

MONTANA DEPARTMENT OF PUBLIC HEALTH &  
HUMAN SERVICES



March 2015  
Version 13



## Record of Distribution

Upon approval of this plan, the Public Health Emergency Preparedness Section will make an electronic copy available. To provide comments and suggestions for future revisions, email [hsphep@mt.gov](mailto:hsphep@mt.gov) or call 406-444-0919.

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The Department of Public Health and Human Services schedules a regular review of all Department Emergency Operations Plans, Supporting Annexes, Standard Operating Procedures, and other guidance documents used to respond to public health emergencies.

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## **Section I: Purpose, Scope, and Assumptions**

### **Purpose**

This Montana Department of Public Health and Human Services (DPHHS) Emergency Support Function #6 *Mass Care, Emergency Assistance, Temporary Housing, and Human Services* (ESF#6) Plan is written as a provisional planning document for the DPHHS Emergency Operations Plan (EOP) to meet the emergency response requirements assigned by the State through the *Montana Emergency Response Framework (MERF)*, maintained by the Montana Disaster Emergency Services (DES). This plan is supported by other EOP annexes, standard operating procedures (SOP), guides, and other planning elements.

### **Scope**

This annex provides guidance and information to coordinate support for local, tribal, state, and volunteer organizations to address the delivery of non-medical services and programs to assist Montanans threatened by potential or actual disasters (MERF, 2012, pg. 40). Although DPHHS is the primary coordinating agency for ESF#6, its activities are heavily dependent on the resources and services offered by other emergency response partners.

The emphasis of this plan is to provide a framework for addressing temporary and short-term support to response and assistance operations for emergencies and disasters which necessitate mass care, emergency assistance, temporary housing, and other human services. DPHHS is not capable of providing all of the services defined under ESF#6, but rather coordinates assistance with providing those prescribed needs of an emergency or disaster. This plan does not define or supplant any emergency operating procedures or responsibilities for any other agency or organization, including the support agencies defined in the MERF and here-in.

The development of this plan is governed by the principle of all-hazards planning, pertains only to DPHHS, and is not limited by the nature of any particular emergency or disaster event. This approach allows the flexibility for DPHHS to respond with equal effectiveness to all events, hazards, emergencies, and disasters or other events that affect public health and the recovery of essential human services in Montana.

The ultimate responsibility for provision of ESF#6 services rests with the local government. This plan can be used to support ESF #8 Public Health and Medical Services operations. Other agencies with State assigned ESF duties might also need ESF#6 assistance. The DES SECC coordinates such situations.

### **Situation**

Montana is vulnerable to several hazards that could result in the need for state government agencies to provide assistance to local and tribal government responders. These hazards include, but are not limited to, wildfires, earthquakes, floods, HazMat incidents, communicable disease outbreak or other public health events, and severe weather. The MERF outlines the breadth of vulnerability to hazards endemic to Montana.

Victims of disasters or emergencies might be forced from their homes depending on such factors as time and extent of the occurrence, area demographics, economic conditions, building construction, and existing environmental conditions. Family members might be separated immediately following an emergency or disaster. Transient individuals, such as tourists, travelers, students, and the pre-disaster homeless, could be involved. Food and relief items could become scarce or compromised. A disaster could also adversely affect

persons considered at-risk or having functional needs, including those with pre-existing disabilities, creating a need for medical supplies, medicines, human services, or economic support to survive.

## **Assumptions**

For the purpose of designing responses in an all hazard environment, this annex outlines the following assumptions.

- Private and volunteer organizations will respond at the local level to provide ESF#6 support until their resources are exhausted, including pre-arranged mutual aid and assistance from their next highest level of support
- Not all disaster victims will request or require ESF#6 services
- If evacuated, some disaster victims will go to congregate shelters or find shelter with friends and relatives
- Some victims will refuse evacuation and remain with or near their damaged homes during or after a disaster
- Victims and responders will need mental or behavioral health support services
- A disaster or emergency could attract family and friends of victims from out of the affected area and find themselves in need of mass care services
- A disaster or emergency could attract affiliated and unaffiliated volunteers from outside of the impacted area and find themselves in need of ESF#6 services
- Victims of emergencies and disasters might include people defined as at-risk, vulnerable, or as having functional needs
- Local response plans include the unique notification, assistance, and support needs of their community's vulnerable populations
- Services and organizations coordinated by DPHHS will be compliant within the rules of the Americans with Disabilities Act (ADA)

## ***Section II: Concept of Operations***

Tribal and local emergency managers, supported by NGO and volunteer relief agencies, provide initial responses to the needs of emergency and disaster victims. When local resources and disaster coordination needs are exhausted, emergency managers will request assistance from the State. Local authorities retain responsibility for all response and recovery operations.

