

ANNEX 6
ESF-6 - MASS CARE

COORDINATING: SC Department of Social Services

PRIMARY: American Red Cross (ARC); The Salvation Army; SC Department of Public Health; SC Department of Health and Human Services; SC Department 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; South Carolina Baptist Disaster Relief; Clemson University Livestock Poultry Health; Feeding the Carolinas; SC Emergency Planning Committee for People with Functional Needs; Able SC; Walton Options; and Accessibility SC

I. INTRODUCTION

Mass Care encompasses sheltering (includes general population, warming/cooling centers, medical needs, partner co-located shelters, pets as defined by FEMA, and service animals); feeding (fixed sites and mobile feeding units); distribution of emergency supplies; reunification and disaster welfare inquiries; and monitoring the overall health of shelter populations.

II. PURPOSE

- A. Coordinate the capability to meet basic human needs (sheltering to include pets, food, distribution of emergency relief supplies, and disaster welfare inquiries) 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, response, recovery, and mitigation 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 corresponding 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), the Joint Field Office (JFO), and Multi Agency Shelter Transition Team(s) (MASTT).

- D. ESF-6 will coordinate mass care operations with all supporting and other appropriate agencies/organizations to ensure accessibility and inclusion for all populations.
- 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 in order to support the counties and Tribal governments, ESF-6 will assess the situation (both pre- and post-event). ESF-6 will then develop strategies on how to respond to the emergency in conjunction with local emergency management officials.
- 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. ESF-6 may activate the Mass Care Sheltering Task Force (MCSTF).
- I. ESF-6 may activate the Mass Care Feeding Task Force (MCFTF), to support a coordinated, accessible, timely, and efficient mass feeding response.
- J. ESF-6 will provide reasonable accommodations and support to those with access and functional needs as requested or needed.
- K. Mass Care
 - 1. General Population Sheltering
 - a. Under a local or state emergency, SCDSS will be the primary organization that will coordinate with ARC, TSA, South Carolina Baptist Disaster Relief (SCBDR), other voluntary agencies/organizations, and local/county emergency managers to conduct general population mass care operations.
 - b. ESF-6 will respond to county submitted resource requests for mass care support.
 - c. ARC will take the lead role in working with government and non-government organizations and local emergency managers, and faith-based organizations, to support general population sheltering. ARC and other organizations may open general population shelters. ARC managed shelters are managed by trained ARC volunteers and staff while SCDSS will provide augmentation to support general population sheltering.
 - d. In a multi-county or state-level event, SCDSS will coordinate the opening and closing of planned shelters in conjunction with ARC to ensure they follow ARC guidelines to include, if necessary, coordinating regional support to the event.

- e. ARC maintains a database of surveyed shelter locations in their shelter system (WebEOCNSS). County and local emergency management can contact their local ARC representative to receive a copy of the RCViewNSS listing of the shelters in their area.
 - f. All support agencies will provide liaison support at all levels during a State of Emergency in person or remote, as requested.
 - g. ESF-6, in coordination with SCEMD and county emergency management, will pre-determine the locations for designated general population shelters.
 - h. SCDSS may be required to open general population shelters without support of other volunteer partners.
2. Warming/Cooling Centers
- a. County authorities are the lead that coordinate, manage and operate warming/cooling centers.
 - b. Warming/cooling centers are used for extreme temperature conditions and provide a location for vulnerable populations to wait out the event, get information and potentially other resources.
 - c. These locations are not intended to provide reception/registration or dormitory support but may require additional resource support once local capabilities are overwhelmed.
3. Medical Needs Shelters (MNS)
- a. The SC Department of Health and Environmental Control (SCDHEC) is the lead state agency that will coordinate, manage and operate medical needs shelters.
 - b. Medical Needs Shelters are primarily for individuals who meet one or more of the following general guidelines:
 - i. Require uninterrupted power to operate equipment/refrigeration
 - ii. Require a temperature-controlled environment
 - iii. Require a medical bed/medical cot
 - c. SCDHEC will contract/coordinate the use of facilities and coordinate the staffing of shelters.
 - d. SCDHEC will coordinate with other ESF-6 support agencies and organizations for MNS needs as necessary.

