

ANNEX 6
ESF-6 - MASS CARE

COORDINATING: SC Department of Social Services

SUPPORTING: American Red Cross (Red Cross); The Salvation Army; SC Department of Health and Environmental Control; 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 Livestock/Poultry Health; Able SC; Harvest Hope; Sexual Trauma Services of the Midlands; SC Emergency Planning Committee for People with Functional Needs; Habitat for Humanity

I. INTRODUCTION

Mass Care encompasses:

- Sheltering (includes general population, individuals with functional and access needs, medical needs, partner co-located shelters, and pets and service animals);
- Feeding (fixed sites and mobile feeding units);
- Distribution of emergency supplies;
- Reunification and disaster welfare inquiries;
- Monitoring the overall health of shelter populations.

II. PURPOSE

- A. Coordinate the capability to meet basic human needs (shelter, 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. Red Cross 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. Mass Care
 - 1. General Population Sheltering
 - a. Under a local or state emergency, SCDSS will be the primary organization that will coordinate with Red Cross, TSA, South Carolina Baptist Disaster Relief (SCBDR), other voluntary agencies/organizations, and local/county emergency managers to conduct general population mass care operations.
 - b. Red Cross will take the lead role in working with government and non-government organizations, faith-based organizations, and private companies that provide shelter services. Red Cross and/or other organization may open general population shelters. However, Red Cross shelter operations are managed by Red Cross-trained volunteers and staff while SCDSS will provide augmentation to support Red Cross and local/county incident commanders that need additional shelter support if there is an identified need for congregate shelter related to a disaster.
 - c. In a multi-county or state-level event, SCDSS will coordinate the opening and closing of planned shelters in conjunction with Red Cross to ensure they follow Red Cross guidelines to include, if necessary, coordinating regional support to the event. Emergency centers can potentially be opened for use by local authorities (ex: warming/cooling centers).
 - d. Red Cross maintains a database of surveyed shelter locations in their National Shelter System (NSS). County and local emergency

management can contact their local Red Cross Representative to receive a copy of the NSS listing of the shelters in their area.

- e. All support agencies will provide liaison support at all levels during a State of Emergency.
- f. ESF-6, in coordination with SCEMD and county emergency management, will pre-determine the locations for designated general population shelters.
- g. SCDSS may be required to open general population shelters without support of other volunteer partners. Detailed procedures for how this will occur is in the ESF-6 Mass Care Standard Operating Procedures (SOP).

2. 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. General criteria, for sheltering in a medical needs shelter
 - i. Individuals who meet one/more of the following general guidelines could qualify as needing to be sheltered at medical needs shelters:
 - Requires uninterrupted power to operate equipment/refrigeration;
 - Requires a temperature-controlled environment;
 - Requires a medical bed/medical cot
- c. SCDHEC will contract/coordinate the use of facilities, coordinate the staffing of the shelter and provide liability coverage to MNS.
- 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.
- 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.

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- j. When identified and appropriately assessed, SCDHEC will co-locate MNS within a partner co-located shelter.
3. Partner Co-Located Shelters
- a. Partner co-located shelters may be managed by Red Cross, 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 interaction between SCDSS, Red Cross, ESF-17 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, Red Cross, and county emergency management.
4. Pets and Service Animals
- 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.
 - b. Clemson Livestock-Poultry Health (CULPH) is the primary agency under ESF-17 for Animal/Agriculture Emergency Response in the SC Emergency Operations Plan (SCEOP). CULPH leads and collaborates with other ESF-17 agencies and organizations to support mass care efforts by coordinating resources to assist people seeking shelter who evacuate with pets and service animals.
 - c. Service animals are not considered pets. Service animals, according to the Americans with Disabilities Act, can accompany their owners into shelter facilities.
 - d. Emergency pet shelters will be of 3 main types: pets stay with owners within the shelter setting (recently named “cohabitated”); pets are sheltered in close proximity to human shelters and owners help provide daily care (referred to as “co-located”); or pets are sheltered separately. These require varied levels of personnel resources (less-to-more, respectively). Other than animal care/control personnel working within their local jurisdictions,

personnel assisting with temporary emergency pet shelters will be volunteers.