DPHHS will conduct ESF#6 coordination operations according to the current policies, rules, and laws of Montana. It can do so proactively in response to incidents that could require coordination or resource assistance to tribal, local, or other State agencies. Also, the SECC can request ESF#6 activation as it coordinates broad responses to disasters and emergencies. DPHHS maintains situational awareness and can elevate its level of response when necessary.

This annex is supported by several standard operating procedures (SOP) and other EOP annexes to guide development of incident action plans.

## **Functional Need and Vulnerable Populations**

DPHHS will work closely in its ESF #6 responsibilities with other public and private agencies to coordinate timely and appropriate support to individuals with functional or special needs resulting from a disaster. Functional need populations are defined, for the purpose of ESF #6 response activities, as vulnerable or at-risk people having functional health needs beyond their capability to maintain during an emergency.

## **Activation**

The implementation of any EOP Annex that has ESF #6 components is an activation of this plan. However, in cases of emergency or crisis outside of daily functions, specific activation could be made by the DPHHS Incident Command Advisory Group, the DPHHS Director, the Public Health & Safety Division Administrator, or any of their designees.

The following circumstances could result in activation of ESF #6 operations.

- Request for activation from the State Emergency Coordination Center operated by DES
- Anticipation of ESF #6 services as a result of a disaster or calamity in the State of Montana
- Response to a direct request for assistance from local, tribal, or other emergency response partner

## **Operational Functions**

The operational functions of ESF#6 are Mass Care, Emergency Assistance, Temporary Housing, and Human Services. DPHHS coordinates or assists ESF#6 partners to fulfill these response operations areas (see Section III: Roles & Responsibilities).

### **Mass Care**

Mass Care involves the coordination of non-medical mass care services to include

- Disaster sheltering of victims
- Feeding operations
- Emergency first aid
- Information exchange about victims to family members, and coordinating
- Bulk distribution of emergency relief items

### **Emergency Assistance**

Emergency assistance that may go beyond the scope of traditional mass care services includes

- Evacuation
- Tracking of evacuees,
- Family reunifications,
- Aid and services to special needs populations,
- Emergency services for household pets and service animals,
- Support to medical and nonconventional shelters,
- Coordination of donated goods and services, and
- Coordination of voluntary agency assistance

### **Temporary Housing**

Housing provides assistance for short- and long-term housing needs of victims, including

- Rental assistance
- Repair

- Loan assistance
- Replacement
- Factory-built housing
- Semi-permanent and permanent construction
- Referrals, identification and provision of accessible housing
- Access to other sources of housing assistance

### Human Services

Human Services includes coordinating disaster response efforts such as

- Counseling
- Recovery for non-housing losses and destroyed personal property
- Food stamps
- Expediting processing of new benefits claims such as unemployment and legal services
- Services for persons with special needs

## Section III: Roles & Responsibilities

In its response to any emergency, crisis, or public health event, DPHHS might ask for assistance from other ESF agencies through the SECC to either directly or peripherally support ESF#6 operations, dependent upon the nature and extent of an emergency event. Each agency is responsible for developing their own operating procedures and is *not* directed by DPHHS. Agency capabilities are affected by available resources and the size and scope of the incident. As such, support is “as able,” depending upon the given situation at the time.

Operational Function	ESF #6 Support Provider
Mass Care	<ul style="list-style-type: none"> <li>★ DPHHS Author</li> <li>★ Local &amp; Tribal Emergency Response Managers</li> <li>★ DES</li> <li>★ Volunteer Organizations including American Red Cross (ARC) and VOAD (See Appendix B)</li> </ul>
Emergency Assistance	<ul style="list-style-type: none"> <li>★ DES Author</li> <li>★ DPHHS</li> <li>★ Local &amp; Tribal Emergency Response Managers</li> <li>★ Montana Governor’s Office of Community Service (OCS)</li> <li>★ Volunteer Organizations including American Red Cross (ARC) and VOAD (See Appendix B)</li> </ul>
Temporary Housing	<ul style="list-style-type: none"> <li>★ DES Author</li> <li>★ Local &amp; Tribal Emergency Response Managers</li> <li>★ Montana Department of Commerce</li> </ul>
Human Services	<ul style="list-style-type: none"> <li>★ DPHHS Author</li> <li>★ Local &amp; Tribal Emergency Response Managers</li> <li>★ Montana Department of Commerce</li> <li>★ Volunteer Organizations including American Red Cross (ARC) and VOAD (See Appendix B)</li> </ul>



## ***Section IV: Maintenance***

This Annex must be reviewed annually to remain accurate and current. The DPHHS Public Health Emergency Preparedness Section will perform this review to determine whether the response capabilities of the agency are sufficient and if it meets all essential factors identified in applicable State and Federal guidelines. A preparedness planning review group could be convened by PHEP to conduct this review. A review cycle is established to update and review internal directives and external rules and regulations for information that may impact this annex and the DPHHS EOP.

