

# **STATE OF OHIO EMERGENCY OPERATIONS PLAN**



## **EMERGENCY SUPPORT FUNCTION #6 MASS CARE**

### **COORDINATING AGENCY**

Ohio Emergency Management Agency

### **PRIMARY AGENCY**

Ohio Emergency Management Agency

**OHIO EMERGENCY OPERATIONS PLAN  
EMERGENCY SUPPORT FUNCTION #6**

**MASS CARE**

**PRIMARY AGENCY:** Ohio Emergency Management Agency (Ohio EMA)

**SUPPORT AGENCIES:** American Red Cross (ARC)  
Ohio Department of Aging (ODAge)  
Ohio Department of Developmental Disabilities (DODD)  
Ohio Department of Education (ODE)  
Ohio Department of Health (ODH)  
Ohio Department of Job and Family Services (ODJFS)  
Ohio Military Reserve (OHMR)  
Ohio Department of Medicaid (ODM)  
Ohio Department of Mental Health and Addiction  
Services (Ohio MHAS)  
Ohio Development Services Agency (ODSA)  
Ohio State Independent Living Council (Ohio SILC)  
The Salvation Army (TSA)  
Ohio Voluntary Organizations Active in Disaster  
(Ohio VOAD)

**I. INTRODUCTION**

A. Purpose

1. Through the State of Ohio Emergency Operations Center (State EOC), ESF-6 addresses, coordinates and reports on the emergency mass care activities of state-level organizations responsible for providing guidance to local jurisdictions for: sheltering, feeding, counseling, first aid, and related social services and welfare activities that are required to assist incident survivors.
2. Certain ESF-6 support agencies are responsible for collecting and reporting local daily shelter-related mass care activities through the use of the Shelter Status Board in the State EOC's WebEOC software and the American Red Cross' National Shelter System that is used to track and report shelter activity.
3. ESF-6 support agencies will support local mass care activities by providing information, guidance, coordination and supplies.
4. Daily information on the provision of local mass care activity support will be shared via briefings and written reports throughout an incident's duration.

## B. Scope

1. Mass Care operations can include a complex array of daily life support activities, including:
  - a. Sheltering
  - b. Sheltering-in-place
  - c. Feeding
  - d. Hydration
  - e. First aid-level medical care
  - f. Transportation
  - g. Counseling
  - h. Storage and distribution of supplies and equipment
2. Recent incidents have highlighted the need for addressing populations with access and functional needs.
3. The changing incident-response environment has necessitated the creation of standards to ensure that those who require mass care services receive the best possible assistance. In November 2010, the Federal Emergency Management Agency issued a document, *Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters*, to guide emergency managers and shelter operators on the provision of support services to those with functional needs who present themselves to general population shelters. Tab A to ESF-6 describes the state's approach to addressing populations with access and functional needs.

The federal government expects states to be prepared to provide mass care services resulting from in-state and out-of-state catastrophic incidents. In response to these federal expectations, the State of Ohio is producing the *Ohio Mass Evacuation Support Plan*, which will become an Annex to the Ohio EOP. That plan will provide direction for the evacuation of large populations due to both man-made and natural incidents. The plan will provide direction for the evacuation of persons within the state, from within the state to another state, from outside the state to the state, and from outside the state through Ohio to another state.

4. Certain ESF-6 agencies will provide direction in response to federal requirements for local jurisdictions to be able to provide for the immediate provision of the sheltering, feeding and medical care of companion animals.