- e. SCDHEC is responsible for maintaining and ensuring the confidentiality of shelter records while in agency care.
- f. SCDHEC will assist sheltered individuals in making arrangements for essential resources, as the situation allows (patients should bring medicine and specialized equipment with them, if possible).
- g. SCDHEC will open and close MNS in coordination with county emergency management in order to meet the sheltering needs.
- h. In a multi-county or state-level event, ESF-6 will assist SCDHEC in coordinating additional regional resources.
- i. County and local emergency management should contact their SCDHEC Regional Public Health Preparedness Director for further information/coordination.
- j. When identified and appropriately assessed, SCDHEC will co-locate MNS within a partner co-located shelter.
- k. For additional information see SCDHEC EOP, Annex N.

4. Partner Co-Located Shelters

- a. Partner co-located shelters may be managed by ARC, SCDSS, county/state or another partner agency. A signed agreement/MOU/MOA will be completed in advance and/or prior to opening. The main roles and responsibilities outlined above for the respective organizations will remain largely unchanged.
- b. May include general population, medical needs, pets and other partner services, such as mental health, child care, etc.
- c. Medical Needs Shelters will function separately but within the shelter. However, there will be interaction between SCDSS, ARC, CULPH and SCDHEC, as necessary, to facilitate mass care among respective populations.
- d. State and local level coordination will occur between ESF-6 and state and regional/county-level agencies and organizations. This may include SCDHEC's Agency Coordination Center (ACC), local SCDHEC preparedness staff, ARC, and county emergency management.

5. Emergency Pet Sheltering

- a. The 2006 Pets Evacuation and Transportation Standards (PETS) Act amended the Stafford Act to ensure that state and local emergency preparedness operational plans address the needs of individuals with

pets and service animals prior to, during, and following a major disaster or emergency. If pets are not permitted to stay with owners in a shelter, they will be provided a safe place to stay.

- b. Pets are defined by FEMA to include dog, cat, bird, rabbit, rodent, or turtle. It does not include reptiles (except turtles), amphibians, fish, insects/arachnids, farm animals (including horses), poultry, and animals kept for racing.
- c. Clemson University Livestock Poultry Health (CULPH) provides subject matter expertise and provides technical guidance to support efforts to coordinate resources in order to assist evacuees with pets who seek shelter.
- d. Three types of emergency pet shelters:
 - i. Cohabitated – pets stay with owners within the shelter setting.
 - ii. Co-located – pets are sheltered in a separate area within proximity of the human shelter (e.g., same building and separate room, or separate building on the same property). This arrangement allows the owners to provide some care to their pets. These require varied levels of personnel, resources, and support.
 - iii. Independent – pets are sheltered separately. These require varied levels of personnel, resources, and support.
- e. The name and location or pre-designated sites for temporary emergency sheltering of pets will be placed into the ESF-6 shelter database and Palmetto Shelter Board.
- f. If a need develops for a temporary emergency pet shelter(s) where none exists, supporting agencies and organizations will coordinate resources with the local jurisdiction to determine location, required resources and staff, mobilization, and management of such site(s) as requested to support local effort.

6. Service and Therapy/Emotional Support Animals

- a. Service animals are not considered pets. Service animals, according to the Americans with Disabilities Act (ADA), can accompany their owners into human shelter facilities.
- b. Therapy/Emotional Support Animals (ESA)s do not receive protections under the ADA. ESAs might not be permitted to accompany their owners into human shelter facilities. The ideal option for individuals with an ESA is to seek non-congregate, pet-

friendly housing options. Shelter staff and volunteers will be able to help identify these other options.

