ANNEX 6

ESF-6 - MASS CARE

PRIMARY: SC Department of Social Services

SUPPORT: American Red Cross; The Salvation Army; SC Department of Health and Environmental Control; SC Department of Health and Human Services; SC Lieutenant Governor's Office on Aging, SC Department of Mental Health; SC Department of Alcohol and Other Drug Abuse; SC Vocational Rehabilitation Department; SC Department of Disabilities and Special Needs; SC Department of Motor Vehicles; S.C. Assistive Technology Program; Southern Baptist Disaster Relief

I.   **INTRODUCTION.** Mass Care encompasses:

- Sheltering (includes general population sheltering and sheltering for individuals with Special Medical Needs)
- Feeding (fixed sites and mobile feeding units)
- Bulk distribution of food and supplies

II.   **PURPOSE**

A.   Coordinate the capability to meet basic human needs (shelter, food, bulk distribution of emergency relief supplies, disaster welfare inquiries, and emergency social services) in disaster situations.

B.   Outline responsibilities and policies established for Mass Care operations before, during and after a disaster.

III.   **CONCEPT OF OPERATIONS**

A.   The SC Department of Social Services (SCDSS) is the lead agency designated for coordinating Mass Care operations. SCDSS is responsible for coordinating all ESF-6 administrative, management, planning, training, preparedness, mitigation, response and recovery activities to include coordinating, and maintaining the ESF-6 SOP.

B.   ESF-6 supporting agencies will assist SCDSS in the planning and execution of the above.

C.   Support agencies will ensure their ESF-6 personnel are familiar with the National Response Framework and the corresponding FEMA Annex with Federal counterpart concepts, actions and responsibilities. This familiarization will include but not be limited to the structure, organization, functions and responsibilities of the Incident Management Assist Teams (IMAT), and the Joint Field Office (JFO).

D.   ESF-6 will coordinate Mass Care with all supporting and other appropriate agencies/organizations.

E.   Each Mass Care agency/organization will manage its own program(s) and maintain administrative and logistical support for its activities.

F.   In coordination with and support of the Counties and tribal governments, ESF-6 will assess the situation (both pre- and post-event), and in coordination with local Emergency Management officials, develop strategies to respond to the emergency.

G.   The American Red Cross (ARC) and The Salvation Army (TSA), in coordination with other voluntary agencies, provide mass care as part of a broad program of disaster relief.

H.   Mass Care

1.   General Population Sheltering

a.   ARC is the primary organization that will coordinate, manage and operate general population mass care shelters in South Carolina (See Annex 2 (Memorandum of Understanding between The American Red Cross and the State of South Carolina) to Attachment D (MOUs, MOAs, and Other Agreements) to the SCEOP).

b.   ARC will open and close general population shelters at the request of and in coordination with County Emergency Management in order to meet the sheltering needs of the local impacted areas.

c.   In a multi-county or State-level event, ESF-6 will assist in coordinating the opening and closing of shelters to include, if necessary, coordinating regional support to the event.

d.   The ARC and/or other organizations may open general population mass care shelters. However, ARC shelter operations are managed by the ARC trained volunteers and staff.

e.   ARC maintains a database of pre-inspected shelter locations in their National Shelter System (NSS) database. County and Local Emergency Management can contact their local ARC representative to receive a copy of the NSS listing of the shelters in their area.

f.   ESF-6, in coordination with SCEMD and County Emergency Management, will pre-determine the locations for designated general population shelters for hurricanes, fixed nuclear facilities, high risk dams, and other potential catastrophic events.

2.   Special Medical Needs Shelters (SMNS)

a.   The SC Department of Health and Environmental Control (SCDHEC) is the lead state agency that will coordinate, manage and operate SMNS in South Carolina.

b. General criteria for sheltering in a SMNS

(1) Individuals who meet one or more of the following general guidelines could qualify as needing to be sheltered at a SMNS:

- Requires uninterrupted power to operate equipment or refrigeration

- Requires a temperature control environment

- Requires a medical bed or medical cot

(2) Specific category of need/admission guidelines are found in *Special Medical Needs Shelter (SMNS) Guidelines* published by DHEC's Office of Public Health Nursing.

c. SCDHEC will contract or coordinate the use of facilities as SMNS facilities, coordinate the staffing of the shelters to include providing medical monitoring, and liability coverage to SMNS.