## II. SITUATION

- A. Incidents that would necessitate the activation of ESF-6 response resources can occur without warning.
- B. Sheltering; first aid assistance; cooling, heating, comfort, feeding and hydration facilities and centers; and bulk distribution of relief supplies may be needed with little-or-no warning or advance notice.
- C. Slowly-developing incidents, such as slow-rising flood waters, may allow more time for warning and evacuation, which could cause the displacement of large populations. Such hazards may necessitate opening shelters and conducting mass care activities outside of the impacted area(s).
- D. Sheltering-in-place and restrictions of movement may be required to prevent the spread of contagious diseases or to protect the population from a chemical, radiological or nuclear incident. These actions may necessitate the establishment of sustenance sheltering operations (support services, such as the provision of food, water and medicine, etc.), when feasible, that would provide people with the means to effectively shelter-in-place for long periods of time. Sustenance sheltering operations would primarily be a local responsibility, but may require support via state-level resources throughout its duration.
- E. Some people may be reluctant or may refuse to evacuate their homes because of their pets. Local jurisdictions and private citizens need to plan for the rescue, evacuation, sheltering and feeding of a portion of the pet population.
- F. Institutionalized populations may need special consideration in evacuation and sheltering situations. These considerations may include security, special housing, medical and/or behavioral health services, and other needs.
- G. In-state and out-of-state hazards could result in catastrophic damage that could necessitate the evacuation, movement and sheltering of a large population (both Ohio residents and evacuees from other states), possibly for an extended period. Ohio's Catastrophic Incident Response Annex describes the State's approach to addressing catastrophic incidents.
- H. Medical sheltering considerations are covered to some extent through agreements with private local healthcare providers to set aside beds and other resources during an emergency that could result in a medical surge. In addition, resources may need to be identified to respond to the requirements of those who seek emergency shelter and depend on mechanical medical devices to maintain life. The Mass Casualty/Medical Surge Plan, Tab F to ESF-8, describes the State's approach to addressing mass casualty incidents.

### III. ASSUMPTIONS

- A. Local mass care providers and local jurisdictions have emergency response plans for mass care operations.
- B. Local mass care providers will have the resources to adequately respond to mass care needs during an incident's initial stages.
- C. People may evacuate an area before evacuation orders are given.
- D. An estimated 55% of impacted households are expected to have companion animals.
- E. Some persons will resist or ignore evacuation orders.
- F. An immediate and sustained need for bulk distribution of relief supplies may be required; the demand for which would be dependent on the duration and impact of an incident, accessibility to impact areas, and availability of needed supplies.
- G. Persons with medical-based functional needs that cannot be adequately addressed in a non-medical shelter may present themselves to non-medical shelters. These individuals may need to either be served or treated on-site and/or referred and/or transported to another site.
- H. Depending on the nature of an incident, additional services such as human and companion animal decontamination may need to be addressed and facilitated prior to admission into shelter facilities.
- I. Family reunification within an impacted area will be an immediate and significant concern as family members, caregivers and companion animals may be separated.
- J. Transient populations, such as tourists, student, and foreign visitors, within impacted areas may require assistance.
- K. People who are non-English speakers or who have limited English proficiency may arrive at shelters requiring assistance.
- L. An influx of mass care professionals and volunteers may strain support resources and may require state-level assistance and/or coordination in an impacted area.
- M. ESF-6 support agencies will work closely with state and federal agencies at the State EOC and at incident site(s) throughout response and recovery operations to provide coordinated and consistent services to impacted populations.
- N. Responding agencies will have adequate procedures, checklists and guidelines that correspond to the responsibilities that are assigned to them under this Plan.

- O. Local law enforcement agencies will be able to address crowd control and security missions at mass care facilities. They may request state-level assistance or support.

#### **IV. CONCEPT OF OPERATIONS**

##### **A. General Considerations**

1. As the lead agency for ESF-6, Ohio EMA will coordinate and report on mass care missions and activities throughout incident response and recovery.
2. This Plan responds to federal mass care requirements as detailed in the Department of Homeland Security's Mass Care Core Capability.
3. This plan's support agencies will work closely with other state and federal agencies in the State EOC and at incident site(s) throughout response and recovery operations to ensure coordinated and consistent service to impacted populations.
4. When ESF-6 support agencies are presented with mass care mission assignments, Ohio EMA's lead staff will meet with ESF-6 support agencies to jointly determine the best assignments of missions and application of agency resources and capabilities.
5. When ESF-6 support agencies have expended their available resources and/or are unable to effectively respond to a mission assignment, ESF-6 support agencies will work within the State EOC to obtain additional response resources via the Emergency Management Assistance Compact (EMAC), Ohio's Public-Private Partnership Program, or other federal, private sector sources.
6. Each ESF-6 support agency will employ and maintain internal, agency-based standard operating procedures to respond to each of their Assignments of Responsibility under this Plan.
7. ESF-6 support agencies will be notified of their activation in the State EOC. Activation will be based upon an incident's response and recovery requirements, and an agency's capabilities and resources.
8. ESF-6 primary and support agencies will provide personnel to staff the State EOC in accordance with the State of Ohio Emergency Operations Plan (Ohio EOP). Actual levels of response and staffing requirements will be based on incident needs.