- e. The name and location of pre-designated sites for temporary emergency sheltering of pets will be placed into the ESF-6 shelter database and Palmetto Shelter Board. If a need develops for a temporary emergency pet shelter(s) where none exists, ESF-17 agencies and organizations will coordinate resources to determine, set up, staff, and manage such site(s).

5. Feeding

- a. ESF-6 will coordinate mass care feeding operations in conjunction with ESF-11 and ESF-18 as requested.
- b. Red Cross, 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. Red Cross, TSA, SCBDR, and Harvest Hope 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 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 take into account accessibility, dietary/nutrition, and assistive technology needs.

6. 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, 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.
7. Health Services at Mass Care Facilities
- a. Red Cross and TSA may provide limited first aid or health care 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.
8. Disaster Welfare Information (DWI)
- a. Some organizations can coordinate “Disaster Welfare Information,” for families separated by disaster. Red Cross uses the “Safe and Well” website to assist in the reunification of family members.
 - b. Those organizations should:
 - 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.
- K. Shelter Management includes:
- Coordinating with SCEMD to estimate the number of evacuees who may require shelter;
 - Planning shelter space;
 - Surveying and assessing facilities, on a recurring basis;
 - Planning, anticipating and coordinating staffing;
 - Plan for and coordinate for feeding operations;
 - Coordinating resources;
 - Providing operational and logistical support;
 - Addressing functional, access and individual medical needs;
 - Consistent and accurate reporting and communication;
 - Identifying and providing public information on options for temporary shelter sites for evacuee’s pets;

- Coordinating shelter opening and closings in coordination with state, county, and local officials;
 - Plan for and be prepared to coordinate with ESF-18 for the arrival of unsolicited goods donated by the community.
- L. ESF-6 will coordinate with ESF-14 (Initial Recovery and Mitigation) on MASTT and transition plans as it affects SCDSS, VOADs, Individual Assistance (IA), and Public Assistance (PA) Programs.
- M. ESF-6 will coordinate with ESF-17 (Animal/Agriculture Emergency Response) on issues relating to evacuee's pets/service animals.
- N. ESF-6 will coordinate with Federal ESF-6 for assistance, as needed.

IV. ESF-6 ACTIONS

A. Preparedness

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 Red Cross, TSA, SCDHEC, SCEMD, and counties to ensure an up-to-date shelter list is available.
4. Coordinate with Red Cross, 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) and Able SC. 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), Red Cross, 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 Able SC.
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, Red Cross, TSA, SCDHEC, and counties to update lists of available shelters to include MNS.
8. Coordinate with ESF-8 (Health and Medical Services) for medical services and behavioral health services in shelters.
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. Coordinate with ESF-17 on issues 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 Red Cross, 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 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.
 5. Coordinate with American Red Cross 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 longer 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 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.
4. ESF-6 lead coordinates mass care operational information management at state and supports county levels, when requested.

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- 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 our 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 organizations 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 in 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.

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- 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, Mitigation, 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 American Red Cross and the State of South Carolina), to Attachment D, (MOUs, MOAs and Other Agreements) to the SCEOP.
 - b. Recruit and train Red Cross disaster volunteers, community and faith-based partners, and state and local employees in Red Cross shelter operations, as requested.
 - c. Conduct Community Disaster and Mitigation Education Programs in order 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.
 - 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 a Red Cross Headquarters in/near the affected area for coordination of services.
 - b. Assign a Red Cross Liaison to ESF-6, at the State EOC and active County EOCs.