The review will:

- Evaluate relevant procedures, equipment, systems, and training
- Verify or validate roles and responsibilities
- Ensure compatibility and coordination with related emergency preparedness documents

Minor corrections, edits, updates, or adjustments in this document do not need vetting by a review group. Changes are tracked in a versioning method or in the Record of Change log.

### **Exercises**

This annex or any of its components could be exercised separately or in conjunction with other exercises. Exercises will be used under simulated, but realistic, conditions to validate policies and procedures for responding to specific emergency situations and to identify deficiencies that need to be corrected. Personnel participating in these exercises should be those who will make policy decisions or perform the operational procedures during an actual event (i.e. critical personnel).

## ***Section VI: Appendices***

Appendix A: ESF#6 Activities (May 2013, FEMA National Response Framework)

Appendix B: Roles of Volunteer Organizations in Disaster Response

# **Appendix A**

## **ESF#6 Activities (May 2013, FEMA National Response Framework)**

### **Mass Care**

- Congregate sheltering
- Feeding
- Distribution of emergency supplies
- Victim reunification

### **Emergency Assistance**

- Volunteer and donation coordination
- Essential community relief services
- Non-congregate and transitional sheltering
- Support to individuals with disabilities and others with access and functional needs in congregate facilities
- Support to children in disasters
- Support to mass evacuations
- Support for the rescue, transportation, care, shelter, and essential needs of household pets and service animals

### **Temporary Housing**

- Rental, repair and loan assistance
- Replacement
- Factory-built housing
- Semi-permanent construction
- Referrals
- Identification and provision of safe, secure, functional and physically accessible housing
- Access to other sources of temporary housing assistance

### **Human Services**

- Disaster assistance programs that help survivors address unmet disaster-caused needs and/or non-housing losses through loans and grants
- Supplemental nutrition assistance
- Crisis counseling
- Disaster case management
- Disaster unemployment
- Disaster legal services
- Other state human services programs and benefits to survivors

## ***Appendix B***

### **Roles of Volunteer Organizations in Disaster Response**

Organizations that utilize volunteers to assist emergency responders or to conduct their own activities can operate at the local, state, or national level. These organizations are independent of formalized emergency response operations, although they could be affiliated with Montana's Volunteer Organizations Active in Disasters (VOAD). State emergency preparedness planners and responders often encourage these organizations to participate and collaborate in planning, training, and exercise activities.

#### ***Montana Chapter of the American Red Cross***

The American Red Cross (ARC) is a private sector organization that provides disaster relief to individuals and families and is responsible for providing emergency congregate and individual care in coordination with local government and private agencies. The ARC receives its mission from a congressional charter and, as mandated by Federal Law 36-United States Code-3001 and reaffirmed in Public Law 93-288 (Stafford Act).

- Initiate mass care services immediately within the affected area upon notification of the emergency or disaster
- Assist government agencies in the management and coordination of sheltering, feeding, emergency first aid services, and bulk distribution of emergency supplies to the affected population
- Coordinate relief efforts with VOAD, OCS, and other non-governmental organizations (NGO) as appropriate
- Provide a representative to the State Emergency Coordination Center (SECC) to facilitate coordination of mass care services
- Initiate and administer the use of the National Safe & Well system for family reunification
- Support mass care services with available facilities, vehicles, supplies, personnel and other provisions as able

#### ***Non-Governmental Organizations***

Voluntary, faith-based, community-based, and other nongovernmental organizations in the civic or nonprofit sector are integral to local community responses to disaster. ARC, The Salvation Army, and other member agencies of the VOAD, etc., will support ESF #6 activities through provision of immediate shelter, feeding, and emergency first aid relief to individuals and families, which are not normally available from government resources. These local organizations will work in cooperation with the local government within their jurisdictions in preparing for, responding to, and recovering from the effects of an emergency or disaster event.