7. Feeding

- a. ESF-6 will coordinate mass care feeding operations in conjunction with ESF-11 and ESF-18 as requested.
- b. ARC, TSA, SCBDR, and other organizations will manage feeding programs for disaster survivors and emergency workers through a combination of fixed sites and mobile feeding units.
- c. ARC, TSA, SCBDR, and Feeding the Carolinas 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 dietary needs.
- e. SCDHEC may coordinate with ESF-6 and/or Harvest Hope or other feeding vendors for feeding support to the MNS.
- f. SCDSS will manage the Disaster Supplemental Nutrition Assistance Program (D-SNAP) under the rules and regulations for the USDA Food and Nutrition Service (FNS).
- g. The SC Department on Aging (SCDOA) will provide technical assistance and support the 10 regional Area Agencies on Aging (AAAs) to help maintain continuity of services to seniors served through the SC Aging Network – including the provision of meals for older adults at congregate sites (senior centers) and home-delivered meals for seniors who cannot attend the congregate sites.
- h. All feeding operations will account for accessibility, dietary/nutrition, and assistive technology needs.

8. Distribution of Emergency Relief Supplies

- a. ESF-6 will coordinate with ESF-18 to determine the appropriate distribution method of emergency relief supplies (to include, but not limited to, water, non-perishable food, paper products, household cleaning supplies, pet care resources, infant care items and personal hygiene products) in areas where commercial trade is inoperative/insufficient to meet emergency needs.
- b. ESF-6 will submit a resource request to SCEMD Supply Unit to coordinate transportation of emergency relief supplies, if needed.

- c. These distribution methods may include mobile distribution and/or agency-specific sites/distribution centers.
- 9. Health Services at Mass Care Facilities
 - a. ARC and TSA may provide limited first aid or health services at their facilities.
 - b. This will not replace required medical services provided by local EMS/support under Annex 8 (Health and Medical Services) of the SCEOP.
 - c. Monitoring the overall health of shelter populations.
- 10. Disaster Welfare Information (DWI)
 - a. Some organizations can coordinate “Disaster Welfare Information” for families separated by disaster. ARC provides reunification services as needed.
 - b. These organizations should:
 - i. Ensure any release of confidential information is in accordance with all relevant federal, state and local laws, specifically those concerning privacy and confidentiality.
 - ii. Work cooperatively with other agencies and organizations to assist in family reunification efforts.
 - iii. Provide DWI-related information in accessible formats, when available.
- L. Shelter Management includes:
 - 1. Coordinating with SCEMD to estimate the number of evacuees and accompanying pets who may require shelter;
 - 2. Planning shelter space for humans and pets;
 - 3. Surveying and assessing facilities, on a recurring basis;
 - 4. Planning, anticipating and coordinating staffing;
 - 5. Plan for and coordinate for feeding operations for humans and pets;
 - 6. Coordinating resources;
 - 7. Providing operational and logistical support;

8. Addressing functional, access and individual medical needs and the medical needs of pets;
 9. Consistent and accurate reporting and communication;
 10. Identifying and providing public information on options for temporary shelter sites for evacuee's pets;
 11. Coordinating shelter opening and closings with state, county, and local officials;
 12. Coordinate with ESF-18 for the arrival of unsolicited goods donated by the community.
- M. ESF-6 will coordinate with ESF-14 (Initial Recovery and Mitigation) on Multi Agency Shelter Transition Teams (MAST) and transition plans as it affects SCDDSS, VOADs, Individual Assistance (IA), and Public Assistance (PA) Programs.
- N. ESF-6 will coordinate with Federal ESF-6 for assistance, as needed.