## B. Local Sheltering and Evacuation Support

1. ESF-6 support agencies will work as a team in the State EOC and at incident site(s) to address the mass care needs of Ohio residents and survivors of out-of-state incidents who are evacuated within, to, or out of the state.
2. ESF-6 support agencies will work with other ESFs to provide or arrange for services and materials to those who are impacted by both man-made and natural incidents and need food, shelter, emergency medical care, protection or counseling.
3. ESF-6 support agencies may provide direction and support for mass care operations in response to catastrophic events both inside and outside of Ohio that may necessitate the evacuation and sheltering of large populations for extended periods of time.
4. Certain ESF-6 support agencies may address the population and maintenance of data into the National Shelter System that provides information on shelter capabilities and the provision of services at locally-established and managed shelters.
5. ESF-6 support agencies may assist in the dissemination of information to impacted citizens regarding both local and destination sheltering operations outside their immediate area in catastrophic events.
6. Certain ESF-6 support agencies may create, communicate and implement consistent mass care standards and sheltering training across the state, and coordinate planning between various levels of government for the provision of integrated mass care services.
7. ESF-6 support agencies may support local mass care operations during incidents that may include the support of Points of Distribution (POD) operations, the support of local sustenance sheltering, the sustainment of local shelter-in-place operations, and the support of local treatment facilities and alternate-care medical facilities during pandemic and/or mass casualty incidents.
8. ESF-6 support agencies will address, coordinate and report on the emergency mass care activities of state-level organizations responsible for sheltering, feeding, counseling, providing first aid, and related social services activities that are required to assist incident survivors.
9. ESF-6 support agencies will provide direction and/or support to local jurisdictions for shelter-in-place, restriction of movement, non-congregate and sustenance sheltering operations.

## 10. State-level Sheltering Operations

- a. The state of Ohio has multiple facilities that could be used for sheltering operations. These facilities are operational sites which already have running water, heat, etc. These facilities may be contacted directly through local EMAs. Examples include, but are not limited to:
  - i. The Ohio Department of Veteran’s Services (ODVS) operates the Ohio Veterans Home in Sandusky, a 427-bed nursing home facility. The Home’s “Domiciliary” offers 293 beds, dedicated to eligible veterans who need medical care but are capable of living independently.
  - ii. The Ohio Department of Developmental Disabilities has multiple facilities around the state that could be used for shelter operations, many of which include staffed facilities for persons with access and functional needs.

### C. Access and Functional Needs Support

1. ESF-6 support agencies provide guidance and support to local jurisdictions regarding the provision of support services to persons with access and functional needs, and who could require special services and considerations in a sheltering or evacuation situation, while maintaining family unity.
2. ESF-6 support agencies provide guidance and support to local jurisdictions regarding the provision of services to institutionalized populations that may need special considerations in sheltering and evacuation situations, including security, special housing and other special needs.
3. The Ohio EOP’s Tab A to ESF-6 (Functional Needs Plan) should be consulted for more detailed information on how the state of Ohio addresses functional needs populations.
4. Certain ESF-6 support agencies will work with ESF-8 agencies, local hospitals and local health treatment facilities to assist in the set-aside of hospital beds and other resources during an emergency, and to identify resources to be able to respond to the requirements of those who may seek emergency shelter and/or may depend on mechanical medical devices (durable medical equipment) to maintain and/or support life.
5. The Ohio Department of Medicaid’s (ODM) contracted case management agencies will identify individuals who are most at risk in emergencies and collaborate with local emergency response agencies. These individuals also have individualized disaster plans to assure that their specific disaster-based needs will be addressed. ODM also works with Nursing Facilities regarding Medicaid-related financial issues that may occur as a result of an emergency the emergency relocation of their residents.