d. SCDHEC will coordinate with other ESF-6 support agencies and organizations for SMNS requirements as needed or necessary.

e. SCDHEC is responsible for maintaining and ensuring confidentiality of medical records.

f. SCDHEC will assist sheltered individuals in making arrangements for essential medical equipment, as the situation allows (patients should bring medicine and equipment with them if possible)

g. SCDHEC will open and close SMNS at the request of and in coordination with County Emergency Management in order to meet the sheltering needs of the local impacted areas.

h. In a multi-county or State-level event, ESF-6 will assist SCDHEC in coordinating the opening and closing of SMNS to include, if necessary, coordinating regional support.

i. See Attachment A (Special Medical Needs Shelter Listing) for a list of the SMNS locations pre-coordinated by SCDHEC. County and Local Emergency Management should contact their Regional Director of Public Health Preparedness for further information or coordination.

3. Feeding

a. ESF-6 will coordinate Mass Care Feeding Operations with ESF-11 (Food Services).

b.   The ARC, TSA, Southern Baptist Disaster Relief (SBDR) and other organizations, will manage feeding programs for disaster survivors and emergency workers through a combination of fixed sites and mobile feeding units.

c.   The ARC, TSA, and SBDR provide feeding capability through their own resources.

d.   Feeding operations will be based on sound nutritional standards and will attempt to include, when feasible, provisions for meeting dietary requirements for people with special restrictions.

e.   SCDHEC will coordinate with ESF-6 for feeding support to the SMNS.

f.   ESF-6 will coordinate for meal distribution to SMNS as needed and as requested.

g.   SCDSS will manage the Disaster Supplemental Nutrition Assistance Program (D-SNAP) under the rules and regulations of the USDA Food and Nutrition Service (FNS).

h.   The SC Lieutenant Governor's Office on Aging will coordinate temporary expansion of the home delivered meals during a federally declared disaster.

i.   In the event of a major disaster or catastrophic event, ESF-6 may activate the Mass Feeding Task Force (MFTF) to support a coordinated, timely and efficient mass feeding response.

4. Bulk Distribution of Emergency Relief Supplies

a.   ESF-6 will coordinate with the SEOC Logistics Section to determine the appropriate distribution method of emergency relief supplies (to include, but not limited to, non-perishable food, paper products, household cleaning supplies, infant care items and personnel hygiene products) in areas where commercial trade is inoperative or insufficient to meet emergency needs.

b.   These distribution methods may include mobile distribution and/or agency-specific sites/distribution centers.

5. First Aid At Mass Care Facilities

a.   The ARC and TSA may provide limited first aid services at their facilities.

    b.   This will not supplant required medical services provided by local EMS, or support under Annex 8 (Health and Medical Services) of the SC Emergency Operations Plan (SCEOP).

    6.   Disaster Welfare Inquiry (DWI)

    a.   The ARC, TSA, and other organizations can facilitate "Disaster Welfare Information" for families separated by disaster.

    b.   The ARC uses "The Safe and Well" program to assist in the re-unification of family members.

    c.   The ARC, TSA, and other organizations will:

- Ensure any release of confidential information is in accordance with all relevant Federal, State, and local laws, specifically those concerning privacy and confidentiality.
- Work cooperatively with other agencies and organizations to assist in family reunification efforts.
- Provide DWI related information in accessible formats, when available.

I.   Shelter management includes:

- Estimating the number of evacuees who may require shelter
- Planning shelter space
- Inspecting facilities on a recurring basis
- Planning, anticipating and coordinating staffing
- Coordinating resources
- Providing operational and logistical support
- Addressing functional or unique individual medical needs
- Consistent and accurate reporting and communication
- Identifying and providing public information on options for temporary shelter sites for evacuees' pets
- Coordinating shelter openings and closings in coordination with State, county and local officials

J.   ESF-6 will coordinate with ESF-17 (Animal/Agriculture Emergency Response) on issues relating to evacuees' pets or service animals.

K.   ESF-6 will coordinate with Federal ESF-6 for assistance as required.

IV.   ESF ACTIONS

    A.   Preparedness

        1.   Prepare for disaster exercises by coordinating with support agencies and organizations for their participation.

        2.   Coordinate with SCDHEC for a regularly updated list of planned SMNS.

        3.   Maintain a roster of primary contact ESF personnel.

        4.   Maintain listings of agency staff to notify for response activities including staff that can accommodate populations with special needs.