IV. ESF-6 ACTIONS

- A. Prevention/protection
1. Prepare for disaster exercises and training by coordinating with support agencies and organizations for their participation and accessibility.
 2. Maintain a contact roster of primary and supporting ESF personnel.
 3. Coordinate with ARC, TSA, SCDHEC, CULPH, SCEMD, and counties to ensure an up-to-date shelter list is available.
 4. Coordinate with ARC, SCDHEC, and community partners to assure the accessibility and disability integration of potential shelter locations to include both physical and service access.
 5. Coordinate with the SC Emergency Planning Committee for People with Functional Needs (SCEPCPFN), Centers for Independent Living (CILs), and DDSN. This can be related to disaster support for access and functional needs-related issues/concerns for preparedness purposes.
 6. Participate in mass care coordination meetings and/or training events.
 7. Ensure procedures are in place to document costs for any potential reimbursement.
 8. Participate in state exercises and/or conduct an exercise to validate this Annex and supporting SOPs annually at a minimum.
- B. Response

1. Open and close shelters in response to public need as assessed by ESF-6, SCDHEC (for MNS), ARC, SCEMD, and county emergency management agencies.
2. Coordinate for providing meals (prepared and/or shelf-stable) at mass feeding sites (fixed, mobile and commodity distribution and/or donated relief supply locations) with the Situation Unit (Operations Section) and SEOC Logistics Section, MCFTF, ESF-11 (Food Services), and ESF-18 (Donated Goods and Volunteer Services).
3. Coordinate for the provision of Durable Medical Equipment (DME) with SC Assistive Technology Program and CILs.
4. Coordinate with the SCEPCPFN to address disability integration concerns related to people with access and functional needs.
5. Coordinate with ESF-15 (Public Information) to provide accessible information to the public related to mass care (shelter opening and closing, accessibility, and items to bring with you to a shelter; what to expect in a shelter).
6. Provide the SEOC Operations Section with updated listing of shelter occupancy levels and shelter needs via Palmetto.
7. Coordinate with SCEMD, ARC, TSA, SCDHEC, and counties to update lists of available shelters, including MNS.
8. Coordinate with ESF-8 (Health and Medical Services) for medical services and behavioral health services in shelters. See ESF-6 SOP document or SC DHEC EOP, Annex N.
9. 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.
10. Coordinate with SEOC Operations and Logistics for the restoration of services at Mass Care sites, as required.
11. Support and coordinate resources relating to evacuee's pets/service animals.
12. Maintain situational awareness of D-SNAP inquiries.
13. Coordinate requests for shelter security through ESF-13 (Law Enforcement).
14. Provide ESF-6 representation on the Recovery Task Force.
15. Activate any mass care task force as necessary.

C. Recovery

1. Feeding
 - a. The priority of mass feeding activities will be disaster survivors.
 - b. Emergency workers will be encouraged to utilize established mass feeding sites (Congregate).
 - c. Coordinate with the SEOC Logistics Section, ESF-11 (Food Services), and ESF-18 (Donated Goods and Volunteer Services) to establish/support existing mass feeding sites operated by the ARC, TSA, SCBDR, and other volunteer agencies.
 - d. Coordinate the provision of prepared meals at mass feeding sites, with TSA, ESF-11, ESF-18, and SEOC Logistics Section, established by emergency management agencies.
 - e. Coordinate with SEOC Logistics Section for any support services at mass feeding sites.
 - f. Coordinate with supporting agencies for the provision of food and water, with consideration to dietary needs, accessibility, and accommodations at mass feeding sites.
2. Coordinate with Federal ESF-6 personnel in the SEOC and JFO.
3. Support long-term recovery priorities as identified by MAST Teams and/or the Recovery Task Force.
4. Coordinate with the US Postal Service to register for temporary change of address/mail forwarding at mass care shelters, fixed and mobile feeding sites, points of distribution, and other mass care sites as needed.
5. Coordinate with ARC and TSA to assist with providing information about disaster survivors to family members outside the disaster area.
6. Coordinate processes to assist disaster survivors on transitioning from congregate shelters to long term housing solutions.

D. Mitigation

1. Review, evaluate, and comment on Proposed State Hazard Mitigation Plan Amendments upon initiation and within the review period.
2. Support requests and directives from the Governor and/or FEMA concerning mitigation and/or re-development activities.
3. Document information which may be needed for inclusion in agency/state/federal briefings, situation reports, and action plans.