6. In November 2010, the Federal Emergency Management Agency (FEMA) released a document entitled, *Guidance on Planning for Integration of Functional Needs Support Services (FNSS) in General Population Shelters*. The document provides planning guidance for meeting federal regulations that impact access and functional needs and the sheltering of children and adults with functional support needs in general population shelters. This guidance was developed to support local, tribal, State and Federal governments to integrate children and adults with and without disabilities who have access and functional needs into every aspect of emergency shelter planning and response.

The guidance document defines FNSS as services that enable individuals to maintain their independence in a general population shelter. FNSS include:

- a. Reasonable modifications to policies, practices, and procedures
  - b. Durable medical equipment (DME)
  - c. Consumable medical supplies (CMS)
  - d. Personal assistance services (PAS)
  - e. Other goods and services as needed
7. Children and adults requiring FNSS may have physical, sensory, mental health, and cognitive and/or intellectual disabilities affecting their ability to function independently without assistance. Others that may benefit from FNSS include women in late stages of pregnancy, elders, and people needing bariatric equipment.
  8. Planning for FNSS in general population shelters includes the development of mechanisms that address the needs of children and adults in areas such as:
    - a. Communication assistance and services when completing the shelter registration process and other forms or processes involved in applying for emergency-related benefits and services including Federal, State, tribal, and local benefits and services.
    - b. DME, CMS, and/or PAS that assist with activities of daily living.
    - c. Access to medications to maintain health, mental health, and function.
    - d. Available sleeping accommodations (e.g., the provision of universal/accessible cots or beds and cribs; the placement, modification, or stabilization of cots or beds and cribs; the provision and installation of privacy curtains).

- e. Access to orientation and way-finding for people who are blind or have low vision.

#### D. Ohio VOAD Member Agency Response

1. Initial response services through VOAD member agencies may include functional response operations that are detailed in the Assignments of Responsibility section of this plan.

#### E. ESF-6 support agencies will coordinate the request for and the application of EMAC-based mass care resources and other out-of-state support services for both catastrophic and non-catastrophic events, and facilitate and coordinate interstate cooperation during mass care operations.

#### F. Recovery Function Interaction

1. ESF-6 support agencies will coordinate with ESF-14 (Community Recovery and Mitigation) to ensure that mass care response operations support the initiation and development of recovery operations.

#### G. Local Animal Rescue Support

1. ESF-6 support agencies will provide guidance and support to local jurisdiction companion animal rescue, relocation, care and reunion operations; and will provide support to local jurisdictions for the immediate provision of the sheltering, feeding and medical care of companion animals.
2. ESF-6 operations are not directed to the rescue or care of production (farm) animals.

#### H. Community Reception Centers (CRC)

1. CRCs are population monitoring locations operated by local agencies to assess the public for radiological exposure, contamination, and decontamination and referral to medical treatment, other care, or to a shelter.
2. Population monitoring can aid in mitigating the effects of a mass casualty or medical surge by assessing the “worried well”, triaging patients for radiological exposure, and easing the patient burden on the medical care infrastructure so it can focus care on more critical patient medical needs.
3. CRCs should be established at or near shelters operated by the American Red Cross.
4. CRC locations may be pre-determined and have equipment and supplies located in, or nearby, to accommodate CRC functions. CRC locations may be set-up based on circumstance at locations not

previously evaluated, provided that they meet the established criteria.

5. CRCs will be staffed by local government agencies with the personnel designated for these functions (e.g., local health, fire, EMS, other local/regional volunteer groups), along with support from the Radiation Response Volunteer Corps (RRVC). The RRVC is a Medical Reserve Corps (MRC) partner group, managed by ODH. RRVC volunteers are radiation protection professionals who will augment local staffing, functioning as the radiation protection personnel in CRC operations.
6. ODH will provide radiological project management support, technical support, and available resources to CRC and RRVC operations, as needed or requested by local entities.
7. In situations where CRCs are not established, or members of the public present at shelters without benefit of CRC evaluation, ODH will provide radiological technical support to the shelter in managing the response.

