, including escalators
- B. Door knobs and panic hardware throughout
- C. Water fountains
- D. Public telephones
- E. Walls, up to eight feet high
- F. Resident living areas
- G. Computer keyboards
- H. Floors and steps
- I. Exterior sidewalks near the facility

Security Services

The Operations Coordinator will coordinate with the appropriate agencies to provide the following services:

Dormitory Security

Foot patrols to increase visibility should be used to prevent any criminal activity in both the perimeter and the interior of the facility.

Shower times should be extended to 24/7 if necessary to provide convenient access to residents. Security should include a staff member(s) near the designated shower area(s).

A procedure for residents to make complaints about misconduct of all types should be established. Law enforcement officials should be notified of such activities immediately.

External/Perimeter Security

Security posts should be in the outermost areas of the facility, including areas designated for parking, reception, and triage.

Posts should be at all entrances to the facility. An aggressive screening process should be employed utilizing the devices necessary to detect prohibited items.

All doorways leading into the facility that are not declared to be access points should be manned to ensure re-direction through the authorized security checkpoints.

Devices such as bicycle barricades can be used to facilitate an orderly queue of evacuees and assist in processing large numbers of people.

A secured area designated for smoking should allow persons to flow back into the facility without re-screening. Barriers may be used to keep this area secure.

Exceptions to the access rule should be made for facility employees, ARC employees, volunteers, medical staff, etc.

At the authorized access points, a sign listing all of the shelter rules including but not limited to prohibited items, reentry times, and applicable policies should be displayed to encourage compliance. In some cases, signs may need to be in other languages.

Traffic and Parking Operations

The Traffic Coordinator should develop a traffic/parking plan so that traffic, parking, and security are organized, safe, and efficient.

Parking should be predetermined for the following working agencies:

- A. Facility Staff
- B. American Red Cross Staff
- C. City/County/Government Officials
- D. Medical Staff

Items to be taken into consideration: delivery locations, media traffic and parking, and emergency response accessibility.

Inventory Control

The Operations Coordinator will coordinate with the appropriate agencies to ensure the following:

Designate a Distribution/Receiving Center (parking lot, or secured area)

- A. Site should be able to be locked or fenced off to establish a security zone
- B. Should be away from arterial entry points
- C. Establish shift supervisors to control/oversee bulk inventory
- D. Pre-position assets for ease of inventory and accessibility
- E. Create a list of fork lift operators, drivers, laborers

Determine the need and priority of bulk items.

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