V. AGENCY/ORGANIZATION RESPONSIBILITIES

- A. General
 - 1. ESF-6 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 will work to educate citizens on disaster preparedness and disaster mitigation activities.
 - 3. ESF-6 will participate in state, county, and local mass care coordination meetings and/or training events.
 - 4. ESF-6 coordinates mass care operational information management at state and supports county level, when requested.

- B. SC Department of Social Services (SCDSS)
 - 1. Preparedness
 - a. Plan for preparedness, response, mitigation, 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, including D-SNAP if approved.
 - d. Develop mass care training programs for SCDSS personnel and partners at the state and county level.
 - e. Support formal agreements, Memorandums of Agreement (MOA), 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 in order to provide for the congregate housing and care of persons displaced or rendered homeless as a result of a natural or man-made disaster or emergency, when requested.
- b. Communicate with all mass care agencies and organization to compile and exchange information concerning the extent of the disaster and the status of response operations. Information and updates will be provided to the SEOC Operations Section.
- c. Provide a State Mass Care Coordinator to the SEOC upon request.
- d. Coordinate with mass care organizations to ensure operational coordination with disaster response of mass care services and support to local governments.
- e. Collect, compile, maintain essential information, and generate reports/records concerning mass care disaster response.
- f. Coordinate with all mass care agencies/organizations and support agencies to ensure all state assets have been exhausted prior to requesting federal assistance.

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 preparedness, response, short-term and long-term recovery actions, in coordination with government agencies, based on hazard analysis and history of disasters. See Annex 2 (Memorandum of Understanding between the ARC and the State of South Carolina) to Attachment D (MOUs, MOAs and Other Agreements) to the SCEOP.

- b. Recruit and train ARC disaster volunteers, community and faith-based partners, and state and local employees in ARC shelter operations, as requested.
- c. Conduct community disaster and preparedness education programs to provide communities with information to help them prepare for disasters.
- d. Identify, coordinate and conduct shelter surveys.
- e. Assess the accessibility of potential general population shelters to include both physical access as well as service access.
- f. Test validity of disaster response plans and procedures through internal and inter-agency disaster response exercises.
- g. Evaluate and coordinate necessary revisions to mass care plans with government agencies.

2. Response

- a. Establish ARC Headquarters in/near the affected area for coordination of services.
- b. Assign ARC Liaison to ESF-6 at the SEOC and active county EOCs.
- c. Conduct Community Disaster Needs Assessments.
- d. Establish and manage general population mass care shelters (facilities) and provide health services, shelter entry screening, and in accordance with county/state agreements.
- 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 health care supplies for ARC facilities.
- j. Provide services to help family members reconnect following a disaster.
- k. Coordinate with federal counterparts to maintain ARC's reunification services, which provides information about disaster survivors to family members..

- l. Provide ARC Nurse Liaison (RCNL) to the DHEC Agency Coordination Center (ACC) or Regional Coordination Center (RCC) upon Medical Need Shelter (MNS) triage activation to assist those who do not qualify for MNS placement.
 - m. Contact ARC Disability Integration Specialist to assist with MNS accessibility, as requested.
3. Recovery
- a. Provide assistance based on immediate disaster-caused need.
 - b. Depending upon an evaluation of need and resources available, provide:
 - i. Immediate assistance
 - ii. Sheltering
 - iii. Health, mental health, and spiritual care services
 - iv. Recovery planning and referrals
 - v. Distribution of emergency supplies
 - vi. Assistance in obtaining information about federal and other resources available to disaster survivors for additional assistance
 - vii. Representatives/information at Disaster Recovery Centers (DRCs) to inform applicants of available ARC assistance.
 - c. Manage ARC Logistics System of Procurement, warehouses, relief facilities, transportation and communication networks.
 - d. Have a nurse liaison available either on call or in ACC/RCC as requested.
- D. The Salvation Army (TSA)
1. Preparedness
 - a. Review and validate TSA North & South Carolina Divisional Disaster Plan.
 - b. Plan for disaster preparedness, response, mitigation, short-term and long-term recovery actions, in coordination with government agencies, based on hazard analysis and history of disasters. See Annex 3 (Memorandum of Understanding between The Salvation Army (A Georgia Corporation) and the State of South Carolina) 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 Care Services.
- e. Deploy to provide emotional and spiritual care.