## I. Relationships between Levels of Government

### 1. Federal

Ohio's ESF-6 support agencies will coordinate closely with federal ESF-6 agencies when those agencies are activated. The federal ESF-6 team is made up of the following organizations and may be active in Ohio following a Presidential Disaster Declaration.

- a. ESF Coordinator: Department of Homeland Security/Federal Emergency Management Agency
- b. Primary Agency: Department of Homeland Security/Federal Emergency Management Agency

### 2. State

- a. State ESF-6 support agencies will work with federal- and local-level agencies during emergencies. See chart, below.

### 3. Local

- a. Local mass care organizations at an incident site will coordinate their response activities with the County Emergency Management Agency and the local Emergency Operations Center (EOC) in their jurisdiction.
- b. Local ARC Regions and Salvation Army Divisions have first-line responsibility for the provision of disaster services within local jurisdictions. ARC Regions and Salvation Army Divisions maintain plans, resources and an operational structure to support service delivery.

- c. Local mass care organizations will coordinate with state-level organizations to define needs, request state and federal mission support; and to provide necessary updates on local mass care activities, including daily sheltering information.

<b><u>Local Organization</u></b>	<b><u>State Organization</u></b>	<b><u>Federal Organization</u></b>
Sheltering and Mass Care organizations Local Emergency Management Agencies	Ohio Emergency Management Agency	U.S. Department of Homeland Security Federal Emergency Management Agency
Local Chapters of the American Red Cross	American Red Cross	American Red Cross
Area Agencies on Aging	Ohio Department of Aging	U.S. Administration on Aging
Local Boards and Departments of Health and OSU Extension	Ohio Department of Agriculture	U.S. Department of Agriculture
Community Action Agencies, Public Housing Authorities	Ohio Development Services Agency	U.S. Dept. of Housing and Urban Development
Community Action Agencies, Public Housing Authorities, Utilities	Ohio Housing Finance Agency	U.S. Dept. of Housing and Urban Development
Local Boards of Education	Ohio Department of Education	U.S. Department of Education
Local Boards and Departments of Health	Ohio Department of Health	U.S. Department. of Health and Human Services
Local Departments of Job and Family Services	Ohio Department of Job and Family Services	U.S. Department. of Health and Human Services U.S. Department of Labor
*	Ohio Military Reserve	*
County Behavioral Health Boards	Ohio Department of Mental Health and Addiction Services	Substance Abuse and Mental Health Services Administration
County Boards of Developmental Disabilities	Ohio Department of Developmental Disabilities	U.S. Administration on Developmental Disabilities
Local offices of Rehabilitation Services and Local Independent Living Councils	State Independent Living Council	*
Local VOAD member organizations	Voluntary Organizations Active in Disasters	National Voluntary Organizations Active in Disasters
*	Ohio Development Services Agency	Small Business Administration
Local Salvation Army Chapters	The Salvation Army	*
*	*	U.S. Department of Defense
*	*	U.S. Department of the Interior
*	*	U.S. Department of Justice
*	*	U.S. Department of Transportation
*	*	U.S. Department of the Treasury
*	*	U.S. Department of Veterans Affairs
*	*	U.S. Postal Service
*	*	Social Security Administration
*	*	Office of Personnel Management
*	*	General Services Administration

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\* There is no comparable organization at this level of government.