        5.   Coordinate with ARC, TSA, SCDHEC, SCEMD and counties to ensure an up-to-date shelter list is available.

        6.   Coordinate with the ARC and SCDHEC to assess the accessibility of potential shelter locations, to include both physical access as well as service access.

        7.   Assist and coordinate with ESF-18 (Donated Goods and Volunteer Services) to update and verify mass care agency (public and private) listings that have a mission and capability to provide mass feeding in times of disaster.

        8.   Coordinate with the Emergency Planning Committee for People with Functional Needs on issues related to disaster support for special functional needs.

        9.   Participate in Mass Care coordination meetings and/or training events.

        10.   Ensure procedures are in place to document costs for any potential reimbursement.

        11.   Participate at least annually in State exercises and/or conduct an exercise to validate this Annex and supporting SOPs.

    B.   Response

        1.   Coordinate for providing prepared meals at mass feeding sites with the Situation Unit (Operations Section) and Logistics Section, as well as ESF-11 (Food Services) and ESF-18 (Donated Goods and Volunteer Services), to include distribution sites established by responding Emergency Management agencies.

2.   Open and close shelters in accordance with public need as assessed by ESF-6, SCDHEC (for SMNS), SCEMD, and County Emergency Management agencies.

3.   Coordinate with ESF-15 (Public Information) to provide notices to the public of the opening and closing of shelters.

4.   Provide the SEOC Operations Section with updated listing of operational shelters occupancy levels and shelter needs.

5.   Coordinate with SCEMD, ARC, SCDHEC, and counties to update lists of available shelters to include SMNS.

6.   Coordinate with ESF-8 (Health and Medical Services) for medical services and behavioral health services in shelters.

7.   Coordinate with ESF-2 (Communications) to ensure each shelter has a working communications system, and has contact with the County EOC and the managing agency.

8.   Coordinate with SEOC Operations and Logistics for the restoration of services at mass care sites, as required.

9.   Coordinate with ESF-17 (Animal/Agriculture Emergency Response) on issues relating to evacuees' pets or service animals.

10.   Maintain situational awareness of D-SNAP.

11.   Coordinate requests for shelter security through ESF-13 (Law Enforcement).

12.   Provide ESF-6 representation on the Recovery Task Force.

C.   Recovery

1.   Feeding

a.   The first priority of mass feeding activities will be disaster survivors.

b.   Emergency workers will be encouraged to utilize established mass feeding sites in lieu of individual site distribution.

c.   Coordinate with the SEOC Logistics Section, ESF-11 (Food Services) and ESF-18 (Donated Goods and Volunteer Services) to establish or support existing mass feeding sites operated by the ARC, TSA, SBDR and other volunteer agencies.

        d.   Coordinate the provision of prepared meals regarding mass feeding sites with ESF-11 (Food Services), ESF-18 (Donated Goods and Volunteer Services), and SEOC Logistics Section, established by emergency management agencies.

        e.   Coordinate with ESF-3 (Public Works and Engineering) for garbage removal and ESF-8 (Health and Medical Services) for food safety standards and practices at mass feeding sites.

        f.   Coordinate with responsible agencies for the provision of food and water to mass feeding sites.

2. Coordinate with Federal ESF-6 personnel in the SEOC and JFO.

3. Support long-term recovery priorities as identified by the Recovery Task Force.

4. Coordinate with Federal counterparts to establish a system for making information about disaster survivors available to family members outside the disaster areas.

5. Coordinate with the US Postal Service to distribute, collect, and mail "locator cards" at mass care shelters, fixed and mobile feeding sites, points of distribution, and other mass care sites.

D. Mitigation

1. Support and plan for mitigation measures including monitoring and updating mitigation actions in the State Hazard Mitigation Plan.

2. Review, evaluate and comment on proposed State Hazard Mitigation Plan amendments upon initiation and within the review period.

3. Support requests and directives from the Governor and/or FEMA concerning mitigation and/or re-development activities.

4. Document matters that may be needed for inclusion in agency or state/federal briefings, situation reports, and action plans.

V.   AGENCY/ORGANIZATION RESPONSIBILITIES

A. General

1. ESF-6 lead and support agencies will identify, train, and assign personnel to maintain contact with and prepare to execute missions in support of ESF-6 during periods of activation.