3. Recovery

- a. As requested and available, 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 the distribution of emergency relief supplies.
- d. Provide additional support within available resources and capabilities in accordance with TSA MOU. See Annex 3 (Memorandum of Understanding between The Salvation Army (A Georgia Corporation) and the State of South Carolina) to Attachment D (MOUs, MOAs and Other Agreements) to the SCEOP.

- E. SC Department of Health and Environmental Control (SCDHEC)

1. Coordinate personnel food safety, health care, crisis counseling and water quality services to support mass care operations.
2. Identify and coordinate facilities and provide staffing/management.
3. Verify the eligibility and accessibility of potential MNS locations in coordination with ARC Shelter Survey.
4. Maintain and update the list of MNS (see Attachment A – Medical Needs Shelter Listing).

5. Coordinate with other ESF-6 support agencies and organizations for MNS requirements, as needed/necessary.
 6. Maintain and ensure confidentiality of shelter records.
 7. Assist sheltered individuals in making arrangements for essential medical equipment and medication as the situation allows (patients should bring medicine and equipment with them, if possible).
 8. Update MNS status information in Palmetto.
 9. Participate in county mass care coordination meetings and/or training.
 10. Support ARC Nurse Liaison with the following to assist MNS triage system:
 - a. Providing necessary contact information, including name, address of triage location, and phone number to the ARC SC Region who will provide it to the ARC Nurse Liaison.
 - b. Notifying ARC SC Region within 24 hours of pending activation of MNS and triage.
 - c. Providing access to necessary systems at the ACC/RCC or virtually.
 - d. Provide security to and from vehicle and designated triage location for ARC Nurse Liaison as necessary.
 11. Conduct or coordinate health status monitoring as needed.
 12. Provide lactation consultants as requested at general population and medical needs shelters.
 13. See SCDHEC EOP Annex N.
- F. SC Department of Health and Human Services (SCDHHS)
1. Review emergency procedures to prepare to activate State Emergency Response Team (SERT) members to the SEOC.
 2. Provide support staff to general population shelters and MNS.
 3. Provide support in DRCs to assist disaster survivors with applying for state and federal assistance programs, as requested.
 4. Assist in providing information and referral services for disaster survivors, as requested.
- G. SC Department on Aging (SCDOA)

1. Review emergency procedures prior to activating SCDOA SERT members to the SEOC, as requested.
2. Ensure that information about vulnerable seniors directly receiving services through the Aging Network, who are affected during an emergency/disaster situation, are identified, safeguarded, and shared securely with the appropriate emergency officials to receive assistance, as needed.
3. Activate the SCDOA Emergency Preparedness Coordinator to act as a liaison for the Aging Network to ESF-6 at the SEOC.
4. Maintain communication with the AAAs (before, during and after a disaster) in order to collect/provide essential information to determine operating conditions, interruption of services (if any).
5. Ensure the capability of the State Office and Aging Network to maintain/resume operations as quickly as possible following a disaster.
6. In coordination with ESF-15, disseminate helpful resource and recovery information to the senior population via the SCDOA's website, regional AAAs, outreach opportunities, and/or applicable social media
7. Interact and coordinate with other agencies and organizations to ensure the health, welfare and safety of seniors served through the aging network to the extent possible.
8. Provide information, referral and assistance services for senior disaster survivors and their families; such as advocacy and assistance with applying for State and Federal assistance programs, as requested.

H. SC Department of Mental Health (SCDMH)

1. Assist with survivor recovery efforts to include crisis counseling and behavior health services; to include special population's needs as appropriate.
2. Provide clinicians and crisis counselors to facilitate response and recovery.
3. Provide facilities for inpatient or other needs, as available.
4. Assist in identifying resources for securing needed prescription medications.
5. When available, utilize Crisis Counseling Program staff to assist in recovery efforts of survivors, responders, and communities.
6. Provide clinical staff to general population shelters, as needed.
7. Provide trained support staff to general population shelters, as available.