## **V. ORGANIZATION AND ASSIGNMENTS OF RESPONSIBILITY**

### **A. Organization**

1. The Ohio Emergency Management Agency (Ohio EMA) is the Primary Agency for ESF-6. As the Primary Agency, Ohio EMA will maintain a constant overview of ESF-6 activities, assist in determining the proper assignment of ESF-6 missions, and take the lead in coordinating with federal ESF-6 agencies.
2. ARC Regions will coordinate with their national parent organization for support of its state and local operations as needed, and will make requests for support through the State EOC.
3. When ESF-6 is presented with mass care mission assignments, the primary agency for ESF-6 will meet with ESF-6 support agencies and they will determine together which agency (ies) has (have) the best set of available resources to respond to the mission assignment.
4. The following organizations have specific responsibilities for state-level mass care operations and will maintain close coordination with each other from initial situation monitoring through recovery operations. All ESF-6 response organizations will maintain their own internal command and control structures during emergency operations.

### **B. Assignments of Responsibility**

1. Ohio Emergency Management Agency
  - a. Coordinate with all support agencies on the ESF-6 team to provide accurate overviews of ESF-6 activities to Ohio EOC personnel.
  - b. Coordinate and report on emergency mass care activities of state-level organizations responsible for sheltering, feeding, bulk distribution, counseling, providing first aid, and related social services and welfare activities that are required to assist incident survivors.
  - c. Request additional resources (EMAC, federal, private sector, etc.) to fulfill mission requirements when ESF-6 response resources have been exhausted.
  - d. Provide coordinating and reporting support for mass care operations in response to catastrophic events both inside and outside the State of Ohio

that necessitate the evacuation and sheltering of large populations for extended periods of time.

- e. Assist in the coordination of family reunification operations.
- f. Facilitate and coordinate the application of EMAC-based resources and other out-of-state support services for both catastrophic and non-catastrophic incidents, and facilitate and coordinate interstate cooperation during mass care operations.
- g. Provide direction and support to local jurisdictions for the provision of sheltering and feeding operations.
- h. Facilitate and coordinate the application of mass care resources provided to, or received in response to, EMAC system requests.
- i. Facilitate and coordinate interstate cooperation of non-EMAC mutual aid during mass care operations.
- j. Assist in the dissemination of information to impacted residents regarding both local and destination sheltering operations outside their immediate area during catastrophic events.
- k. Support consistent mass care standards and sheltering training across the state, and coordinate planning between many levels of government for the provision of integrated mass care services.
- l. Provide direction and support to local jurisdictions for their immediate provision of the rescue, sheltering, feeding and medical care of companion animals.
- m. Support local-level companion animal relocation, care and reunification operations.
- n. Support mass care operations during the activation of the Ohio Strategic National Stockpile Plan, including sustenance support (food, water, cots, etc.) of the public and the staff; planning for the support of local sustenance and sustainment of local shelter-in-place operations; and the support of local treatment facilities during pandemic situations.
- o. Provide support and coordination for the evacuation of large populations to destination shelters due to both man-made and natural incidents.
- p. Provide direction and support to local jurisdictions for shelter-in-place, restriction of movement, non-congregate and sustenance sheltering operations that result from pandemic and other incidents.

2. American Red Cross (ARC)
  - a. Open and staff shelters in response to local needs.
  - b. Provide ARC information releases to the Joint Information Center.
  - c. Coordinate and provide on-site feeding, mobile feeding and snacks to incident survivors and responders with assistance from The Salvation Army.
  - d. Provide first aid and related health services to sheltered survivors and survivors at incident sites.
  - e. Distribute appropriate bulk materials for disaster relief.
  - f. Provide Disaster Welfare Information (DWI) services when requested.
  - g. Support the operation of local shelters that are established to provide mass care services to the survivors of both in-state and out-of-state incidents, in response to both man-made and natural incidents.
  - h. Support for mass care operations in response to catastrophic events both inside and outside the State of Ohio that necessitate the evacuation and sheltering of large populations for extended periods of time.
  - i. Assist in the planning for the support of local sustenance sheltering.
  - j. Support consistent mass care standards and sheltering training across the state.
  - k. Support the provision of services to respond to the medical and functional needs of shelter residents while maintaining family unity.
  - l. Provide support and coordination for the evacuation of large populations to destination shelters due to both man-made and natural incidents.
3. Ohio Department of Aging (ODAge)
  - a. Advocate for the needs of older adults and their caregivers in the incident area.
  - b. Serve as liaison to Ohio's Area Agencies on Aging (AAA), which may have the following roles in emergencies and disasters:
    - i. Coordinate with and support local aging service providers to support mass care needs and activities.