- c. Conduct Community Disaster Needs Assessments.
 - d. Establish and manage general population Mass Care shelters (facilities) and provide Health Care Assessments, as requested.
 - 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 Red Cross facilities.
 - j. Provide services to help family members reconnect following a disaster.
 - k. Coordinate with Federal counterparts to maintain Red Cross' Safe and Well website which provides information about disaster survivors to family members outside the disaster area.
 - l. Provide a Red Cross 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 Red Cross Disability Integration Specialist, as requested to assist with Medical Needs Shelter accessibility.
3. Recovery
- a. Provide assistance based on immediate disaster-caused need, not loss.
 - b. Depending upon an evaluation of need and resources available, provide:
 - i. Direct client assistance
 - ii. Shelter/Temporary Shelter
 - iii. Health and Mental Health and Spiritual Care Services
 - iv. Recovery Planning Advocacy and Referrals
 - v. Distribution of Emergency Supplies
 - vi. Assistance, in obtaining information, about federal and other resources available, for additional assistance, to disaster survivors
 - vii. Representatives/information at Disaster Recovery Centers (DRCs) to inform applicants of available Red Cross assistance.

- c. Manage its' Logistics System of Procurement, warehouses, relief facilities, transportation and communication networks.
- d. Assist DHEC with discharge planning for MNS occupants via Red Cross Nurse Liaison.
- e. Having a nurse liaison available either on call or in ACC.RCC, until triage is demobilized.

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 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 Care 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 limited to, food & commodities, clothing, furniture, bedding and household items.

- d. In accordance with TSA Memorandum of Understanding provide additional support, within available resources and 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 (SCDHEC)
1. Coordinate personnel (when available), food safety, healthcare, crisis counseling and water quality services to support mass care operations.
 2. Identify and coordinate facilities, provide staffing/management and liability coverage for MNS.
 3. Verify the accessibility of potential MNS locations in coordination with Red Cross 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. Provide Red Cross Nurse Liaison with the following to support MNS triage system:
 - a. Providing necessary contact information, including name, address of triage location, and phone number to the Red Cross SC Region who will provide it to the Red Cross nurse liaison.
 - b. Notifying Red Cross SC Region within 24 hours of pending activation of MNS and triage.
 - c. Providing workspace, internet and phone access at the ACC/RCC.
 - d. Providing security to and from vehicle and designated triage location for Red Cross nurse liaison.
 11. Conduct or coordinate health status monitoring as needed.
 12. Provide lactation consultant as requested to shelter residents.
 13. See SCDHEC EOP Annex O.

- 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 vulnerable seniors directly receiving services through the Aging Network, who are affected during an emergency/disaster situation, are identified and shared 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 State Emergency Operations Center.
 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. 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)
 - 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. As lead for and along with other ESF-17 agencies and organizations, responsibilities are as follows:
 - a. Plan for preparedness, response, mitigation, short-term and long-term recovery actions related to pets and service animal mass care issues. Planning efforts include the following:
 - i. Building local, regional and state emergency pet shelter capabilities
 - ii. Pet shelter staff volunteer training
 - iii. Implementation of best practices for emergency pet sheltering
 - iv. Assisting SCEMD with maintenance of their MOUs with the American Society for the Prevention of Cruelty to Animals (ASPCA) and the National Animal Rescue and Sheltering Coalition (NARSC)
 - b. Participate in SC Multi-Agency Mass Care Task Force activities.
 - c. Lead ESF-17 SERT in the SEOC to coordinate resources needed to assist people seeking shelter who have evacuated with pets and service animals, to include the following:
 - i. Providing non-shelter options to evacuees with pets
 - ii. Short-term pet shelter staffing and management
 - iii. Longer-term pet shelter staffing and management
 - iv. Procurement of pet food and other supplies for pets and service animals in shelters
 - v. Veterinary medical care for sheltered pets and service animals
 - d. Assist with recovery efforts, including providing options for long-term pet sheltering for people unable to return to their homes when they leave shelters.
- 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 by providing the following upon request:
 - a. Durable Medical Equipment for individual or shelter use.
 - 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.
 - c. Technical assistance on improving shelter accessibility.
2. 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.

R. Harvest Hope

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

VIII. 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 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 through South Carolina's ESF-17 and request federal support, if needed. South Carolina's ESF-17 (Animal/Agriculture Emergency Response) correlates with the overall mission of Federal ESF-11 in this regard.