- I. SC Department of Alcohol and Other Drug Abuse Services (DAODAS)
Provide behavioral health counseling personnel and other substance abuse services, as requested.
- J. SC Vocational Rehabilitation Department (SCVRD)
 - 1. Provide the following resources, if available:
 - a. Crisis Counselors to staff emergency shelters, as requested.
 - b. Accessible vans and van drivers, as requested.
 - c. Alcohol and Drug Treatment Facilities, as requested.
 - 2. Provide support staff to general population shelters as requested.
- K. SC Department of Disabilities and Special Needs (SCDDSN)
 - 1. Provide support staff to general population shelters, as requested.
 - 2. Provide contractor services to general population shelters in recovery operations, as requested.
- L. SC Department of Motor Vehicles (SCDMV)
Provide support staff to general population shelters, as requested.
- M. SC Assistive Technology Program (SCATP)
 - 1. Assists in shelter operations by providing, upon request:
 - a. Durable Medical Equipment (DME) as available
 - b. Online Durable Medical Equipment listing
 - c. Equipment loan and demonstration
 - d. Training
 - e. Technical assistance/support to various state committees
 - f. Information Listserv
 - 2. Work with various state committees that affect AT acquisition and IT accessibility.
- N. South Carolina Baptist Disaster Relief (SCBDR)
 - 1. Provide support for Mass Feeding operations to include general population shelters and MNS.

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

O. Clemson University Livestock Poultry Health (CULPH)

1. Work with other Mass Care support agencies to provide technical assistance to support building local, regional, and state emergency pet sheltering capabilities as needed.
2. Provide SEOC staff coverage during a declared emergency who will work within ESF-6 as necessary.
3. Provide outreach regarding opportunities for pet sheltering staff training upon request.
4. Provide subject matter expertise and technical assistance regarding best practices for emergency pet sheltering.
5. Assist with sourcing resources requested by localities to support emergency pet sheltering, such as:
 - a. Providing references to locate non-shelter options to evacuees with pets.
 - b. Identify potential sources for short-term and longer-term emergency pet shelter staffing.
 - c. Identify potential sources for the procurement of pet food and other supplies required by animals within the shelter setting.
 - d. Identify potential sources for veterinary medical care for sheltered pets and service animals.
6. Participate in the SC Multi-Agency Mass Care Task Force activities as appropriate.
7. Assist with recovery efforts, including sourcing potential options for long-term pet sheltering for people unable to return to their homes.

P. SC Emergency Planning Committee for People with Functional Needs (SCEPCPFN)

Coordinate with ESF-6 personnel to ensure communication and coordination within SCEPCPFN agencies and organizations for situational awareness and to address unmet needs of people with access and functional needs.

Q. Able South Carolina

1. Assists with shelter operations and training by providing resources and access needs pre-, during, and post-disaster for the counties in our serving area. Able SC offers services to the following counties in the Midlands and

Upstate: Abbeville, Anderson, Calhoun, Cherokee, Chester, Clarendon, Fairfield, Greenville, Greenwood, Kershaw, Laurens, Lee, Lexington, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, and York. However, many of our programs are statewide.

- a. Provide Durable Medical Equipment for individual or shelter use.
 - b. Provide training and technical assistance on supporting shelters and individuals with access and functional needs that have all types of disabilities, including but not limited to those with communication disabilities, assistive technology, durable medical equipment, or service animals.
 - c. Provide technical assistance on improving shelter accessibility.
 - d. Assign resource support for shelter providers, individuals with access and functional needs, and community organizations to assist with emergency preparedness paperwork, food allocation, and accessibility needs in shelters and community support providers.
2. Lead collaboration with other disability service providers through the South Carolina Disability Partners in Disaster Coalition to bring observed trends, address unmet needs, and offer a venue for annex partners SCEMD to share updates with the encouragement of disability service provider dissemination.