- ii. Identify and address unmet needs among older adults and their caregivers.
  - iii. Contact clients who receive long-term support and services to determine if they are safe, are in need of evacuation and/or need assistance to remain in their homes.
  - iv. Ensure that relocated clients continue to receive needed long-term care support and services.
    - v. Participate in EOCs, DRCs and/or sheltering operations.
    - vi. Assist older adults and their caregivers in establishing their eligibility for disaster relief services and disaster assistance programs.
    - vii. Facilitate the Pre-Admission Review process for older adults that need to be temporarily relocated to long-term care facilities.
  - c. Regional Representatives of the Office of the State Long-Term Care Ombudsman
    - i. Communicate with first responders about support needs for consumers of long-term care of any age and in any location.
    - ii. Identify and assure that unmet needs are met.
    - iii. Follow displaced consumers to assure that they are able to return to their preferred home as soon as possible.
    - iv. Provide assistance to consumers with selecting alternative long-term services and supports as needed.
      - v. Assist individuals with recovery of personal property.
      - vi. Communicate with regulatory agencies and the State LTC Ombudsman.
  - d. Coordinate the access and use of data and information available from the Annual Statewide Survey of Long-Term Care Facilities (nursing homes and residential care facilities) and ODA's Long-term Care Consumer Guide to support the identification of sheltering options and alternatives.
4. Ohio Department of Education (ODE)
- a. Coordinate and support local school districts and private schools involved in mass care operations.
  - b. Provide listings of schools that can be used for shelters or to support shelter activities to local sheltering organizations and emergency management officials when requested.
  - c. Coordinate and support local food preparation services involved in mass care operations.
  - d. Provide direction and support to local jurisdictions for shelter-in-place, restriction of movement, non-congregate and sustenance sheltering operations that result from pandemic and other incidents.

5. Ohio Department of Health (ODH)
  - a. Coordinate and support local health departments (LHDs) with shelter evaluations and inspections to ensure that shelters meet health and safety standards, including those affecting populations with access and functional needs.
  - b. Coordinate and support LHDs in the availability of public health services that may be disrupted by sheltering.
  - c. Coordinate and support LHDs in the surveillance and control of infectious diseases in shelters.
  - d. Provide assistance in the establishment of Community Reception Centers (CRCs). See Concept of Operations section, above, and Ohio's Radiological Emergency Preparedness Operations Manual for further information.
6. Ohio Department of Job and Family Services (ODJFS)
  - a. Coordinate with local county departments of job and family services for the implementation of disaster assistance programs, including:
    - i. Assistance to eligible families with an emergent need due to the incident with use of available Temporary Assistance to Needy Families (TANF) funds.
    - ii. Assistance to eligible elderly or disabled individuals with an emergent need to the incident with use of available non-TANF (state-only) funds.
    - iii. Federal disaster emergency food assistance program.
    - iv. Provision of departmental representatives as needed to give advice & assistance to impacted persons.
    - v. Provision of child-care services that are needed as a result of the incident.
  - b. Provide Federal Disaster Unemployment and Re-Employment Assistance.
  - c. Assist private relief organizations and/or public agencies in distributing emergency supplies, as necessary.
  - d. Assist employees in solving special employment problems that may arise as the result of an incident.