2.   ESF-6 lead and support agencies will work to educate citizens on disaster preparedness and disaster mitigation activities.

3.   ESF-6 lead and support agencies will participate in State, County and local Mass Care coordination meetings and/or training events.

B.   SC Department of Social Services

1.   Preparedness

a.   Plan for mitigation, preparedness, response, and short-term and long-term recovery actions.

b.   Maintain and disseminate current information on Federal and State policies, laws, and regulations relevant to SCDSS responsibility in Mass Care operations.

c.   Disseminate administrative procedures for specific SCDSS administered programs designed to meet post-disaster needs to include the D-SNAP.

d.   Develop Mass Care training programs for SCDSS personnel and participate in ARC shelter and SMNS operations training at State and county level.

e.   Maintain formal agreements, Statement of Understandings (SOU), Memorandums of Understanding (MOU), and working relationships with supporting Mass Care agencies and organizations as required.

f.   Participate in periodic Mass Care drills and exercises.

g.   Evaluate and coordinate necessary revisions to Mass Care plans with Mass Care member agencies/ organizations.

h.   Provide guidance and consultation to local government in developing and maintaining a local Mass Care capability and capacity (to include county visits).

2.   Response

a.   Provide SCDSS staff to support shelter operations, as required.

b.   SCDSS will register SMNS patients and caregivers, and report shelter status to SCDSS operations.

c.   Communicate with all Mass Care agencies and organizations to compile and exchange information concerning the extent of the

disaster and the status of response operations. Provide such information to the SEOC Operations Section.

    d.   Provide a State Mass Care Coordinator to the SEOC upon request of the SCEMD.

    e.   Coordinate with Mass Care organizations to ensure operational coordination in disaster response of mass care services and support to local government.

    f.   Collect, compile, and maintain all essential information, generate reports and records concerning Mass Care disaster response.

3.   Recovery

    a.   Continue to coordinate with Mass Care agencies and organizations.

    b.   Continue to keep the public informed of available mass care State and Federal assistance programs.

    c.   Administer recovery programs (e.g. – D-SNAP).

    d.   Coordinate with all Mass Care agencies/organizations and support agencies to ensure all State assets have been exhausted prior to requesting Federal assistance.

C.   American Red Cross

1.   Preparedness

    a.   Plan for disaster mitigation, preparedness, response, short term, and long-term recovery actions in coordination with government agencies based on hazard analysis and history of disaster (See Annex 2 (Memorandum of Understanding between The American Red Cross and the State of South Carolina) to Attachment D (MOUs, MOAs, and Other Agreements) to the SCEOP).

    b.   Recruit and train disaster volunteer workers and State employees in ARC shelter staff operations.

    c.   Conduct Community Disaster and Mitigation Education programs to provide communities with information to help them prepare for disasters.

    d.   Conduct shelter surveys.

    e.   Identify, coordinate, and obtain written agreements for shelters in every county.

f.   Assess the accessibility of potential general population shelter locations, to include both physical access as well as service access.

g.   Test validity of disaster response plans and procedures through internal and inter-agency disaster response exercises.

h.   Evaluate and coordinate necessary revisions to Mass Care plans with government agencies.

2.   Response

a.   Establish an ARC headquarters in or near the affected area for coordination of services.

b.   Assign an ARC liaison to ESF-6 at the State Emergency Operations Center.

c.   Conduct community disaster needs assessments.

d.   Establish and manage general population mass care shelters (facilities) and provide limited first aid coverage.

e.   Provide a list of operational shelters to ESF-6 during disasters.

f.   Work cooperatively with ESF-6 to provide shelter status information as necessary.

g.   Provide meals at fixed sites and through mobile feeding units.

h.   Provide special dietary needs and culturally appropriate foods when available and feasible.

i.   Assist in securing additional first aid supplies for ARC facilities.

j.   Provide services to help family members to reconnect following a disaster.