R. AccessAbility

1. Assist with shelter training, accessibility and resource needs pre, during, and post disaster in center service areas (Williamsburg, Orangeburg, Charleston, Berkeley and Dorchester Counties, as well as unserved counties of Horry and Marion)
 - a. Execute training, technical assistance, and support to shelter staff to maintain shelter accessibility and knowledge of disability needs and awareness.
 - b. Allocate Resource support for shelters through training and disbursement of Durable Medical Equipment for shelter or individual use as needed.
 - c. Provide Training and technical assistance in supporting shelter guests with all types of disabilities including but not limited to those with assistive technology, durable medical equipment, or service animals as resources are available.
2. Maintain communication with other disability service providers to introduce newly observed trends, address unmet needs regarding the coastal regions of the state (Accessibility service area), and offer a venue for annex

partners SCEMD to share updates with the encouragement of disability service provider dissemination.

S. Walton Options

1. Walton Options offers services to the counties of Allendale, Aiken, Barnwell, Bamberg, Beaufort, Colleton, Edgefield, Hampton, Jasper and McCormick.
2. Assists with shelter operations by providing the following upon request:
 - a. Durable Medical Equipment for individual or shelter use as available and appropriate.
 - b. Training and technical assistance on supporting shelterees with all types of disabilities including but not limited to those with assistive technology, durable medical equipment, or service animals as resources are available.
 - c. Technical assistance on improving shelter accessibility.
3. Maintain communication with other disability service providers to bring observed trends, address unmet needs, and offer a venue for annex partners SCEMD to share updates with the encouragement of disability service provider dissemination.

T. Feeding the Carolinas

1. Preparedness
 - a. Works with local Emergency Managers to determine the best locations for pre-positioning supplies pre-disaster.
 - b. Maintains stocks of shelf-stable food items, water, paper products, and other disaster related supplies.
 - c. Pre-position supplies at designated disaster agencies and collaborative partners.
2. Response
 - a. Serves as liaison between ESF-6 and ESF-18 regarding donated goods and services.
 - b. Provides meals to MNS in cooperation with SCDHEC.
 - c. Coordinates with other VOADs, FEMA, and other disaster response staff to assess resource needs and contact potential donors to meet those needs.

- d. Serves as the primary provider of food, water, and other supplies for the Governor’s “Team SC” events as requested.
3. Recovery
- a. Works with county Long-Term Recovery Groups (LTRGs) to provide food, water, and other supplies in areas affected by a disaster.
 - b. Develops resources (cash and in-kind) to meet any identified unmet needs.
 - c. Coordinates disaster recovery services with the SC Disaster Recovery Office, providing assistance whenever possible.

VI. MEMORANDUMS OF UNDERSTANDING (MOU)

See Annex 2, to Attachment D, (MOUs, MOAs and Other Agreements) to the SCEOP.

VII. REFERENCES

- A. South Carolina Multi-Agency Mass Care Feeding Task Force Strategy
- B. South Carolina Multi-Agency Mass Care Sheltering Task Force Strategy
- C. South Carolina Multi-Agency Mass Care Shelter Transition Task Force Plan
- D. ESF-6 Mass Care Standard Operating Procedures (SOP)
- E. SCDHEC EOP Annex O
- F. South Carolina Recovery Plan
- G. SC Emergency Animal Sheltering Plan

VIII. FEDERAL ASSISTANCE

- A. This Annex is supported, by the National Response Framework, ESF-6 (Mass Care), Federal ESF-11 (Agriculture and Natural Resources), Emergency Assistance, Housing and Human Services.
- B. When fully operational, representatives from state and federal ESF-6 will assist in staffing the JFO.
- C. Once established, Federal ESF-6 executes 4 functions:
 - 1. Mass Care
 - 2. Emergency Assistance

3. Housing
 4. Human Services
- D. South Carolina ESF-6 coordinates mass care support services for pets and service animals during disasters. Federal support via Federal ESF-11 will be requested as needed.