7. Ohio Military Reserve (OHMR)
  - a. Assist in the operation of emergency shelters; including setting-up, managing and taking down equipment needed to operate emergency shelters for displaced persons.
8. Ohio Department of Mental Health and Addiction Services (OhioMHAS)
  - a. Provide shelter to and coordinate necessary activities to support regional hospital operations and to assure continued treatment and services.
  - b. Support community response as resources allow.
  - c. Coordinate and monitor state behavioral health activities to address survivor needs in coordination with local mental health boards.
  - d. Provide behavioral health clinical consultation services to State EOC staff.
  - e. Provide representatives to assist local mental health and/or joint Alcohol, Drug and Mental Health (ADAMH) Service Boards and Regional, County and Community Mental Health Centers in providing supportive services and treatment to incident survivors.
  - f. Provide temporary shelter in behavioral healthcare facilities as available.
  - g. In coordination with American Red Cross, ADAMH Service Boards, Community Behavioral Health providers, County EMAs, State agencies, community partners and local housing authorities identify shelter and emergency housing as available for persons receiving mental health, and or alcohol and drug addiction services in the incident area.
  - h. Provide direction and support or the provision of services to state hospital in-patient populations that need special considerations in sheltering and evacuation situations, including security, special housing needs, and other special needs. State hospitals will address locally identified emergency needs to patients and as determined clinically appropriate to patient need in coordination with local boards and providers and families.
9. Ohio Department of Developmental Disabilities (DODD)
  - a. Provide shelter to and address the needs of persons with developmental disabilities who reside in the State-run developmental centers, and assist in coordinating resources for unmet needs among the developmental disabilities population in the incident area.
  - b. Provide direction and support to for shelter-in-place, restriction of movement and sustenance sheltering operations.

- c. Provide direction and support to local jurisdictions for the provision of services to institutionalized populations that need special considerations in sheltering and evacuation situations, including security, special housing needs, and other special needs.

10. Ohio Development Services Agency (ODSA)

- a. Assist with the identification of available housing in communities impacted by an incident and coordinate referrals of incident survivors to appropriate emergency housing to meet short and long-term needs.
- b. Upon request by Ohio EMA, assist with the identification of available housing in communities affected by emergencies and provide referrals to incident survivors for housing and related services.
- c. Maintain support to persons in emergency shelters and temporary housing through local Community Action Agencies and other non-profit agencies.

11. Ohio Department of Veteran's Services (ODVS)

- a. In incident response, provide overnight shelter services and food and water to 100+ persons for up to a week.

12. Ohio State Independent Living Council (Ohio SILC)

- a. Address the shelter and mass care needs of persons with disabilities who must be relocated to emergency shelters and temporary housing.
- b. Provide direction and support to local jurisdictions for shelter-in-place, restriction of movement and sustenance sheltering operations.
- c. Provide direction and support to local jurisdictions for the provision of services to institutionalized populations that need special considerations in sheltering and evacuation situations, including security, special housing needs, and other special needs.

13. The Salvation Army (TSA)

- a. Provide support for the operation of local shelters and feeding centers and canteens that are established to provide mass care services to survivors of both in-state and out-of-state incidents, in response to both man-made and natural incidents.
- b. Provide support for mass care operations in response to catastrophic events both inside and outside the State of Ohio that necessitate the evacuation and sheltering of large populations for extended periods.

- c. Support consistent mass care standards and training across the state; and assist in the coordination and planning between levels of government for the provision of integrated mass care services.
- d. Provide support and coordination for the evacuation of large populations to destination shelters due to both man-made and natural incidents.
- e. Provide direction and support to local jurisdictions for shelter-in-place, restriction of movement, non-congregate and sustenance sheltering operations that result from pandemic and other incidents.
- f. Provide support services to incident survivors.
- g. Provide support activities including volunteer coordination/operations support, mass care shelter and feeding operations, and community and public information outreach.

14. Ohio Voluntary Organizations Active in Disasters (Ohio VOAD)

- a. Through member organizations, provide early services and material support to incident survivors, including, but not limited to:
  - i. Debris removal/chain saw teams
  - ii. Child care services
  - iii. Donations management, warehousing and transportation services
  - iv. Feeding stations and food
  - v. Provision of flood bucket cleaning kits
  - vi. Mud-out teams
  - vii. Humanitarian and emotional care services
  - viii. Affiliated volunteer coordination
  - ix. Amateur radio support

**VI. RESOURCE REQUIREMENTS**

- A. Each ESF-6 support agency will maintain internal, agency-based standard operating procedures and checklists that detail the logistical and administrative support arrangements specific to its agency.
- B. Additional material and personnel support needs during an emergency may be requested through ESF #7, Resource Support and Logistics.