3.   Recovery

a.   Provide assistance based on disaster-caused need, not loss.

b.   Depending upon an evaluation of need and resources available, provide:

- Food, clothing, and other emergency needs
- Temporary housing assistance until other resources are available to meet the need

- Bulk supplies for temporary minor repair of owner-occupied homes to make them habitable

- Basic items essential to family living

- Essential medical and nursing care items and/or assistance/referral for those injured or made ill because of the disaster, or whose condition is aggravated by the disaster

- Assistance in obtaining information about federal and other resources available for additional assistance to disaster survivors

- Representatives or information at Disaster Recovery Centers (DRC) to inform applicants of available ARC assistance

  c. Manage its own logistics system of procurement, warehouses, relief facilities, transportation, and communication networks.

D. The Salvation Army

 1. Preparedness

  a. Review and validate TSA North & South Carolina Divisional Disaster Plan.

  b. Plan for disaster mitigation, preparedness, response, short term, and long-term recovery actions in accordance with the Memorandum of Understanding between The Salvation Army (A Georgia Corporation) and the South Carolina Emergency Management Division (See Annex 3 (Memorandum of Understanding between The Salvation Army (A Georgia Corporation) and the South Carolina Emergency Management Division) to Attachment D (MOUs, MOAs, and Other Agreements) to the SCEOP).

  c. Test validity of disaster response plans and procedures through internal and inter-agency disaster response exercises.

 2. Response

  a. Activate the Divisional Incident Management Team (IMT).

  b. Assign a TSA Liaison to the SEOC.

  c. Establish a Command Post in the affected area to coordinate TSA activities/personnel/equipment.

  d. Initiate TSA mass services.

  e. Deploy teams to provide emotional and spiritual care.

3. Recovery

    a. As required and/or requested, assign TSA representation in DRCs to provide assistance to disaster survivors.

    b. Provide information and referral services to disaster survivors.

    c. Contingent upon available resources, implement a program for distribution of items needed by survivors including, but not be limited to food & commodities, clothing, furniture, bedding and household items.

    d. In accordance with TSA Memorandum of Understanding, provide additional support within available resources & capabilities (See Annex 3 (Memorandum of Understanding between The Salvation Army (A Georgia Corporation) and the South Carolina Emergency Management Division) to Attachment D (MOUs, MOAs, and Other Agreements) to the SCEOP).

E. SC Department of Health and Environmental Control

1. Coordinate personnel, food safety, health care, crisis counseling and water quality services to support Mass Care operations.

2. Identify, coordinate facilities, coordinate staffing (including medical personnel) and management, and provide liability coverage for SMNS.

3. Assess the accessibility of potential SMNS locations, to include both physical access as well as service access.

4. Maintain and update the list of SMNS (see Attachment A – Special Medical Needs Shelter Listing).

5. Coordinate with other ESF-6 support agencies and organizations for SMNS requirements as needed or necessary.

6. Maintain and ensure confidentiality of medical records.

7. Assist sheltered individuals in making arrangements for essential medical equipment, as the situation allows (patients should bring medicine and equipment with them if possible)

8. Update SMNS status information in Palmetto (formerly WebEOC/EM-COP).

9. Provide nurses, within capabilities, to support SMNS and (as available) ARC shelters.

10. Participate in annual County Mass Care coordination meetings and/or training events.

F. SC Department of Health and Human Services

1. Review emergency procedures to prepare to activate SERT members to the SEOC.

2. Provide support staff to general population shelters and SMNS.

3. Provide support in DRCs to assist disaster survivors with applying for State and Federal assistance programs.

4. Assist in providing information and referral services for disaster survivors.

G. SC Lieutenant Governor's Office on Aging

1. Review emergency procedures to prepare to activate SERT members to the SEOC.

2. Assist in the identification of affected elderly population during disasters or emergencies.

3. Assign a liaison from the SC Lieutenant Governor's Office on Aging (LGOA) to ESF-6 at the SEOC.

4. Perform initial Assessment of Need to include:

   - Re-establishing LGOA and Aging Network operations
   - Coordinating with other disaster response agencies
   - Managing delivery of non-perishable meals
   - Organizing volunteer activities

5. Offer services to the elderly population as needed.

6. Coordinate temporary expansion of the home-delivered meals program during a federally-declared disaster.

7. Provide support in disaster recovery centers to assist the elderly with applying for State and Federal Assistance programs.

8. Assist in providing information and referral services for disaster survivors, to include the elderly.

H.   SC Department of Mental Health

1.   Assist with victim recovery efforts to include crisis counseling and behavior health services, and special population needs.

2.   Provide crisis and behavioral health counselors to facilitate response and recovery.

3.   Provide medical facilities, as available.

4.   Identify resources to secure medication, as needed.

5.   Identify Federal Crisis Counseling Programs for affected individuals, families, communities, and responders.

6.   Provide support staff to general population shelters.

I.   SC Department of Alcohol and Other Drug Abuse Services

Provide behavioral health counseling personnel and other substance abuse services.

J.   SC Vocational Rehabilitation Department

1.   Provide resources the following resources, if available:

- Crisis counselors to staff emergency shelters
- Accessible vans and van drivers
- Alcohol and Drug treatment facilities

2.   Provide support staff to general population shelters.

K.   SC Department of Disabilities and Special Needs

Provide support staff to general population shelters.

L.   SC Department of Motor Vehicles

Provide support staff to general population shelters.

M.   SC Assistive Technology Program

1.   Assists in shelter operations by providing:

- An equipment loan and demonstration program
- An on-line equipment exchange program
- Training

- Technical assistance

- Publications

- An interactive CDROM (SC Curriculum Access through AT)

- An information listserve

2. Works with various State committees that affect AT acquisition and IT accessibility.

N. Southern Baptist Disaster Relief

1. Provide support for mass feeding operations to include general population shelters and SMNS.

2. Assist in the coordination of local support to SMNS operations.

VI. MEMORANDUMS OF UNDERSTANDING (MOU)

A. Memorandum of Understanding between The American Red Cross and the State of South Carolina (See Annex 2 to Attachment D (MOUs, MOAs, and Other Agreements) to the SCEOP).

B. Memorandum of Understanding between The Salvation Army (A Georgia Corporation) and the South Carolina Emergency Management Division) to (See Annex 3 to Attachment D (MOUs, MOAs, and Other Agreements) to the SCEOP).

VII. FEDERAL ASSISTANCE

A. This Annex is supported by the National Response Framework, ESF-6, Mass Care, Emergency Assistance, Housing, and Human Services.

B. When fully operational, representatives from ESF-6 will assist in staffing the JFO.

C. Once established, Federal ESF-6 executes four functions:

- Mass Care

- Emergency Assistance

- Housing

- Human Services

C. Federal ESF-6 is responsible for assisting in providing for the safety and well-being of household pets and service animals. In South Carolina, State ESF-17 (Animal/Agriculture Emergency Response) is responsible for this activity.

VIII. ATTACHMENTS

A -   Special Medical Needs Shelter Listing

ATTACHMENT A

Special Medical Need Shelter Listing			
County	Facility Name	Patient Capacity	DHEC Region
Abbeville	Abbeville Area Medical Center 420 Thomson Circle Abbeville, SC 29620	10	Upstate
Aiken	Aurora Pavilion Behavior Center 655 Medical Park Drive Aiken, SC 29801	15	Midlands
Allendale	Allendale County Hospital 1787 Allendale Fairfax Hwy Fairfax, SC 29827	6	Low Country
Anderson	AnMed Health 2000 East Greenville St. Anderson, SC 29621	25	Upstate
	Anderson Civic Center 3027 Martin Luther King Jr Blvd Anderson, SC 29625	500	Upstate
Bamberg	None		Low Country
Barnwell	None		Midlands
Beaufort	Beaufort Memorial Hospital 955 Ribaut Rd Beaufort, SC 29902	10	Low Country
	Hilton Head Hospital 25 Hospital Center Blvd Hilton Head, SC 29926	5	Low Country
Berkeley	None		Low Country
Calhoun	None		Low Country
Charleston	Health South Rehabilitation Hospital 9181 Medcom St Charleston, SC 29406	12	Low Country
Cherokee	Mary Black Health System-Gaffney 1530 N. Limestone Street Gaffney, SC 29340	31	Upstate
Chester	Chester Regional Medical Center 1 Medical Park Road Chester, SC 29706	10	Midlands
Chesterfield	None		Pee Dee

Special Medical Need Shelter Listing			
County	**Facility Name**	**Patient Capacity**	**DHEC Region**
Clarendon	Clarendon Health System Lake Marion Nursing Home 1527 Urbana Road Summerton, SC 29148	6	Pee Dee
Colleton	Colleton Medical Center 501 Robertson Blvd. Walterboro, SC 29488	6	Low Country
Darlington	McLeod Regional Medical Center 701 Cashua Ferry Road Darlington, SC 29532	10	Pee Dee
Dillon	McLeod Regional Medical Center 301 E. Jackson Street Dillon, SC 29536	8	Pee Dee
	City of Dillon Wellness Center 1647 Commerce Drive Dillon, SC 29536	31	Pee Dee
Dorchester	Dorchester Senior, Inc. 312 N Laurel Street Summerville, SC 29483	20	Low Country
Edgefield	Edgefield County Hospital 300 Ridge Medical Plaza Edgefield, SC 29824	6	Midlands
Fairfield	Fairfield Memorial Hospital 102 US 321 Bypass North Winnsboro, SC 29180	5	Midlands
Florence	Carolina's Hospital System 805 Pamplico Highway Florence, SC 29505	12	Pee Dee
	McLeod Regional Medical Center 555 E. Cheves Street Florence, SC 29506	19	Pee Dee
	Lake City Community Hospital 258 N Ron McNair Blvd Lake City, SC 29560	8	Pee Dee
Georgetown	None		Pee Dee
Greenville	BonSecours Wellness Arena 650 N Academy St Greenville, SC 29601	25	Upstate
Greenwood	Self Regional Healthcare 1325 Spring St. Greenwood, SC 29646	20	Upstate

Special Medical Need Shelter Listing			
County	**Facility Name**	**Patient Capacity**	**DHEC Region**
	Greenwood Regional Rehabilitation Hospital 1530 Parkway Greenwood, SC 29646	10	Upstate
Hampton	B.T. DeLoach Bldg 201 Jackson Ave W Hampton, SC 29924	6	Low Country
Horry	None		Pee Dee
Jasper	None		Low Country
Kershaw	Kershaw Health Medical Center 1315 Roberts Street Camden, SC 29020	10	Midlands
Lancaster	Springs Memorial Hospital 800 W. Meeting Street Lancaster, SC 29720	6	Midlands
Laurens	Greenville Health System - Laurens County Memorial Hospital 22725 Hwy 76 East Clinton, SC 29325	20	Upstate
	Martha Franks Retirement Community 1 Martha Franks Dr Laurens, SC 29360	25	Upstate
Lee	Tuomey Healthcare Hospital 129 N. Washington Street Sumter, SC 29150	30	Pee Dee
Lexington	Lexington Medical Center 2727 Sunset Blvd. West Columbia, SC 29169	20	Midlands
	Midlands Technical College 1260 Lexington Drive West Columbia, SC 29170	32	Midlands
Marion	Carolina Hospital System 2829 U.S. 76 Mullins, SC 29574	14	Pee Dee
Marlboro	None		Pee Dee
McCormick	Petra Health and Rehab of McCormick 204 Holiday Road McCormick, SC 29835	12	Upstate
Newberry	Newberry County Memorial Hospital 2669 Kinard Street Newberry, SC 29108	4	Midlands

Special Medical Need Shelter Listing			
County	**Facility Name**	**Patient Capacity**	**DHEC Region**
Oconee	Oconee Medical Center 298 Memorial Drive Seneca, SC 29672	30	Upstate
	Walhalla High School 4701 Highway 11 Walhalla, SC 29691	47	Upstate
Orangeburg	Regional Medical Center 3000 St. Matthews Road Orangeburg, SC 29118	6	Low Country
Pickens	Cannon Memorial Hospital 123 W G Acker Drive Pickens, SC 29671	7	Upstate
Richland	None		Midlands
Saluda	Saluda Nursing Center 581 Newberry Highway Saluda, SC 29138	3	Midlands
Spartanburg	Spartanburg Regional Medical Center 101 East Wood Street Spartanburg, SC 29303	12	Upstate
	Spartanburg Regional – Village Hospital 250 Westmoreland Rd. Greer, SC 29651	5	Upstate
	Mary Black Memorial Hospital 1700 Skylyn Dr. Spartanburg, SC 29307	22	Upstate
	USC Upstate 800 University Way Spartanburg, SC 29303	75	Upstate
Sumter	Tuomey Healthcare Hospital 129 N. Washington Street Sumter, SC 29150	30	Pee Dee
Union	Union Medical Center 322 West South Street Union, SC 29379	10	Upstate
Williamsburg	None		Pee Dee
York	Piedmont Healthcare System 222 S. Herlong Ave. Rock Hill, SC 29732	5	Midlands